

School Leadership Role in Mitigating the Effects of Teenage Pregnancy on Academic Performance of Senior High School Students in Ghana

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RESEARCH ARTICLE

Abstract

Teenage pregnancy continues to pose a significant threat to the educational development of young girls in many communities in Ghana. This study explores the role of school leaders and school-level policies in mitigating the effects of teenage pregnancy on the academic performance and progression of Senior High School girls in the Northern Region of Ghana. The study was guided by a case study design and a mixed-method approach using both quantitative and qualitative data. One hundred and ten (110) respondents were selected using simple random and purposive sampling techniques. The findings indicate that teenage pregnancy has negative effects on school attendance, academic achievement, and emotional stability. In addition, it also affects social relationships among pregnant teenagers, their parents, and teachers. The study highlights the critical need for quality school leadership and strong school policy, for example, integrated sex education programs, and promotion of preventive and proactive measures to delay early sexual engagement among students. These interventions are enormously important in the face of the academic and social challenges posed by teenage pregnancy in senior high schools in the region.

Keywords: School, Leadership practices, Pregnant learners, Academic Performance, Students

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1 INTRODUCTION

Teenage pregnancy continues to be one of the major challenges confronting the educational development of young girls in many African countries. This kind of interruption often leads to school dropouts and poor learning achievement, preventing these young women from completing their secondary education and progressing to tertiary education. Teenage pregnancy, according to the *Adolescent pregnancy* (2024), is a form of pregnancy that occurs among girls between the ages of 9 and 19 years. Globally, an estimated 21 million teenage girls become pregnant annually in developing countries, with 12 million of them giving birth (UNICEF, 2020; *Adolescent pregnancy*, 2024; Terefe, 2022; Reidpath and Allotey, 2018). Teenage pregnancy rates in sub-Saharan Africa stand at 18.8% (Kassa et al., 2018). The issue is, however, more prevalent in developing countries, including Ghana (UNICEF, 2020; *Adolescent pregnancy*, 2024). Between 2016 and 2020, over 1 million teenage girls in Ghana were said to be pregnant, with an annual average of over 111,000 cases (Abudl-Malik et al., 2025). According to the Ghana Statistical Service, 15% of women aged 15-19 have ever been pregnant: 11% have given birth and 4% had pregnancy loss in 2022 (Ghana

Statistical Service, 2015). In addition, a recent study in 2025 reported that 35.3% of Ghanaian adolescents had been pregnant (including births, miscarriages, and abortions), with 26% of these pregnancies ending in abortion (Kyei-Arthur et al., 2025).

This worrying trend presents a significant challenge for policymakers and educators worldwide due to its undesirable impact on the education and prospects of young girls (Alam and Mohanty, 2023; Leung et al., 2019). Early parenthood disrupts the academic pursuits and career aspirations of many teenage girls. Consequently, institutional support for teenage mothers is crucial, particularly in societies where young marriages and teenage pregnancies are prevalent (Emeri and Olarenwaju, 2022). Despite concerted efforts by parents, stakeholders, NGOs, educationists, advocacy groups, and governments, teenage pregnancy remains a challenge in the Northern Region of Ghana. This research aims to address the challenges associated with teenage pregnancy, especially concerning its impact on the academic performance of young girls (Chirwa-Kambole et al., 2020). The occurrence of teenage pregnancy continues to negatively affect the overall well-being of adolescent girls and potentially the overall educational achievement in Ghana.

Additionally, teenage mothers often experience embarrassment, stigmatization, dishonor, and dropping out of school, which stifle their ambitions and prevent them from achieving higher goals (Alhuzail and Levinger, 2024). It takes effective school leadership to help deal with these issues in a school context (Ylimaki and Brunderman, 2021; Simonsen and Rundmo, 2020). Adolescent pregnancy imposes significant challenges on young girls, including school dropouts and involvement in unlawful activities such as unsafe abortion, street hawking, and child abandonment (Cruz et al., 2021; Thwala et al., 2022; Pietras et al., 2024). These issues further exacerbate the cycle of poverty, adoption challenges, recurrent pregnancies, and other adverse effects for adolescent girls and society (Nkhoma et al., 2020; Etini and Gabriel, 2024). Moreover, pregnant teenage girls often struggle with psychological instability, which makes it difficult for them to remain at school and engage with their peers (Sabet et al., 2023). The stigma and emotional challenges associated with teenage pregnancy compound them, often leading to permanent academic disengagement.

