EXPERIENCES OF UNINTENDED PREGNANCIES AMONG UNIVERSITY STUDENTS IN ZIMBABWE: INSIGHTS FROM MALE AND FEMALE STUDENTS FROM BINDURA UNIVERSITY OF SCIENCE EDUCATION.



 \mathbf{BY}

TATENDA GILVESI KAHARI

SUPERVISOR: MR SHONIWA

REG NO: B210125B

A DISSERTATION SUBMITTED IN PARTIAL FULFILMENT OF THE REQUIREMENTS FOR BACHELORS OF SOCIAL WORK DEGREE

DEPARTMENT OF SOCIAL WORK

FACULTY OF SOCIAL SCIENCE & HUMANITIES

BINDURA UNIVERSITY OF SCIENCE EDUCATION

JUNE 2025

DECLARATION

Reg Number B210125B

I declare that "Experiences of unintended pregnancies among university students in

Zimbabwe focusing on insights from male and female students from Bindura University of

Science Education", is my own work and that all the sources that I have used have been indicated

and acknowledged by means of complete references.

TATENDA G KAHARI

DATE: 20/06/25

SUPERVISORS SIGNATURE

DATE: 20/06/2025

RELEASE FORM

Name of Student: Tatenda Gilvesi Kahari

Student Number: B210125B

Project Title: Experiences of unintended pregnancies among university students in Zimbabwe

focusing on insights from male and female students from Bindura University of Science Education

Year granted: 2025

Permission is hereby granted to the Bindura University Library to produce single copies of this

project and lend or sell such copies for private, scholarly or scientific research purpose only. The

author reserves other publication rights and neither the project nor extension extracts from it may

be printed or otherwise reproduced without the author's written permission.

Name: Tatenda G Kahari

Signature:

Date: 16 JUNE 2025

Name of supervisor: **L. Shoniwa** Signature:

Date: 16 JUNE 2025

iii

ACKNOWLEDGEMENTS

First of all, I would like to appreciate my supervisor Mr Shoniwa for the time and effort he gave to supervise me during the course of this project. I am so grateful of the time and effort of those who participated in the research.

I would like to acknowledge my parents Mr and Mrs Kahari for support they gave me in my studies. I would also like to acknowledge my grandmother and uncle, Mrs Kahari and Mr Kuripa for their support in my life as well as my studies.

I also want to acknowledge my friends Maxwell Dzumbunu, Juliana Chiveso, Tanisha Munyurwa and Nyasha Simbanegavi for their support from my day at BUSE.

BINDURA UNIVERSITY OF SCIENCE EDUCATION

FACULTY OF SOCIAL SCIENCES AND HUMANITIES

DEPARTMENT OF SOCIAL WORK



Tatenda C, Kahari	1 22/08/2025
Student Signature	Date
Qua	, 22/08/br
Supervisor Signature	Date
#	12/8/25
Chairperson Signature	Date
	BINDURA UNIVERSITY OF SCIENCE EDUCATION FACULTY OF SOCIAL SCIENCES & HUMANITIES DEPARTMENT OF SOCIAL WORK
	2 7 AUG 2025
	PRIVATE BAG 1020, BINDURA, ZIMBABWE

DEDICATION

I dedicate this project to my parents, grandmother and friends who supported me in everything I did towards the completion of my studies. May God you and protect you.

PLAGARISM REPORT

kaharitatendaB210125B.docx

ORIGINAL	ITY REPORT			
1 (0 RITY INDEX	8% INTERNET SOURCES	3% PUBLICATIONS	3% STUDENT PAPERS
PRIMARY	SOURCES			
1	tajoso.u Internet Sour	dsm.ac.tz		3,
2	research Internet Sour	nspace.ukzn.ac.:	za	1,
3	WWW.CO Internet Sour	ursehero.com		<1%
4	core.ac.			<1%
5	uir.unis			<1%
6	hdl.han			<19
7	Submitt Student Pape	ed to Midlands	State Universit	<1 9
8	wiredsp Internet Sour	ace.wits.ac.za		<19
9	reposito	ory.unam.edu.na	a	<1%
10	elibrary Internet Sour	.tucl.edu.np		<1%
11	file-thes	is.pide.org.pk		<19
12	"Levera	kwu C. Nweke, I ging Technologio for Sustainable	cal Advanceme	ents in

BINDURA UNIVERSITY OF SCIENCE EDUCATION DEPARTMENT OF SOCIAL WORK

Name: Tatenda G Kahari			

Registration No: B210125B

MARKING GUIDE: UNDERGRADUATE RESEARCH PROJECT

Chapter 1 INTRODUCTION	Possible	Actual
	Mark	Mark
Abstract	10	
Background to the study- what is it that has made you choose this particular	20	
topic? Include objectives or purpose of the study		
Statement of the problem	10	
Research questions	15	
Assumptions	5	
Significance of the study	15	
Limitations of the study	5	
Delimitations of the study	5	
Definition of terms	10	
Summary	5	
Total	100	
Weighted Mark	15	

Comments	•

Chapter 2 LITERATURE REVIEW

Introduction- what do you want to write about in this chapter?	5	
Conceptual or theoretical framework	10	
Identification, interpretations and evaluation of relevant literature and citations	40	
Contextualisation of the literature to the problem	10	
Establishing gaps in knowledge and how the research will try to bridge these gaps	10	
Structuring and logical sequencing of ideas	10	
Discursive skills	10	
Summary	5	
Total	100	
Weighted Mark	20	

Chapter 3 RESEARCH METHODOLOGY

Introduction	5	
Research design	10	
What instruments are you using to collect data?	30	
Population, sample and sampling techniques to be used in the study	25	
Procedures for collecting data	15	

Total Weighted Mark 25	Data presentation and analysis procedures	10	
Meighted Mark omments	Summary		
Applet 4 DATA PRESENTATION, ANALYSIS AND DISCUSSION	Total		
hapter 4 DATA PRESENTATION, ANALYSIS AND DISCUSSION Introduction	Weighted Mark	25	
Data presentation 50 Is there any attempt to link literature review with new findings 10 How is the new knowledge trying to fill the gaps identified earlier 10 Discursive and analytical skills 20 Summary 5 Total 100 Weighted Mark 30 Menents 5 Mappendices i.e. copies of instruments used and any other relevant material 5 Total 100 References 5 Appendices i.e. copies of instruments used and any other relevant material 5 Total 100 Weighted mark 100 References 5 Appendices i.e. copies of instruments used and any other relevant material 5 Total 100 Weighted mark 10 Total 100 Total 100 Total 100 Total 100 Total 100 Total	CommentsChapter 4 DATA PRESENTATION, ANALYSIS AND	DISCUSSION	
Data presentation 50 Is there any attempt to link literature review with new findings 10 How is the new knowledge trying to fill the gaps identified earlier 10 Discursive and analytical skills 20 Summary 5 Total 100 Weighted Mark 30 Menents 5 Mappendices i.e. copies of instruments used and any other relevant material 5 Total 100 References 5 Appendices i.e. copies of instruments used and any other relevant material 5 Total 100 Weighted mark 100 References 5 Appendices i.e. copies of instruments used and any other relevant material 5 Total 100 Weighted mark 10 Total 100 Total 100 Total 100 Total 100 Total 100 Total	Introduction		5
How is the new knowledge trying to fill the gaps identified earlier 20	Data presentation		
Discursive and analytical skills Summary Fotal Fotal Weighted Mark Bapter 5 SUMMARY, CONCLUSION AND RECOMMENDATIONS Introduction- focus of the chapter Summary of the whole project including constraints Conclusions- have you come up with answers to the problem under study Recommendations(should be based on findings) Be precise References Appendices i.e. copies of instruments used and any other relevant material Fotal MARY: Actual Total ter 1 ter 2 ter 3 ter 4 ter 5	Is there any attempt to link literature review with new find	dings	10
Summary Fotal Weighted Mark ments hapter 5 SUMMARY, CONCLUSION AND RECOMMENDATIONS introduction- focus of the chapter Summary of the whole project including constraints Conclusions- have you come up with answers to the problem under study Recommendations(should be based on findings) Be precise 30 References Appendices i.e. copies of instruments used and any other relevant material Fotal MARY: Actual Total ter 1 ter 2 ter 3 ter 4 ter 5		d earlier	10
Fotal Weighted Mark 30 Weighted Mark 30 ments Thapter 5 SUMMARY, CONCLUSION AND RECOMMENDATIONS Introduction- focus of the chapter 5 Summary of the whole project including constraints 25 Conclusions- have you come up with answers to the problem under study 30 Recommendations(should be based on findings) Be precise 30 References 5 Appendices i.e. copies of instruments used and any other relevant material 5 Fotal 100 Weighted mark 10 ments MARY: Actual Total ter 1 ter 2 ter 3 ter 4 ter 5	Discursive and analytical skills		
Meighted Mark ments hapter 5 SUMMARY, CONCLUSION AND RECOMMENDATIONS Introduction- focus of the chapter Summary of the whole project including constraints Conclusions- have you come up with answers to the problem under study Recommendations(should be based on findings) Be precise References Appendices i.e. copies of instruments used and any other relevant material Fotal Weighted mark Actual Total ter 1 ter 2 ter 3 ter 4 ter 5	Summary		
hapter 5 SUMMARY, CONCLUSION AND RECOMMENDATIONS Introduction- focus of the chapter 5 Summary of the whole project including constraints 25 Conclusions- have you come up with answers to the problem under study 30 Recommendations(should be based on findings) Be precise 30 References 5 Appendices i.e. copies of instruments used and any other relevant material 5 Fotal 100 Weighted mark 10 MARY: Actual Total ter 1 ter 2 ter 3 ter 4 ter 5	Total		
hapter 5 SUMMARY, CONCLUSION AND RECOMMENDATIONS Introduction- focus of the chapter Summary of the whole project including constraints 25 Conclusions- have you come up with answers to the problem under study Recommendations(should be based on findings) Be precise 30 References Appendices i.e. copies of instruments used and any other relevant material 5 Fotal Weighted mark 10 MARY: Actual Total ter 1 ter 2 ter 3 ter 4 ter 5	Weighted Mark		30
Conclusions- have you come up with answers to the problem under study Recommendations(should be based on findings) Be precise References Appendices i.e. copies of instruments used and any other relevant material Fotal Fotal Weighted mark 10 MARY: Actual Total ter 1 ter 2 ter 3 ter 4 ter 5			••••••
Recommendations(should be based on findings) Be precise References Appendices i.e. copies of instruments used and any other relevant material Fotal Weighted mark 100 MARY: Actual Total ter 1 ter 2 ter 3 ter 4 ter 5	Introduction- focus of the chapter	MENDATIONS	
References 5 Appendices i.e. copies of instruments used and any other relevant material 5 Fotal 100 Weighted mark 10 MARY: Actual Total ter 1 ter 2 ter 3 ter 4 ter 5		MENDATIONS	
Appendices i.e. copies of instruments used and any other relevant material Fotal Fot	Introduction- focus of the chapter Summary of the whole project including constraints Conclusions- have you come up with answers to the problem.	lem under study	25
Fotal 100 Weighted mark 10 ments MARY: Actual Total ter 1 ter 2 ter 3 ter 4 ter 5	Introduction- focus of the chapter Summary of the whole project including constraints Conclusions- have you come up with answers to the problem.	lem under study	25 30
Weighted mark 10 ments MARY: Actual Total ter 1 ter 2 ter 3 ter 4 ter 5	Introduction- focus of the chapter Summary of the whole project including constraints Conclusions- have you come up with answers to the problem.	lem under study	25 30 30
ments MARY: Actual Total ter 1 ter 2 ter 3 ter 4 ter 5	Introduction- focus of the chapter Summary of the whole project including constraints Conclusions- have you come up with answers to the problem Recommendations (should be based on findings) Be precised References	lem under study se	25 30 30 5
MARY: Actual Total	Introduction- focus of the chapter Summary of the whole project including constraints Conclusions- have you come up with answers to the problem Recommendations (should be based on findings). Be precised References Appendices i.e. copies of instruments used and any other in the contraction of the chapter.	lem under study se	25 30 30 5 5
ter 2 ter 3 ter 4 ter 5	Introduction- focus of the chapter Summary of the whole project including constraints Conclusions- have you come up with answers to the proble Recommendations(should be based on findings) Be precise. References	lem under study se	25 30 30 5 5 100
ter 2 ter 3 ter 4 ter 5	Introduction- focus of the chapter Summary of the whole project including constraints Conclusions- have you come up with answers to the problem Recommendations (should be based on findings). Be precised References. Appendices i.e. copies of instruments used and any other and the state of the problem of	lem under study se relevant material	25 30 30 5 5 100
ter 3 ter 4 ter 5	Introduction- focus of the chapter Summary of the whole project including constraints Conclusions- have you come up with answers to the problem Recommendations (should be based on findings). Be precised References. Appendices i.e. copies of instruments used and any other and the state of the problem of	lem under study se relevant material	25 30 30 5 5 100
ter 4 ter 5	Introduction- focus of the chapter Summary of the whole project including constraints Conclusions- have you come up with answers to the problem Recommendations (should be based on findings). Be precised References Appendices i.e. copies of instruments used and any other and the state of the problem Recommendations (should be based on findings). Be precised References Appendices i.e. copies of instruments used and any other and the state of the problem Recommendations (should be based on findings). Be precised References Appendices i.e. copies of instruments used and any other and the problem Recommendations (should be based on findings). Be precised References. Appendices i.e. copies of instruments used and any other and the problem Recommendations (should be based on findings). Be precised References. Appendices i.e. copies of instruments used and any other and the problem Recommendations (should be based on findings). Be precised References. Appendices i.e. copies of instruments used and any other and the problem Recommendations (should be based on findings). Be precised References. Appendices i.e. copies of instruments used and any other and the problem Recommendations (should be based on findings). Be precised References. Appendices i.e. copies of instruments used and any other and the problem Recommendations (should be based on findings).	lem under study se relevant material	25 30 30 5 5 100
ter 5	Introduction- focus of the chapter Summary of the whole project including constraints Conclusions- have you come up with answers to the problem Recommendations (should be based on findings). Be precised References. Appendices i.e. copies of instruments used and any other and the state of the problem of the state of the problem of t	lem under study se relevant material	25 30 30 5 5 100
	Introduction- focus of the chapter Summary of the whole project including constraints Conclusions- have you come up with answers to the problem Recommendations (should be based on findings). Be precised References Appendices i.e. copies of instruments used and any other and the state of the problem of the state of the problem of the p	lem under study se relevant material	25 30 30 5 5 100
	Introduction- focus of the chapter Summary of the whole project including constraints Conclusions- have you come up with answers to the problem Recommendations (should be based on findings). Be precised References. Appendices i.e. copies of instruments used and any other and the state of the problem of	lem under study se relevant material	25 30 30 5 5 100
	Introduction- focus of the chapter Summary of the whole project including constraints Conclusions- have you come up with answers to the problem Recommendations (should be based on findings). Be precised References. Appendices i.e. copies of instruments used and any other and the state of the problem of	lem under study se relevant material	25 30 30 5 5 100

ABSTRACT

The study explored the experiences of unintended pregnancies among university students in Zimbabwe focusing on insights from male and female students from BUSE. The study had three objectives to identify the causes of unintended pregnancies among male and female students from BUSE, to explore the consequences of unintended pregnancies faced by students from BUSE and to investigate the coping mechanisms for mechanisms employed by male and female students at BUSE. The Ecological Systems Theory and Socioeconomic Theory were utilized as theoretical frameworks for this study. A qualitative approach was employed, utilizing a mix of in depth interviews and focus group discussions as data collection methods. In this study there were fifteen participants, five female students, four male students, dean of the faculty, two lecturers, two healthcare workers and one worker from SAYWHAT (local organisation that works with students). The study employed two non-probability sampling techniques which are convenience sampling and purposive sampling. The study revealed the causes of unintended pregnancies among university students, the findings demonstrated that peer pressure, drug abuse and insufficient comprehensive sex education as the causes of unintended pregnancies among university student. The study also revealed the consequences of unintended pregnancies among university students, it came out of the study that disruption of academic goals, financial constrain and emotional distress were the consequences of unintended pregnancy among university students. The study also revealed the coping mechanisms employed by students in dealing with unintended pregnancies, substance abuse, escape avoidance, engaging in open communication and self-isolation emerged as the coping strategies employed by students. The study recommended that universities should develop and implement comprehensive sexual education programs that focus on contraception, safe relationships and the effects of peer pressure. These recommendations can help the stakeholders to create a supporting environment that will assist students dealing with unintended pregnancies to overcome their challenges and lead a good life.

