



# Effect of Social Skills Training on Self Concept of Teenage Mothers, A Case Study of Training College in Kenya

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**Abstract:** The purpose of this study was to investigate the effectiveness of social skills training in enhancing the self-concept of teenage mothers in Kibera, a population often marginalized and vulnerable due to societal stigma, rejection, and isolation following teenage pregnancy. The study employed a mixed-method sequential explanatory design, anchored on Carl Rogers' person-centered theory and Bandura's social cognitive theory. The research targeted 150 teenage mothers, collecting quantitative data through self-concept and social skills questionnaires, and qualitative data through interviews with a social worker and a school administrator. Quantitative data was analyzed using SPSS version 21, and participants with low mean scores in self-concept were further examined through qualitative methods. The findings revealed that social skills training significantly improved the self-concept of teenage mothers, providing them with tools to better manage their emotions and interactions. The qualitative analysis underscored the psychological and emotional challenges these mothers face, particularly the lack of support and acceptance from their families. The study concludes that enhancing self-concept in teenage mothers requires not only social skills training but also increased psychological support and familial acceptance. The implications of this study suggest the need for stronger guidance and counselling services for both parents and teenage mothers. It also emphasizes the importance of policy interventions in low-income communities, particularly in education, to reduce the incidence of teenage pregnancy and its associated challenges. Addressing these issues holistically could lead to better outcomes for teenage mothers, empowering them to rebuild their lives and improve their futures.

**Keywords:** Training on Social Skills, Self-Concept, Teenage Mothers, Training College, Kenya

## 1. Introduction

According to the World Health Organization (2018), approximately 16 million girls aged 15 to 19 years and about one million girls younger than 15 years give birth each year. In the United States alone, studies have shown that teenage girls under 20 years old give birth to approximately 400,000 babies annually (Boobpamala, Kongvattananon, & Somprasert, 2019). Teenage pregnancy has profound psychological implications that can negatively affect the self-concept of young mothers, leading to repeated pregnancies and poor self-understanding. Many teenage mothers who escape early marriage are often returned to school without adequate psychological and emotional preparation. As a result, those from low-income backgrounds and with poor educational attainment are likely to experience challenges in their everyday interpersonal relationships, often feeling socially isolated, marginalized, and rejected by others (Sang, 2015). These challenges contribute to the development of a poor self-concept among teenage mothers.

Research by Sámano et al. (2017) highlights that teenage mothers frequently report poor family relationships and communication, which can drive them to seek love and acceptance outside the family. Many of the challenges these adolescents face stem from a lack of unconditional love and support from their families, making them vulnerable to unprotected sexual relations without considering the consequences. Due to the long-term impact on self-concept and psychosocial adjustment following teenage pregnancy, some of these girls opt for illegal abortions, hide in shame, and experience feelings of guilt, depression, and abandonment (Gaspar, Cerqueira, Branquinho, & Matos, 2018).

Qualitative research by Ellis-Sloan and Tamplin (2019) and Fearnley (2018) suggests that teenage mothers are acutely aware of their stigmatizing identity, which affects how they present themselves. While some studies have explored strategies for rehabilitating teenage mothers to help them rebuild their self-concept, these efforts have been limited. For example, Paik's (1992) study in the USA suggests that various support services, including role models and significant others in teenagers' lives, can improve aspects of their moral-ethical development, family interactions, and social relationships.

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In Africa, studies have confirmed that the shame associated with becoming a mother at a young age often leads to anxiety, depression, and self-defeating thoughts, resulting in a sense of shattered dreams and a lack of purpose in life. A study conducted by Mohamed and Mahmoud (2018) in Egypt found that societal and cultural stigmatization is a significant factor linking teenage pregnancy to poor self-concept, leading to shame and self-defeating behaviour. According to Anyamene and Obumneke (2021), when teenage mothers lack the potential and confidence to face life's challenges, they may resort to withdrawal, become nervous, timid, defensive, aggressive, or struggle to maintain stable relationships and effective communication skills. These psychological challenges can lead to expulsion from school, social exclusion, and rejection by family and friends, all of which contribute to poor self-concept.