In essence, teenage pregnancy among senior high school students poses a significant threat to the academic and social development of adolescent girls. Whilst maintaining that education is the vital tool that can be used to curb the menace of teenage pregnancy or unintended pregnancies (UNESCO, 2017), the role of school leaders remains underexplored in dealing with this menace. School leaders can serve as a critical tool for reducing the effects of teenage pregnancy on the academic performance of senior high school students by creating a supportive environment that allows mothers to continue their education. It should be mentioned that studies in countries such as South Africa and Kenya demonstrated that school leadership practices have led to the provision of individual learning plans and reintegration policies for teenage mothers, leading to improved academic outcomes (Ngabaza et al., 2016; Macharia and Wanyoike, 2016). However, evidence in the Ghanaian situation remains scarce, particularly in the context of the northern region. This study aims to address the gap in understanding how school leaders can help mitigate the effects of teenage pregnancy on the academic performance of senior high school students in Ghana. This study is critical, given the fact that current empirical evidence is focused on the prevention and socio-economic outcomes rather than the integration and support for these teenage mothers within the formal educational context (Amoah-Saah and Akosah, 2024; Morgan et al., 2022; Senkyire et al., 2022).

A lot of different groups, like the government, international organizations, NGOs, philanthropists, and civil organizations, have taken action to stop and lessen the effects of teen pregnancy. These groups include teaching about sexual and reproductive health, running campaigns to encourage people to use birth control, starting programs to stop child marriage, and working to reduce poverty. Despite these efforts, the problem persists, particularly in rural communities in Ghana, where teenage pregnancy significantly impacts the academic performance of senior high school students. In line with that, current policies and orientation in Ghanaian SHSs often focus on punitive measures, such as expulsion or suspension, rather than creating enabling environments that allow these students to continue their education. This is partly because there are no clear

guidelines for how schools can accommodate pregnant students, provide counseling services, or address stigma and discrimination within the school environment. This lack of a school support system exacerbates the woes faced by these pregnant teenagers, further diminishing their academic performance and long-term ambitions.

Recent studies by [Akyina and Heeralal \(2024\)](#), [Prempeh and Dzansi \(2024\)](#), and [Ibrahim \(2018\)](#) argue for an inclusive reform in Ghanaian educational system that shifts from punitive to rehabilitative frameworks, particularly in Ghanaian secondary schools. In this regard, the inadequate accessible research specifically examining the role of school leaders in helping to mitigate these effects, particularly in rural areas in Northern Ghana poses a great challenge. Due to this research gap, this paper seeks to provide empirical evidence to fill in the gap by examining the role of school leadership in helping to mitigate the effects of teenage pregnancy on the academic performance of senior high school students. The general objective of this study is to determine the role of school leadership in mitigating the effects of teenage pregnancy on the academic performance of senior high school students in Ghana. Specifically, the study aims to examine the causes of teenage pregnancy among senior high school students, identify its effects on their academic performance, and determine how school leadership can help address and alleviate these effects to support the educational attainment of affected students.

In the view of [Spencer \(2011\)](#), adolescent pregnancies are those that occur among young girls between the ages of 14 and 18. Additionally, [Baird et al. \(2025\)](#) added that teenage pregnancy is a societal challenge in which fully grown activities and duties are exhibited by people who, in their age and developmental nature, are not yet fully grown. The distinctive feature of the adolescent stage of growth is that it tests diverse systems of life, which also include sexual practices. It is also well known that adolescence is considered a stage in life when teenagers are confronted with uncertainties because they must choose between a whole complex of issues which are quite critical in shaping their lives. The issue and dynamics of teenage or adolescent pregnancy can vary from community to community and from one person to another. According to the Reproductive and Child Health (RCH) of the Public Health Division of the [Ghana Health Service \(2012\)](#), adolescence precisely implies the process of 'growing up'. The word "teenage" or "adolescence" refers to a phase of changing nature in age and personal development. Many scholars and institutions, such as Spencer, GHS, WHO, and others, have accepted the explanation that teenagers are people from the age group of 10 to 19 years ([Ghana Health Service, 2012](#)). This research further categorizes the teenage stage into two segments: the young adolescent, defined as those aged 9 to 14. It also refers to those between the ages of 15 and 19 as older adolescents. Contextually, therefore, a teenage pregnancy is a pregnancy that occurs among girls between the ages of 10 and 19 years.