Table of Contents

DECLARATION	ii
RELEASE FORM	iii
ACKNOWLEDGEMENTS	iv
DEDICATION	vi
PLAGARISM REPORT	vii
MARKING GUIDE: UNDERGRADUATE RESEARCH PROJECT	viii
ABSTRACT	x
CHAPTER ONE	1
1.1 Introduction	1
1.2. Background of the study	1
1.3. Statement of the Problem	3
1.4. Aim of the study	4
1.5. Research objectives	4
1.7. Justification of the study	4
1.8. Definition of key terms	6
1.9 Organization of the Research Report	6
1.10 Chapter Summary	7
CHAPTER TWO	8
LITERATURE REVIEW	8
2.1. Introduction	8
2.2. Theoretical framework	8
2.2.1. Ecological Systems Theory	8
2.2.2. Socioeconomic Theory	10
2.3. OVERVIEW OF THE TOPIC OF UNINTENDED PREGNANCIES	12
2.4. FACTORS THAT CONTRIBUTES TO UNPLANNED PREGNANCIES AT HIGHER EDUCATION INSTITUTIONS	13
2.5. CONSEQUENCES OF UNINTENDED PREGNANCIES FACED BY STUDENTS IN UNIVERSITIES	19
2.7 CHAPTER SUMMARY	30
CHAPTER THREE	31
RESEARCH METHODOLOGY	31
3.1. Introduction	31
3.2 Research approach	31

APPENDIX 2. APPROVAL FORM	69
APPENDIX 1: LETTER FROM BINDURA UNIVERISTY OF SCIENCE	
References	
5.7 Chapter Summary	
5.6 Areas for future study	
5.5 Recommendations	
5.4 Implications for Social Work	
5.3 Conclusion	
5.2 Summary	
5.1 Introduction	54
SUMMARY, CONCLUSIONS AND RECOMMENDATIONS	
CHAPTER FIVE	
4.6 Chapter Summary	
4.5 Coping mechanisms for unintended pregnancies employed by male and female students at Bind University of Science Education	50
4.4 Consequences of unintended pregnancies faced by students	46
4.3 Causes of unintended pregnancies among male and female students	43
4.2 Demographic Distribution	42
4.1. Introduction	42
PRESENTATION, INTERPRETATION, ANALYSIS AND DISCUSSION OF FINDINGS	42
CHAPTER FOUR	42
3.14. Chapter Summary	40
3.13. Limitations	40
3.12. Ethical considerations	39
3.11. Data analysis	38
3.9. Research procedure	36
3.8.3. Data collection tools	35
3.7. Data collection methods	34
3.6. Sampling	33
3.5. Target population	32
3.4. Study setting	32
3.3. Research design	32

APPENDIX 3: LETTER FOR PERMISSSION FROM ORGANIZATION	69
APPENDIX 4: INFORMED CONSENT FORM	70
APPENDIX 4: INTERVIEW GUIDE FOR MALE AND FEMALE UNIVERSITY STUDENTS	71
APPENDIX 5: INTERVIEW GUIDE FOR KEY INFORMANTS	73
APPENDIX 6: FOCUS GROUP DISCUSSION GUIDE	75

List of Table	es
---------------	----

TABLE 4.2 1: Demographic characteristics of participants
--

CHAPTER ONE

1.1 Introduction

This chapter presents a study on the experiences of unintended pregnancies among university students in Zimbabwe focusing on insights from male and female students from Bindura University of Science Education. The chapter contains the background of the study, statement of the problem, aims, objectives, research questions, significance of study and definitions of key terms which were used in the research.

1.2. Background of the study

The issue of unintended pregnancies among female students in tertiary institutions is a global concern because it is associated with negative implications to women's educational achievement, health and socio-economic achievement. Most of the university campuses around the world have become conducive for sexual activities because students feel that it is the only way to become part of the school sexual culture. They also want to enjoy themselves and that sometimes results in unintended pregnancies. Gama (2008) argues that most of the pregnancies that the students get are unintended. The current problem of unintended pregnancies among students in mainland China has become a reproductive health concern and it has adverse personal and socioeconomic implications to students. A research conducted in mainland China found that 17.7% of sexually active college students had unintended pregnancies with 14.9% of female participants reporting that they got pregnant unintentionally and 19.5% of male participants reported that they unintentionally impregnated their partners (Guo et al, 2019). The research contributes to the study in terms of finding the prevalence of unintended pregnancies among university students. Research conducted by Sarder et al (2021) shows that about 36% of pregnancies among university students in Bangladesh are unplanned. The research shows that the prevalence is quite high and that there is a need for improved reproductive health education and access to contraception methods.

In Africa, the problem of unintended pregnancies among tertiary students is quite prominent in the region. Africa has one of the highest adolescent pregnancies in the world. According to Masinga (2021), the birth rate in University of Zululand in South Africa has gone up because students do

not use contraceptives. Also, University of Limpopo in South Africa has recorded a rise in pregnancy among students although the university has a Health Centre which offers a variety of contraceptives. However, despite the presence of a health centre on campus, many students still get pregnant and that has affected their school life. Statistics show that about 54% of all pregnancies in Ethiopia are unintended. According to research carried out by Demissie, Nigatu and Beyene (2020) on college students, 73.3% of the respondents had been exposed to unintended pregnancy. The findings show that reproductive health education and services are inadequate for many students who get unintended pregnancies. The research by Shiferaw et al demonstrates that 85.2% of participants in Mizan-Tepi University got unwanted pregnancies. These findings show the high prevalence of unintended pregnancies and poor sexual health education and access to contraceptives among university students.

Furthermore, unintended pregnancies come at a cost for the students involved and their families. The implications of unintended pregnancies span from academic to socio-economic to health dimensions. Academically, significant disruptions such as missing classes, difficulties in concentration results in failing courses, dropping out and delayed completion of studies. Studies conducted by Davies et al (2018) indicate that cognitive alterations that occur during pregnancy can lead to poor concentration. Many pregnant students get pregnant because they get distracted by school activities and they find themselves on edge between school and motherhood. Studies conducted in Latin America found that up to 36 percent of school dropout cases among students could be related to unintended pregnancy or motherhood (Cruz, 2021). There are also health implications of unintended pregnancies like poor mental health, pregnancy complications, unsafe abortions and delayed prenatal care (Phiri, Nyamaruze and Akintola, 2021). Pregnant students have prenatal maternal stress because of physical and psychological changes that come with being pregnant and having to change to a new role of motherhood. Socioeconomic implication of unintended pregnancies are financial implications, limited access to health services, social stigma and cultural and social norms. Moran et al (2024) argue that students who get pregnant while attending tertiary institutions experience extreme financial implications especially when the spouse does not take responsibility and parents stop supporting them. Despite the presence of different types of birth control methods, the prevalence of unintended pregnancies among university students continues to increase each year. Students refuse to use contraceptives because of cultural beliefs about sex and pregnancy.

The experiences of unintended pregnancies among university students at BUSE are similar to those of other women in Zimbabwe. Pregnant students struggle to cope with the requirements of both school and motherhood. They are exposed to stress and anxiety because they have no time for their studies because of the pregnancy. The absence of dedicated resources such as childcare facilities or flexible scheduling options, complicates their circumstances. Bindura University was founded in 1996, the institution is in the urban setting of the city of Bindura (Chiparausha, & Chigwada, 2016). Bindura is located in Mashonaland Central Province about 88km northeast of the capital city (Jimu et al, 2023). Bindura University of Science Education is a medium sized university with enrolment that ranges from 9000-9999 students. Bindura University of Science Education has four campuses namely Main campus, Astra campus, Town campus and FSE campus.

1.3. Statement of the Problem

The problem of unintended pregnancies among university students in Zimbabwe is a global concern. Although reproductive health and education services are available, female students still experience unintended pregnancies (Marimirofa et al, 2022). There are a lot of reasons why the female students get unintended pregnancies. Even though reproductive health services and contraceptives are available, many female students get unintended pregnancies (Marimirofa et al, 2022). This situation is not only affecting the academic performance of the students but also has a broader social and economic implications. Pregnant students are exposed to stigma, no support and school activities that affect their schoolwork and mothers (Stone, 2015). If the problem of unintended pregnancies among students is not dealt with in the best way possible, there will be more school dropouts in tertiary institutions, poor academic outcomes, mental health implications, socioeconomic disadvantages, fewer career opportunities and others. Balancing the demands of pregnancy and studies can be quite stressful. Students resort to different coping strategies such as substance abuse, self-isolation, social support, prayer and escape avoidance, some of this coping mechanisms have negative implications to the unborn child and pregnant students, (Phiri, Nyamaruze and Akintola, 2021). Despite the prevalence of this issue, there is a lack of comprehensive research focusing on the experiences of these students, leading to gaps in understanding their experiences.

1.4. Aim of the study

The purpose of this study is to explore the experiences of unintended pregnancies among university students in Zimbabwe focusing on insights from male and female students from Bindura University of Science Education

1.5. Research objectives

The research was guided by the following objectives:

- To identify the causes of unintended pregnancies among male and female students from Bindura University of Science Education.
- To explore the consequences of unintended pregnancies faced by students from Bindura University of Science Education.
- iii. To investigate the coping mechanisms for unintended pregnancies employed by male and female students at Bindura University of Science Education.

1.6. Research questions

This research was guided by the following research questions:

- i. What are the causes of unintended pregnancies among male and female students from Bindura University of Science Education?
- ii. What are the consequences of unintended pregnancies faced by students from Bindura University of Science Education?
- iii. What are the coping mechanisms for unintended pregnancies employed by male and female students at Bindura University of Science Education?

1.7. Justification of the study

The research on the experiences of unintended pregnancies among male and female students in tertiary institutions in Zimbabwe is significant for several reasons.

1.7.1 To universities

The research would shed light on the specific challenges these students encounter as unintended pregnancy can make it difficult for them to manage their studies, health and other responsibilities. Students find it difficult to work well in school when they are pregnant because they cannot concentrate well and they get tired easily. Through research on the experiences of the students, the research will give insight into the issue of unintended pregnancies among students. It will give important findings about the students' circumstances. The findings of the research will lead to provision of help to pregnant students through counselling, flexible schedules and provision of childcare. This will enable pregnant female students to continue with their studies and not drop out of school because of their unintended pregnancies.

1.7.2 For policy reform and advocacy

The study can inform policy development, the study can provide evidence based insights that inform the creation of specific policies addressing reproductive health and education. This research can serve as foundation for advocacy efforts that promote reproductive rights, raising awareness about the struggles faced by pregnant students, fostering understanding and support from classmates, faculty and the broader community. The study would also help to shape university policies to ensure that unintended pregnant students receive fair treatment and necessary resources to succeed with their academic.

1.7.3 To the body of knowledge

This study would contribute to the wider body of knowledge regarding women's education and health. This research can act as the basis for advocacy for reproductive rights and raise awareness about the problems that the pregnant students are going through. The research can make the student's fellow classmates, faculty and the community understand the experiences of the students. It can also lead to the formulation of university policies that make sure that pregnant students get fair treatment and resources to succeed in their academic life.

1.8. Definition of key terms

- **i. Experience** refers to practical knowledge, skill or practice derived from direct observation of or participation in events or particular activity (Billett, 2014).
- **ii. Student** refers to any person registered by the University for the purpose of obtaining a qualification of the University (Garwe, 2015).
- **iii. University** refers to a post- secondary educational institution that offers advanced learning programs, degrees, diplomas, technical courses and teacher education courses (Saroyan and Frenay, 2023).
- **iv. Unintended pregnancies** are those that happen when people either did not want to get pregnant or did not coordinate the timing of the pregnancy, or occur when individuals or couples do not wish to have a child at that specific moment (Son field et al., 2021).

1.9 Organization of the Research Report

To ensure a coherent flow throughout the dissertation, the structure is organised as follows:

Chapter One – This introductory chapter outlines the study's background and presents the statement of the problem. It also states the aim of the problem, objectives, research questions, justification of the study, definition of terms and organization of the research report.

Chapter Two – The second chapter reviews literature and discusses the theoretical frameworks for the study which are Ecological Systems Theory and Socioeconomic Theory.

Chapter Three – This chapter details the research methodology including the chosen research approach, research design and study setting. It explains the target population, sampling techniques and size used as well as data collection techniques, research procedure, trustworthiness, data analysis, ethical considerations and limitations of the study.

Chapter Four – The fourth chapter presents, interprets, analyze and discusses the study's findings. **Chapter Five** – This concluding chapter summarizes the study, discusses its implication for social work, offers recommendations and suggest areas for future study.

1.10 Chapter Summary

This chapter provided an overview of the study's background and the statement of the problem on the experiences of unintended pregnancies among university students in Zimbabwe focusing on insights from male and female students from Bindura University of Science Education. The chapter also highlighted the aim of the problem, objectives, research questions, justification of the study, definition of terms and organization of the research report. The next chapter reviews the relevant literature related to the study.

CHAPTER TWO

LITERATURE REVIEW

2.1. Introduction

This chapter examined literature, empirical research and theoretical writings pertinent to the study. This chapter's primary aim is to examine the literature on the experiences of unintended pregnancies among university students in Zimbabwe, which guides the research goals tackled by this study. The reviewed literature was obtained from textbooks, journals and online sources. This chapter examines the current research on unintended pregnancies among university students, highlighting the experiences of both male and female students in Zimbabwe. The goal of the study is to situate the problem within wider socio-economic, cultural and educational contexts. This section wraps up with a summary of the chapter.

2.2. Theoretical framework

The study was strongly influenced by the Ecological Systems Theory and Socioeconomic Theory. By integrating both ecological systems theory and socioeconomic theory the study aims to create a holistic understanding of the factors contributing to unintended pregnancies among university students, highlighting the need for multifaceted interventions that address both individual and systemic challenges. The theories are discussed below.

2.2.1. Ecological Systems Theory

Urie Bronfenbrenner's ecological systems theory appears significant in this research because it examines how various environmental levels impact individual behaviors. Unintended pregnancies in university students are influenced by multiple ecological factors such as personal traits, social connections, university regulations, cultural and societal norms and the wider socio-economic environment (Renn, 2020). These factors interplay to influence students' experiences when managing their own well-being and the care of children resulting from unintended pregnancies. The ecological traits highlight crucial factors that are likely to affect female university students

facing unintended pregnancies. This theory highlights the significance of grasping the different levels of impact on an individual's growth, such as:

Microsystem: - The surrounding environment, including family, friends and educational institutions. This layer has a direct effect on personal experiences and choices.

Mesosystem: - Connections between various microsystems, such as the link between a student's home life and their educational setting.

Exosystem: - External surroundings that indirectly influence the person, including community assets and regulations.

Family Dynamics: - The perspectives of family members regarding sexual health and education can directly affect students' decisions.

A supportive family may promote open conversations about contraception, whereas a more conservative family could create stigma around sexual activity resulting in unintended pregnancies (Robinson, 2022). Mesosystem: - Peer Connections: Engagement with peers can influence students' actions and perceptions regarding sex and pregnancy. When peers exchange knowledge about contraceptive methods and sexual health, it can lower the chances of unplanned pregnancies. On the other hand, peer influence can result in dangerous actions. Exosystem: - Healthcare Access: The presence of reproductive health services in the community affects students' access to contraceptives and information (Bersamin et al, 2017). Restricted access can result in increased occurrences of unplanned pregnancies. Macrosystem: - Cultural Norms: Societal perceptions of premarital sex and gender expectations in Zimbabwe can greatly influence how students manage their sexual health. For example, societal taboos regarding conversations about sexual matters might hinder students from obtaining assistance or knowledge. Chronosystem: - Social Transformations: Alterations over time, like changes in educational policies or health campaigns, can influence students' awareness and perspectives on unintended pregnancies. For example, recent efforts encouraging sexual education might affect the frequency of unintended pregnancies in students.

2.2.2. Socioeconomic Theory

The second theory that guides the study is socioeconomic theory. In this study, socioeconomic theory explains how individuals' socioeconomic status affects their lives and their management of unintended pregnancies. In African contexts, especially universities, students from disadvantaged financial backgrounds encounter monetary limitations that restrict their access to healthcare services (Ruswa & Gore, 2022). In situations where students experience unexpected pregnancies, they face economic impacts (Walker et al, 2022). The circumstances are more challenging for students who come from families with low income. They discovered they were in a circumstance for which they were financially unprepared for themselves and their infants. This shortage of resources exacerbates the challenges in caring for themselves and their children, consequently heightening concerns about psychosocial issues. The theory aids in tackling the financial issues faced by university students dealing with unintended pregnancies and the resulting psychosocial challenges. Economic Theory explores how individuals and societies distribute resources, make decisions and react to incentives.