While there has been research on social skills as an intervention for improving the self-concept of teenage mothers in Kenya, much of it has focused on academic and economic empowerment rather than the effectiveness of social skills training specifically aimed at addressing poor self-concept. Kenya has long faced the societal challenge of high rates of early pregnancy. A survey by Okore, Asatsa, and Ntarangwe (2021) reported that Nairobi County had the highest number of teenage pregnancies, with 11,795 cases from January to May 2020. This increase has raised concerns among stakeholders, parents, religious communities, and political leaders. Being pregnant as a teenager can be devastating, leading to a loss of confidence and struggles with self-worth, body image, and shame. There is an urgent need to address teenage pregnancies by fully funding and implementing psychosocial and social skills programs to rebuild teenage mothers' self-concept, empowering them in decision-making, self-awareness, and assertive behavior to prevent repeat pregnancies. Neglecting this issue could make them more vulnerable to their perpetrators and increase the likelihood of additional pregnancies. Currently, the problem is being addressed by introducing psychosocial support and teenage mothers' projects that aim to empower them economically and help them adjust to their new roles and life transitions (Kumar, Stecher, Li, Knyaz, & Tamura, 2018).

## 2. Literature Review

Parray and Kumar (2017) conducted a quasi-experimental study in India to investigate the impact of assertiveness training on self-esteem, stress, psychological well-being, and academic achievement among adolescents. The study purposively sampled 13 students aged 16 to 19 years. The results demonstrated a significant improvement in the students' levels of assertiveness and self-esteem. The researchers concluded that assertiveness training effectively enhances both assertiveness and self-esteem. Similarly, Shanmugam and Kathyayini (2017) carried out a study in India to examine the relationship between assertiveness and self-esteem among adolescents. This study employed a descriptive correlation research approach and randomly sampled 60 adolescents from a selected children's hospital. The findings revealed a significant positive correlation ( $r_s = 0.64$ ) between assertive behaviour and self-esteem in adolescents. This finding is relevant to the present study as it highlights the effectiveness of assertive behaviour, particularly concerning age and educational level, which are important intervening variables in the current research.

Okore et al. (2021) conducted a study in Egypt to examine the relationship between self-concept and aggressive behaviour among deaf adolescents. The researchers recruited a convenience sample of 60 deaf students and found that the majority of participants had low self-concept. The current study builds on this by examining the effectiveness of social skills training in enhancing the self-concept of teenage mothers, using a mixed methods sequential explanatory design and a census method to sample a larger number of participants, thus generating new subjective experiences of the participants.

Nihayati, Tristiana, Junata, and Yusuf (2017) conducted a quasi-experimental study in Indonesia to explore the effect of social skills training on self-efficacy. The study involved 43 clients from a mental hospital and sampled 30 participants. Results indicated that social skills training significantly improved the client's ability to interact with others. This study is relevant to the present research as it emphasizes the effectiveness of social skills training in enhancing the self-concept of teenage mothers in Kenya, employing a mixed methods sequential explanatory design to uncover new subjective experiences.

A study on predictors of social skills among adolescent girls ( $N = 364$ ) was conducted by Morowatisharifabad, Baghernezhad Hesary, Sharifzadeh, Miri, and Dastjerdi (2019) in Iran. The study examined the relationship between life skills and self-esteem, focusing on age and relationship management among Iranian teenage girls. The findings showed a significant association between life skills and self-esteem ( $p < 0.05$ ). This is pertinent to the present study as it highlights the significant association between social skills and relationship management among teenage girls, which may also apply to self-concept among teenage mothers in Kenya, using a mixed methods sequential explanatory design.