Several studies have found varied causes of teenage pregnancy. For instance, [Ahinkorah et al. \(2021\)](#) found that inadequate parental communication and lack of comprehensive sexual education were predictors of adolescent pregnancy across both developed and developing countries. Similarly, [Yakubu and Salisu \(2018\)](#) identified a cluster of interrelated factors, including poverty, lack of access to education, and gender inequality, as a global contributor to teenage pregnancy. Furthermore, a study by [Finning et al. \(2019\)](#) identified factors such as depressed moods and truancy as contributors to teenage pregnancy. [Mohr et al. \(2019\)](#) link teenage pregnancy to low educational attainment and poor family backgrounds. Similarly, [Okine and Dako-Gyeke \(2020\)](#) reported that adolescents with limited or no education and inadequate parental care face an increased likelihood of early pregnancies. [Neel et al. \(2017\)](#) revealed that in 2014, 23.2% of adolescents with no formal education and 19% with only primary education had begun childbearing.

In addition, [Babedi \(2021\)](#) noted that many teenage pregnancies are a result of curiosity about sex, often driven by socio-economic hardship, poor educational opportunities, and unstable life circumstances. These factors are combined with the perception that poverty and social inequality influence sexual behaviour and increase the risk of teenage pregnancies [Bae et al. \(2022\)](#). On the other hand, studies have revealed the profound implications of teenage pregnancies for the education of young girls. Studies have shown that many schools in Ghana and across

Africa stigmatize pregnant teenagers, labelling them as moral deviants, which discourages school attendance, achievement, and retention (Morgan et al., 2025; Liebowitz and Porter, 2019). For instance, in Zambia, Chanda (2021) reports that over 2,230 girls dropped out of school due to pregnancy in 2015, while in Kenya, over 60% of the 42 million out-of-school youths were girls, with pregnancy being the major factor.

Ruzibiza (2021) also brought attention to the social stigma surrounding teenage pregnancy, highlighting the perception that behaviors like sexual activity and motherhood are inappropriate for adolescents. Also, Mukabana et al. (2024) highlighted the challenges faced by teenage mothers, such as poor health and childcare responsibilities, which hinder their return to school. Finally, Maddox (2024) in the U.S found that teenage mothers experience disrupted schooling and long-term socioeconomic disadvantages because of the dual burden of caregiving and limited academic participation. Similarly, Baird (2023) reported that in the UK, young mothers were more likely to leave school early and encounter challenges re-entering the education system, suggesting a global pattern of educational marginalization for pregnant mothers.

2 METHODOLOGY

2.1 Research Design

This study employed a case study research design and a mixed method, involving qualitative and quantitative methods. This design ensured that the researchers strived for objectivity, and they discovered real-life case systems or multiple cases over time through detailed or in-depth data collection involving multiple sources of information. The case study design was adopted for this research to have a thorough investigation of the causes and effects of teenage pregnancy on the Senior High School students, as well as the school leadership roles in helping to mitigate the effects of teenage pregnancy on the academic performance of students.

2.2 Population of the Study

The researchers selected the three senior high schools (SHS) in the Northern Region. The selected schools have a population of 1,212 students, with 71 teaching staff. Out of the total population, there were 538 females and 684 males. Among the teaching staff, 28 were females and 43 were males. In addition to the teachers and students, school administrators, officials of the Ghana Education Service, and non-governmental organizations involved in promoting girls' education were also included in the study.

2.3 Understanding the Process of System-wide Change

The researchers determined the sample size using Slovin's formula, which resulted in 93 respondents for the quantitative aspect of the study, measuring the perception of students and teachers in the selected school on the causes and effects of teenage pregnancy in their schools. The randomness in the selection process guaranteed unbiased representation among the students and teacher population. On the other hand, for the qualitative aspect, 17 participants were purposefully selected through purposive sampling to select key informants for the qualitative data through interviews. This involves selecting participants who meet specific predetermined criteria relevant to the research topic. In this research, the specific inclusion criteria included being a teenage mother, a school administrator, or an individual directly involved in educational policy and support services. This is necessary for this research because it ensures that the study includes participants (students, school administrators, GES officials, and NGOs) who have firsthand experience of the effects of teenage pregnancy on the academic performance of teenage mothers. This includes 10 students (7 teenage mothers and 3 non-mothers), 5 headteachers, 1 official from the Ghana Education Service (GES), and 1 representative from an NGO involved in girls' education. Participants were selected based on their knowledge, roles, and experience related to teenage pregnancy and school leadership. Thus, this ensured that the data that was gathered was rich, relevant, and had contextual insights. Demographically, the students ranged from 13-19

years old and were from different academic levels (SHS 1-3). In this regard, consent was sought from their parents. The headteachers had between 5-15 years of experience in school leadership. Lastly, the GES officials and NGO representatives were selected based on their involvement in gender-related educational programs for over 5 years.