In the realm of unintended pregnancies, economic theory can shed light on university students' decision-making related to sexual health, contraception and family planning. Students frequently evaluate the advantages and disadvantages of utilizing contraception against the possible outcomes of unplanned pregnancies. For instance, the upfront expenses of buying contraceptives might discourage some students, particularly if they have limited financial resources. Financial motivators can influence students' choices related to sexual activity and contraceptive use. For example when universities offer free or subsidized contraception, it could motivate more students to utilize these services, leading to a decrease in unintended pregnancies. Students weigh the opportunity costs linked to unplanned pregnancies, including the possible effects on their education, job opportunities and financial security. Students may be driven to adopt preventive measures due to the fear of interrupted academic careers (Yazdkhasti et al, 2015). Economic theory highlights the significance of resource accessibility, encompassing healthcare and education. In Zimbabwe, restricted access to reproductive health services can result in increased rates of unplanned pregnancies as students might lack the resources to acquire contraception or obtain medical guidance.

Economic factors, including poverty and unemployment levels, can impact students' decisions. Students from disadvantaged socioeconomic backgrounds might encounter more difficulties in obtaining contraceptive services and may prioritize education and family planning differently. A female student might opt not to use contraception because of its purchase cost, resulting in an increased risk of unintended pregnancy (Iseyemi et al, 2017). Should a university establish a program providing free contraceptives and sexual health education, it could result in higher usage among students, consequently decreasing unintended pregnancies. A male student might reflect on how becoming a parent could affect his education and career, prompting him to talk about birth control with his partner. In sub-Saharan Africa, societal norms and gender relationships greatly influence reproductive choices regarding health. Lesthaeghe (2023) demonstrated that social pressures and disparities in gender power lead to student pregnancies. Studies in Ghana and Uganda also highlight peer pressure, drug use and economic challenges as key contributors (David, 2018). Restricted availability of reproductive health services continues to be a significant issue in numerous African universities.

In Nigeria, merely 40% of female students indicated they had access to contraceptives, with many unaware of how to use them correctly (Adepoju et al., 2022). In Kenya, financial difficulties drive numerous students into bonds with older men, which raises their vulnerability to pregnancy and sexually transmitted diseases (Kilonzo et al., 2023). The movement from rural areas to cities heightens the risks for female students who are not accustomed to urban settings. In African universities, transactional sex is a common survival tactic with financially struggling students entering relationships for monetary assistance, leading to unintended pregnancies (Mutsvairo & Chari, 2022). Economic difficulties drive numerous young women into transactional relationships, increasing their susceptibility to unprotected intercourse and accidental pregnancies (Msuya et al., 2020). Although sexual and reproductive health services are accessible, students encounter obstacles such as misinformation, stigma-related fear and insufficient confidentiality in medical environments. Kavishe (2025) argued that at the University of Dar es Salaam links unplanned pregnancies to economic instability, leading certain students to participate in transactional sex or relationships involving a "sugar daddy." Maphie (2023) investigated the psychosocial experiences of pregnant women students at the same institution but did not address the elements leading to unplanned pregnancies.

2.3. OVERVIEW OF THE TOPIC OF UNINTENDED PREGNANCIES

Unplanned pregnancy is one of the most concerning public health challenges and a significant reproductive health matter, including unintentional pregnancy (Hall et al., 2016). Unplanned pregnancies are those that happen when people either did not want to get pregnant or did not coordinate the timing of the pregnancy, or occur when individuals or couples do not wish to have a child at that specific moment (Son field et al., 2021). These pregnancies might occur due to contraceptive failure, improper or inconsistent use of contraception, limited access to contraceptives or participating in sexual activity without any contraceptive methods. Unplanned pregnancies can arise in different demographic groups such as college students and may have considerable effects on personal lives, relationships and general health (Hall et al., 2016). Unplanned pregnancies worldwide pose a health issue that impacts many girls, their families, and societal structures. As reported by the World Health Organization (2022), around 210 million pregnancies take place annually across the globe, with 87 million being unplanned and 41 million resulting in births.

The report indicates that approximately 21-22 million unsafe abortions occurred globally, translating to 22 unsafe abortions for every 1000 women aged 15-44 years. The report on deaths from unsafe abortion estimates that 47,000 maternal deaths occurred, which represents 13% of maternal mortality in 2008. WHO, (2022) demonstrate that nearly fifty percent of pregnancies in the United States, for instance, are unplanned, and around 48% of American women of reproductive age have encountered at least one unintended pregnancy. The United Nations Population Fund (2022) identifies unplanned pregnancy as a significant health risk that many female students have experienced in recent times. Unplanned pregnancies among university students have become a major issue worldwide, presenting numerous challenges for individuals, educational institutions and society as a whole. The university population is concerning since over 90% consists of young people. WHO (2022) describes youth as the period when a person is past childhood but not yet reached adulthood. In terms of age, adolescence is considered to span from 10 to 24 years. Worldwide, 1.2 billion of the roughly 3 billion youth population are under 25 years old in sub-Saharan Africa, with nearly 1 in 3 individuals aged 10 to 24 years (UNFPA, 2022). As per WHO (2022), young girls represent the most at-risk group, as they often do not utilize sexual reproductive services, including family planning, and receive minimal attention, especially in sub-Saharan Africa (Kibira et al., 2019). This is because they suffer from early marriage, adolescent

pregnancy, unplanned and unwanted pregnancies, and sexually transmitted infections linked to early initiation of unsafe sexual practices.

Worldwide, unintended pregnancies in young people make up half of the 121 million each year, and this trend presents a significant challenge (UNFPA, 2020). UNFPA (2020) estimated that 11% of global births happen among adolescents, with over 90% of these births taking place in low- and middle-income nations. Sub-Saharan Africa ranks as one of the areas with the highest rates of teenage pregnancies while also experiencing the lowest levels of family planning. In Tanzania, specifically, teenagers make up nearly one fourth (24%, or 12.8 million) of the overall population (NBS, 2022). The provision of health services, including reproductive health, nutrition assistance, and screening for young individuals, is a matter that necessitates the focus of all involved parties. Furthermore, findings from additional research involving university students indicate that individuals attending higher education institutions often partake in spontaneous and unprotected sexual behaviors, which is believed to result from a less stringent parental environment (Motuma et al., 2021). The actions expose young individuals to unplanned pregnancies, abortions, and sexually transmitted infections. Unintended pregnancies led to various educational outcomes for students, including dropout rates, financial difficulties and social neglect and abandonment. Additionally, data from research carried out in universities within the Dar es Salaam region indicated that the rate of unwanted pregnancies was 27%, while the abortion rate stood at 54.6% (Msuya et al., 2018).

2.4. FACTORS THAT CONTRIBUTES TO UNPLANNED PREGNANCIES AT HIGHER EDUCATION INSTITUTIONS

This section reviews the literature on the factors contributing to unintended pregnancies among university students. Key influences include peer pressure which can lead to risky behaviors and substance abuse which impairs judgment. Socioeconomic standing affects access to resources, while inconsistent application and irregular use of birth control increase risk. Furthermore, insufficient comprehensive sexual education makes students less informed, while restricted access to medical care reduces student's capacity to access contraceptive services. These factors are discussed below.

2.4.1. Peer Pressure

Unintended pregnancy is a prevalent concern for teenagers globally. The teenage years are a unique period in each person's life. It represents a transition phase from being a child to becoming an adult (Adegoke and Ayoade 2017). It is characterized as a phase in human development where numerous psychological and anatomical changes take place, leading to reproductive maturity in adolescents (Lerner, 2018). Numerous adolescents manage this transition effectively, but some undergo considerable stress and engage in sexual activities, with women becoming pregnant. Peer pressure is prevalent in adolescence as young people look for reassurance among their friends and often mimic their behavior without recognizing if it is beneficial or harmful. Youth is a transitional phase in a person's life where a child moves from being a minor to an adult (Adeniyi & Kolawole, 2015). Peer pressure often seems to impact students' academic performance differently, especially among female students. Social pressure can occasionally compel female students to engage in risky actions, resulting in negative consequences such as unplanned pregnancies. It is the way their peers affect them, whether in a positive or negative manner. Young people seek comfort in those they meet among their peers, yet they remain unaware of the intellectual impacts their classmates exert on them. Research shows that peer pressure among students can increase their anxiety, particularly regarding their academic success (Kadir, et al 2018).

2.4.2. Substance Abuse

Hilton, et al (2018) define substance abuse as the use of illegal substances like drugs, however, they also mention that it encompasses the excessive or improper use of alcohol, prescription drugs and other legal substances such as cigarettes. Substance addiction is often regarded as the leading health challenge confronting the nation. The survey indicates that 10% of the population participates in drug or alcohol misuse, while 20% of patients under family doctors' care, not counting smokers, face substance abuse problems. In African culture, consuming alcohol is typical at social gatherings and aims to be pleasurable. Regrettably, certain individuals take this too far and participate in risky behaviors such as unprotected intercourse, gang rape and experiences with multiple sexual partners (threesomes). Unintended pregnancies in higher education students are primarily connected to high levels of alcohol intake. The phrase "ke ga mma, ga a mpone," meaning "it is a place where my parents can't see me," is commonly used among university and college students. Mbandlwa (2020) states that the financial situations of numerous residents in

townships and informal settlements lead to elevated levels of alcohol abuse. Individuals residing in the informal settlement facing financial difficulties frequently resort to alcohol as a way to cope (Dada, et al 2017).

2.4.3. Socio-Economic Standing

Therefore, socio-economic status measures a student's access to family resources (financial, social, cultural, and human capital), along with the family's or household's social position. Wanjiku and Wanjiru (2018) contend that in families with scarce resources, education for males should be prioritized. Girls have been conditioned to accept this and since it is socially and culturally less acceptable for them to underperform academically, they usually leave school for their brothers' benefit. In line with Udo, et al (2018), similarly noted that families, especially mothers, encourage boys' education as it assists adults in affording long-term care insurance. The concept that poverty has been "medicalized" is often illustrated by referring to cases where people in medical environments present with problems mainly stemming from their economic hardship. The difference in abortion rates between low-income and affluent women largely originates from the significantly higher rates of unintended pregnancy among those with fewer resources,

2.4.4. Inconsistent Application of Birth Control Methods

Haeger, et al (2018) state that unplanned pregnancies lead to a considerable need for emergency contraception, yet insufficient knowledge hinders individuals from utilizing it. Contraceptives are considered an effective means of avoiding unplanned pregnancies. Even though some universities provide safe and dependable contraception, many women who wish to avoid pregnancy either do not use contraception or use it inconsistently. Women in the middle age group face a considerable risk of contracting STIs and diseases such as HIV and AIDS (Coetzee & Ngunyulu, 2015). Nevertheless, irregular use of contraceptives is believed to significantly influence unintended pregnancies. Research indicates that inconsistent contraception use among students at higher education institutions accounted for 61% of unintended pregnancies. Irregular use of contraceptives results in hormonal disruption, potentially leading to unintended pregnancy or infertility.

As stated by Khan, et al (2020) argued that factors contributing to inconsistent use or non-use included changes in women's lives, such as starting or ending a relationship, relocating, commencing a new job or school or experiencing a personal crisis. Additional elements encompassed social deprivation, challenges in obtaining care, a lack of drive or hesitance to avert pregnancy, perceptions and encounters with the contraceptive method, the mindset of healthcare providers, and obstacles related to accessing treatment. Margherio (2019) suggests that women who were unhappy with their existing contraceptive method exhibited greater inconsistent usage. Abortions due to unintended pregnancies have a major impact on society. Both are more common among young individuals and students at prestigious educational establishments. Unintended pregnancies among students in higher education institutions are associated with inadequate prenatal parental behaviors and social repercussions for both the mother and the child (Homco, et al 2019).

2.4.5. Insufficient comprehensive sexual education

Insufficient comprehensive sex education (CSE) is a major reason behind unplanned pregnancies in both male and female university students. This lack of education can result in various problems that heighten the chances of unintended pregnancies (Moyo, et al 2021). A lot of students do not possess sufficient understanding of different contraceptive techniques, their effectiveness and the proper ways to use them. This may lead to improper or inconsistent use of contraception, resulting in accidental pregnancies. Lacking appropriate education, students might depend on myths or false information regarding sexual health and contraception. This may result in misunderstandings regarding the safety and efficacy of contraceptive methods, deterring individuals from utilizing them. For instance some students might think that specific contraceptives are dangerous or not effective, which can discourage them from using them entirely. Thorough sex education delivers information on contraception and also instructs on negotiation techniques for practicing safe sex. Students without this education may struggle to talk about contraception with their partners, resulting in unprotected intercourse. Mollborn (2017) stated that peer influence and the need to uphold relationships can complicate these discussions, leading to increased rates of unintended pregnancies.

Students might be unaware of existing sexual health resources, such as locations to access contraceptives or obtain guidance. This ignorance can result in overlooked chances to avert

unintended pregnancies (Fekede, 2022). In various situations, conversations regarding sex and contraception are viewed negatively, resulting in a deficiency of open discussions among students. This cultural obstacle may keep students from obtaining information or assistance about sexual health, worsening the problem of unintended pregnancies. The absence of thorough sex education greatly leads to unintended pregnancies in university students by generating knowledge gaps, promoting misinformation and restricting resource access.

2.4.6. Irregular Use of Birth Control

Irregular use of contraception is a major reason for unplanned pregnancies among university students of both genders. This inconsistency may stem from several factors such as limited knowledge, accessibility challenges, and behavioral influences (Moyo, et al 2021). Numerous students might not completely grasp how to utilize contraceptives efficiently. This encompasses a lack of understanding regarding the proper use of condoms, oral contraceptives or additional methods, potentially resulting in misuse and a higher likelihood of unplanned pregnancies. Even if students know about contraceptive methods, they might encounter obstacles to obtaining them. This encompasses monetary limitations, insufficient stock at nearby drugstores or social stigma linked to buying contraceptives. For example students from low-income families might struggle to buy contraceptives consistently, resulting in inconsistent usage (Margherio, 2019). Impulsive behaviors along with the effects of drugs and alcohol, may result in irregular use of contraceptives. Students might participate in unprotected sexual encounters at social gatherings or parties, where contraceptive use is frequently neglected. The character of relationships may also influence the use of contraceptives.

In informal or non-serious relationships, students might be less inclined to talk about or emphasize the importance of contraceptive use. Moreover, the influence of peers or the urge to fit in with societal expectations can result in choices that undermine safe sex behaviors (Margherio, 2019). Inconsistent discussions regarding contraceptive use between partners may result in misinterpretations and unprotected intercourse. Numerous students might be uneasy talking about contraception, leading to one partner believing the other is using protection when they actually aren't. Irregular use of contraceptives is a significant factor contributing to the occurrence of unintended pregnancies among college students. Tackling the obstacles to efficient contraceptive

use such as education, accessibility and communication, is crucial for lowering unintended pregnancies in this population.

2.4.7. Restricted Access to Medical Care

Restricted access to healthcare is a major element leading to unplanned pregnancies among male and female college students. This problem includes several obstacles that hinder students from accessing essential reproductive health services such as contraceptive options, sexual health education and counseling (Mbandlwa, 2020). Numerous college students encounter financial limitations that restrict their capacity to pay for healthcare services such as contraceptives and reproductive health advice. This economic pressure may result in decreased utilization of accessible services, heightening the chances of unplanned pregnancies. Students residing in rural or neglected regions might have restricted access to healthcare centers offering reproductive health services. The remoteness of these facilities may deter students from obtaining care, especially if they do not have transportation or are pressed for time because of their academic responsibilities. Cultural perspectives on sexual health can lead to stigma associated with pursuing reproductive health services. Learners might experience embarrassment or shame when seeking contraceptive services or sexual health education, resulting in a lack of awareness and a higher risk of unintended pregnancies. Numerous universities lack thorough reproductive health services, such as the availability of contraceptives and sexual health education. When healthcare services are restricted or not customized to meet students' needs, it can lead to decreased usage rates and increased occurrences of unintended pregnancies. Students might not recognize the reproductive health services accessible to them, such as counseling and contraceptive choices. This unawareness may hinder them from seeking assistance when necessary, leading to unplanned pregnancies (Msuya et al., 2020). Restricted availability of healthcare significantly contributes to the incidence of unintended pregnancies in university students. Tackling financial, geographical and cultural obstacles, alongside enhancing the access to comprehensive reproductive health services on campuses is crucial for decreasing unintended pregnancies within this group.

2.5. CONSEQUENCES OF UNINTENDED PREGNANCIES FACED BY STUDENTS IN UNIVERSITIES

This section reviews the literature on the consequences of unintended pregnancies faced by university students which include disruption of academic goals, financial strain, emotional and mental effects, pressure on romantic relationships, changes in lifestyle and stigma exclusion. These consequences are discussed below.