Kuasit, Chunuan, Hatthakit, and Bullock (2018) conducted a study in China to evaluate the effectiveness of a Nursing Program as a strategy for enhancing and building resilience in pregnant teenagers. The findings revealed that participants in the experimental group showed a significantly greater improvement in life goals mean scores compared to the control group. Additionally, Okore et al. (2021) conducted a study in Kenya investigating the influence of life skills training on teenagers' behaviour. The study concluded that life skills training equips students to make informed decisions, voice their opinions before reaching conclusions, solve problems effectively, and become more assertive.

### 3. Methodology

The study was conducted at St. Charles Lwanga Vocational Training College in Kibera, Nairobi County, Kenya. Kibera, an informal settlement situated in Nairobi's Southwestern peri-urban zone approximately seven kilometres from the Nairobi City Centre, has a population exceeding 250,000, according to the 2019 census. The residents of Kibera represent various ethnic groups and races found within the country. St. Charles Lwanga Vocational College is located in Raila Village, along the Kibera Southern by-pass, off Ngong Forest.

The choice of this locale was based on the observable experience at the rehabilitation training college, where one of the psychological effects of teenage pregnancy is poor self-concept. Kibera has a high concentration of teenage mothers enrolled in rehabilitation programs, which motivated the researcher to examine the effectiveness of social skills training in enhancing the self-concept of these teenage mothers. According to Kuasit et al. (2018), selecting a study location is critical when the existence of a problem is evident.

The study population consisted of 150 teenage mothers, a social worker, and a college administrator. This information was derived from document analysis of the school records.

The study employed a mixed-methods sequential explanatory design, which involves two distinct phases: quantitative followed by qualitative (Creswell, Plano Clark, Gutmann, & Hanson, 2003). In the first phase, quantitative data were collected using standardized and self-developed questionnaires in the form of a Likert scale. After collecting the quantitative data, participants whose mean scores ranged between 1.0 and 2.5 were purposively selected for the qualitative study, as these scores indicated low self-esteem. The qualitative phase aimed to create new subjective experiences for the participants and explain the quantitative results obtained in the first phase. The two phases were connected in the intermediate stage of the study, with the rationale being that quantitative data and subsequent analysis provided a general understanding of the research problem.

A census method was used to select all the teenage mothers for the quantitative study, while an extreme case-sampling technique was employed to select those with low mean scores on self-esteem for the qualitative study. A purposive sampling method was used to select one social worker and the administrator.

The data collection instruments included a standardized questionnaire, a researcher-developed and modified questionnaire, and an interview guide. The researcher used the Self-Efficacy Scale, Relationship Management Scale, Self-Awareness Scale, Self-Monitoring Scale, Rosenberg Self-Esteem Scale, and Assertiveness Scale for quantitative data collection. A semi-structured interview guide was used to collect qualitative data.

The Self-Esteem Scale, consisting of 10 Likert scale items, was adapted from Alessandri, Vecchione, Eisenberg, and Laguna (2015). This brief unidimensional measure of global self-esteem was originally developed by Rosenberg to assess self-esteem in adolescents. The researcher adopted any mean score between 1.0 and 2.5 as an indication of low self-esteem. Permission to use this questionnaire is generally granted, and researchers do not need to seek additional permission. The pilot test conducted helped to ascertain the quality of the tool, and the scale reported a Cronbach's alpha coefficient of 0.873, indicating high reliability according to Creswell (2014).

The Self-Monitoring Scale (SMS), a 4-item Likert scale, was based on guidelines provided by Bing, Rajpar, and Zakaria (2013). High scores indicate high self-monitoring, while low scores indicate low self-monitoring. This self-administered scale was modified for use with teenage mothers based on suggestions from supervisors and other research experts. The adaptation primarily involved language modifications to fit the Kenyan context. The scale assessed the ability of teenage mothers to monitor how they express their nonverbal behaviour and their awareness of self-presentation in social situations. As with the Self-Esteem Scale, permission to use the SMS is generally granted. The pilot test reported a Cronbach's alpha coefficient of 0.834, which indicated very high reliability according to Creswell (2014).

