Factors Impacting the Financial Independence of Women Who Were Teenage Mothers

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Walden University
2018
Abstract

Factors Impacting the Financial Independence of Women Who Were Teenage Mothers

by

Jeanette Parker

MA, Walden University, 2010
BA, University of Michigan, 2007

Dissertation Submitted in Partial Fulfillment
of the Requirements for the Degree of
Doctor of Philosophy
Human Services-Counseling and Social Services

Walden University
February 2018
Abstract

Teenage pregnancy in the United States is a national concern because of negative outcomes for teen mothers and their children of teen mothers. There is ample research on the negative outcomes associated with teen pregnancy; however, there is little research on the success of teenage mothers. This transcendental, phenomenological study examined how former teenage mothers overcame challenges of teen pregnancy to become financially independent adults. The research question for this study was: What factors enabled former teen mothers to overcome challenges of teen pregnancy to become financially independent adults? Principles from social learning theory and resilience theory provided the conceptual framework. Fifteen women who were teenage mothers participated in the study. Data were collected using semistructured interviews and a demographic questionnaire. Coliazz’s 7- step process was used analyze the data. Key findings showed the following: family support and government assistance enabled the women to continue their education and achieve financial independence; most fathers were supportive during the child’s first year, but the support subsided as the relationship between the parents dissolved; the women received little support from their communities or from the educational system. Findings from this study make in important contribution to the literature by taking a strengths-based approach to document the success of teenage mothers. One recommendation is that human services professionals should advocate for stronger support systems for teen mothers because results from this study revealed that good support systems for teenage mothers will enable them to become stronger pillars of society, thus making a positive social change.
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Dedication

This research is dedicated to my late parents: Mr. Robert Gene Gaston and Mrs. Lillie Mae Poster, who instilled in me the values of compassion, strength, and perseverance; to my sister in law, Mrs. Toni Briggs, who is the initial reason I started on my educational journey; to Ms. Ida M. Keys, my sister who has always been a leaning post for me and my strength when I was weak; and to Dr. Paula Duren, who inspired me to continue “knocking down one goal after another until reaching my goal.”
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Chapter 1: Introduction to the Study

Introduction

Approximately one third of female teenagers between the ages of 13 and 19 in the United States become pregnant each year (Basch, 2011), including approximately 3.19% between the ages of 15 and 19 (Kleiber & Dimidjian, 2014, p. 48). Although the teenage pregnancy rate has declined in the United States, it remains the highest among industrialized countries (Assini-Meytin & Green, 2015; Barnes & Morris, 2012; Biello, Sipsma, & Kershaw, 2015; Children Having Children, 2016; Hamilton, Martin, Osterman, Curtis, & Mathews, 2015). Since its peak in 1991, the teen birth rate had declined by 64% within one year (2014-2015) and had dropped by an overall 8% (Hamilton et al., 2015). Hamilton and Ventura (2012) have presented that teenage pregnancy continues to be a national concern because of the associated health risks for the mother and child as well as the escalating costs associated with teenage pregnancy and motherhood. In 2010, public spending associated with teenage childbearing totaled over $9 billion (Hamilton et al., 2015).

Past research on teenage pregnancy has identified the negative outcomes associated with teen pregnancy and motherhood such as social, economic, school, and emotional problems (Boustani, Frazier, Hartley, Meinzer, & Hedemann, 2015), but there is little documentation on the success that teenage mothers may have. The purpose of this qualitative study was to determine how some successful teenage mothers overcame the challenges of teenage pregnancy and motherhood. Success was identified by the teen mothers’ ability to overcome challenges associated with teen pregnancy to become
financially independent of government assistance. A strength-based approach in qualitative research focuses on the character strengths and the positive outcomes of psychology (Niemiec, Shogren, & Wehmeyer, 2017). By using a strength-based approach to gather data on the successes of teenage mothers, I was able to contribute knowledge in an area that needs further research. In addition, this research addressed the gap in literature regarding the successfulness of teenage mothers.

**Background**

**Teen Pregnancy in the United States**

The rate of teenage pregnancy is higher in the United States than in most other developed countries (Centers for Disease Control and Prevention - CDC, 2013). The highest rates of teenage pregnancy for the United States were reported in 1957 with 97.3 per 1,000 births by girls between the ages of 15 through 19 years of age. In 2012, the rate was 29.4 births per 1,000 teenagers within this same age group (CDC). In 2013, the latest year for available data on teenage birth available by the CDC, the teenage birth rate was at an all-time low of 26.5 births per 1,000 teens aged 15 to 19 years, which represented a 10% decrease from 2012.

Although the United States has experienced a decrease in the rates of teenage pregnancy, teen pregnancy is still a concern because the United States continues to have a higher teenage pregnancy rate than other developed countries (CDC, 2013). The primary reasons that teenage pregnancy is a national concern for the United States are the negative associated consequences, including economic costs to society, poor educational attainment, decreased quality of life for the mothers, and negative health outcomes for
teenage mothers and their children (Magness, 2012). Other negative consequences include poor social, physical, and emotional well-being for both mothers and children (Magness, 2012; Pires, Araujo-Pedrosa, & Canavarro, 2013).

**Economic costs.** According to Magness (2012), the annual cost associated with teen births in the United States was approximately $10.9 billion, with the average annual cost at approximately $4,080 per teenage mother (Hudgins, Erickson & Walker, 2014). Many of these teenagers end up relying on government assistance, which in-turn becomes a financial liability for society (Magness, 2012; Minnick & Shandler, 2011; Mollborn & Jacobs, 2011). Seventy-four percent of the respondents in a 1995 survey indicated that the thought of unwed parenthood being morally wrong was a deterrent to teenage pregnancy (Mollborn, 2010a). In addition, the survey indicated that respondents thought that teenagers should not get pregnant if they were not able to provide financial support for them and their child (Hudgins et al., 2014; Mollborn, 2010a).

**Poor educational outcomes.** Poor educational attainment is one of the greatest consequences of teenage pregnancy (Comlossy, 2014). Comlossy reported that only 50% of teenage mothers complete their high school education by age 22 compared to 90% of teenagers without children. Other researchers have also shown the same percentage rate, and that less than 2% of teenage mothers earn a college degree by age 30 (East & Barber, 2014; Hamilton et al. 2014). The two main reasons many teenage mothers forego competing their high school education is that the responsibility of parenting often takes precedence over an education, and often the teens themselves are children of teenage parents who do not support them in completing their education (Mollborn, 2010b).
**Negative health outcomes.** Teenage pregnancy has been associated with adverse health conditions for the teenaged mother and infant (Harden, Brunton, Fletcher, & Oakley, 2009). Some of the most common medical complications associated with teenage pregnancy for the mother are pregnancy induced hypertension, anemia, and sexually transmitted diseases (Ghose & Lopamudra, 2013). Ventura, Hamilton, and Mathews (2013) revealed that babies born to teenage mothers were more likely than those born to older women to have low birth weight, which has a significant impact on the health of the infant. Infant mortality is also a risk for babies born to teenage mothers (Ventura et al., 2013).

**Negative impact on quality of life.** Pires et al. (2013) revealed that the teenagers’ overall quality of life may be damaged once a teenager becomes pregnant. The researchers found that teenage parents often experienced loss of social support that stemmed from cultural mores that were against young, unwed mothers. The teen mothers also experienced declines in their socioeconomic status, which was often on the lower spectrum before their pregnancies (Pires et al., 2013). They further concluded that pregnant teenagers reported feeling as if they were not prepared for motherhood (Pires et al.). These researchers have presented that the young mothers had insufficient resources, increased levels of stress, and were more at risk for emotional and behavior issues than adult mothers (Pires et al.).