2.4 Data Collection Procedure

Primary data was collected by administering research instruments such as questionnaires for students and interview guides for teachers. The researchers also collected secondary data from published theses, articles, news items, and reports. We collected primary data from some nominated respondents within the sample frame of the research population. The research employed the services of teachers and students to administer questionnaires in the selected senior high schools. The researchers distributed 93 questionnaires to students and teachers, and they successfully answered and retrieved all 93 questionnaires. Meanwhile, conversational interviews were conducted in person with key informants based on their preferences. Each interview lasted between 30 minutes to 1 hour. The consent of each participant was sought before including them in the research. However, each participant was provided with the opportunity to leave or withdraw at any point during the interview.

2.5 Statistical Treatment of Data

The Statistical Package for Social Sciences (SPSS), version 23.0, served as the statistical tool for analyzing the quantitative data collected. SPSS analyzed the coded responses and presented them in a tabular form showing the frequency and the percentage of each response. This allowed for a simple interpretation of the results.

The researchers employed thematic content analysis to analyze the qualitative data. After transcribing all interviews verbatim, the researchers independently read through the transcripts multiple times to familiarize themselves with the data. An initial round of open coding was done manually to identify recurring concepts, ideas, and patterns. These initial codes were then grouped into various categories and themes that have emerged through the process. To ensure rigor and validity, two researchers independently coded the same set of transcripts and compared the results. Discrepancies were then discussed and resolved collaboratively, ensuring that the data is consistent and minimizing subjective bias. Findings from interviews with students, teachers, and administrators were compared and cross-validated. Member checking was done to ensure that the interpretations accurately reflected the perspectives of the respondents.

3 RESULTS AND DISCUSSIONS

3.1 Causes of Teenage Pregnancy among Senior High School Girls

The first objective of this study was to find out the causes of teenage pregnancy among senior high school students in the Northern Region. The findings reveal that poverty is the leading factor contributing to teenage pregnancy. Other significant factors included lack of sex education, exposure to mass media combined with curiosity, poor parenting, peer group influence, and breakdown of cultural and religious values. Table 1 shows the version themes that emerged during the thematic analysis of the interview.

Table 1. Thematic Analysis of Interview Responses on Causes of Teenage Pregnancy Among Senior High School Girls

No.	Theme	Theme description by respondents	No of respondents mentioning this theme once or more
1	Poverty and Financial Hardship	Participants mentioned poverty, financial constraint, inability to afford educational cost and family financial pressure.	7
2	Lack of parental support	Death of parents, Lack of financial support, Low parental affection, inadequate parent-child communication, weak parental supervision and monitoring, Broken homes and family instability, low parental awareness on reproductive health,	3
3	Peer Influence	Participants mentioned peer pressure, Downplaying consequences of pregnancy, Fear of isolation, myths on the use of contraceptives, experimenting what peers post in social media.	3
4	Transactional Relationship with Older Men	Participants mentioned exploitative sexual relationships with older men ("sugar daddies") in exchange for school-related expenses and promises of marriage or future life security by older men.	2
5	Lack of Sex Education/Awareness	Participants mentioned lack of knowledge about pregnancy, contraceptives and reproductive health.	2

Table 2 shows that 30 (32.2%) respondents indicated that poverty is the major cause of teenage pregnancy among senior high school girls in the Northern Region, 22 (23.7%) indicated lack of sex education, 15 (16.1%) indicated mass media, 11 (11.8) indicated poor parenting, 9 (9.7%) indicated peer group influence, and 6 (6.5%) indicated culture and religious breakdown as the major cause of teenage pregnancy among teenage girls.