### 4. Data Analysis

Analysis was performed using SPSS, version 21. Pearson correlation was used to examine the relationship between quantitative variables. Descriptive statistics, including means, frequencies, standard deviations, and percentages, were employed to analyze the participants' quantitative data. Qualitative data were transcribed and analyzed based on emerging themes.

### 5. Results of The Study

#### 5.1. Socio-Demographic Characteristics of the Teenage Mothers

Table 1 presents the socio-demographic characteristics of teenage mothers. The findings show that the majority of the teenage mothers who participated in the study were aged 20 years and above (68%), while 27% were aged between 17 and 20 years. The lowest participation was among those aged between 12 and 16 years. This suggests that the level of social skills competence and life experience related to self-concept is influenced by the age of the individual. The majority of participants who were 20 years and above became pregnant during their late adolescence, while they were in senior secondary school, and they had already assumed parenting responsibilities before coming to the rehabilitation centre.

**Table 1:** Demographic characteristics of teenage mothers

Categories		Frequency (f)	Percentage (%)
Age of participants	12-16 years	5	5.0
	17-20 years	27	27.0
	20 years & above	68	68.0
Birth Order	First Child	44	44.0
	Middle Child	37	37.0
	Last Child	19	19.0
Educational Level	Primary	22	22.0
	Secondary	78	78.8
Whom they live with at Home	Father, Mother and Siblings	23	23.0
	Mother and Siblings	20	20.0
	Father and Siblings	2	2.0
	Alone	32	32.0
	Relatives	19	19.0
	Husband	4	4.0

Source: Computed by researcher.

## 5.2. Birth Order and Family Responsibilities

In terms of birth order, the findings revealed that most of the teenage mothers who participated in the study were the first child (44%), followed by 37% who were middle children, and 19% who were the last child. This could indicate that, in many cases, the first child experiences significant financial dependency from the family and struggles with substantial responsibilities, making them more vulnerable to early pregnancy. One participant shared her experience:

*"I am the breadwinner in my family because my mother is very sick and cannot take care of the family. The responsibility of the family rests on my shoulders. I regret involving myself in this situation where I have to take care of my child and my family, which is very difficult for me at this young age. The father of the child is not giving me any support, and I feel so frustrated and sad that I allowed myself to be deceived because of poverty."* (P1, Individual Interview, November 17, 2020)

## 5.3. Educational Level and Vulnerability to Early Pregnancy

Regarding educational level, the findings indicate that the majority of teenage mothers (78%) became pregnant while in secondary school, while 22% became pregnant while in primary school. This suggests that a lack of social skills in decision-making may have contributed to their vulnerability to early pregnancy. The findings underscore the importance of incorporating social skills training at all educational levels to help raise the self-concept of teenage mothers. This aligns with the findings of Mohr, Carbajal, and Sharma (2019), who noted that educational levels impact teenage pregnancy in low- and middle-income families. The empirical evidence supports the study by Sang (2015), who argued that teenage mothers from low-income backgrounds and with poor educational attainment are more likely to experience challenges in their interpersonal relationships, leading to poor self-concept.

## 5.4. Living Arrangements and Social Support

In terms of living arrangements, the results show that 32% of the participants live alone, 23% live with their parents and siblings, 20% live with their mother and siblings, 19% live with relatives, 4% live with their husband (the father of the baby), and 2% live with their father and siblings. The findings suggest that most teenage mothers live alone with their babies, which may be indicative of rejection and a lack of support from families, friends, and relatives. One participant described her experience:

*"When I ask for food to feed my child, my mother tells me to go and look for the father of the child and collect food for my child. 'You are now a mother, so take the responsibility of taking care of your child. I sent you to school to learn and better your life, but you preferred to become a mother. Sort yourself out.' I have to cope with the abuse I receive from my mother on a daily basis. She calls me all sorts of bad names and tries to make me feel bad. She keeps telling me to take my baby to the father since I decided to become a mother at my age. I had no option but to move out and live alone with my baby."* (P2, Individual Interview, November 17, 2020)