**Successful Teenage Mothers**

Although teenage pregnancy has been defined as a national epidemic because of the negative outcomes associated with it, teenage pregnancy does not automatically lead
to a life-time of poverty, sickness, and distress (Comlossy, 2014; Taylor, 2014). Taylor (2014) produced a documentary on teenage mothers titled “Teenage Mom Success Stories,” whereby she provided examples of success stories of three Detroit former teen mothers who beat the odds associated with teenage pregnancy to become productive and successful professionals. The common denominators in the stories of these women were structure, an ardent desire to succeed, family support, and continued education. Taylor highlighted the strengths that allowed these women to succeed. I am hopeful that my research on the accomplishments of teenage mothers will help in fostering social change by challenging the myths that women who become teenage mothers are destined to be a life of poverty, become a strain on society, and are incapable of attaining a successful life (Taylor, 2014).

**Problem Statement**

The United States has one of the largest teenage pregnancy rates of developed countries (Farber, 2014). Comlossy (2014) indicated that 3 of every 10 American girls may become pregnant before they are 20 years of age. Agencies that report statistics on teenage pregnancy and motherhood have indicated that the success of teenage mothers is very unlikely because teenage pregnancy has an impact on the education, income, psychological well-being, and overall health of the teen mothers and their children (Comlossy, 2014; Taylor, 2014). Mollborn and Jacobs (2011) stated that teenage mothers fall behind their peers in terms of education and occupational status by the time they reached midlife. Because most jobs in today’s economy require an education beyond a high school diploma and teenage pregnancy has a significant impact on educational
attainment, a teenage mother’s economic potential is more limited than teenagers who forgo motherhood until adulthood (Comlossy).

Teen pregnancy plays an intricate role in adverse health outcomes for the mother and child during pregnancy and after the birth. Some of the conditions a pregnant teen may experience are gestational hypertension, anemia, prolonged labor, and postpartum hemorrhaging (Ghose & Lopamudra, 2013). Ghose and Lopamudra (2013) mentioned some of the obstetrical complications often associated with teenage birth as preterm labor and preterm delivery, which causes premature membrane rupturing and thus premature birth and under developed infants. Many pregnant teenagers must rely on government assistance to pay their medical bills because of a lack of health insurance coverage (Pregnant teen help, 2011; Rajoriya & Kalra, 2015). Because of the pregnant teenager’s lack of ability to pay for their health care, the responsibility falls on the government through programs like Medicaid, which are programs funded by tax payers (Pregnant Teen Help, 2011).

After a thorough review of the literature, I found an abundance of researchers who took a biased approach on teenage pregnancy focusing on the negative outcomes (Ghose & Lopamudra, 2013; Kearney & Levine, 2012; Kirven, 2014; Koleva & Stuart, 2014; Lall, 2007; Meade et al., 2008; Penman-Aguilar, Carter, Snead, & Kourtis, 2013; Pires et al., 2013; Rajoriya & Kalra, 2015; Ventura et al., 2013; Wildsmith, Manlove, Jekielek, Moore & Mincieli, 2012; Yardley, 2008). I found few researchers who looked at the positive outcomes in an unfavorable situation by investigating the factors that enabled young mothers to overcome barriers, beat the odds, and become successful adults.
However, I did find a researcher (Taylor, 2014) who focused on three women who were teenage mothers but who overcame barriers and challenges to become productive and successful professionals. My study expanded upon Taylor’s research by conducting a deeper investigation to determine factors that enabled teenage mothers to become successful at becoming financially independent. By identifying the tools that some women used to enable them to overcome challenges associated with teenage pregnancy, other women may be able to use those tools to increase their will, hope, desire, and efforts to succeed.

**Purpose of the Study**

The purpose of this qualitative, phenomenological research study was to examine the lived experiences of women who were teenage mothers and who were ultimately able to independently provide financial support for themselves and their children. This research was conducted in Macomb County, Michigan; however, participants were from various locations within the United States. Macomb County is in the suburban area of Detroit, Michigan. The cities included Clinton Township and Mount Clemens; both are about 10 miles outside the city of Detroit. Teenage pregnancy in the United States is the highest among industrialized countries, to the point that teenage pregnancy has been viewed as a national epidemic (Faber, 2014). Previous researchers on the outcomes of teenage pregnancy and motherhood addressed the negative outcomes associated with it, such as the teenage mothers becoming high school dropouts, poor educational attainment, living in impoverished environments, and becoming a government liability (Hamilton & Ventura, 2012). In this research, I took a positive approach by determining the factors
that enabled some teenage mothers to become successful and financially independent adults.

**Research Question**

What are the factors that enabled former teen mothers to overcome the challenges of teen parenting to become successful, financially independent adults?

**Conceptual Framework**

Principles from social learning theory and resilience theory were used as the conceptual framework for this study. Principles from both theories were used to examine and explain the factors that enabled some teenage mothers to overcome some of the obstacles of teenage pregnancy and successfully become financially independent. The principles of social learning theory were used to provide some explanation of the social and cultural factors that may have contributed to the success of teenage mothers. Principles of resilience theory were used to explain the inner strength that enabled the teenage mothers to overcome challenges of teen parenting to become financially independent.

**Social Learning Theory**

According to Bandura’s (1971) social learning theory, people can learn by observing other behaviors. Most behavior is learned either deliberately or inadvertently through observation, modeling, and imitating the behavior of others. The unconscious decision rather to imitate behavior of model or not is based on the rewards and consequences associated with the behavior.
Researchers Akella and Jordan (2015) studied if children who were born of teenage parents were more likely to imitate early sexual behavior and motherhood displayed by their mother. Qualitative research, consisting of in-depth interviews, was performed with 20 participants. These researchers indicated that there was a connection between the environment of the teenagers and teenage pregnancy and strongly supported Bandura’s social learning theory (Akella & Jordan, 2015).

Attentional processes are very much a part of learning theory because individuals do not learn a process if they do not recognize it or pay attention the process (Bandura, 1971). The attentional processes associated with social learning theory can be used to explain why generations after generation of teenagers, within the same family, become teenage mothers. The principles of this theory were useful in explaining the phenomenon of successful teenage mothers. There is a more thorough review of the social learning theory and its relevance to my research in Chapter 2.

**Resilience Theory**

The principles of the resilience theory help to explain the strengths that enable certain individuals to become triumphant over personal challenges and obstacles (VanBreda, 2001). VanBreda (2001) stated that individual resilience provides is an internal state of hardiness, learned resourcefulness, self-efficacy, and stamina that endow an individual with a sense of coherence, a need to thrive, and a sense of personal causation. These principles can be used to provide possible explanations as to why some teenage mothers can achieve financial independence despite being faced with the challenge of being a pregnant teenager (VanBreda). The challenges faced by those with a
strong resilience are not any less than those with a lesser amount of resilience; it is just that they may have a greater determination to succeed, and their focus on their goals may be more precise. There is a more thorough review of the resilience theory and its relevance to my research in Chapter 2.

**Nature of the Study**

My reason for choosing a qualitative phenomenological approach for this study was to gather information from successful women who were teenage mothers to determine what factors enabled former teen mothers to overcome the challenges of teenage parenthood and become successful, financially independent adults. Studies using a qualitative approach studies are typically founded upon in-depth interviews, direct observation, and written documentation (Patton 2002). I employed a phenomenological, descriptive approach to examine the phenomenon of interest, which were the factors that contributed to the success of teenage mothers.

Phenomenological research is used to examine the essence of a phenomenon as experienced by a group of participants (Rolfe, 2006). Davidsen (2013) emphasized that the phenomenological approach can be used to investigate the humanistic portion of a phenomenon by focusing on two parallel currents. In this research, I analyzed the phenomenon of interest by reviewing environmental factors and outcomes of teenage mothers. Researchers use the phenomenological approach to analyze various related parallel movements of thought that are not homogenous but may have a similar point of origination (Davidsen, 2013). The phenomenological approach was useful in determining how former teenage mothers achieved financial independence.
I used purposive sampling to recruit participants from the Northeastern portion of the United States. Semi-structured interviews were conducted to collect information from participants regarding their experiences as teenage mothers and the factors that enabled them to successfully overcome related challenges. The interviews consisted of open-ended questions, followed by two summary questions that asked if there is anything else participants would like to add and whether participants had any questions for me. Interviews were audio-taped upon consent and subsequently transcribed verbatim.