Table 2. Causes of Teenage Pregnancy among Senior High School Girls

Factor	Frequency	Percentage (%)
Poverty	30	32.2
Lack of sex education	22	23.7
Mass media and curiosity	15	16.1
Poor parenting	11	11.8
Peer group influence	9	9.7
Culture and religious breakdown	6	6.5

From the data, the major cause of teenage pregnancy is poverty. This is followed by a lack of sex education and the great influence of the media on teenagers' decisions on sex. During an interview with some of the student respondents, a teenage mother who returned to SHS 1 recounted the reason why she got pregnant "... I was unable to pay the registration fee ... I eventually got into a relationship thinking I could use the man to pay my registration fee ... I got pregnant and left school. However, I was encouraged by my friends to come ... I'm currently in school and my child is living with my mother-in-law... ". (S4)

Another teenage girl also indicated that "I lost my mother ... so, one man offered to help me continue my school. When he said he loved me, I agreed, and, in the process, he got me pregnant. After I delivered, he asked me to go back to school...". (S1)

A teenage mother in SHS3 indicated that "... my parents expect me to ... get money to support the family. What work do I do? Where will I get the money? Of course, from my boyfriends. That led me to become pregnant...". (S3). This aligns with the qualitative responses from the key informants who narrated how financial challenges pushed some girls into relationships with older men who provided monetary support in exchange for romantic relationships leading to unplanned pregnancies. As one student recounted that her inability to pay school fees forced her into a relationship, while another shared how the loss of her mother left her vulnerable to exploitation by a man who promised to support her education.

These findings were supported by the study of [Amo-Adjei and Tuoyire \(2018\)](#), which highlighted that economic hardships push young girls into transactional relationships, often with older men, increasing their vulnerability to early pregnancies. Also, the findings align with the works of [UNICEF \(2020\)](#), which found that economic inequalities expose adolescent girls to explore other prospects aside from education. In addition, these findings suggest that addressing teenage pregnancy requires a multifaceted strategy. Interventions should therefore prioritize alleviating poverty by offering financial support to vulnerable students.

3.2 Effects of Teenage Pregnancy on Senior High School Students

Teenage pregnancy has been identified as a critical issue that affects the personal and academic development of girls. This study has shown how teenage pregnancy disrupts education, leading to high school dropouts and reduced academic performance. The data is presented in Table 3 and Figure 1.

Table 3. Thematic Analysis of the Effects of Teenage Pregnancy on Senior High School Students

No.	Theme	Theme description by respondents	No of respondents mentioning this theme once or more
1	School Dropout	Participants mentioned that teenage pregnancy truncates education or academic progression of teenage mothers leading to school dropout.	7

2	Irregular School Attendance	Participants mentioned that pregnant students do not come to school regularly due to health issues, regular hospital visits and stigmatization.	5
3	Poor Academic Performance	Participants narrated that teenage mothers perform poorly due to lack of concentration, emotional, psychological and health related factors.	3
4	Absenteeism	Participants mentioned that pregnant girls usually skip classes due to ill health and regular hospital visits or stigma.	4
5	Stigmatisation and Low Self-esteem.	Participants narrated that teenage mothers experience social rejection and isolation, shame and embarrassment in school, inferiority complex, negative labelling such as "school mother".	5

From Figure 1, 25 respondents (26.9%), are of the view that teenage pregnancy makes pregnant or teenage mothers have irregular attendance in schools. About 30 respondents (32.3%) agreed that teenage pregnancy leads to school dropout of affected learners; 21 respondents (22.5%) responded that it leads to poor performance; and 17(18.3%) respondents noted that teenage pregnancy leads to a high rate of absenteeism.