## 5.5. Correlation with Existing Literature

The qualitative findings are consistent with the work of Jiménez-Peña et al. (2019), who found that verbal abuse and a lack of support negatively affect the self-concept of teenage mothers and may lead to repeated pregnancies. Additionally, these findings confirm the results of studies by Miriti and Mutua (2019) and Mangeli, Rayyani, Cheraghi, and Tirgari (2017), which indicated that teenage mothers often face social stigma, a lack of emotional and psychological support, and stress related to new life adjustments. Psychosocial support plays a critical role in

enhancing the self-concept of teenage mothers, as the transition to the new role of motherhood requires love and acceptance.

**Table 2:** Demographic Differences in Social Skills

		Relationship Management	Assertiveness	Self-Monitoring
<b>Age</b>	12 -16	3.60	2.32	3.60
	17 - 20	3.48	2.68	3.23
	20-above	2.40	2.97	2.69
<b>Birth Order</b>	First Child	3.40	2.90	2.90
	Middle Child	3.47	2.82	2.75
	Last Child	3.44	2.83	3.11
<b>Educational Level</b>	Primary	3.38	2.85	3.00
	Secondary	3.45	2.85	2.86
<b>Whom they live with</b>	Father, Mother & Siblings	3.44	2.99	2.77
	Mother & Siblings	3.46	2.92	2.93
	Father & Siblings	3.10	2.90	3.25
	Alone	3.26	2.80	2.78
	Relatives	3.71	2.70	3.10
	Husband	3.45	2.95	2.93

Source: Computed by researcher

### 5.6. Comparison of Demographic Differences in Social Skills

Table 2 presents a comparison of the demographic differences in social skills among the participants. The findings reveal that the mean score for social skills was highest in the younger age group (12-16 years) for relationship management (mean = 3.60), followed by the 17-20 years group (mean = 3.48). Interestingly, assertiveness was lowest in the younger age group (mean = 2.32) and highest in those aged 20 years and above (mean = 3.48). In terms of self-monitoring, it was again highest in the younger age group (mean = 3.60), followed by the 17-20 years group (mean = 3.23). These findings suggest that assertiveness increases as individuals transition from early to late adolescence. Interestingly, relationship management and self-monitoring are highest in early adolescence but tend to decrease as adolescence progresses, as seen in the sample of the present study. The results indicate that social skills are influenced by the age of the participants.

### 5.7. Influence of Birth Order on Social Skills

Regarding birth order, the findings show that relationship management was consistently the highest across the three birth orders: first child (mean = 3.40), middle child- (mean = 3.47), and last child (mean = 3.44). In terms of self-monitoring, the last child scored the highest (mean = 3.11). Interestingly, the findings reveal that the first child scored highest in assertiveness, while the last child scored highest in self-monitoring (mean = 2.90). This may be due to the assumption that the first child, being a role model for younger siblings, is more aware of their thoughts, feelings, and capabilities and can regulate themselves accordingly. On the other hand, last-born children may be more aware of their behaviour in social situations compared to first and middle children. The findings suggest that social skills, particularly relationship management, are influenced by birth order.

### 5.8. Impact of Educational Level on Social Skills

In terms of educational level, the results reveal that those who became pregnant while in primary school reported the highest mean scores across all three social skills constructs. The highest score was for relationship management, with a mean score of 3.38 for the primary level and 3.45 for the secondary level. Differences in mean scores were also found in self-monitoring, with those at the primary level scoring higher (mean = 3.00) compared to those at the secondary level (mean = 2.86).

For the sample in this current study, the results indicate that those who became pregnant while in primary and secondary school have better relationship management skills. The findings also show that those who became pregnant while in primary school demonstrate better self-monitoring behaviour compared to those at the secondary school level. When comparing the mean scores, teenage mothers who became pregnant while in primary school (mean = 3.00) are found to be better than those in secondary school (mean = 2.86) in their level of social skills.