**Definitions**

*Adolescent:* The period of teenage years between the age of 12 and 19 (East, Slonim, Horn, Trinh, & Reyes, 2009).

*Educational attainment:* The completed level of a high school education or its equivalence (Mollborn, 2007).

*Intergenerational cycle:* Daughters of teenage mothers who experience teenage pregnancy (Meade, Kershaw, & Ickovics, 2008).

*Socioeconomic status:* The educational attainment of the teenager and their parents, the families’ income, wealth, occupations, and community level financial or material resources (Penman-Aguilar, Carter, Snead, & Kourtis, 2013).

*Teen birth rate:* The number of births to women aged 13 to 19 per 1,000 (Hamilton & Ventura, 2012).

*Teenage pregnancy:* Pregnancy that occurs in a female below the age of 20 when the pregnancy ends (Ghose & Lopamudra, 2013).
**Assumptions**

Several assumptions are associated with qualitative research because some of the research is based on the views and interpretations of the participants (Patton, 2002). The data related to this research were the results of information filtered through the views and interviews of the participants; therefore, their stories cannot be proven or guaranteed (Creswell, 2009). Another assumption was that the participants would be honest when answering the questions; however, one of the limitations associated with data acquired through the interview process is that the information may be contingent upon the interviewee’s individual personal biases (Patton, 2002).

Patton (2002) stated that the validity of research based on an individual’s perspective cannot be determined. I also assumed that the findings of this qualitative research, based on a small sample size, could be transferrable to a larger population (Galvin, 2015; Patton, 2002). In addition, I assumed that some of the participants would have some common experiences, thus allowing me to uncover some common themes among the interview responses. Patton addressed this assumption by stating that “the world is patterned; those patterns are knowledgeable and explainable” (p. 224). Finally, I assumed that many of societal problems could be addressed and solved with the proper tools (Patton, 2002).

**Scope and Delimitations**

I aimed to examine the factors that enabled some teenage mothers to become successful mothers and financially independent adults despite the challenges and problems associated with teenage parenthood. The participants were adults over the age
of 18 who were unmarried teenage mothers between the ages of 13 and 19 years when they gave birth to their first child. The participants kept and raised their own child or children. These participants obtained financial independence before the age of 30 and were not on welfare assistance from the government at the time of the study. Data did not include the perspectives of the fathers of the children nor any other relative or support system of the participants. Only the lived experiences of the women who became mothers in their teenage years were included in this research.

Limitations

Qualitative research is assumed to have significant limitations because of the nature of the methodology (Rolfe, 2006). The validity of the approach is considered a limitation because it relies on the reported experiences of the participants as well as the researcher’s ability to interpret that information accurately (Nutt-Williams & Morrow, 2009). Because of this limitation, there could be some biases and some misconceptions that could introduce bias in the results. In this qualitative, phenomenological research, I used semi-structured interviews to collect data on the phenomenon of interest, which is the success of teenage mothers. Since I asked the participants to provide their subjective experiences, it was not possible to prove or disprove the validity of various perspectives because the process of qualitative research uses self-reflection (Patton, 2002). The data provided for the qualitative research was based on the testimonies of the participants and subject to their own recollection and/or biases (Patton, 2002). Another possible limitation of the study includes the authenticity of the interviews (Patton, 2002).
According to Patton (2002), the interview process has several limitations: The participant’s state of mind at the time of the interview is a limitation of the qualitative research. Emotions, anger, and anxiety may influence the responses given by the participant (Patton, 2002). In addition, Patton stated that the interview is based on the recollection of the participant, which may or may not be accurate; moreover, the responses of the participants may be affected by any biases or prejudices they may have. Lastly, how the participant reacts to the researcher may influence the interview as well (Patton, 2002).

**Significance of the Study**

This research contributed to social change by adopting a strengths-based approach for examining the successes of teenage mothers as opposed to taking a biased deficits-based approach for examining negative outcomes associated with teenage motherhood. A strength-based approach focused on the internal strength of the teenager to establish some positivity in their lives based on their own set of morals and values (Fenton, Walsh, Wong, & Cumming, 2015).

This strength-based approach will enable practitioners and society to understand the inner strengths that enabled these teenage mothers to persevere. Findings from this research could be used to show society that although teenage pregnancy may be viewed as an epidemic, it does not have to hinder the success of teenage mothers; they can become productive assets to society.

Information from this study was used to identify the factors that enabled teen mothers to overcome challenges they faced and became successful adults. Human
services professionals can use the information from this study to advocate for the provision of the support and resources needed that young mothers to succeed. Other professionals such as social workers, healthcare workers, and counselors can use information from this study to inform teenager mothers of resources they can use to help them achieve financial independence.

Professionals can use this information to help teen mothers establish goals and strategies to succeed as well as guide them in the direction of success. In addition, professionals could use the results from this study to help teenage mothers understand that although pregnancy is not an ideal situation, the associated challenges can be overcome. Teenage mothers are capable of leading successful lives as loving mothers, pillars, and successful women in society.

The results of this research can be used to inform society of the benefits of providing appropriate resources and support for teenage mothers to help them succeed. Society must become aware of the areas where teenage mothers are successful and recognize the resources that were instrumental in their success. This research can serve as a contribution; it can provide an opportunity for suggestions in establishing effective methods that enable the pregnant teenager or teenage mother to be successful.

**Summary**

In this chapter, I provided an introduction and overview for the research study. I provided information on the high rate of teenage pregnancy in the United States in comparison to other industrialized countries. Basch (2011) indicated that approximately one third of teenagers ranging from the ages of 13 to 19 years in the United States become
pregnant each year. This high rate of pregnancy continues to be higher in this country than in other industrialized countries (Basch, 2011). Researchers who have studied teenage pregnancy have indicated that most teenage mothers and their children become dependent on the government in the form of health care, food stamps, and financial assistance (Akella & Jordan, 2015; Basch, 2011; Minnick & Sandler, 2011). Although teenage pregnancy may not be an ideal situation for a teenager, it does not have to end in poverty and despair (Taylor, 2014). There is a gap in literature that addresses the successes and accomplishments of teenage mothers. The research question and the purpose of the study were identified in this chapter. In this chapter, I also reviewed how the rate of teenage pregnancy has an impact on society because of the medical challenges and financial obligations associated with teenage pregnancy.

The theoretical framework of the study was the social learning theory, which addresses how influential people provide role modeling or support for young mothers. The resilience theory was also included in the theoretical framework as providing an explanation as to why some teenagers are still able to succeed despite the challenges that may be associated with teenage pregnancy. In addition, I outlined the nature of the study as the phenomenological descriptive approach.

The most significant limitations of this research were the challenges associated with face-to-face interviewing. Interviewing is indicative of the qualitative approach, but the memory, personality, or current mood of the participant at the time of the interview can pose a challenge to obtaining good responses from participants. The assumptions, scope, and delimitations of this study were also addressed. Chapter 2 provides a list of
the literature pertaining to teenage pregnancy, some of the challenges associated with teenage pregnancy, and resources to help the teenager to be a successful parent. There is also an in-depth review of the challenges and factors associated with teenage pregnancy in Chapter 2.
Chapter 2: Literature Review

Introduction

Teenage pregnancy is defined as a teenage female becoming pregnant between the ages of 13 and 19 years and has been a long-standing national public concern in the United States (Akella & Jordan, 2015). The pregnancy of a teenage girl can lead to negative consequences as well as social problems for the teenager and her child (Akella & Jordan, 2015; Ventura et al., 2013). Some of the negative factors of teenage motherhood include the economic burden imposed on society due to the associated need for government provided welfare, health care, and dependency on food stamps (Buchholz & Gol, 2013; East, Reyes & Horn, 2007; Mollborn, 2007, 2010a; Schoon & Polek, 2011; Smithbattle, 2006). The negative outcomes associated with teenage pregnancy include poverty, lack of education, and physical and mental health issues for both the mother and the child (Ventura et al., 2013).