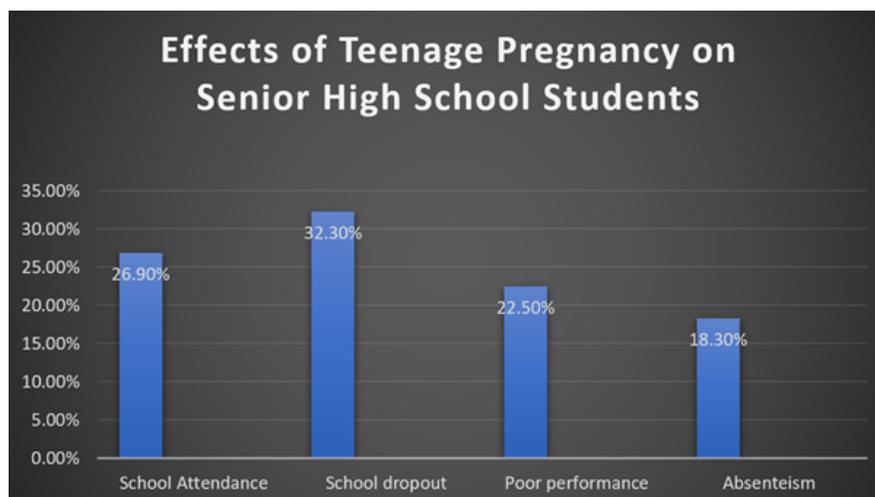


Figure 1. Effects of Teenage Pregnancy on Senior High School Students

A female student in one of the SHSs stated this clearly when she said, " ... *When you become*

pregnant, you cannot continue in school. So, you will have to drop out of school. Girls who become pregnant get teased in class. In some cases, they are deserted by their family and friends. This affects their self-esteem, which discourages them from even returning to school after birth ... ". (S10). Another female student stated that "... girls who become pregnant whilst in school end up dropping out of school". (S8).

Both the quantitative and qualitative data highlight the various impacts of teenage pregnancy on the educational progression of young girls in the Northern Region. The data shows that irregular teenage pregnancy affects regular school attendance and absenteeism, which strongly aligns with the work of Kabiru et al. (2024), who found that pregnant teenagers face frequent absenteeism due to health complications, stigma, or caregiving responsibilities. The findings also correspond to Abuya et al. (2019), who observed that pregnant girls face stigma from peers and school staff, which often discourages pregnant teenagers from consistent school attendance.

It is significant to mention that high schools in the district allow teenage girls who are pregnant the opportunity to attend class and continue their education. This opportunity is not available in some schools in Ghana, as they tag these girls as bad or prostitutes (Morgan et al., 2025; Letsie, 2021). One of the teachers highlighted this notion in the following excerpts of the interview: "... teenage pregnancy has the tendency of truncating a girl's education progress. However, many of those girls in this school do come back after delivery and we accept them". (T1). The findings suggest that teenagers who often get pregnant whilst in school have an interest in attending classes or continuing their education after delivery, but some factors, including neglect, sadness, mood swings, depression, and rejection, among others, affect their continuation.

3.3 School Leadership Roles in Mitigating the Effects of Teenage Pregnancy on Academic Performance

The research explores school leadership's role in addressing teenage pregnancy and related issues of continuation of school attendance, achievement, retention, and progression to tertiary/higher Education. Following the narratives from the key respondents, the research explores various school leadership opportunities using the Distributed Leadership theoretical lens (Leithwood et al., 2020; Spillane et al., 2007; Hallinger and Heck, 2009; Hulpia et al., 2012) in handling the following issues.

Table 4. Thematic Analysis on School Leadership's Role in Mitigating Teenage Pregnancy

No.	Theme	Theme description by respondents	No of respondents mentioning this theme once or more
1	Re-entry Strategies and Policies	Participants mentioned school-level enforcement of policies that allows teenage mothers to return to school after child birth.	7
2	Supportive Counselling Services	Participants mentioned The provision of targeted psychosocial support, counselling services, and follow-ups on pregnant students and teenagers mothers to help address embarrassment, trauma and stigma-related issues.	10

3	Flexible Learning Environments	Flexible learning environment such as flexible class times, part-time attendance, or remedial support to help balance childcare and academic responsibilities. Delivery of age appropriate and culturally relevant education on sex, reproduction, relationships and equipping students with knowledge to make an informed decision.	8
4	Health and Reproductive Education		10

3.3.1 Re-entry strategies and policies

Interviews with teenage mothers, teachers, and school administrators revealed that re-entry policies, when appropriately implemented, will offer pregnant students and teenage mothers a high sense of security and hope for returning to school after childbirth. Unfortunately, a lack of clear guidelines and communications about these policies often leaves affected students feeling isolated, dejected, and hopeless. For instance, one of the counsellors recounted that "*many girls felt ashamed to return to school after childbirth due to stigma...*" (C1). Re-entry policies play a significant role in reducing dropout rates among pregnant girls and ensuring academic continuity for these students. School leadership must put in place strategies to ensure re-entry options help reduce stigma and offer pregnant students and teenage mothers a second chance at securing better education. School leaders must create an inclusive teaching and learning environment (Ibrahim, 2018; Manyengo, 2025; Hilal, 2025). These inclusive practices should include flexible learning options, tracking the progress of returnee girls, and support in securing childcare facilities. School leadership should work with relevant stakeholders to provide these essential services.