### 5.9. Influence of Living Arrangements on Social Skills

In terms of living arrangements, the findings show a high consistency in mean scores across different living situations in relation to relationship management: living with father, mother, and siblings (mean = 3.44), mother and siblings (mean = 3.46), father and siblings (mean = 3.10), living alone (mean = 3.26), with relatives (mean = 3.71), and with husband (mean = 3.45). The results also reveal a higher mean score for assertiveness among those living with their mother and siblings (mean = 3.92). For self-monitoring, the highest mean score was among those living with their father and siblings (mean = 3.25), followed by those living with relatives (mean = 3.10). The



findings suggest that the level of assertiveness is influenced by whom the participants live with, depending on the kind of psychosocial support and assistance they receive. This may be attributed to their parents' attitudes and level of acceptance and understanding of their situation. The empirical findings align with Kumar et al. (2018), who emphasized the importance of psychosocial support for teenagers in influencing their social skills and enabling them to adjust to their new roles as young mothers.

**Table 3:** Demographic Differences in Self-Concept

		Self-Awareness	Self -Efficacy	Self-Esteem
<b>Age</b>	12 -16	2.88	2.96	3.14
	17 - 20	2.65	3.01	2.82
	20-above	2.66	3.40	2.56
<b>Birth Order</b>	First Child	2.69	3.31	2.64
	Middle Child	2.77	3.23	2.82
	Last Child	2.42	3.25	2.54
<b>Educational Level</b>	Primary	2.65	3.37	2.73
	Secondary	2.67	3.24	2.64
<b>Whom they Live with</b>	Father, Mother & Siblings	2.85	3.50	2.49
	Mother & Siblings	2.72	3.08	2.84
	Father & Siblings	2.85	3.00	3.10
	Alone	2.48	3.35	2.41
	Relatives	2.72	3.13	2.80
	Husband	2.50	3.10	2.25

Source: Computed by the researcher.

## 6. Comparison of Demographic Differences in Self-Concept

Table 3 presents a comparison of the demographic differences in self-concept among teenage mothers. The findings show that the mean scores for self-efficacy were highest among teenage mothers aged 20 years and above, while self-esteem was highest among those aged 12-16 years. Consequently, the mean score for self-efficacy is higher across different birth orders, educational levels, and living arrangements at home.

### 6.1. Correlation Between Self Concept And Assertiveness

The study aimed to examine the relationship between the self-concept of teenage mothers and their level of assertiveness. The results of the analysis are displayed in Table 4.

**Table 4:** Correlation between Self-concept and Assertiveness

Self – Concept		Assertiveness
Self- Awareness	R	.151
	Sig.	.136
Self- Efficacy	R	.061
	Sig.	.546
Self Esteem	R	.029
	Sig.	.775
	N	100

Table 4 revealed the Level of assertiveness on the self-concept of teenage mothers in Kibera, Nairobi.

The results in Table 4 indicate a very weak positive relationship between assertiveness skills and self-awareness of teenage mothers ( $p < 0.05$ ,  $r = 0.151$ ). This suggests that as assertive behaviour increases, teenage mothers' self-awareness also increases. This implies that learning assertive techniques can be an effective tool for coping with various life stressors. Increasing assertive behaviour becomes an expression of one's feelings, which aligns with the study by Ghodrati, Tavakoli, Heydari, and Akbarzadeh (2016), who found that assertiveness is a core human behaviour, key to interpersonal relationships, and needs to be promoted among adolescents. Qualitative findings also indicated that some teenage mothers improved their self-awareness through psychosocial training offered at the rehabilitation centre. This was evident from one participant who said:

*"I am a final-year student in the catering department. I had my baby when I was in Form Four, which led to my poor performance in the KCSE. All my dreams of going to university and my aspirations were shattered, and I still regret what happened to me. My parents were mad at me at first because I brought shame to them. When I came to this centre, I was not able to speak out or express myself without getting angry or blaming others. The centre invites people to come here once a week to talk to us about entrepreneurship as well as give us psychosocial support. I am gradually beginning to express myself without much fear since I came to this centre. I have grown compared to when I first came here."* (P6, Individual Interview, November 17, 2020)

The study found no significant correlation between assertiveness and self-efficacy among teenage mothers ( $p > 0.05$ ,  $r = 0.061$ ). This suggests that assertive behaviour among teenage mothers has no impact on their self-efficacy. Similarly, the study found no significant correlation between assertiveness and self-esteem among teenage mothers ( $p > 0.05$ ,  $r = 0.029$ ). This indicates that when parents show less involvement and lack of support for their teenage daughters, the teenage mothers' self-esteem tends to decrease. The results from the current study contradict the findings of Rutter et al. (2017), who reported that assertiveness training has the potential to motivate and enhance students' self-efficacy among secondary school students. Qualitative findings further indicated that teenage mothers' parents' attitudes towards them significantly contributed to their low self-esteem. One of the participants shared her experience:

*"I am a first-year student in the hairdressing department. I had my baby when I was in Form Two, and since then, I have been living with regrets. My parents rejected me and sent me away to go and look for the father of my baby. The worst part is that the boy who got me pregnant rejected both me and my baby, and he is nowhere to be found. I cry and get hurt each time I remember the situation I got myself into. I live alone with my child, and taking care of this baby has been extremely difficult, especially now that the baby is sick. This rehabilitation centre has been my motivation; it has helped me get through my day, my schoolwork, and taking care of my baby."* (P7, Individual Interview, November 18, 2020).

## 6.2. Correlation Between Self Concept And Self-Monitoring

The study aimed to examine the relationship between the self-concept of teenage mothers and their self-monitoring competence. The findings are presented in Table 5.

**Table 5:** Correlation between Self Concept and Self-Monitoring

Self - Concept		Self - Monitoring
Self- Awareness	R	.036
	Sig.	.724
Self- Efficacy	R	-.323**
	Sig.	.001
Self Esteem	R	.211*
	Sig.	.035
N		100

Source: Computed by the researcher.

From Table 5, the current study found no significant correlation between self-monitoring and self-awareness among teenage mothers ( $p > 0.05$ ,  $r = 0.036$ ). This indicates that self-monitoring behaviour among teenage mothers has no impact on their self-awareness. However, the study found a weak negative correlation between self-monitoring and self-efficacy among teenage mothers ( $p < 0.01$ ,  $r = -0.323$ ). This means that an increase in self-monitoring behaviour among teenage mothers is associated with a decrease in self-efficacy. Additionally, the study found a weak positive correlation between self-monitoring and self-esteem among teenage mothers ( $p < 0.05$ ,  $r = 0.211$ ). This suggests that an increase in self-monitoring behaviour can lead to an increase in teenage mothers' self-esteem. The results from the current study are consistent with earlier studies by Lawrence and Saileela (2019), who reported a low positive relationship between self-concept and self-monitoring among higher secondary students.

## 7. Discussion

The present study aimed to assess the effect of social skills training on enhancing the self-concept of teenage mothers. The findings revealed that assertiveness increases as individuals transition from early adolescence to late adolescence, as observed in the study sample. Interestingly, relationship management is highest at the onset of adolescence but decreases as individuals progress into late adolescence. A similar pattern was observed in self-monitoring, where it is highest at the beginning of adolescence and decreases as adolescence progresses. These findings suggest that social skills are influenced by the age of the participants.

The study also found that relationship management had the highest prevalence across different birth orders. In terms of self-monitoring, the last-born children scored the highest. Interestingly, the findings showed that the first-born children demonstrated higher assertiveness, while the last-born children exhibited better self-monitoring. This may be due to the mentorship programs offered at the rehabilitation center and the assumption that first-born children have greater knowledge of their thoughts and are seen as role models for their younger siblings. According to the study's findings, last-born children are more aware of their behavior in social situations than the first- and middle-born children.