Being a teenage mother does not have to lead to a lifetime of poverty and disadvantages (Hudgins et al., 2014; Magness, 2012; Schoon & Polek, 2007). With the proper support, a pregnant teenager or a teenage mother can live a successful life with positive results (Buchholz & Gol 2013). The focus of my qualitative study was to determine the factors that enabled teenage mothers to overcome challenges associated with teen pregnancy to become successful, financially independent adults. The literature review includes current research as well as seminal research older than 5 years; older research was included in this literature review because of the lack of current research on
the topic and to provide support regarding the length of time that teenage pregnancy has
been of national concern.

**Literature Search Strategy**

The psychology databases I used for this literature review were PsycINFO, PsycARTICLES, SocINDEX, SAGE Premier, PsycEXTRA, and PsycCRITIQUES. This research consisted of data found in seminal and peer-reviewed articles on teenage pregnancy; documentation is also inclusive of information on motherhood and the associated factors of pregnancy and motherhood in the United States. I used the following terms as search words or phrases: *teenage pregnancy*, *teenage pregnancy in the United States*, *teenage pregnancy in America*, *teenage pregnancy and culture*, *the effects of teenage pregnancy*, *teenage parents*, *teenage parenting*, *teenage pregnancy prevention*, *sex education*, *economics success of teenage mothers*, *social learning theory*, *life course theory*, *social learning theory and teenage motherhood*, *life course theory and teenage pregnancy*, and *parenting* to establish a literature base.

**Conceptual Framework**

The social learning and the resiliency theories were selected to be used as my conceptual framework. The social learning theory was selected because it provides an explanation as to how influential people provide support and role modeling for young mothers. The resiliency theory was chosen because this theory provides an explanation as to why some teenage girls who become pregnant can succeed considering the challenges associated with teenage pregnancy and motherhood.
Social Learning Theory

Social learning theory serves as part of the conceptual framework for this study on the successes of teenage mothers in the United States. Principles from the social learning theory were used to provide an explanation of how people learn from observing the behavior of others (Bandura, 1977). In this study, I was concerned with the modeling, imitation, and reinforcement factors associated with the social learning theory.

New behaviors can be learned either through experience or direct observation of others called models. Individuals observe the behavior others and then mimic the behavior based on their perceived rewards or punitive consequences associated with the behavior (Bandura, 1977). A role model is an individual whom another person aspires to be like; thus, they tend to pattern their behavior like the role model. Wildsmith et al., 2012 conducted qualitative research that examined the importance of role models in the lives of adolescent girls, the influence that a role model had on the life of a young girl was analyzed. The methodology that was used in this research was personal interviews with adolescent girls who were in fourth and eighth grades. The findings of their research determined that role models were influential on the life ambitions of adolescent girls (Wildsmith et al., 2012).

Role models are influential in the lives of adolescent girls in negative as well as positive situations. When a girl finds someone that she considers as a role model, it is because of an aspect of behavior of the individual she idolizes and aspires to emulate (Wildsmith et al., 2012). Children and adolescents tend to imitate those whom they perceive to be like them, which is the reason for considering the observed individual as a
role model. The teenager’s perception of the role model is one of superiority, with the tendency to idolize the behavior of the individual (Wildsmith et al., 2012). The teenage mother’s idolized perception may be a positive factor in the attainment of their inner strength. The individual perceived as a role model for the young teenager may be an older sibling or one of their peers (Wildsmith et al. 2012).

Although exposure to observable behaviors is an essential factor in the social learning theory, exposure to behavior is not enough to elicit mimicking. Behavior cannot be learned if the attention, recognition, or retention processes are not used while observing a behavior (Bandura, 1971). If an individual does not remember the behavior and or the consequences, then it is unlikely to be repeated. When the positive behavior that leads to a teenage mother’s success is observed with an impactful influence, the observed behavior information is very likely to be retained and thus remembered; this is the retention process. This retention of information process makes the modeling or mimicking of the behavior most likely.

Several researchers have used principles of social learning as the basis for explaining the intergenerational cycle of teenage pregnancy (Assini-Meytin & Green, 2015; Christoffersen & Laustern, 2009; East et al., 2007; Florescu, Temneanu & Mindru., 2016; Meade et al., 2008). These researchers indicated that teens observe influential models, such as parents and siblings becoming teen parents, and then the teens and learn and imitate those behaviors (Florescu et al. 2016). East et al. (2007) conducted a qualitative study that examined the relationships between teen pregnancy and risky behaviors among siblings within a family. One of the criteria to be a participant in this
research was to have at least one older teenage daughter and at least one other biological younger sibling who had never been pregnant. East et al. indicated a positive correlation between the behavior of a younger sibling and the pregnancy of an older sibling.

The principles of social learning theory can be used in the explanation of the success of teenage mothers because the social learning theory suggests that people learn from each other (Chavis, 2012). Through observational learning, imitation, or modeling, teenage mothers can learn new behaviors that foster successful outcomes (Chavis). Sufficient support and encouragement can help the teenage mother to form a positive identity, increasing their levels of confidence and self-esteem (Wildsmith et al., 2012).

A positive environment can help the teenage mother to strive to emulate their role models in success and perseverance, thus enabling them to become financially independent members of society (Chavis, 2012). The principles of social learning theory can be applied to the successes of teenage mothers because of these factors. Social learning theory is based upon the concept of behaviors that influences and manipulates another individual, and new behavior is learned by observation, modeling, and reinforcement (Akella & Jordan, 2015). When a teenage mother finds a model whom she chooses to emulate, she observes the consequence of the model’s behavior and then imitates the behavior. This same rationale applies to the factors that enable a teenage mother to become successful by the modeling of others positive behavior (Akella & Jordan).
Resiliency Theory

The resilience theory was first introduced by Norman Garmezy, who was referred to as the grandfather of resilience theory by the New York Times, along with Emmy Werner, Ruth Smith, and Michael Rutter (Harlow, 2009). This theory originally started out in psychiatry and developmental psychology through the completion of a study on parents with schizophrenia (Harlow, 2009). The authors of this study focused on the children of schizophrenic parents and how well some children could adapt more so than others, despite being at an elevated risk for psychopathology. The theory of resiliency is based on Sigmund Freud’s theory that negativity experienced early in life has an impact on adult psychopathology (Harlow, 2009).

Resiliency is a dynamic process that enables an individual to persevere despite adversity and provides them with the ability to function above the norm despite challenging situations (Cheavens, Cukrowicz, Hansen & Mitchell, 2015). Resilience theory provides a change in research from a deficit-based approach that focuses on factors associated with psychopathology and maladaptive functioning, to an approach that focuses on people’s strengths and resources that enable them to engage adaptive functioning and experience positive outcomes when faced with challenges in life (Cheavens et al., 2015).

An essential factor in the resiliency theory is that individuals adopt the mindset that although their situation may seem hopeless, that there is still hope of a positive outcome (Cheavens et al., 2015). The resilience theory can be used to explain how individuals may set personal goals that provide them the tenacity to press on despite their
challenging circumstances (VanBreda, 2001). The resilience theory can also be useful in providing an explanation to the driving forces that enable some teenage mothers to become successful, despite the associated challenges of teenage pregnancy and motherhood (Wildsmith et al., 2012).

Wildsmith et al. (2012) used quantitative data from the National Longitudinal Survey on teenage childbirth to study motherhood in this group. The researchers revealed that teenage mothers experienced a higher level of short term socioeconomic disadvantages than women who delay pregnancy; and identified the resiliency theory as assisting the researcher in explaining some of the protective factors associated with positive outcomes in teenage pregnancy and motherhood (Wildsmith et al., 2012).