In this regard, Distributed Leadership theoretical underpinning presents an inclusive and collaborative process of handling teenage mothers (Leithwood et al., 2020). In dealing with these teenage mothers and menaces like these ones, it requires the wider-system perspectives that take into consideration the support and commitment of students, staff, and parents (Leithwood et al., 2020; Hulpia et al. (2009); Fook and Sidhu, 2009). Generally, the headteachers in the study areas have demonstrated transformational and distributed leadership traits as they exhibited accountability for school outcomes (Jones et al., 2015).

Continuous Professional Development Programmes should be organised periodically for teaching and non-teaching staff to develop and maintain positive attitudes amongst school leaders towards teenage and adolescent mothers' re-entry (Manyengo, 2025).

3.3.2 Supportive Counselling Services

Interviews with school counsellors and teenage girls suggest that counselling services play a crucial role in helping students navigate the emotional and psychological challenges pregnant students go through. Many of the narrated experiences in this research indicate that social exclusions often accompany teenage pregnancy. One of them narrated, "I felt lost and confused about what to do with my life after realizing I was pregnant ...". In this regard, counselling services help students cope with stress, depression, and anxiety, all of which negatively impact the academic well-being of teenage mothers.

School leadership should support teenage mothers to receive personalized counselling. When this

is organized, they are more likely to stay engaged in their studies, continue attending school, and ultimately complete their education. This can be achieved when individual expertise is utilized to support these teenage mothers. Distributed Leadership emphasizes expertise rather than positional authority. The leadership paradigm in Ghanaian schools should be enhanced to ensure an inclusive approach to school management.

3.3.3 Flexible Learning Environment

The study highlights the importance of a flexible learning environment and options for teenage mothers. Some students narrated that traditional schooling hours were difficult to manage alongside their caregiving responsibilities. *"I could barely keep up with my schoolwork because I needed to constantly attend to my baby at home, but with evening classes, I was able to study and care for my baby during the day ..."* (S3), shared by a teenage mother. This highlights the need for flexible learning options in senior high schools in the region, such as evening classes or online learning, to enable teenage mothers to pursue their education without compromising their role as caregivers. Schools that offer these alternatives can significantly increase the retention and academic success of teenage mothers. Flexibility will help reduce absenteeism and the risk of school dropout, as it provides an opportunity for these students to balance their academic and family responsibilities.

3.3.4 Health and Reproductive Education

The study revealed a significant gap in knowledge about reproductive health and its consequences. Many students narrated that they had less knowledge about the risks of teenage pregnancy or how to prevent it. One of the students narrated, *"No one educated me on how serious it could be to get pregnant ..."* (S8). Therefore, it is of high importance that school leadership facilitate the integration of comprehensive and reproductive education into the curriculum to help raise awareness and empower students with the knowledge to make informed decisions. When schools incorporate this education, it may not only prevent teenage pregnancies but also reduce the stigma associated with them and create a more supportive school environment for pregnant students.

Distributed Leadership has been very key in shaping the perceptions of individuals identity (Gronn, 2002; Ibrahim and M. Victoria, 2022). It is contextually situated to ensure teenage mothers' re-entry into school, provide a flexible learning environment, and supportive counselling services among others. Strong and effective school leadership is appreciated when it provides a strategic sense of direction that seeks to consider the collective perspectives of school staff (Bush and Glover, 2014; Jones et al., 2015). The school system should be transformed in Ghana if this menace is to end. Headteachers should avoid solo leadership and use distributed practices.

4 CONCLUSION AND RECOMMENDATIONS

In conclusion, this study examined the role of school leadership in mitigating the effects of teenage pregnancy on the academic performance of senior high school students in Ghana. The findings identified key contributing factors to teenage pregnancy, including poverty, inadequate sex education, and peer influence. Given the multifaceted impact of teenage pregnancies, such as school dropout, irregular attendance, poor academic performance, and stigmatization, holistic and strategic responses are essential. The study underscores the need for school leadership that goes beyond administrative functions to actively engage parents, local communities, Parent-Teacher Associations, and traditional authorities in promoting parental responsibility and adolescent supervision. Furthermore, it calls for the institutionalization of counseling services, peer support groups, flexible learning pathways, and the implementation of comprehensive, culturally sensitive sex education programmes.

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