2.5.1. Disruption of Academic Goals

Unintended pregnancies in university students can greatly hinder their academic aspirations, resulting in numerous difficulties that impact their educational paths. Students who are pregnant frequently encounter health problems that may result in higher rates of class absenteeism (Msuya et al., 2020). This lack of presence may obstruct their capacity to stay current with assignments and engage in crucial educational activities, ultimately influencing their grades and general academic achievements. Numerous students facing unplanned pregnancies might require a break from their education or a lighter course load to handle their new duties. This may lead to a prolonged duration for finishing their degrees, postponing their workforce entry and affecting their future career opportunities. The financial responsibilities of parenting can prompt students to take on additional work hours, potentially clashing with their academic commitments. Juggling work and academics can be especially difficult, frequently leading to diminished academic results and heightened stress levels. The pressure of handling an unexpected pregnancy can result in emotional difficulties, such as anxiety and depression.

These psychological elements can additionally hinder academic achievement, as learners may find it difficult to focus on their coursework or participate completely in their learning setting (Mekonnen et al., 2018). Students dealing with unintended pregnancies might encounter social stigma or feel disconnected from their peers, resulting in a deficiency of support. This separation can reduce their drive and involvement in educational tasks, further hindering their academic objectives. The duties of being a parent can divert students' attention from their educational and professional goals. Some individuals might opt to focus on short-term financial security rather than long-term academic objectives, potentially resulting in a deviation from their initial career trajectories. Unplanned pregnancies present considerable difficulties for university students, interfering with their academic aspirations and influencing their overall educational journeys.

2.5.2. Financial Strain

Unexpected pregnancies can create considerable financial pressure on university students, hindering their capacity to handle tuition fees and everyday living expenses. Students opting to continue their pregnancies encounter immediate financial challenges associated with childcare (Mekonnen et al., 2018). The expenses related to parenting such as diapers, clothes, meals, and medical care can be daunting for students who frequently possess restricted financial means. Medical costs for prenatal care, childbirth and postnatal care can be significant. Numerous students might lack sufficient health insurance coverage, resulting in out-of-pocket expenses that can further burden their finances. Students might have to lessen their course loads or pause their education to look after their child which can postpone graduation and restrict their future income possibilities. This decrease in educational achievement can have lasting financial effects since advanced education is frequently associated with improved job prospects and increased income. To manage the financial pressures of an unexpected pregnancy, numerous students might increase their work hours or find extra jobs. Juggling work and study can result in heightened stress and might adversely affect academic performance, resulting in a cycle of financial and educational difficulties. Students experiencing unplanned pregnancies may increase their dependence on financial aid or governmental support programs (Msuya et al., 2020).

Although these resources can offer short-term assistance, they might not entirely address the expenses involved in child-rearing, resulting in persistent financial insecurity (Msuya et al., 2020). The financial burden faced during and following an unplanned pregnancy can have enduring impacts on students' monetary well-being. This encompasses possible debt buildup, obstacles in saving for upcoming expenditures and hurdles in realizing financial autonomy. The financial pressure caused by unplanned pregnancies can profoundly influence university students, impacting their academic success and future financial security. Tackling these challenges with thorough support services and resources is crucial for assisting students in navigating the difficulties of unintended pregnancies while balancing their educational and financial objectives.

2.5.3. Emotional and mental effects

Unintended pregnancies can significantly impact the emotional and psychological well-being of university students. These consequences can greatly influence their mental health, academic

success and general well-being (Mbandlwa, 2020). Students encountering unplanned pregnancies frequently deal with increased stress and anxiety. This pressure can arise from worries regarding their educational prospects, economic security and the duties of being a parent. Worries about parental responses and societal criticism can intensify these emotions. Numerous students indicate that they experience symptoms of depression due to unplanned pregnancies. The mix of educational demands, monetary strain and the emotional impact of an unexpected pregnancy can result in sensations of hopelessness and despair. Unintended pregnancies may cause social isolation since students might distance themselves from their peers because of stigma or shame. This seclusion can reduce their support systems, making it harder to manage the emotional and psychological pressures of pregnancy and motherhood.

Becoming a parent can lead to an identity crisis for numerous students. They might find it difficult to balance their identities as students with their emerging duties as parents, resulting in confusion and a feeling of detachment from their former way of life and goals (Mbandlwa 2020). Unplanned pregnancies can create considerable stress in relationships with partners, family, and friends. Disagreements can occur regarding perspectives on child-rearing, financial duties, and future intentions, potentially resulting in emotional turmoil and additional mental health issues. Students might utilize different coping mechanisms to handle the emotional and mental impacts of unplanned pregnancies. These strategies may involve positive actions, like obtaining help from counseling services, as well as detrimental behaviors such as substance abuse, which can exacerbate their mental health issues. The emotional and psychological impacts of unplanned pregnancies in college students are complex and can create notable difficulties in both their academic and personal spheres.

2.5.4. Pressure on romantic relationships

Unplanned pregnancies frequently lead to stress and strain among couples. Partners might encounter disputes regarding child-rearing duties, monetary responsibilities and future aspirations, potentially resulting in conflicts and in certain instances, relationship dissolutions (Fekede, 2022). The strain of an unexpected pregnancy can intensify current problems or generate new ones, complicating couples' efforts to sustain a healthy relationship. The dynamics of the relationship might change significantly following an unplanned pregnancy. For certain couples, pregnancy might strengthen their commitment whereas for others it can evoke feelings of resentment or

regret. The dynamics of the partnership can shift as partners manage the intricacies of approaching parenthood, which may not match their original expectations or wishes. Students might encounter tension in their family relationships due to an unplanned pregnancy.

Worries about how parents might react can create feelings of shame or fear, prompting students to distance themselves from family support. In certain situations, families might respond unfavorably causing additional emotional turmoil for the student (Mlambo, 2020). The negative perception surrounding unplanned pregnancies can result in social exclusion. Students might experience feelings of being evaluated by classmates or worry that their social groups will shift, causing them to distance themselves from friendships and sources of support. This seclusion can amplify feelings of loneliness and anxiety, making it harder to manage the circumstance. Conversely, certain students might discover that their connections deepen while facing the difficulties of an unforeseen pregnancy collectively. Assistance from partners, family and friends can offer crucial emotional and practical help, aiding students in navigating the shift into parenthood.

2.5.5. Changes in way of life

Students might have to modify their educational objectives and priorities. Pregnancy obligations and possible parenting duties may result in lighter course loads or even a short-term leave from academic pursuits (Mlambo, 2020). This change can postpone graduation and change career paths, as students might prioritize urgent family obligations over future educational goals. The cost of raising a child can result in alterations to one's lifestyle such as longer work hours or the necessity to seek extra income sources. Students might need to juggle part-time employment alongside their coursework, which can result in stress and exhaustion, complicating their academic performance even more. Unplanned pregnancies frequently lead to changes in social dynamics. Students might withdraw from social events or peers because of the stigma linked to being a young parent or the practical difficulties of parenting. This may result in sensations of loneliness and a diminished network of social support.

Expectant students might require substantial adjustments to their health and wellness practices. This involves going to routine prenatal visits, modifying eating habits and controlling stress levels. Prioritizing health can result in lifestyle adjustments that favor physical wellness over former routines, like studying late at night or socializing (Dada, 2020). The unexpected emotional effects

of an accidental pregnancy may result in lifestyle modifications as students deal with emotions like anxiety, depression or stress. They might pursue therapy or support circles, which can change their everyday habits and social engagements. Connections with partners, relatives and friends can alter considerably. Students might find enhanced support in certain relationships while encountering stress in others. These dynamics can affect daily interactions and lifestyle decisions, as students might place family and parenting above social activities.

2.5.6. Stigma and exclusion

Unintended pregnancies in university students frequently result in considerable stigmatization and social exclusion. These effects can significantly impact students' mental health, academic success, and general well-being (Robinson, 2022). Numerous students encounter societal scrutiny and stigma related to being pregnant during their education, especially when the pregnancy is unplanned. Such stigma can arise from cultural standards that perceive premarital sex and unplanned pregnancies unfavorably. Consequently, students might experience shame or embarrassment, causing them to conceal their circumstances from friends and relatives. The anxiety of facing judgment from peers, teachers, and relatives can cause students to distance themselves from social situations. This retreat can intensify emotions of loneliness and isolation, hindering their ability to seek help from their social circles. Stigmatization can put a strain on current friendships and peer connections. Friends might respond with unease or withdrawal, causing a collapse in social support structures.

This disconnection can increase the isolation of students, making it difficult to handle the emotional and practical challenges of an unplanned pregnancy (Robinson, 2022). The mix of stigma and isolation may result in heightened anxiety, depression and stress for students who are pregnant. The emotional impact of experiencing marginalization can impair their capacity to concentrate on academic duties and personal health. Stigmatization could hinder students from accessing essential support services like counseling or healthcare. The anxiety of facing judgment may prevent them from utilizing resources that could assist them in managing their situations successfully. The experience of being stigmatized can result in lasting effects on students' self-worth and sense of self. They might absorb adverse societal views, influencing their future relationships and individual growth.

2.6. COPING MECHANISMS FOR UNINTENDED PREGNANCIES EMPLOYED BY STUDENTS IN UNIVERSITIES

This section reviews the coping mechanisms employed by university students facing unintended pregnancies. The coping strategies include seeking support services, educational workshops, engaging in open communication, substance abuse, developing a support network, escape avoidance, practicing stress management, exploring financial assistance and self-isolation. While some coping mechanisms can be beneficial but others may have negative effects therefore complicating the student's ability their challenges effectively. The coping mechanism are discussed below.

2.6.1. Seeking support services

Accessing support services is an essential strategy for university students dealing with unexpected pregnancies. This method provides students with emotional, psychological and practical support, which can greatly reduce the stress and difficulties linked to their circumstances (Robinson, 2020). Numerous universities provide counseling services tailored to assist students in managing the emotional challenges of unexpected pregnancies. These services offer a secure environment for students to share their emotions, examine their choices and cultivate coping mechanisms. For example, a study emphasized that students who accessed counseling felt more supported and more prepared to manage the stress of their situations. Participating in peer support groups can be advantageous for students. These groups enable people to engage with others facing similar difficulties, promoting a feeling of community and empathy. Exchanging experiences in a nurturing setting can alleviate feelings of loneliness and stigma related to unplanned pregnancies (Dada, 2020).

2.6.2. Educational workshops

Colleges frequently offer seminars on subjects like child-rearing, budgeting and effective time utilization. These tools can assist students in getting ready for the real-life elements of parenting while managing their educational duties. Workshops centered on budgeting for children can enable students to make knowledgeable financial choices (Dada, 2020). Utilizing health services such as

prenatal care and family planning options, is crucial for students dealing with unplanned pregnancies. Universities might provide health clinics that deliver complete reproductive health services, guaranteeing that students obtain the medical attention they require during this important period. A university female student who finds out she is unexpectedly expecting may experience a sense of overwhelm and uncertainty about her next steps. In seeking support services, she may initially go to the campus counseling center to talk about her emotions and examine her choices. In counseling, she discovers nearby resources, including financial assistance programs and parenting courses. Furthermore, she might participate in a support group for expectant students, allowing her to exchange her experiences and receive perspectives from peers facing similar circumstances (Robinson, 2022). This mix of emotional and practical assistance enables her to manage her unplanned pregnancy more efficiently.

2.6.3. Engaging in open communication

Participating in transparent communication is an essential strategy for university students dealing with unexpected pregnancies. This method enables students to share their emotions, ask for guidance and receive assistance from their social circles, which can greatly reduce the emotional weight tied to their circumstances (Robinson, 2022). Discussing their experiences can assist students in understanding their emotions. Students can alleviate feelings of isolation and anxiety by confiding in trusted friends, family or partners about their emotions. Transparent communication creates a nurturing atmosphere where students sense their voices are acknowledged and respected. Participating in conversations regarding their circumstances enables students to examine their choices in greater depth. Through open communication with others, they can collect various viewpoints and guidance, which can help in making well-informed choices about their pregnancy, whether it pertains to parenting, adoption or termination. Clear communication can enhance bonds with partners and family members. Students can cultivate understanding and support by sharing their feelings and concerns, which is essential during this difficult period. This may result in a more cooperative method for tackling the difficulties associated with an unexpected pregnancy (Dada, 2020). For example, a male student discovering that his partner is unexpectedly pregnant might feel anxious and uncertain about how to assist her. Through open dialogue, he can start a discussion with her regarding their emotions, concerns and possible future actions. This conversation not only aids him in grasping her viewpoint but also

enables them to examine their choices collectively, which might include pursuing counseling, looking into parenting classes or contemplating other possibilities. By keeping communication channels open, they can work through the complexities of their situation together, which can improve their emotional resilience and decision-making abilities.

2.6.4. Substance abuse

Students in higher education turn to substance abuse as a means to cope with unintended pregnancies, illustrating a complex interaction of stressors linked to academic demands and the difficulties of unintended pregnancy. Matsai & Raniga (2021) reveals that many students employ substance use to manage overwhelming stress of academic responsibilities combined with financial constraints and the stigma faced by students. For example, research performed with student nurses in South Africa discovered that adapting to college life, marked by unfamiliar social settings and academic pressures, leads to heightened stress levels, causing some students to resort to substance use as an unhealthy coping mechanism (Mathe, Downing and Kearns, 2021). The findings indicate that the availability of substances such alcohol and cannabis at university campuses influence the high rates of substance abuse in this group. The isolation experienced by students due to social stigma makes them more likely to turn to substance abuse as a way to manage anxiety and depression. The dependency poses health risks for both the pregnant student and the unborn children while negatively impacting their academic success and general well-being (Mathe, Downing and Kearns, 2021). The literature emphasizes the critical necessity for focused interventions that tackle the core stressors encountered by students and offer healthier strategies to reduce the dependence on substance use.

2.6.5. Developing a support network

Establishing a support network is an essential strategy for university students dealing with unplanned pregnancies. A robust support network offers emotional, informational and practical help, aiding students in managing the difficulties linked to their circumstances (Mlambo, 2020). Friends, family and peers can offer a supportive ear, assisting students in navigating their emotions and alleviating feelings of loneliness. Support networks may also offer tangible aid, like childcare assistance, rides to medical visits or support with educational duties. This may reduce some of the pressure linked to managing pregnancy and studies. Participants in a support network can

exchange important information regarding resources like counseling services, financial assistance and parenting courses.

This shared understanding can enable students to make knowledgeable choices. A network of encouraging people can inspire students to persist in their education and chase their objectives even in the face of the difficulties posed by an unplanned pregnancy. For instance, a male student whose girlfriend is unexpectedly expecting may feel daunted by the circumstance. Creating a support network allows him to connect with friends who have faced similar circumstances or participate in a campus organization centered on parenting (Dada, 2020). This network can offer him emotional assistance and practical guidance on how to assist his partner and handle their duties. Furthermore, he could engage with university resources that provide workshops on parenting and financial management, thus improving his capacity to handle the circumstances.

2.5.6. Escape avoidance

Escape avoidance is a coping mechanism that some students utilise when dealing with stress and challenges associated with unintended pregnancy. This form of coping involves trying to avoid stressful situations or emotions by distracting oneself or withdrawing from the issue. For many students this may results in distancing themselves from friends and family, skipping classes and participating in activities that allow them to escape their concerns (Thabethe, 2017). Although escape avoidance helps students to escape stress temporarily, it can create some problems over time. Employing avoidance strategy can increase feelings of anxiety and depression which can affect a student from managing academic work with pregnancy and this can affect the welfare of the unborn child. Therefore, escape avoidance provide immediate relief for pregnant students by avoiding stressful situations.

2.5.7. Practicing stress management

Practicing stress management is an essential strategy for university students dealing with unexpected pregnancies. Efficient stress management strategies can assist students in dealing with the emotional and practical difficulties linked to their circumstances, thereby enhancing their mental well-being and academic success (Haeger, et al 2018). Practicing mindfulness and meditation can assist students in lowering anxiety levels and enhancing emotional control. These methods prompt students to concentrate on the current moment, helping to reduce feelings of stress

linked to unplanned pregnancies. Consistent exercise is recognized for lowering stress and enhancing overall health. Students can gain advantages from participating in physical activity, whether it's through college sports teams, exercise classes or individual training sessions.

Exercise triggers the release of endorphins, which can elevate mood and alleviate stress. Cultivating strong time management abilities can assist students in harmonizing their academic duties with the challenges of pregnancy (Haeger, et al 2018). By organizing tasks and establishing achievable objectives, students can lessen stress levels and enhance their capacity to handle their circumstances. Utilizing the counseling services offered by the university can be a beneficial method to handle stress. Professional counselors can provide coping techniques customized to the specific needs of students, assisting them in managing the emotional challenges of unplanned pregnancies. Connecting with a support network of friends, family and peers can offer both emotional comfort and practical help. Exchanging experiences and emotions with peers can make students feel less alone and more supported.