**Literature Review Related to Key Variables and/or Concepts**

**Teenage Pregnancy in the United States**

In a comparison of teenage mothers to older mothers, who postpone motherhood until later in life, the teenage mother is more likely to come from lower educational attainment with reduced income opportunities and a dependency on welfare and food stamps environment (Assini-Meytin & Green, 2015). According to Assini-Meytin & Green (2015), the negative impacts associated with teenage motherhood have a direct association with single parenthood of mothers who are the head of households and live in poverty (The National Campaign, 2012).

Past research showed that approximately 6% of teenage mothers received some government assistance within the first year of their child’s birth (The National Campaign, 2012). The report submitted by The National Campaign on teen childbearing indicated
that 55% of teenage mothers received Medicaid, and 3 out of 10 received food stamps within the first year of the birth of their child (The National Campaign, 2012). In addition, teen mothers are more likely to use illicit drugs such as alcohol, marijuana, and cocaine (Assini-Meytin & Green, 2015). Other impacts associated with teenage pregnancy are subsequent births, social isolation, and depression (Kleiber & Dimidjian, 2014). Teenagers, who give birth are five times more likely to have subsequent births before the age of 20 than those who were not teenage mothers (Kleiber & Dimidjian, 2014). Kleiber and Dimidjian (2014) stated that teenage mothers are less likely to sustain a stable friendships or intimate relationships, and they experience greater levels of postpartum depression than those who delay motherhood.

Teenage pregnancy has a greater impact on minority cultures and ethnic groups in the United States (Children Having Children, 2016). African American and Hispanic teenagers account for 35% of the nation’s teenagers; however, the rate of pregnancy for these groups, is 57% (Children Having Children, 2016). Teenage pregnancy among minorities tends to magnify other issues such as living in impoverished conditions and environments laced with alcohol and substance abuse, less educational attainment therefore, and higher rates of illiteracy (Children Having Children, 2016).

Teenage pregnancy not only has a negative impact on the teenage mother, it also has a negative impact on the child as well. The negative impact affects their physical health conditions, cognitive development, educational attainment, psychological impacts, as well as fostering integrational probabilities (Diaz & Fiel, 2016). Teenage pregnancy has become such an epidemic in the United States that it is now considered as a social
problem primarily because of the liability it poses on the public (Assini-Meytin & Green 2015; Buckingham-Howes, Oberlander, Hurley, Fitzmaurice & Black, 2011; Farber, 2014).

In 2014, 250,000 babies were reported to have been born to teenage mothers (Nall, 2016, p. 1); this number reflected a birthrate of 24.2 per 1000 in the age group of teenagers 15 to 19 years (Centers for Disease Control and Prevention, 2016). Hamilton and Ventura (2012) noted that teenage pregnancy rates have been declining in the US since the late 1950’s. Although there has been a reduction in teenage pregnancy, the rates for girls aged 15 to 19 years remains higher in the US than in other developed countries in the world (Akella & Jordan, 2015; Assini-Meytin & Green, 2015; Comlossy, 2014; Darroch, Singh, & Frost, 2001; Hamilton & Ventura, 2012; Kleiber & Dimidijian, 2014; Minnick & Shandler, 2011; Mollborn & Jacobs, 2011).

More than 29 of every 1,000 teenage girls between the ages of 15 and 19 years will give birth each year in the United States, in comparison to 25 per 1000 in the United Kingdom, 15, in Australia and Canada, less than 10 in Germany, and less than 5 in Japan (Comlossy, 2014). Kearny and Levine (2012) determined that teenage girls in the United States are more than twice as likely to give birth than Canadian teenagers, approximately four times more likely to get pregnant than teenagers in Norway and Germany, and the chances of an American teenager becoming a mother is 10 times more likely than teenagers in Switzerland (Kearny & Levine, 2012).
Impact of Teenage Pregnancy on Society

Assini-Meytin & Green (2015) have presented that teenage pregnancy has long-term socio-economic effects on the teenage mother as well as her children. Teenage pregnancy and early parenthood are significant life events that are related to negative consequences considered as challenges to socio-economic advantages (Assini-Meytin & Green, 2015). “Compared to nonteenage mothers, teenage mothers were more likely to be poor, live in a family dependent on welfare, live in a female-headed household during childhood, and have a mother who was a teen mother herself” (Assini-Meytin & Green, 2015, p. 532).

Hudgins et al. (2014) indicated that teenage mothers are more likely to need public assistance than older mothers. The exact outcome related to teenage births may vary from teenager to teenager depending on the teen’s circumstances (Penman-Aguilar et al., 2013). However, teenage pregnancy is a burden on taxpayers and society because it poses a social liability on them (Comlossy, 2014). The liability of teenage childbearing is associated with higher cost of health care, child welfare, and criminal justice services, which has been determined to be approximately $9 to 10 billion each year (Comlossy, 2014). The vast amount of this cost is the cost of health insurance, that is approximately 2$ billion each year, and the welfare assistance, that is approximately $3 billion each year (Comlossy, 2014).

Comlossy (2014) indicated that welfare dependency by teenage mothers may persist well into adulthood (Assini-Meytin & Green, 2015). Researchers who studied women who were aged 32 and 42 years, and were previously teenage mothers, have
presented that they were more likely to be unemployed, live in poverty, and continue to rely on government assistance than women who were not teenage mothers (Assini-Meytin & Green, 2015). The continued use of government assistance seems to be an intergenerational cycle that is initiated by the teenage mother—thus continuing the cycle of government assistance with a lack of work ethics (Edmark & Hanspers, 2015). Per Edmark and Hanspers (2015), children may follow the pattern of government assistance that is set by the parent because the parent is the role model for the child. This welfare dependent environment may have taught the child how the welfare system works and how it is beneficial. The cost of teenage pregnancy on society is partially due to the teenager dropping out of high school because of the pregnancy; it reduces their states future jobs and earning potential (Edmark & Hanspers, 2015, p. 2). This reduction in the states earning potential also causes a reduction in the state’s tax revenue, economic productivity as well as the states competitiveness ability.

**Ethnicity and Teen Pregnancy**

Akella and Jordan (2015) have presented that African American and Hispanic teenagers account for 57% of teenage pregnancies in the United States. In 2007, the birth rate for African American and Hispanic teenagers ages 15 to 17 years was 64 and 83 per 1000, in comparison to 21 per 1000 for white teenagers (Akella & Jordan, 2015, p. 42). Hamilton et al. (2015) reported the following teenage pregnancy rates per ethnic group for among teens age 15 – 17 years for 2014: White teenagers: 17.3 per 1000 births; for females aged 15-17; 34.9 per 1000 for African American females; and: 38 per 1000 for Hispanic females. Reed, Miller, and Timm (2011) indicated that one of the reasons that
African American adolescents are more likely to become teenage mothers is because African Americans value motherhood. African Americans place immense value on family and continuance; and the onset of pregnancy is an indicator of family growth and continuance (Reed et al., 2011). In addition, African Americans view motherhood as “the epitome of self-actualization” (Reed et al., 2011, p. 35).

The Center for Disease Control and Prevention (2016) reported the disparity in teenage birth rates in 2014 for teenagers aged 15-19 years being as follows:

- 12% for American Indian/Alaska Natives
- 11% Non-Hispanic African Americans
- 11% Asian/Pacific Islanders
- 9% Hispanics
- 7% Non-Hispanic Caucasians

Although there has been a decline in teenage pregnancy for all ethnic groups, ethnicity remains a factor in the various rates of pregnancy. Several researchers have indicated that teen pregnancy rates for African American and Hispanic teens have been consistently almost double the rate for White teenagers (Basch, 2011; Hamilton, 2015; Hamilton & Ventura, 2012).