The findings also revealed that social skills are influenced by birth order. Those who became pregnant while in primary school reported the highest mean scores across all three social skills constructs. The study argues that those who became pregnant while in primary and secondary school have better relationship management. Additionally, those who became pregnant while in primary school demonstrated better self-monitoring behavior than those in secondary school. The findings suggest that assertiveness is influenced by whom the participants live

with, depending on the kind of psychosocial support and assistance they receive. This could be due to their parents' attitudes, level of acceptance, and understanding of their situation.

The study found that the age of the participants influences their self-concept as they transition into motherhood. The findings concluded that self-concept grows as individuals transition from early adolescence to late adolescence. This finding supports the work of Lawrence and Saileela (2019), who found that self-esteem decreases with age. Adolescents' self-esteem is higher between 12 and 14 years, while those aged 23 and above have the lowest self-esteem. In terms of birth order, the findings showed that self-concept is not consistent with birth order. However, qualitative findings indicated that some teenage mothers who are first-born children became pregnant following their mother's footsteps, influencing their self-concept. One participant stated:

*"My mom is 32 years old and a single mom. I followed in her footsteps—she got pregnant at the age of 17. My mother did not get rid of me, so I did not want to get rid of mine. My child has brought me good luck; it's the reason I am in this rehabilitation centre, and I have benefited a lot from the centre. The centre teaches us positive parenting, the need to bond with our child, and being a responsible parent. It teaches us not to relent in life's struggles, no matter the challenges, to avoid repeat pregnancies." (P3, Individual Interview, November 17, 2020).*

The findings also revealed that those who became pregnant while in primary and secondary school reported the highest mean scores in self-efficacy. The study suggests that those who became pregnant while in primary and secondary school have high self-efficacy, but their self-esteem decreases during secondary school. Teenage mothers who became pregnant while in primary school were found to have better self-concepts than those in secondary school.

The findings further showed that self-esteem and self-awareness are influenced by the amount of love, acceptance, and support shown to teenage mothers. It is evident that those who live with the father of their baby have issues with self-esteem and self-awareness. Some of them may be in abusive relationships if the relationship was imposed on one party. This was evident in the experience of a participant who said:

*"My parents are very aggressive towards me, constantly insulting me. The constant refrain is to go and look for the father of my child. I endure all the abuse because I have nowhere to go with my baby. I only stay with my parents under the same roof so I can go out to find casual work to take care of my baby and myself. After much pressure, I moved in with the father of my baby. I had dreams of going to university, but now all my dreams are shattered. My man beats me all the time when there is no food in the house. I am struggling to feed my new family since my parents have rejected my baby and me." (P4, Individual Interview, November 17, 2020).*

Sending teenage mothers to live with the father of the baby reflects a society where parents and family members indirectly encourage teenage pregnancy. This arrangement can allow the teenagers to continue engaging in sexual relationships and become susceptible to abusive relationships. This has a negative impact on their self-concept and sends a confusing message to the younger generation about sex and motherhood.

## 8. Conclusion

The study concludes that a significant number of teenage mothers experience challenges with relationship management and assertiveness. The findings reveal a weak positive correlation between assertiveness, self-awareness, self-efficacy, and self-esteem. Therefore, promoting assertiveness among teenage mothers is crucial to help them build self-confidence and express themselves without aggression. The study provides evidence that social skills training is effective in enhancing the self-concept of teenage mothers, particularly through holistic formation and mentorship programs.

Additionally, the qualitative findings highlight the need to improve the self-concept of teenage mothers through family psychological support. The study underscores that the self-concept of teenage mothers is negatively impacted by the lack of psychological support, forgiveness, and acceptance from their families. The suggested interventions include being emotionally present, providing psychological support, and offering unconditional love to teenage mothers.

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