2.5.8. Exploring financial assistance

Financial pressure can greatly affect students' capacity to handle their academic duties and personal lives during this difficult period. Gaining financial support can ease certain challenges linked to pregnancy and parenting, enabling students to concentrate on their studies and personal health (Besarmin, 2020). Numerous universities provide dedicated financial aid options for students who are parents or experiencing unforeseen financial difficulties. This may encompass grants, scholarships, or emergency funds aimed at assisting students in challenging situations. Students might qualify for government aid programs offering financial help to families with low income. Certain universities offer childcare financial assistance or collaborate with nearby childcare facilities to support student parents in managing childcare expenses. This assistance can be vital for students who must manage parenting alongside their academic work (Besarmin, 2020).

Obtaining health insurance via the university or government initiatives can assist in covering medical costs associated with pregnancy and delivery, alleviating the financial strain on students. Students might also seek informal financial help via peer support groups or crowd funding sites (Besarmin, 2020). This may involve arranging fundraising activities or asking for assistance from relatives and friends. For instance, a male student whose girlfriend is unexpectedly expecting may

feel burdened by the financial consequences of their circumstances. To manage, he could look into financial aid opportunities offered by their university, like applying for a grant aimed at student parents. Moreover, he may explore government initiatives that offer financial assistance to families, guaranteeing they obtain essential resources. By actively pursuing financial support, he can reduce some of the anxiety related to their unplanned pregnancy and concentrate on helping his partner and continuing his studies.

2.5.9. Self-isolation

Alpert (2017) defines self-isolation as the act of separating oneself from others. Self-isolation is a strategy often utilized by pregnant students in higher education to deal with the complex difficulties linked to their situation. Students in high institutions who choose self-isolation often aim to avoid peers scrutiny and social stigma that arise from societal norms about pregnancy and academic life. Many students who experience unintended pregnancies feel shame and fear about their circumstances, causing them to disengage from social engagement and support systems (Robinson and Ward, 2014). Expectant students withdraw from social interactions to manage the emotional distress caused by academic stress, financial difficulties and relationship problems which can increase feelings of loneliness and depression. Moreover, this coping strategy leads to negative academic consequences, as students who withdraw from social interaction may find it difficult to participate in their studies and abandon essential support networks that could contribute to their educational achievement. Self-isolation offers only temporary relief from the difficulties of pregnancy and academic life but results in detrimental effects on mental health and educational performance.

2.6. RESEARCH GAP

Several gaps have been identified in the literature above. First gap is that many studies have mainly focused on the experiences and opinions of female students, neglecting the perspectives of male students. This oversight limits a comprehensive understanding of the issue from a holistic viewpoint, as male involvement and perspective play a crucial role in the dynamics of unintended pregnancies. Another gap identified, coping mechanism such as seeking support services and education workshops are mentioned, there is limited understanding of their effectiveness particularly regarding maladaptive responses such as substance abuse and self-isolation. Research

is needed to identify which coping strategies are most effective to students and identify barriers that prevent effective coping.

Existing literature highlights the consequences of unintended pregnancies such as disruption of academic goals and emotional effects but there is lack of thorough investigation into how these consequences affect student's long term academic and personal outcomes. Addressing these gaps is crucial for developing tailored interventions and support systems for students affected by unintended pregnancies.

2.7 CHAPTER SUMMARY

This chapter illuminated a theoretical framework, within which literature was reviewed, drawing from various sources and texts to establish the foundation of this research. The chapter explored different texts concerning unintended pregnancies on college campuses. This section also included the theories that impacted the study. This chapter set the stage for the next chapter, which will discuss the study's Methodology.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1. Introduction

This chapter presents the research methodology used to investigate the experiences of unintended pregnancies among university students at Bindura University of Science Education. It outlines the research approach and design, explains the justification behind their selection. The study setting is described and the target population of male and female students. The sampling size and methods are examined followed by an overview of the data collection methods and tools utilized. Trustworthiness is examined to validate the credibility of the study findings and the chapter concludes with the summary of the data analysis techniques and ethical considerations.

3.2 Research approach

Research approach is the procedure selected by the researcher to collect, analyse and interpret data (Taherdoost, 2021). The research adopted a qualitative approach to explore the experiences of unintended pregnancies among university students in Zimbabwe. Qualitative approach involves collecting and analysing non-numerical data such as text, video or audio to understand concepts, opinions or experiences. This approach allowed the researcher for in-depth exploration of the personal narratives of students, providing insights into their challenges, coping mechanisms and the impact of pregnancy on their academic lives, this depth of understanding is important when examining sensitive topics such as unintended pregnancies during studies. The advantage of using qualitative approach is that it helps the researcher to generate rich and contextual data (Tracy, 2024). The approach generated rich, descriptive data that provides context to the participant's experiences. Another advantage of using qualitative approach is that it ensured flexibility in data collection, qualitative methods such as interviews and focus groups allow for adaptability during data collection. Researcher modified questions based on participant's responses, leading to more relevant and insightful data.

3.3. Research design

According to Pandey (2021), research design refers to the framework of methods and techniques chosen by a researcher to conduct a study. It outlines how data will be collected, measured and analysed to answer specific research topic. This study utilised a case study research design to explore the experiences of unintended pregnancies among university students in Zimbabwe focusing on insights from male and female students from Bindura University. Case study research design is a qualitative research approach that focuses on an in- depth exploration of specific instance, event or phenomenon within its real life context (Ridder, 2017). The justification for using case study research design is that it enabled a thorough examination of the individual experiences of unintended pregnancy, shedding light on their emotions, challenges and coping strategies hence this helped to have insights that other research designs cannot offer. Another advantage of using case study is that by concentrating on Bindura University, the findings can be specifically tied to the unique context and policies of the university, making the results more applicable for enhancing support for students.

3.4. Study setting

Study setting is the physical, social or experimental context within which the research is conducted (Howlett, 2022). The study was conducted at Bindura University in Bindura which is located in Mashonaland Central Province about 88km north east of the capital city. The study focused on Bindura University of Science Education which is found in this city. Bindura University of Science Education hosts students from various regions of Zimbabwe, making it an ideal site to explore a broad range of perspectives on unintended pregnancies. This diversity can provide insights from students of different socio-economic and cultural backgrounds, providing a diverse student population. Also the university environment provide easier access to potential participants, this accessibility assist in data collection through interviews and focus groups.

3.5. Target population

Target population can be defined as a specific group of individuals that researchers aim to study or understand within a broader context (Maxwell, 2021). The research focused on male and female students enrolled at Bindura University, specifically students who have experienced unintended

pregnancies or who have been affected by such experiences. By focusing on this specific group, the research aim to gather important insights into the experiences of unintended pregnancies among university students. Including both male and female students provides a comprehensive understanding of the experiences and perspectives related to unintended pregnancies, this ensures that the research captures insights from all angles. The consequences of unintended pregnancies does not only affect the individual who experience pregnancy but also their partners, exploring the experiences on both genders can offer understanding of emotional, social, academic and financial consequences. However, the dean, lecturers, healthcare workers at Bindura University were involved in the study so that their perspectives could be assessed, this population have first-hand experience working with university students and they have specialised knowledge regarding sexual health and students welfare hence they can provide valuable insights and depth to the study. Also one worker from SAYWHAT (local organisation that works with students) was involved in the study

3.6. Sampling

3.6.1 Sample size

Lakens (2022) define sample size as the number of observations or individuals included in a study or experiment. It is a crucial aspect of research design as it can influence the validity and reliability of the study's findings. In this study there were fifteen participants, five female students, four male students, dean of students, two lecturers, two healthcare workers and one worker from SAYWHAT (local organisation that works with students). Participants were interviewed until no new information was emerging. The researcher continued the interviews until when he felt that enough insights have been gathered and that additional interviews are unlikely to provide new perspectives or findings.

3.6.2. Sampling methods

The researcher employed two non-probability sampling techniques which are convenience sampling and purposive sampling. According to Sharma (2017) a sampling technique is a predetermined strategy chosen before any data is gathered to select a sample from a particular population. The mentioned sampling techniques are described and explained below.

3.6.2.1 Convenience sampling

In this study, convenience sampling was utilized to gather insights of experiences of unintended pregnancies among Bindura University students. Convenience sampling can be defined as a non-probability sampling method where units are selected for inclusion in the sample because they are the easiest for the researcher to access (Sharma, 2017). The researcher approached students on campus especially in common areas like library, dining rooms and hostels, participants who are open to discuss their experiences were invited to join the study. The justification for using convenience sampling is that it enables the researcher to quickly recruit participants who are readily available hence it helps to gather data quickly. Another advantage of using convenience sampling is that participants can be approached at their convenience, allowing for adaptability in scheduling interviews or focus groups.

3.6.2.2 Purposive sampling

Purposive sampling refers to a group of non-probability sampling techniques in which units are selected on the basis of characteristics that the researcher need in a sample (Thomas, 2022). In this research, key informants were purposively selected on the basis of professionalism and the knowledge that they have on the experiences of unintended pregnancies among Bindura University students. The key informants will include healthcare workers, dean of students, lecturers and a representative from SAYWHAT. The purposive sampling technique was relevant in this study as it focused on particular characteristics of the population that are of interest and enables the researcher to answer the research questions.

3.7. Data collection methods

Data collection is the process of gathering, measuring and analysing accurate data. This research used in-depth interviews and focus group discussions to explore the experiences of unintended pregnancies among university students at BUSE. In-depth interviews provided a platform for participants to convey personal narratives, providing deep insights into their feelings and circumstances. Focus group discussion were also utilised, it facilitated interactions between participants.

3.8.1 In-depth interviews

Rosenthal (2016) define in-depth interviews as qualitative research methods used to gather detailed information from participants through open ended conversation questions. The researcher conducted in-depth interviews with twelve participants. Key informants such as lecturers, healthcare workers, the dean and a representative from a local organisations called SAYWHAT were included. The researcher conducted research with key informants in order to collect rich and detailed data. This in-depth interviews allowed the researcher to delve into participant's thoughts, feelings, experiences and behaviours, making it effective for understanding complex issues such as personal experiences. Open-ended questions enabled the participants to share their views freely resulting in gaining deeper insights about the experiences of unintended pregnancies. The researcher engaged in a dialogue with the participants, fostering a comfortable atmosphere that helps to create rapport with the participants which enables the participant to share information freely.

3.8.2. Focus group discussions

Focus group discussion involves gathering people from similar backgrounds or experiences together to discuss a specific topic of interest (Krueger and Casey, 2015). Focus group discussions can also be defined as facilitated discussions, held with a small group of people who have specialist knowledge in particular topic. In this research focus group discussions were conducted with female students and male students. The researcher conducted focus group discussions with eight participants. The justification of using this method is that focus group discussions allows participants to share personal stories and experiences in their own words hence this will help to have rich qualitative data. Another advantage of using focus group discussion is that it helped the researcher to probe for clarification and ask follow-up questions on the spot, leading to a more comprehensive understanding of participants views.

3.8.3. Data collection tools

Data collection tools refers to instruments or methods used to gather information from participants, (Creswell, 2014). For this study the researcher used in-depth interview guide and focus group discussion guide for data collection.

3.8.3.1. In-depth interview guide

The researcher utilised in-depth interview guide, which is a structure set of questions that covers key topics related to the research objectives (Deterding and Waters, 2021). The guide included opening questions which helped to build rapport with participants, it also included core questions that focus on causes, consequences and coping mechanisms employed by students dealing with unintended pregnancies during studies and lastly it included follow-ups questions that helped the researcher to probe for deeper understanding of the participant responses.

3.8.3.2. Focus group discussion guide

A focus group discussion guide was employed, it included a structured outline of topics and questions to guide the discussion. Key discussion topics focused on the specific interest of the study such as causes, consequences and coping mechanisms employed by students dealing with unintended pregnancies during studies. The justification for using this tool is that focus group discussions provide deep insights into participant's thoughts, feelings and experiences (Stewart and Shamdasani, 2014).

3.9. Research procedure

Research procedure are steps taken to gather information and answer research questions (Opie, 2019). The researcher began the data collection process by obtaining permission from the registrar of Bindura University to conduct the study. The researcher submitted a formal request that outlined the research purpose, methods and ethical considerations. When the approval was secured, the researcher made arrangements with respondents which are the female students who were experiencing or affected by unintended pregnancies during studies, male students, lecturers, nurses from the clinic and representative from local organisation called SAYWHAT. During the initial contact, the researcher informed the respondents about the nature of study, its objectives and the importance of their contribution. Before the interviews, the researcher clearly communicated that participation is voluntary and the participants have a right to withdraw whenever they feel like. The researcher provided a consent form detailing the procedures, potential risks and benefits, which the participants signed. The researcher also sought verbal and written consent to record the

sessions for accuracy. The researcher ensured that all data captured, including recordings were securely stored to maintain confidentiality and protect participant's privacy.

3.10. Trustworthiness

In qualitative research, trustworthiness pertains to frameworks for ensuring research quality and rigor (Adler, 2022). In this study on the experiences of unintended pregnancies among university students in Zimbabwe, trustworthiness is crucial as it influences the reliability of the information obtained from both male and female students at BUSE. Establishing trustworthiness is essential for producing reliable data that can inform policy makers and support systems designed to tackle unintended pregnancies. The key aspects of trustworthiness are discussed below.

3.10.1 Credibility

Credibility in qualitative research donates the trust that can be assigned to the validity of the findings, indicating how well the research portrays the experiences and viewpoints of the participants (Haven & Van Grootel, 2019). In this study, credibility is crucial for ensuring that the findings obtained from both male and female students are genuine and representative. The researcher used member checks to enhance the credibility of the study. Participant assessed the results to validate their perspectives and experiences have been correctly represented. This procedure ensures that the researchers interpretation align with participants views and experiences. This strategy allows the study to guarantee that its findings are reliable and accurately represent the complex situations encountered by university students facing unintended pregnancies.

3.10.2. Dependability

Dependability reflects how much a research study can be replicated by another researcher and yield the same results (Haven & Van Grootel, 2019). In this study on the experiences of unintended pregnancies among university students in Zimbabwe, dependability is crucial to guarantee that the finding can be trusted and reproduced in comparable contexts. To improve the dependability of the study, the researcher utilised a detailed audit trail that records the complete research processs, encompassing participant selection and data collection techniques. This openness enables others to trace the research procedure and assess its coherence (Haven & Van Grootel, 2019).

3.10.3. Transferability

Transferability refers to the extent to which the results and interpretations obtained from a study can be relevant and applicable to different contexts or environments outside the particular research setting (Adler, 2022). Transferability is crucial for showing the wider significance of the results. To improve the transferability of the study, the researcher provided a comprehensive and detailed accounts of the research context, encompassing the socio-cultural elements and the distinctive setting of BUSE. Capturing the varied experiences of male and female students generates a thorough narrative that enables readers to evaluate how the results could pertain to other comparable environments such as universities from different areas or nations.

3.10.4. Confirmability

Confirmability is the degree to which results are influenced by participants experiences instead of the researchers biases (Haven & Van Grootel, 2019). The researcher used data triangulation to enhance the confirmability of the study, researcher utilised interviews and focus group discussion as data collection methods to validate findings. This method enhanced the confirmability of the findings and offers a deeper insight into the experiences of male and female students alike. The researcher also used member checks and kept audit trial to improve the confirmability of the study

3.11. Data analysis

Data analysis is the process of systematically collecting, cleaning, transforming, describing, modelling and interpreting data (Larose, 2014). The researcher employed thematic analysis to analyse the data gathered from the interviews with respondents. Braun and Clarke (2012) state that thematic analysis is a method of identifying, analysing and reporting patterns and themes within data. There are six stages in the thematic analysis process which are familiarisation, coding, theme generation, theme review, theme definition and naming and writing up. The researcher applied codes to various data segments and generated themes based on these codes and data patterns. The themes were reviewed and refined according to the research questions and objectives, preparing them for presentation in the concluding stage of thematic analysis, which involves presenting, analysing and discussing the data.

3.12. Ethical considerations

Ethical considerations in research are a set of principles that guide the research designs and practices (Gupta, 2017). These principles include informed consent, confidentiality and transparency.

3.12.1 Informed consent

According to Millum and Bromwich (2021), informed consent is the voluntary agreement regarding a role a person will play in a research study after they are fully informed. The researcher gave participants sufficient information about the study including the study objectives and the entire nature of the study. The researcher made sure that the participants understand the information and used language or terms that the participants are familiar with and checked for understanding. Participants signed consent forms to signify their acceptance to participate in the study. Participants were clearly informed of their right to withdraw from the study any time without any consequences.

3.12.2 Confidentiality

The researcher ensured that all information shared by the participants was protected and it cannot be disclosed for other purposes. The researcher clearly explained to the participants how the information will be used, stored and protected. Copies of informed consent forms and notes from interviews were stored in locked cabinets to prevent unauthorised access. Electronic data was stored in computers that are protected with strong passwords.