**Impact of Teenage Pregnancy for the Mother and Child**

Teenage pregnancy can dramatically change the course of a young mother’s life (Nall, 2016). Teenage mothers and their children are viewed as an elevated risk for a range of negative outcomes (Langille, 2007; Magness, 2012). Magness also indicates that teenage pregnancy can negatively impact the health of the teenage mother and the
general well-being of the baby. The teenage mother is at a unique place because she has not fully matured into adulthood before taking on the responsibility of a child (Magness, 2012). The age of adolescence, from 13 thru 18 years, is an age that produces some extremely high risks of complications for the pregnant teenager. The difficulty during this time is because the teenagers are not physiologically, psychologically, or socially prepared for motherhood or the associated challenges of motherhood (Florescu et al., 2016).

**Physical health.** Teenage pregnancy may place young girls at risk for poor health because their bodies may not have fully matured at the time of pregnancy (Ghose & Lopamudra, 2013). Although an adolescent girl’s body experiences ovulation, the uterus is not fully matured until the age of adulthood, which may be around the ages of 18 through 20 years old (Buchholz & Gol, 1986 & Rajoriya & Kalra, 2015). Researchers, at the People’s College of Medical Sciences and Research Centre, who studied teenage pregnancy, delivery, and associated medical complications, conducted a study that indicated that the immature bodies of pregnant teenagers have a challenging time coping with the double burden of reproduction and growth (Rajoriya & Kalra, 2015). Rajoriya and Kalra concluded that pregnant teenagers experience some medical complications because their bodies are not yet ready for child bearing.

Of the 3,641 babies delivered during the time of the Rajoriya and Kalra (2015) study, 2.1% of the total deliveries were to teenagers. Of those deliveries, 13% were pre-term and 46% were caesarean sections. Fifty percent of the caesarean sections were due to cephalo-pelvic disproportion (pelvis too small to accommodate the birth of a child),
and 50% of the Caesarean sections were due to fetal distress (Rajoriya & Kalra, 2015).

At the time of this research, medical complications associated with teenage pregnancy and child birth were the leading cause of death for girls between the age of 15 and 19 years of age in developing countries. This research by Rajoriya and Kalra only included teenage mothers between the ages of 13 and 19 years; therefore, no additional information regarding the child birth of adult women was included. Rajoriya and Kalra also revealed that teenage mothers were more susceptible to anemia, pre-term labor, and two times more likely (than older women) to develop hypertension and other related conditions because of the pregnancy. According to the World Health Organization (2014), complications associated with pregnancy and childbirth was the second leading cause of death world-wide for teenagers between the ages of 15 to 19 years.

The risk of fatality during pregnancy is twice as great for teenagers between the ages of 15 and 19 years (49 per 1000) than for women in their early twenties (Ghose & Lompamudra, 2013; World Health Organization, 2014), in comparison to 12 per 100,000 in developed countries (World Health Organization, 2016). Anemia, preterm labor, as well as hypertension, are associated with pregnancy; and child birth is responsible for approximately 70,000 deaths of teenage girls in developing countries each year (Ghose & Lopamudra, 2013, p.1; Rajoriya & Kalra, 2015; Ventura et al., 2013).

**Mental health.** The adolescent years are accompanied by physical, cognitive, and emotional changes (Chico, Gonzalez, Steiner, & Fleming, 2014). The affect, decision making, and action elements are very critical in the development of adolescents (Chico et al., 2014). Researchers have indicated that although pregnant adolescents had a greater
amount of stress than their peers who were not pregnant, childbearing did not necessarily cause the psychological stress (Mollborn & Morningstar, 2009). Mollborn and Morningstar suggested that these teenagers may have already been stressed before their pregnancy.

Researchers who have studied the mental health of pregnant teenagers and teenager mothers determined that teenage mothers experience a greater amount of depression than adult mothers or nonpregnant teenagers (Hodgkinson, Beers, Southammakosane, & Lewin, 2017). Depression rates among teenage mothers’ range between 16% and 44%, in comparison to the life-time possibility of depression of 5% to 20% of nonpregnant teenagers. Koleva and Stuart (2014) presented a mixed-method study to determine the relationship between depression, demographic factors, and obstetrical risk factors for young mothers. Koleva and Stuart included 500 adolescent teenagers who were between four and 38 weeks pregnant. The teenagers completed the Beck Depression Inventory (BDI) as well as a demographic questionnaire. Koleva and Stuart found no statistically significant relationships between depression scores and demographic factors such as age, school attainment, and employment or marital status. However, the lack of social support and the stress associated with life emerged as predictors for depression in pregnant teenagers (Koleva & Stuart, 2014).

Easterbrooks, Kotake, Raskin, and Bumgarner (2016) conducted a longitudinal study on teenage mothers, under the age of 21 years who were at least 16 years of age. The purpose of this study was to determine the level of depression of adolescent mothers in the first 2 years after the birth of their child. The data for this research were collected
upon the initial enrollment in the study, 12 months, then again in 24 months (Easterbrooks, et al., 2016). Easterbrooks et al. indicated that there was evidence of depression in young mothers, but the depression was directly related to the level of support from the father as well as a sense of well-being with other support and living situations (Easterbrooks, et al., 2016).

**Poor nutrition.** It is not unusual for teenagers to exhibit poor eating habits and neglect to take vitamins before becoming pregnant, and they continue this behavior during pregnancy because they fail to understand the importance of good prenatal nutrition (Kirven, 2014). The high mortality rate of infants born to teenage mothers has been linked to low birth weight because of poor prenatal nutrition by the mother (Strunk, 2008). The proper diet for an expectant mother should include an additional 200 to 300 extra calories per day (Cleveland Clinic, 2016). The extra caloric intake should come from lean meats, low fat dairy, fruits, vegetables, as well as whole grain products (Cleveland Clinic, 2016). School based clinics can be very useful in the successful outcomes of teenage pregnancy (Strunk 2008). School based clinics can be very essential in educating the pregnant teenager about the importance of nutrition in the development of their unborn child as well as their own health (Kirven, 2014).

**Social stigma.** In the United States, there are stigmas associated with teenage pregnancy that may have a negative effect on the success of a teenage mother (Macvarish, 2010). Teenage pregnancy has been viewed by society as a violation of societal expectations; it is considered a violation of the cultural “norm” for a young, unmarried teenager to bear children (Mollborn & Denis, 2011). Teenage pregnancy
solidifies the fact that a teenager has been sexually active and thus violated societal
expectations and norms (Farber, 2014). Violations of societal expectations and norms can
lead to stigmas against those who violate the standards (Farber, 2014).

Yardley (2008) examined the experiences of stigma of 20 pregnant teenagers aged
16 to 19 years. The participants revealed that the stigmas associated with teenage
motherhood were manifested through labelling, stereotyping, separation, status loss, and
discrimination (Yardley, 2008). These teenage mothers reported that they were often
viewed as immature, irresponsible, unmarried, dependent upon government assistance,
and unfit mothers (Yardley, 2008). The general opinion or societal stigmas regarding
teenage pregnancy may cause barriers that ultimately hinder the teenage mothers’ success
(Mollborn & Jacobs, 2011).

The 1996 Welfare Reform Act was enacted because of pressure from the public to
limit welfare benefits to unwed mothers and by requiring them to live with a parent and
to be enrolled in school until graduation to receive benefits (Mollborn & Jacobs, 2011).
Many of the teenager mothers could not meet the requirements because they were high
school drop outs (Mollborn 2007). The reduction in financial assistance, caused by the
welfare reform act, added to the economic strain experienced by teenage mothers and
reduced the likelihood of their success (Mollborn & Jacobs). This is a prime example of
how stigmas and public opinion can set barriers against certain groups of people

**Disruption of education.** Several researchers have indicated becoming pregnant
as a teen disrupts a young girl’s education (Basch, 2011; Docksai, 2010; Mollborn,
2007). Basch (2011) reports that teenage mothers are 10% to 12% less likely to complete
their high school education than teens without children. In comparison to the 89% of women who were not teenage mothers, only 50% of teenage mothers receive a high school diploma by the age of 22 (The National Campaign, 2012). Coyne, Langstrom, Lichtenstein, and D’Onofrio (2013) have presented that girls who become pregnant during their teenage years received less of an education compared to women who delayed pregnancy until the age of 30. Less than 50% of teenage mothers complete their high school education, and only 2% of them had earned a college degree before age 30 (Docksai, 2010). This lack of formal education has a negative effect on the teen mothers’ chances of obtaining long-term career opportunities (Docksai, 2010).