3.12.3 Anonymity

Anonymity refers to the practice that individuals who participate in research should not be identifiable during the analysis of their data. Participants were informed that their identity remained anonymous. Personal information was not disclosed and pseudonyms was used instead. The above-mentioned measures enhanced participation as participants were more willingly to provide their experiences in the study when they were aware that their identities would not be disclosed.

3.12.4 Voluntary Participation

Participants were informed about their right to choose whether to participate or not to take part in the study, participation is voluntary. Information about the study's purpose, procedures and potential risks was clearly communicated before agreeing to participate. The researcher made participants aware that they can withdraw from the study anytime without facing any consequences.

3.12.5 Ethical Approval

The researcher prepared a detailed research proposal that clearly outlined the research objectives and methodology, participants recruitment was included and data collection methods and analysis was outlined. The proposal was submitted to the registrar of Bindura University of Science Education. Consent forms were developed, it explains the purpose of the study and procedures. The researcher ensured that participants are aware of their rights to take part in the study or not, participants can withdrawal at any time without facing any negative consequences.

3.13. Limitations

Study limitations can be defined as any flaws or weaknesses in the methodology or study design that may affect the interpretation of the study findings, (Solem, 2015). Budgetary constraints resulting from the socioeconomic challenges in Zimbabwe affected the study, making it difficult to conduct research within a limited budget. Limited financial resources restricted the ability to conduct a more extensive study involving various universities. The researcher maximised the available budget by utilising cost-effective data collection methods such as focus groups discussions conducted on campus. Furthermore, cultural attitudes towards pregnancy outside of marriage influenced participant's willingness to participate and share openly. To overcome this issue the researcher emphasised on confidentiality and the value of participants views in shaping support systems.

3.14. Chapter Summary

The chapter discussed the research methodology used to investigate the experiences of unintended pregnancies among university students at Bindura University of Science Education. It outlines the

research approach and design, explained the justification behind their selection. The study setting is described the target population of male and female students. The sampling size and methods are discussed followed by an overview of the data collection methods and tools utilized. Trustworthiness is examined to validate the credibility of the study findings and the chapter concludes with a summary of the data analysis techniques and ethical considerations that guided the research process.

CHAPTER FOUR

PRESENTATION, INTERPRETATION, ANALYSIS AND DISCUSSION OF FINDINGS

4.1. Introduction

This chapter includes the presentation, analysis and interpretation of the data collected in the study. The section also presents the research's findings. The findings were presented in the form of themes and ordered according to the objectives of the study, shedding light on the causes, consequences and coping mechanisms of unintended pregnancies among university students. Verbatim statements are also included in this chapter to add the richness of data. The chapter also included a discussion of the findings, the discussion provides a critical analysis of the themes.

4.2 Demographic Distribution

The table below presents the biographic data of the participants who took part in the study. Since unintended pregnancy affects both males and females, both were included in the study. The research was done on 15 participants including students and key informants, 6 were males and 9 were females. The study comprised of 9 students and 6 key informants who comprised of 2 lecturers, 2 nurses, Dean of students and a representative from SayWhat organization. The age group of students from 21-22 were 4, the age group of students who were from 23-24, were 3 and those from 19-20 were 2. The difference in age groups was necessary to the study as they balance results and also that unintended pregnancy happens to any age group at the university. Most students who participated were final year students who were 4. The researcher selected this group, using the wisdom that they might have seen or experienced unintended pregnancies at the university. The second year students were 3 and the first year students were 2. Most students were selected from the Main Campus, that were 3, TC were 2, Astra 2 and FSE were 2. This was done to balance the results from all the BUSE campuses. Most of the students were doing Social Work were 3, IT 2, Purchasing and Supply were 2 and Crop Science 2.

TABLE 4.2 1: Demographic characteristics of participants

Characteristics	Details (Age)	Number
Students (9)	19-20	2
	21-22	4
	23-24	3
Lecturers (2)	40-45	2
	46-50	1
Nurses (2)	35-40	1
Dage (1)	41-45	1
Dean (1) SayWhat Rep (1)		1
Say what Rep (1)		1
TOTAL		15
SEX	Male	6
	Female	9
TOTAL		15
LEVEL OF STUDENTS	First Year	2
	Second Year	3
	Final Year	4
TOTAL		9
CAMPUS AREA	Town Campus	2
	Main Campus	3
	Astra Campus	2
	FSE Campus	2
TOTAL		9
PROGRAMS		_
	Social Work	2
	I.T	2
	Purchasing	3
	Crop Science	2
TOTAL		9

4.3 Causes of unintended pregnancies among male and female students

The study findings indicated that they are various causes of unintended pregnancies among male and female students at BUSE. These ranges from peer pressure, drug abuse and insufficient comprehensive sex education. Both students and key informants gave valuable information to the study.

4.3.1 Peer Pressure

It came out of the study that peer pressure was one of the major causes of unintended pregnancies at the university. Most participants argued that students at college suffer from pressure from their peers and what they do. This can be illustrated by the statement below from one respondent;

"At university level there is this pressure to be sexually active, I've done it just to not be left out." (First Year Student)

"Listening to my friends makes me feel like I should be doing the same, even if I'm not ready." (Second Year Student)

"Peer influence is strong, students often make choices just to belong." (Lecturer)

The statements above are supported by Adegoke and Ayoade (2017) who argued that unintended pregnancy is a prevalent concern for college students globally due to peer pressure. Many adolescents manage this transition successfully but some face considerable stress and engage in sexual activities which leads to women getting pregnant. Peer pressure is very common in the youth as they try to seek comfort from each other and follow each other blindly without even knowing if it is good or bad. Youth is a transition stage of a person when the child is moving from a minor to an adult (Adeniyi & Kolawole, 2015). The peer pressure affects the students differently in terms of the learning outcomes especially to the female students. Social pressure might make the female students engage in risky behaviors which in turn results in negative outcomes such as unintended pregnancies. It is how the peers affect them positively or negatively. Young people seek comfort in those they meet among their peers, yet they remain unaware of the intellectual impacts their classmates exert on them (Kadir, et al 2018). The researcher noted that this trend was common especially among first year and second year students.

4.3.2 Substance Abuse

Another cause of unintended pregnancies at university, which came out of the study was substance abuse. The participants acknowledged that some students can engage in abusing drugs, thereby engaging in sexual intercourse unknowingly of their activities or consequences. This can be illustrated by the statement below from one respondent;

"College culture often involves drinking at social gathering for enjoyment. Unfortunately some students engage in risky behaviours including unprotected sex "(SayWhat member)

"Due to socioeconomic pressures, students often abuse drugs like marijuana leading to reckless sexual behaviours which causes unintended pregnancies" (**Dean**)

"At parties, after a few drinks, I never think about protection. It's just not on my mind."

(Second year student)

Mbandlwa (2020) states that the financial situations of numerous residents in townships and informal settlements lead to elevated levels of alcohol abuse. Individuals residing in the informal settlement facing financial difficulties frequently resort to alcohol as a way to cope (Dada, et al 2017). With the advent of coping with stress and life pressures, students tend to abuse drugs and this will lead to unintended pregnancies. Participants revealed that lack of access to mental health service exacerbates their situations, the normalization of substance use in social gatherings lead to risky behaviors including unprotected sex. This in turn increases the likelihood of unintended pregnancies.

4.3.3 Insufficient comprehensive sexual education

Insufficient comprehensive sex education also emerged as a major reason behind unplanned pregnancies in both male and female university students. This lack of education can result in various problems that heighten the chances of unintended pregnancies (Moyo, et al 2021). This can be illustrated by the statement below from one respondent;

"The sex education I had was too basic. I didn't learn enough about how to use contraception properly "(Final year student)

"Some students might think that specific contraceptives are dangerous or not effective, which can discourage them from using them entirely." (Nurse)

"Students might be unaware of existing sexual health resources, such as locations to access contraceptives or obtain guidance." (Nurse)

Without sex education, students may rely on myths or wrong information about sexual health and contraception. This can lead to misunderstanding about the safety and effectiveness of contraceptive methods which may discourage them from using them. The above statements are supported by Mollborn (2017) who argued that, thorough sex education delivers information on

contraception and also instructs on negotiation techniques for practicing safe sex. Students without this education may struggle to talk about contraception with their partners, resulting in unprotected intercourse. Flex (2020) stated that peer influence and the need to uphold relationships can complicate these discussions, leading to increased rates of unintended pregnancies. The ignorance can result in overlooked chances to avert unintended pregnancies (Fekede, 2022). In some cases, sex and contraception talks are viewed negatively which may lead to shortage of open talks among students. This cultural problem may prevent students from getting information or assistance about sexual health which may worsen the unintended pregnancies. Lack of comprehensive sex education results in unintended pregnancies in university students by creating knowledge gap, spreading misinformation and blocking resource access.

4.4 Consequences of unintended pregnancies faced by students

The study outlined various consequences of unintended pregnancies faced by students at BUSE, revealing profound impacts on their lives. The participants highlighted several key consequences such as disruption of academic goals, financial constrain and emotional distress. Students and key informants gave valuable information.

4.4.1 Disruption of Academic Goals

It came out of the study that unintended pregnancies cause disruption of academic goals of students. Unintended pregnancies in university students can greatly hinder their academic aspirations, resulting in numerous difficulties that impact their educational paths. This can be illustrated by the statement below from one respondent;

"I missed so many classes because of my pregnancy complications. It made keeping up with my studies really difficult" (Second Year Student)

"Trying to support my partner while keeping up with my own classes has really heightened my anxiety. It feels like too much to handle. "(Final year student)

"Unintended pregnancies can derail students' academic progress, making it difficult for them to stay focused." (Nurse)

The above statements are supported by Msuya et al., (2020) who said that pregnant students often face health problems which may result in higher rates of absenteeism from class. Their absence may prevent them from keeping up with assignments and engage in important educational

activities which affect their grades and overall learning achievements. Several students who faced unplanned pregnancies may take a break from their education or take an easier course load to take care of their child which may delay their graduation and limit their future earning possibilities. This reduction in learning outcomes can have long-term financial impacts as higher education is often associated with higher earning potential. To cope with the financial challenges of an unplanned pregnancy, many students may work more hours or get extra jobs. Working and studying can cause increased stress which may affect their learning negatively and may result in a cycle of financial and learning difficulties. Psychological factors can also affect academic achievement, as a student may have difficulties in concentrating on studies or even participating fully in the classroom (Mekonnen et al, (2018). Students experiencing unintended pregnancies can experience stigma and social isolation from their peers, thus lacking the support they require. This isolation drain their motivation and engagement with assignments, affecting their educational goals. The obligations of parenthood distract students from their academic and career ambition.

4.4.2 Financial Strain

The study also outlined that unexpected pregnancies can create considerable financial pressure on university students, hindering their capacity to handle tuition fees and everyday living expenses. The expenses related to parenting such as diapers, clothes, meals and medical care can be daunting for students who frequently possess restricted financial means. Medical costs for prenatal care, childbirth and postnatal care can be significant. This can be illustrated by the statements below;

"Numerous students might lack sufficient health insurance coverage, resulting in out-ofpocket expenses that can further burden their finances." (**Dean**)

"Having a baby means extra expenses that I never planned for, it's hard to afford school and a child." (Second year student)

"The financial burden of unplanned pregnancy can severely impact students finances leading to debt, obstacles in saving for upcoming expenditures and hurdles in realizing financial autonomy." (SayWhat representative)

Students opting to continue their pregnancies encounter immediate financial challenges associated with childcare (Mekonnen et al., 2018). The study findings illustrated that students might have to

lessen their course loads or pause their education to look after their child which can postpone graduation and restrict their future income possibilities. This decrease in educational achievement can have lasting financial effects since advanced education is frequently associated with improved job prospects and increased income. To manage the financial pressures of an unexpected pregnancy, numerous students might increase their work hours or find extra jobs. Juggling work and study can result in heightened stress and might adversely affect academic performance, resulting in a cycle of financial and educational difficulties. Although these resources may provide temporary relief, they may not completely cover the costs of child rearing which results in long term financial insecurity (Msuya et al., 2020). Financial stress resulting from unplanned pregnancies can significantly affect university students which affect their learning success and future financial stability. Handling these challenges with proper support services and resources can help students manage the challenges of unintended pregnancies while achieving their education and financial goals.

4.4.3 Emotional and mental effects

Findings reveal that the effects of unplanned pregnancies on university students have adverse emotional and mental effects. Students have reported increased stress and anxiety levels after getting pregnant, as they grapple with the overwhelming responsibilities that come with this life-changing event. This can be illustrated by the statements below from participants;

"I felt overwhelmed and anxious after finding out l was pregnant, it was hard to cope with everything." (Final Year Student)

"I never expected to feel alone, the pressure and fear about the future made my mental health to decline rapidly." (First year student)

"Emotional and mental health challenges are often overlooked but they are significant consequences of unintended pregnancies." (Nurse)

Many students reported that they experienced depression after becoming pregnant. The combination of school demands, financial strain and the emotional trauma of an unplanned pregnancy can lead to feelings of hopelessness and despair. Participants reported that unplanned pregnancies can lead to social exclusion as students may become socially withdrawn from friends

due to stigma or shame. Social exclusion can reduce their support systems, making it harder to deal with the emotional and psychological burden of pregnancy and motherhood. Becoming a parent can lead to an identity crisis for numerous students. Students feel torn between their student and parent identities, leading to a feeling of detachment from their former life and goals (Mbandlwa 2020). Students use different coping strategies to manage the emotional and mental effects of unplanned pregnancies. The coping strategies may include positive behaviours such as seeking help from counseling services and harmful behaviours such as substance abuse which may worsen their mental health status. The emotional and psychological effects of unplanned pregnancies in university students are multi-dimensional and create notable challenges in both the academic and personal spheres.

4.4.4 Stigma and exclusion

The study revealed that unplanned pregnancies in university students often lead to considerable stigmatization and social exclusion. These effects have adverse effects on students' mental health, academic performance and general well-being (Robinson, 2022).

"Some of my friends distanced themselves when they found out about the pregnancy, it's so isolating and painful."(Second year student)

"I felt judged by my peers after my pregnancy, it's like people see me differently now and I don't fit in anymore." (Final year student)

"The stigma surrounding unintended can lead to social exclusion, making it harder for students to seek support." (Lecturer)

As a result, students experience shame or embarrassment, causing them to hide their situations from friends and relatives. Anxiety about being judged by peers, teachers and relatives makes students avoid social situations. Avoiding social situations can intensify feelings of loneliness and social isolation, making it difficult to reach out for help from their social support systems. Stigmatization can be stressful to current friendships and peer networks. Friends may react with unease or withdrawal, leading to breakdown in social support systems. This social isolation can make students' situations worse, making it difficult to deal with the emotional and practical challenges of unplanned pregnancy (Robinson, 2022). Stigmatization can also prevent students

from accessing important support services such as counseling or health care. The fear of being judged may prevent them from utilizing support resources that could help them manage their situations successfully. Stigmatization may also result in long-term effects on students' self-worth and self-image. They may internalize negative societal attitudes which can affect their future relationships and personal growth.

4.5 Coping mechanisms for unintended pregnancies employed by male and female students at Bindura University of Science Education

The study findings outlined various methods used by students in copying up with unintended pregnancies, highlighting a range of strategies that reflect their diverse experiences and circumstances. Several themes emerged from the study including substance abuse, escape avoidance, engaging in open communication and self-isolation.

4.5.1 Substance abuse

One of the coping mechanisms that emerged from the study was through substance abuse. The participants stated that students in higher education turn to substance abuse as a means to cope with unintended pregnancies, illustrating the complexity of stressors related to academic demands and the challenges of unintended pregnancy. This can be illustrated by the statements below from participants:

"I started drinking more after I found out I was pregnant, it was my way of escaping the overwhelming feelings I had." (Second Year Student)

"Many students turn to substance abuse as a way to cope but this often complicates their situation even further." (Lecturer)

"Substance abuse is a common reaction among students facing unintended pregnancies, it serves a temporary escape from their problems." (Nurse)

Matsai & Raniga (2019) reveals that many students employ substance use to manage overwhelming stress of academic responsibilities combined with financial constraints and the stigma faced by students. For example, research performed with student nurses in South Africa discovered that adapting to college life, marked by unfamiliar social settings and academic

pressures, leads to heightened stress levels, causing some students to resort to substance use as an unhealthy coping mechanism (Mathe, Downing and Kearns, 2021). The findings indicate that the availability of substances such alcohol and cannabis at university campuses influence the high rates of substance abuse in this group.

4.5.2 Escape avoidance

Another copying mechanism that emerged from the study was escape avoidance. Escape avoidance is a coping mechanism that some students employ when dealing with stress and challenges related to unintended pregnancy. Escape avoidance is a coping mechanism that involves avoiding stressful situations or emotions by distracting oneself or avoiding the issue. The participants revealed that students will just avoid people. This can be illustrated by the statement below from one participant;

"I started skipping classes and avoiding friends. I didn't want to deal with the questions about my situation. "(Final year student)

For many students this may results in distancing themselves from friends and family, skipping classes and participating in activities that allow them to escape their concerns (Thabethe, 2017). Employing avoidance strategy can increase feelings of anxiety and depression which can affect a student from managing academic work with pregnancy and this can affect the welfare of the unborn child. Therefore, escape avoidance provides immediate relief for pregnant students by avoiding stressful situations. This can be illustrated by the statement below from one respondent;

"Although escape avoidance helps students to escape stress temporarily, it can create some problems over time." (Dean)

4.5.3 Engaging in open communication

Engaging in open communication is another coping strategy that emerged from the study. Open communication plays a vital role in helping students to navigate the challenges related to unintended pregnancies. This can be illustrated by a statements below;

"I found that sharing my worries with friends made a huge difference, it felt good to be heard and supported." (First year student)

"I joined a support group where we talked about our experiences, it was refreshing to share openly with fear of being judged." (Final year student)

"Encouraging open communication can alleviate some of the stress, students need to feel safe discussing their fears and concern," (Lecturer)

Findings regarding open communication reveal its vital role in promoting resilience among students dealing with unintended pregnancies. This statements are supported by Robinson (2022) who argued that open communication enables students to share their emotions, ask for guidance and receive assistance from their social circles, which can greatly reduce the emotional weight tied to their circumstances (Robinson, 2022). Students who engaged open communication felt less isolated and empowered, allowing them to confront their situations successfully. Dada (2017) stated that open dialogue allows students to face their fears, share experiences and offer mutual support which is essential during such a transformative and stressful time

4.5.3 Self-isolation

Self-isolation is another copying mechanism which emerged from the study. Alpert (2017) defines self-isolation as the act of separating oneself from others. Self-isolation is a strategy often utilized by pregnant students in higher education to deal with the complex difficulties linked to their situation. This can be illustrated by the statement below from one respondent;

"Students in high institutions who choose self-isolation often aim to avoid peers' scrutiny and social stigma that arise from societal norms about pregnancy and academic life." (Lecturer)

Many students who experience unintended pregnancies feel shame and fear about their circumstances, causing them to disengage from social engagement and support systems (Robinson and Ward, 2014). Expectant students withdraw from social interactions to manage the emotional distress caused by academic stress, financial difficulties and relationship problems which can increase feelings of loneliness and depression. Moreover, self-isolation offers only temporary relief from the difficulties of pregnancy and academic life but results in detrimental effects on mental health and educational performance. This can be illustrated by the statement below from one respondent;

"Students think that avoiding their issues will help, but it usually leads to more anxiety and feelings of guilty and educational disruptions." (Lecturer)

4.6 Chapter Summary

The chapter has presented the data obtained about unintended pregnancies among university students in Zimbabwe. In an effort to understand this phenomenon, the researcher used in-depth interviews and key informant interviews. The study used a qualitative research approach a sample size of 15 participants, comprising with 9 students and 6 key informants including dean of the faculty, two lecturers, two nurses and a representative for SAYWHAT. The researcher also embraces thematic data analysis technique to interpret and assign meaning to the study findings. Themes and subthemes have also been analyzed in detail to assign meanings in the chapter.

CHAPTER FIVE

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

5.1 Introduction

This chapter provides a summary of the findings, the conclusions and implications of the research findings based on the analysis of the information obtained. The chapter also give recommendations for stakeholders that may address the research issue of unintended pregnancies among university students in Zimbabwe focusing on male and female students at Bindura University of Science Education.

5.2 Summary

The study was on the experiences of unintended pregnancies among university students in Zimbabwe focusing on insights from male and female students from Bindura University of Science Education. The study revealed that peer pressure contributed to unintended pregnancies among university students. Most of the participants felt pressure to participate in sexual activities to be accepted by their friends. Peer pressure forced students to take quick decisions without first thinking about the repercussions. The study highlighted that peer pressure can make an individual to feel that they need to participate in sexual activities when in fact they may not want to. It came out of the study that substance abuse contributed to unintended pregnancies among university students. The culture of drinking alcohol and taking drugs in university campuses makes poor judgments and therefore engage in risky sexual activities. Participants indicated that most social functions that they attend usually have a lot of alcohol which may result in people making bad judgment about contraceptives and leading to unintended. Lack of comprehensive sexual education also came out as one of the contributing factors to unintended pregnancies among university students. Most of the students indicated that they were given very little information about sexual health, contraception and safe sex. This could mean that they did not understand how to use birth control or they were not knowledgeable about the available resources and lack of comprehensive sexual education hinder the student's ability to make informed decisions about their sexual health.

Adding from the above, the study established that the disruption of goals and objectives is a consequence of unintended pregnancy among university students. Most of the participants indicated that it was difficult to pursue their education due to their health condition related to unintended pregnancy. This made them more absent from classes which made it difficult to catch up with classes and assignments. The study established that the other consequence of unintended pregnancy is financial pressure. Most of the respondents indicated that they spent a lot of money on antenatal care, delivery and raising children which became difficult to sustain in terms of money. The study revealed that unintended pregnancies lead to emotional and psychological consequences. Most of the participants indicated that they were depressed, anxious and overly stressed due to the combined effect of academic pressure, financial problems and parenting which has resulted in them withdrawing from friends and activities. The emotional consequences of unintended pregnancies also caused social isolation where some students indicated that they pulled back from friends and other social activities due to stigma and shame. It was established that students who experience unintended pregnancies are subjected to social stigma that makes them feel like they are isolated from their friends. This makes them feel shame and humiliation that they hide their situations and avoid social activities.

It came out of the study that students with unintended pregnancies used various coping strategies and the coping mechanisms were both positive and negative. Most of the students resorted to substance abuse where they use alcohol and drugs as a way to run away from stress and peer pressure. The study established that escaping avoidance is a kind of denial of reality where they end up avoiding class and also pulling back from friends. It was established that open communication as a coping mechanism proved to be a positive way of coping where the students who discussed their experience with their friends or other support groups indicated that they did not feel lonely and they felt supported. The study established that some of the students used to withdraw from their friends as a coping mechanism to avoid criticism and being stigmatized that increased the feeling of loneliness and worsened the mental health of the participants. Understanding coping mechanisms are critical for planning of support programs in educational institutions to know what supports are necessary and discourage unhealthy coping mechanisms.

5.3 Conclusion

The study established that unintended pregnancies among university students is a complex issue influenced by social pressure, inadequate education and lack of support networks. The results indicate that there is a critical need for proper sexual education, mental health resources and ways of communication to assist the students in handling these issues. The impact extends beyond short term challenges and has the impact of interfering with goals and objectives, financial stress and emotional stress which was worsened by social stigma and isolation. Some students choose to use unhealthy coping mechanisms while others benefitted from open communication and support systems which is why there is a need for support systems that create an environment that nurtures the students. The results of the study show the need for open lines of communication, peer support networks and accessible health care to help the students deal with the issues related to unintended pregnancies. The study identified various coping mechanisms used by the students. While some students used unhealthy coping mechanisms like substance abuse and self-isolation others benefitted from open communication and support networks. The disparity shows that there is a need to cultivate an environment that promotes communication and provides support systems. Dealing with unintended pregnancies is not an individual issue but a community issue which needs the participation of educational institutions, health care providers, and community organizations.

5.4 Implications for Social Work

The results of this study on the experiences of unintended pregnancies among university students in Zimbabwe focusing on insights from male and female students from Bindura University of Science Education has significant implications for social work practice especially in youth support, education and community support. The first implication for social work is to advocate for comprehensive sexual education in the university institutions. Sexual education should not just focus on teaching students about contraception and sexual health but also on emotional and psychological health in sexual relationships. Social workers can assist students by equipping them with knowledge and skills that can reduce the number of unintended pregnancies and empower students to make better decisions. Second implication for social work is the need for social workers to provide mental health support for students that get unintended pregnancies. Social workers should be trained on trauma informed care and speciality training that focuses on the needs of these

students. Creating safe places for open communication can help the students who are feeling lonely and ashamed. By creating open dialogue the students will not feel isolated and can feel safe to seek assistance. Third implication for social work is that social workers should engage with the institution of higher learning to plan for peer support programs. The initiatives would promote open communication between students to share experiences and coping strategies. Peer led support networks can assist in improving the emotional strength of the students and make them feel part of the community. In summary, the implications for social work practice indicates that there is need for holistic approach that provides a mix of education, mental health support and community support that can be effective in dealing with unintended pregnancies among university students.

5.5 Recommendations

5.5.1 Policy/Programmatic Recommendations

Universities should develop and implement comprehensive sexual education programs that focus on contraception, safe relationships and the effects of peer pressure. These programs should be included in the university curriculum by the next academic year and the programs should be interactive and in local language that appeals to students to make them want to be part of the programs.

5.5.2 Stakeholders/Partners Based Recommendations

University administration should engage local health facilities to provide accessible reproductive health resources and counseling services in the university. This initiative should be in place in six months' time to allow the students access to services that can help them in terms of counseling and workshops on reproductive health.

5.5.3 Community/Research Participants Based Recommendations

Peer support groups should be created for students that get unintended pregnancies to enable them communicate and share experiences. These groups should be established in the next academic semester and it should be done with trained facilitators who can facilitate the group discussions and provide necessary resources that can help them overcome the challenges that they are facing.

5.5.4 Social Work-Based Recommendations

Social workers should be trained on how to deal with unique needs of students that get unintended pregnancies including trauma informed care and empathy based communication. The training should be done in the next year with a variety of practical cases and role playing to prepare social workers to deal with the challenges that they are likely to encounter in real life.

These recommendations can help the stakeholders to create a supporting environment that will assist students dealing with unintended pregnancies to overcome their challenges and lead a good life.

5.6 Areas for future study

Future studies should focus on long term effect of unintended pregnancies on student's academic performance and careers.

5.7 Chapter Summary

This chapter provided a summary of the findings, the findings were organized according to the research objective. The chapter provided conclusions based on the analysis and it also included the implications for social work practice. It also provided recommendations for various stakeholders and areas for future study was included to address areas that have not been fully understood regarding unintended pregnancies among university students.

References

- Adegoke, A.A. and Ayoade, C.A., (2017). Relationships among leisure, social self-Image, peer pressure and at-risk behaviours of adolescents in Nigeria. *Journal of Psychology in Africa*, 17(1-2), 73-77.
- Adeniyi, M.A. and Kolawole, V.A., (2015). The influence of peer pressure on Adolescents' social behaviour. *University of Mauritius Research Journal*, 21.
- Adler, R. H. (2022). Trustworthiness in qualitative research. Journal of Human Lactation, 38(4), 598-602.
- Adepoju, A., Ojo, S., & Alabi, T. (2022). Access to contraception among female university students in Nigeria: Barriers and facilitators. *African Journal of Reproductive Health*, 26(2), 56-72.
- Alpert, P. T. (2017). Self- perception of social isolation and loneliness in older adults. *Home Health Care Management & Practice*, 29(4), 249-252.
- Braun, V., & Clarke, V. (2012). Thematic analysis. American Psychological Association.
- Besarmin, M. M. (2020). Young adults and casual sex: The relevance of casual drinking settings. *Journal of sex research*, 49(2-3), 274-281
- Chiparausha, B., & Chigwada, J. (2016). Contributing to the open access movement through an institutional repository: experiences at Bindura University of Science Education.
- Chigona, A., & Chetty, R. (2021). Societal pressures and unintended pregnancies among South
- Coetzee, M.H. and Ngunyulu, R.N., (2015). Assessing the use of contraceptives by Female undergraduate students in a selected higher educational institution in Gauteng. Curationis, 38(2), 1-7.
- Creswell, J. (2014). *Research Designs: Qualitative, Quantitative and Mixed Methods.* 4th edition. Sage Publications, United Kingdom.

- Cruz, E., Cozman, F. G., Souza, W., & Takiuti, A. (2021). The impact of teenage pregnancy on school dropout in Brazil: a Bayesian network approach. BMC Public Health, 21, 1-8.
- Dada, S., Burnhams, N.H., Erasmus, J., Parry, C., Bhana, A. and Timol, F., (2017). South African community epidemiology network on drug use (SACENDU). Monitoring alcohol, tobacco and other drug abuse treatment admissions in South Africa. Human Sciences Research Council.
- David, K. (2018). Peer Influence and Illicit Drug Use among Adolescents in Secondary School of Makindye Division Kampala, Uganda (Doctoral dissertation, Kampala international University college of humanities and social sciences).
- Davies, S. J., Lum, J. A., Skouteris, H., Byrne, L. K., & Hayden, M. J. (2018). Cognitive impairment during pregnancy: a meta analysis. *Medical Journal of Australia*, 208(8), 35-40.
- Deeg, R. and Jackson, G. (2017). The State of the Art: Towards a more dynamic theory
- Deterding, N. M., and Waters, M. C. (2021). Flexible coding of in-depth interviews: A twenty-first-century approach. Sociological methods & research, 50(2), 708-739.
- Demissie, T. W., Nigatu, A.M & Beyene, G.M. (2020). Assessment of emergency contraceptives utilization and associated factors among female college students at Debre Tabor town. Gupta, S. (2017). Ethical issues in designing internet-based research: recommendations for good practice. Journal of Research Practice, 13(2).
- Fekede, B. (2022). Assessing Student Awareness towards the Effects of Unintended Pregnancy: The case of Female students at Mettu College of Teachers Education. *Reproduction*, *5*(1)
- Gupta, S. (2017). Ethical issues in designing internet-based research: recommendations for good practice. Journal of Research Practice, 13(2).

- Gama, N.N. (2008). The effects of unplanned pregnancy on female students of the University of Zululand (Doctoral dissertation).
- Guo, C., Pang, L., Ding, R., Song, X., Chen, G., & Zheng, X. (2019). Unmarried youth pregnancy, outcomes and social factors in China: Findings from a Nationwide population-based survey. *Sexual Medicine*, 7(4),396-402.
- Haeger, K.O., Lamme, J. and Cleland, K., (2018). State of emergency contraception in The US, (2018. Contraception and reproductive medicine, 3(1), 1-12.
- Haven, T & Van Grootel, D.L. (2019). Preregistering qualitative research. *Accountability in research*, 26(3). 229-244.
- Hilton, B.T., Betancourt, H., Morrell, H.E., Lee, H. and Doegey, J.A., (2018). Substance Abuse among American Indians and Alaska Natives: An integrative cultural framework for advancing research. International Journal of Mental Health and Addiction, 16(2), 507-523.
- Homco, J.B., Peipert, J.F., Secura, G.M., Lewis, V.A. and Allsworth, J.E., (2019). Reasons for ineffective pre-pregnancy contraception use in patients seeking abortion services.Contraception, 80(6), 569-574. Journal of African Gender Studies, 35(1), 56-79.
- Howlett, M. (2022). Looking at the 'field'through a Zoom lens: Methodological reflections on conducting online research during a global pandemic. *Qualitative research*, 22(3), 387-402.
- Isayemi, A., Zhao, Q., McNicholas, C., & Peipert, J. F. (2017). Socioeconomic status as a risk factor for unintended pregnancy in the contraceptive CHOICE project. *Obstetrics & Gynecology*, 130(3), 609-615
- Jimu, C., Kanyemba, R., Tarisayi, K. S., Shumba, K., & Govender, K. (2023). An exploration of female healthcare workers experience during the COVID-19 pandemic in Bindura, Zimbabwe. *Cogent Social Sciences*, 9(1), 2218725.

- Kadir, H., (2018). The influence of peer groups on students' anxiety in EFL Learning (Doctoral dissertation, FSD).
- Kavishe, A. M. (2025). Unintended Pregnancy among Unmarried Female Students at the University of Dar es Salaam. *Eastern African Journal of Humanities and Social Sciences*, 4(1), 151-160.
- Khan, M.A., Trottier, D.A. and Islam, M.A., (2020). Inconsistent use of oral contraceptives in rural Bangladesh. Contraception, 65(6), 429-433.
- Krueger, R. A., and Casey, M. A. (2015). Focus group interviewing. Handbook of practical program evaluation, 506-534.
- Kilonzo, N., Okal, J., & Otieno, P. (2023). Economic hardships and sexual behaviours among female.
- Lakens, D. (2022). Sample size justification. Collabra: psychology, 8(1), 33267.
- Larose, D. T., and Larose, C. D. (2014). Discovering knowledge in data. (Vol. 4). John Wiley & Sons.
- Lerner, R.M., (2018). Concepts and theories of human development. Routledge. MacPhail, C., Pettifor, A.E., Pascoe, S. and Rees, H.V., (2007). Contraception use and Pregnancy among 15–24 year old South African women: a nationally representative cross-sectional survey. BMC medicine, 5(1), 1-8.
- Lesthaeghe, R.J. (Ed.). (2023). Reproduction and social organization in sub-Saharan Africa. Univ of California Press.
- Maphie, T. (2023). Psychosocial experiences of female students after unintended pregnancy at the University of Dar es Salaam. Tanzania Journal of Education and Social Sciences, 15(1), 89-104.