Teen mothers experience disruption in their education because they have the primary responsibility of caring for a new baby (Penman-Angular et al., 2013). Teenage mothers may lack the child care support that would allow them to attend school. Although some teenage mothers may be married or cohabitating, they often have an even less chance for completing high school (Mollborn, 2010b). Without the needed support in caring for their children, teen mothers are forced to forego their education (Harden et al., 2009; Penman-Angular et al., 2013). Teenage parents may have less promising educational outcomes than those who were not teenage parents as “73% of all teenage parents have completed a high school degree or equivalent by the year 2000 (the final year of the wave), compared to 95% of nonparent” (Mollborn, 2010 b, p. 156).

Teenage mothers are less likely to complete a high school education than those who give birth later in life (Basch, 2011; Comlossy, 2014; Coyne et al., 2013; Ghose & Lopamudra, 2013; Hamilton et al., 2012). East & Barber (2014) suggested that many
teenagers either dropped out prior to the pregnancy or would drop out of school anyways because of numerous environmental disadvantages such as poverty and low educational aspirations. The stress and the disadvantages, associated with teenage pregnancy and motherhood may be alleviated if the educational systems were more supportive of the teenager’s educational aspirations and needs (Smithbattle, 2006). Although many pregnant teens may feel that they are being forced to leave school for a period because of discrimination by the public-school system, they are still more likely to return to school if there were supportive measures in place (Smithbattle, 2006). Elements in the teenagers’ environments, such as impoverished living conditions and inferior school systems, may also decrease their chances of going to college and obtaining employment that will support their family (Smithbattle, 2006).

**Poor employment opportunities.** Poor educational attainment has been linked to poor employment opportunities (Penman-Angular et al., 2013). Penman-Angular et al. (2013) attempted to determine whether there was an association between teenage pregnancy and socioeconomic status. Penman-Angular et al. found that unfavorable socioeconomic conditions, inclusive of employment opportunities, was the result of high rates of teenage pregnancy. Since postsecondary education is very important in the competitive employment market, a lack of high school education is very likely to cause the challenge of employment opportunities (Penman-Angular et al., 2013).

**Impaired social relationships.** Becoming a mother too early in life may have a negative impact on the social development of the mother (Ghose & Lopamudra, 2013; Hudgins et al., 2014; & Smithbattle, 2000). Mollborn and Jacobs (2011) examines how
social constraints that are associated with young motherhood puts a limit on the mobility and social life of teen mothers. This limitation was associated with the embarrassment that teenage pregnancy brings, the life interruptions, and birth complications that may be involved (Sodi & Sodi, 2012). Sodi and Sodi presented a qualitative retrospective study on the quality of life for teenage mothers in South Africa. These researchers found that teenage pregnancy and motherhood could result in missed opportunities in life causing the teenager to grow up fast-missing a lot of their adolescent years but, with support, these teenagers could overcome various challenges (Sodi & Sodi, 2012).

**Low socioeconomic status.** Penman-Aguilar et al. (2013) determined that pregnant teenagers are more likely to be high school dropout in comparison to their peers who did not get pregnant. In addition, pregnant teenagers are also less likely to be gainfully employed, putting them in a low socioeconomic status (Penman-Aguilar et al., 2013). Socioeconomics is inclusive of educational attainment of the teenager and their parents, their family income, wealth and occupation, and community-level (financial or material), resources (Penman-Aguilar et al., 2013). Interventions for teenage mothers have a positive impact on the teenagers, as well as effective in the elimination of disparities in teenage parenting.

Being a teenage mother interrupts the teens’ education and reduces their subsequent probable income by approximately $1,000 to $3,000 per year (Fletcher & Wolfe, 2008). Teenage motherhood also increases the probability of receiving government cash assistance. The World Health Organization (2014) presented that because many adolescent girls who become pregnant must drop out of school and
deficient education, they learn fewer skills that can lead to employment as well as decreased future educational opportunities. Teenage pregnancy not only effects the teenager and her family but also has a negative impact on the annual income she could make in her lifetime and the taxes she could contribute (World Health Organization, 2014).

Mollborn and Dennis (2012) presented a longitudinal qualitative study on the socioeconomic outcomes for teenage mothers and their children in comparison to older mothers and their children. Data for the study were taken from the Early Childhood Longitudinal Study-Birth Cohort of 2001. Mollborn and Dennis determined that children born to teenage mothers experienced a greater number of socioeconomic disadvantages compared to children born to adult mothers. In addition, the home environment and the maternal skills of the teenagers are reported as unfavorable. Teenage mothers also experienced economic strains because of reduced social programs and other financial resources (Mollborn & Jacobs, 2011).

**Inadequate parenting/nurturing skills.** Parenthood can be a stressful time especially for teenage mothers who have had to make a rapid and drastic role change. Such a drastic role transition may have a psychological effect on the teenage mother (Diaz & Fiel, 2016). Researchers have presented that teenage mothers frequently lack the necessary skills to effectively parent their children (Ghose & Lopamudra, 2013; Wildsmith et al., 2012). Teenage mothers may lack parenting skills because the teenage mothers are still adolescents and have not yet fully matured either physiologically or
psychologically. Therefore, the young mothers may not have developed the intellectual and emotional maturity that is required to raise children (Ghose & Lopamudra, 2013).

Teenagers are often unaware of the proper development of babies or issues that the babies may have in their developmental process (Strunk, 2008). The lack of maturity renders the teenage mothers unable to effectively nurture their infants or provide the necessary stimulation (smiling, touching, verbal communications, or sensitivity) for the child’s optimal development, which in turn may cause a deficit in the psychosocial development of the infant (Ghose & Lopamudra, 2013). Adolescent girls often have undeveloped cognitive and emotional maturity along with a lack of knowledge in child development (Dhayanandhan, Bohr & Connolly, 2014). Researchers indicated that children born to teenage mothers are more likely to suffer child abuse at the hands of their mothers than children born to older mothers (Dhayanandhan et al., 2014). Children of teenage mothers are more prone to child abuse because the teenage mother is unable to adequately handle the challenges associated with their own development coupled with the development of their children (Dhayanandhan et al., 2014). Additional research by Bartlett and Easterbrooks (2012) indicated that 80% of child abuse was at the hands of the parents and that more children born to teenage mothers are abused than those born to older mothers.

Chico et al. (2014) presented a study that examined the maternal sensitivity of teen mothers during two home visits conducted approximately two weeks apart. The first visit consisted of researchers obtaining informed consent from the mothers. On the second visit the mothers were just informed to spend time with their children and remain
within camera view. After less time than 30 minutes, the teenage mothers in the study were asked to complete a survey while the infants were still with them. The authors indicated that in comparison to adult mothers, teenage mothers expressed a lack of maternal sensitivity in dealing with their infants (Chico et al., 2014). Teenage mothers exhibited less affection towards their infants, less positive facial expressions, and less verbal and emotional responsiveness to their infants, than mothers who were adults.

School-aged children who were reared by nurturing mothers early in life had brains with a larger hippocampus, which is essential to learning, memory, and stress responses. Nauert (2012) determines the level of nurturing a child received from a parent by videotaping parent/child interactions during a stressful situation. If a teenage mother can provide an emotionally supportive and cognitively stimulating environment, their children are more likely to have fewer behavior issues and better outcomes than parents who provide a home environment with low stimulation (Nauert, 2012; Wildsmith et al., 2012).