- Marimirofa, M., Murwira, M., Machinga, F., Zvoushe. A., & Gamba, L. S. (2022). Knowledge, attitudes and practices on contraceptive use among young people in selected universities in Zimbabwe. *African Journal of Reproductive Health*, 26(10), 55-62.
- Margherio, C., (2019). Centering female agency while investigating contraceptive use: A case study in Agincourt, South Africa. International journal for equity in health, 18(1), 1-11.
- Masinga, B. (2021). Female students concern about and management of their sexual and reproductive health at the University of KwaZulu-Natal, Pietermaritzburg.
- Mathe, T. L., Downing, C., Kearns, I. (2021). Reproductive Health and Family Planning Services in Africa. *In Family planning and reproductive health*, *5*(3) 50-67.
- Matsai, V., & Raniga, T. (2021). Economic stressors and coping of single mothers living in poverty in Zimbabwe. *Social Work*, *57*(2), 182-192.
- Mekonnen et al. (2018). Unintended Pregnancy and Its Determinants among University Students in Ethiopia. Journal of Heliyon. 6 (6): e04309.
- Moyo et al. (2021). Prevalence and factors associated with unintended pregnancy among female students at selected universities in Zimbabwe. BMC Women's Health, 22: 464 (2021)
- Maxwell, J. A. (2021). Why qualitative methods are necessary for generalization. Qualitative Psychology, 8(1), 111.
- Mbandlwa, Z., (2020). Analysis of a one-sided narrative of Gender-Based violence in South Africa. Solid State Technology, 63(6), 13227-13240.
- Millum, J., and Bromwich, D. (2021). Informed consent: What must be disclosed and what must be understood? The American Journal of Bioethics, 21(5), 46-58.

- Moran, L., Capper, T., Gupta, M., Meedya, S., & Mendez, S. (2024). Financial hardship and Australian midwifery students: A scoping review and thematic analysis. *Women and* Pandey, P., and Pandey, M. M. (2021). *Research methodology tools and techniques*. Bridge Center.
- Mollborn, S. (2017). *Mixed messages: Norms and social control around teen sex and pregnancy.*Oxford University Press.
- Msuya, S., Akhter, H., & Said, M. (2020). Economic hardships and transactional relationships Mutsvairo, B., & Chari, T. (2022). The phenomenon of transactional sex in African universities. of capitalist variety. Socio-Economic Review" 5(1): 149–179.
- Opie, C. (2019). Research procedures. Getting Started in Your Educational Research: Design, Data Production and Analysis, 159, p176.
- Pandey, P., and Pandey, M. M. (2021). Research methodology tools and techniques. Bridge Center.
- Phiri, T. M., Nyamaruze, P., & Akintola, O, (2021). Stress and coping among unmarried pregnant university students in South Africa. *BMC Pregnancy and Childbirth*, 21(1), 817.
- Renn, K.A. (2020). The influence of peer culture on identity development in college students. *Journal of College and Character*, 21(4), 237-243
- Ridder, H.G. (2017). The theory contribution of case study research designs. *Business research*, 10, 281-305.
- Robinson, R.S. (2022). Linkages Between Family Planning and HIV/AIDS Programs. *In International Handbook of Population Policies*. Springer International Publishing.

- Robinson, T., & Ward, J. V (2014). "A belief in self far greater than anyones disbelief". Cultivating resistance among African American female adolescents. *In Women, girls & psychotherapy*. Routledge.
- Rosenthal, M. (2016). Qualitative research methods: Why, when, and how to conduct interviews and focus groups in pharmacy research. Currents in pharmacy teaching and learning, 8(4),
- Ruswa, A.S., & Gore, O. T. (2020). Rethinking student poverty: Perspectives from higher education institution in South Africa. *Higher Education Research & Development*, 41(7) 2352-2366.
- Sarder, A., Islam, S. M. M., Maniruzzaman, Talukder, A., & Ahammed, B. (2021). Prevalence of unintended pregnancy and its associated factors: evidence from six South Asian countries. PLoS One 16(2), e0245923.509-516.
- Solem, R. C. (2015). Limitation of a cross sectional study. *American Journal of Orthodontics and Dentofacial Orthopedics*, 148(2), 205.
- Stewart, D. W., and Shamdasani, P. N. (2014). Focus groups: Theory and practice. (Vol. 20). Sage publications.
- Stone, R. (2015). Pregnant women and substance use: fear, stigma, and barriers to care. *Health & justice*, 3, 1-15.
- Sharma, G. (2017). Pros and cons of different sampling techniques. International journal of applied research, 3(7), 749-752.
- Taherdoost, H. (2021). Data collection methods and tools for research; a step-by-step guide to choose data collection technique for academic and business research projects. *International Journal of Academic Research in Management (IJARM)*, 10(1), 10-38.

- Thomas, F. B. (2022). The role of purposive sampling technique as a tool for informal choices in a social Sciences in research methods. Just Agriculture, 2(5), 1-8.
- Tracy, S. J. (2024). Qualitative research methods: Collecting evidence, crafting analysis, communicating impact. John Wiley & Sons.
- Udo, M.K., Ramsey, G.P. and Mallow, J.V., (2018). Science anxiety and gender in Students taking general education science courses. Journal of Science Education and Technology, 13(4), 435-446.
- Walker, M., Mclean, M., & Mukwambo, P. (2022). Low-income students, human development and higher education in South Africa: *Opportunities and obstacles*. *12*(4), 67-78.
- Wanjiku, M. and Wanjira, M., (2018). The road to empowerment. Nairobi, FEMNET. Yarborough, C. A conceptual paper on factors that affect public perceptions of Welfare.
- Yazdkhasti, M., Pourreza, A., Pirak, A., & Abdi, F. (2015). Unintended pregnancy and its adverse social and economic consequences on health system: a narrative review. *Iranian journal of public health*, 44(1), 12.
- UNESCO. (2022). Sexual health education programs in higher learning institutions: A global review. UNESCO. https://www.unesco.org
- UNFPA Tanzania. (2022). Unintended pregnancies among university students in Tanzania: Challenges
- UNFPA. (2020). Reproductive health and rights for young people: Progress and challenges. United Nations Population Fund. university students in Kenya. Journal of Reproductive Health, 19(2), 112-128.
- World Health Organization. (2022). Global trends in unintended pregnancy and reproductive health access. WHO. https://www.who.int

APPENDIX 1: LETTER FROM BINDURA UNIVERISTY OF SCIENCE EDUCATION

FACULTY OF SOCIAL SCIENCES & HUMANITIES DEPARTMENT OF SOCIAL WORK

P. Bag 1020 BINDURA, Zimbabwe

Tel: 263 - 71 - 7531-6, 7621-4

Fax: 263 - 71 - 7534



BINDURA UNIVERSITY OF SCIENCE EDUCATION

Date: 17 FEBRUARY 2025

TO WHOM IT MAY CONCERN

RE: REQUEST TO UNDERTAKE RESEARCH PROJECT IN YOUR ORGANISATION

This serves to introduce the bearer:......who is a BSc SOCIAL WORK student at Bindura University of Science Education and is carrying out a research project in your area/institution.

May you please assist the student to access data relevant to the study, and where possible, conduct interviews as part of a data collection process.

Yours faithfully

MS E.E. CHIGONDO CHAIRPERSON BINDURA UNIVERSITY OF SCIENCE EDUCATION SOCIAL WORK CHARPERSON

17 FEB
1-6-JAN 2025

FACULTY OF SCIENCE EDUCATION PRIVATE ENG 1024, INVANIA, ZHARASHE

APPENDIX 2: APPROVAL FORM

I certify that I supervised **Tatenda G Kahari** (**B210125B**) in carrying out this research titled **Experiences of unintended pregnancies among university students in Zimbabwe focusing on insights from male and female students from Bindura University of Science Education in partial fulfilment of the requirements of the Bachelor of Science, Honours Degree in Social Work and recommend that it proceeds for examination.**

Donwo

Date: 16 JUNE 2025

Supervisor

Name: **L. Shoniwa** Signature:

68

APPENDIX 3: LETTER FOR PERMISSSION FROM ORGANIZATION



BINDURA UNIVERSITY OF SCIENCE EDUCATION

P. Bag 1020 Bindura, Zimbabwe

Tel: +263 712 842 711 +263 772 419 285 +263 712 733 438 Tel: (066) 210 6039 E-mail: deputyreg.hr@buse.ac.zw

HUMAN RESOURCES

20 May 2025

Mr. Tatenda Gilvesi Kahari House Number 598 Shingirai Chipadze BINDURA

Dear Mr. Kahari

RE: APPLICATION FOR PERMISSION TO CARRY OUT RESEARCH AT THE BINDURA UNIVERSITY OF SCIENCE EDUCATION: MR. TATENDA GILVESI KAHARI

The above subject refers.

Bindura University of Science Education has granted you the permission to undertake research on the topic "The experiences of unintended pregnancies among University Students, specifically focusing on insights from males and females students" under the following conditions:-

- That you should treat all information strictly with utmost confidentiality and purely for Academic purposes only.
- That in carrying out this research you shall not disturb the business of the University.
- c) That the permission can be withdrawn at any time by the Registrar or by any higher officer.
- That you should avail to the Bindura University of Science education a copy of your research findings.

I wish you success in your research work and in your studies. If you have any concerns or require additional information please feel free to contact the Registrar.

Yours Faithfully

Mr. J. Makunde REGISTRAR

BUSE@25: Celebrating Growth, Partnerships, Academic and Innovation Excellence

APPENDIX 4: INFORMED CONSENT FORM

My name is Tatenda Gilvesi Kahari a Social Work student at Bindura University of Science Education. I am undertaking a research titled "EXPERIENCES OF UNINTENDED PREGNANCIES AMONG UNIVERSITY STUDENTS IN ZIMBABWE: INSIGHTS FROM MALE AND FEMALE STUDENTS FROM BINDURA UNIVERSITY OF SCIENCE EDUCATION". The study aim to explore the experiences of unintended pregnancies among university students in Zimbabwe focusing on insights from male and female students from Bindura University of Science Education. Participants may benefit from the study in several ways, gaining deeper understanding into issues surrounding unintended pregnancies, access to support services at the university and helping to inform policies and programs aimed at reducing unintended pregnancies, some participants may experience emotional discomfort because discussing sensitive issues such as personal experiences may evoke feelings of distress. Please note that your identity remains anonymous and all your responses will be confidential. Your participation will be greatly appreciated.

For any questions or concerns regarding the study, participants can contact.

Tatenda Gilvesi Kahari

Email: <u>kaharitatenda2@gmail.com</u>

Phone: +263 772 662 998

Informed consent statement

I		consent to par	rticipate in th	e research entitle	d, "EXPERIEN	CES
OF	UNINTENDED	PREGNANCIES	AMONG	UNIVERSITY	STUDENTS	IN
ZIM	BABWE: INSIGH	ITS FROM MALE	AND FEMA	LE STUDENTS	S FROM BIND	URA
UNI	VERSITY OF SCI	ENCE EDUCATIO	N". The rese	archer has explair	ned to me the reso	earch
purp	ose, I give consent	voluntarily. I underst	and that my	right to withdraw	from participation	ng oi
refus	ing to participate	will be respected a	nd that my	responses and i	dentity will be	kep
confi	dential.					

Participants signature	Date	///
Researcher's signature	Date	/

APPENDIX 4: INTERVIEW GUIDE FOR MALE AND FEMALE UNIVERSITY STUDENTS

Thank you for agreeing to take part in this interview. I am Tatenda Gilvesi Kahari and I am studying Social Work at Bindura University of Science Education. I am conducting interviews on the experiences of unintended pregnancies among female and male students in Zimbabwe: Key insights from male and female students at Bindura University of Science Education.

Place of interview						
Date of	interview					
Section	A: Demographic information					
1.	Age					
2.	Level of study					
3.	Academic year					
4.	Course/ program					

Section B: Causes of unintended pregnancies

- 1. Can you share your personal experiences with unintended pregnancy?
- 2. What factors do you believe contributed to this situation?
- 3. How would you describe your knowledge about contraceptive methods before the pregnancy?
- 4. Were there any gaps in sexual education provided at the university?
- 5. How do peer relationships or social circles influence sexual behaviour among students.

Section C: Consequences of unintended pregnancies

- 1. How did the unintended pregnancy affect your academic performance and goals?
- 2. Did you consider dropping out of university due to pregnancy?
- 3. Can you describe any emotional or psychological challenges you faced as a result of unintended pregnancy?
- 4. How did these experiences affect your relationships with friends and family?
- 5. What financial burdens did you encounter as a result of the pregnancy?

6. How did you manage these financial challenges?

Section D: Coping mechanisms

- 1. Have you ever utilised any of the following coping strategies to address the difficulties you faced: If you have other coping strategies, please mention them.
- 2. How effective are these coping strategies in helping students cope?
- 3. What personal strength or community resources have been helpful in coping?

APPENDIX 5: INTERVIEW GUIDE FOR KEY INFORMANTS

Thank you for agreeing to take part in this interview. I am Tatenda Gilvesi Kahari and I am studying Social Work at Bindura University of Science Education. I am conducting interviews on the experiences of unintended pregnancies among female and male students in Zimbabwe: Key insights from male and female students at Bindura University of Science Education.

Place of interview					
Da	Date of interview				
Section A: Demographic information					
1.	Age				
2.	Gender				
3.	Educational background				
4.	Professional Role				
5.	Years of experience				
Section B: Causes of unintended pregnancies					
1.	How do you define unintended pregnancies in the context of university students?				
2.	What are the primary factors that contribute to unintended pregnancies among students?				
3.	How do you think knowledge about contraceptive methods play a role in these issues?				

Section C: Consequences of unintended pregnancies

4. Are there any gaps in sexual education provided at the university?

1. How do unintended pregnancies affect university students' academic performance and goals?

5. How do peer relationships or social circles influence sexual behaviour among students.

2. Do university students consider dropping out of university due to pregnancy?

- 3. What emotional or psychological challenges do students face when dealing with unintended pregnancies?
- 4. How do these experiences affect university students relationships with friends and family?
- 5. What financial burdens do university students encounter as a result of the pregnancy?
- 6. How do university students manage these financial challenges?

Section D: Coping mechanisms

- 1. From your observations, what coping strategies do students employ when faced with unintended pregnancies?
- 2. How effective are these coping strategies in helping students cope?
- 3. What personal strength or community resources have been helpful in coping among university students?

APPENDIX 6: FOCUS GROUP DISCUSSION GUIDE

Thank you for agreeing to take part in this discussion. I am Tatenda Gilvesi Kahari and I am studying Social Work at Bindura University of Science Education. I am conducting a focus group discussion on the experiences of unintended pregnancies among female and male students at Bindura University

Please remember that there are no right or wrong answers to the questions in this guide. If you have any questions or need clarification feel free to ask. All information shared during the interview will be kept confidential and your name will not be revealed. The data collected will be solely for academic purposes. Participation is voluntary and you can choose not to answer any questions that make you uncomfortable. You also have the right to withdraw from the interview at any time.

Section A: Demographic information

1.	Age
2.	Level of study
3.	Academic year
4.	Course/ program

Section B: Causes of unintended pregnancies

- 1. What do you think are the main causes of unintended pregnancies among university students?
- 2. How do these causes differ between male and female students?
- 3. How effective do you find the sexual health education provided at the university?
- 4. In what ways do friends or peers influence decisions about sexual activity and contraceptive use?
- 5. How accessible do you find contraceptives and sexual health on campus?
- 6. Are there any barriers encountered in obtaining these resources

Section C: Consequences of unintended pregnancies

1. How do you think unintended pregnancies affect students' academic performance and future plans?

- 2. What emotional challenges do students face when dealing with unintended pregnancies?
- 3. How do these experiences affect relationships with family and friends
- 4. Is there a stigma surrounding unintended pregnancies among students?
- 5. How does this stigma manifest in social interactions or campus life?

Section D: Coping mechanisms

- 1. What are the coping mechanisms employed by students?
- 2. How effective are these coping strategies?
- 3. How do you think cultural and societal background influences the coping strategies?