**Impact of Teenage Pregnancy on the Child**

The children of teenage mothers are presented with greater challenges than those of older mothers (Nall, 2016). Researchers have presented that teenage mothers do not have the necessary intellectual or emotional maturity to support their developing babies; which in turn, may have a negative impact on the development of the child (Ghose & Lopamudra, 2013). In addition, more researchers have presented that children born to teen mothers experience many negative outcomes such as inadequate nurturing, poor cognitive development, and poor physical health (Chico et al., 2014; Coyne et al., 2013;
Hudgins et al., 2014; Nall, 2016). Children born to teenage mothers are reported to have a greater risk of behavioral problems, which lead to mental well-being treatment, than children born to older parents (Turner, Grindstaff, & Phillips, 1990; Wildsmith et al., 2012).

**Cognitive development of the child.** Several researchers have presented that babies born to teenage mothers often have developmental issues and exhibit poor academic performances later in life (Jahromi, Umana-Taylor, Updegraff, & Zeiders, 2016; Strunk, 2008). Children born to teenage parents may also have the additional risks of adverse social, cognitive, and behavioral outcomes (Keown, Woodward, & Field, 2001). Researchers have presented that children of teen mothers are more likely to have delayed language abilities that may later contribute to learning disabilities (Jahromi, et al., 2016; Keown et al., 2001). In addition, infants born to teenage mothers are more likely to have developmental disabilities and learning difficulties in preschool (Mollborn & Dennis, 2012). These children may suffer from learning disabilities such as malformations, psychosomatic developmental delays, disabilities in growth and behavior as well as delayed speech (Florescu et al., 2016).

**Physical health concerns for the child.** Data from medical reports have linked teenage motherhood to several physical health conditions for the children (Nall, 2016). Nall (2016) concluded that teenage pregnancy may lead to mental health conditions for the mother, less job opportunities, as well as negative aversive impact on their health. Nall also stated that although teenage pregnancy may pose some difficulties, awareness
of the difficulties and the available resources can be very beneficial for the mother and child.

Infants born to teenage mothers are often underweight at birth, which may cause the babies to have developmental issues as well (Mollborn & Dennis, 2012). Babies born to teenage mothers are often predisposed to childhood illness, and they are more susceptible to diseases associated with premature births and low birth weights (Coyne et al., 2013; Ghose & Lopamudra, 2013). The higher rates of premature births and low birth weight associated with teenage pregnancies increases the chances of the babies having blindness, deafness, chronic respiratory problems, cognitive impairments, mental illness, cerebral palsy, dyslexia, and hyperactivity (Webb, Passmore, Cline, & Maguire, 2014). Ghose and Lopamudra (2013) concluded that the high risks of diseases associated with teenage pregnancy can be eliminated with the proper obstetrical and delivery care.

Other disadvantages of children born to teenaged mothers. Adolescents born of teenage mothers are at greater risk of adverse outcomes than adolescents born to adult women for several reasons (DeGenna, Larkby, & Cornelius, 2011). The primary reasons for the disadvantages are that the adolescent has not yet fully developed either physically, cognitively or emotionally (Upadhya & Ellen, 2011). The lives of children born to teenage mothers are often filled with social and financial disadvantages (Mollborn & Dennis, 2010). According to Barnes and Morris (2012), 10% of American children are born to a teenage mother.

Early motherhood has an impact on the family environment and child delinquency, which in-turn, can impact the behaviors and attitudes of the children born of
teenage mothers; thus, influencing the risk of various negative outcomes (Barnes & Morris, 2012). Not only does young motherhood have an impact on their first birth, it may also have an impact on subsequent births (regardless of the mother’s age) because of the early first birth. Outcomes like poverty, welfare dependency, unemployment, childhood delinquency, and intergenerational pregnancy will have an impact on the entire household because of the mother’s initial early pregnancy (Barnes & Morris, 2012).

Breheny and Stephens (2008) defined teenage motherhood as a social problem that is correlated with insufficient psychological functioning and parental skills (Breheny & Stephens, 2008). Teenage motherhood is also a cycle of disadvantages that include intergenerational teenage motherhood, low socioeconomic status, unemployment, child abuse and neglect, inadequate parenting skills and a lack of educational attainment (Breheny & Stephens, 2008). Because most teenage pregnancy is unplanned or unintended, the risk of negative outcomes for the baby are intensified (Barnes & Morris, 2012). The stressful home environment that is often associated with teenage single-parenthood can contribute to the adolescents being at greater risk of early puberty, early sexual activity, drug usage, gang membership, dropping out of school, and ultimately becoming teenage parents themselves (DeGenna, et al., 2011).

DeGenna, Goldschmidt, and Cornelius (2015) revealed that teenage mothers are more likely to use marijuana than older mothers. The use of marijuana by the teenage mother has been associated with early sexual behavior of their children (oral or vaginal by age 14). Maternal substance abuse has been associated with unprotected sexual behavior in the children of teenage mothers (DeGenna, et al., 2011).
Strengths and Successes of Teenage Mothers

The first step on the road to financial and social success is educational attainment (Taylor, 2014). A teenage mother returning to school after the birth of a first child has a positive impact on several factors. The continuance of education may decrease the likelihood of subsequent births as an adolescent, improve her socioeconomic conditions; and potentially improve academic and behavior outcomes for her children (Magness, 2012).

Smithbattle (2006) acknowledged the challenges for teenage mothers but pointed out that teenage mothers could become successful when provided with certain resources. Some of the resources that can assist in the success of teenage mothers are good educational attainment, adequate employment, and emotional support (Taylor 2014). Taylor also posited that young teenage mothers can experience successful outcomes with the assistance of structure, determination, and their own internal drive.

Mangino (2008) presented a qualitative study with five participants who were pregnant teenagers in high school to determine why some teenage mothers could overcome the challenges of teenage pregnancy and graduate high school. All the women in the research indicated that having a teen-parent-counselor as life coach was helpful (Mangino, 2008). The purpose of the life coach was to assist in resolving personal, emotional, and lifestyle issues (Mangino, 2008). Mangino stated that the triangle of support represented three areas of inquiry which were school related, economic, and personal. The presence of only two of the components in the triangle of support may allow the teenage mother to be successful; however, if two of the components are not
present at all, the pregnant teenager is bond for failure. Mangino presented that success is contingent upon the active contributions of the school, personal, and economic components (Mangino, 2008).

In my search for literature related to the research on the successes of teenage mothers, I found a few researchers who focused on the positive aspects of teenage pregnancy using qualitative studies (Hudgins et al., 2014; Magness, 2012; Mollborn, 2007; Mollborn & Jacobs, 2011; Schoon & Polek, 2010; Smithbattle, 2006; Taylor, 2014). These authors have presented that with an adequate support system (i.e. family and social) and education, teenage mothers are more likely to be successful than they would be without these support systems.

According to Hudgins, Erickson, and Walker (2014), the Georgia Campaign for Adolescent Power and Potential (GCAPP) (a nonprofit state-level organization), was developed in 1995 to provide housing and support for teenage parents. This organization was established due to the abundance of teenage pregnancy in the state of Georgia (Hudgins et al., 2014). The services provided at GCAPP include mentoring, financial education, volunteerism, career support, and employment through the partnering of other community service (Hudgins et al., 2014). The average length of stay in the homes was 8 to 9 months, and 93% of the teenage mothers were either able to obtain their General Educational Development (GED) or a high school diploma. After 11 years of implementation of the GCAPP, an evaluation indicated that most teenage parents were succeeding in life (Hudgins, et al., (2014).
There is limited literature that has focused on the successes of women who were pregnant teenagers (Magness, 2012). Although teenage pregnancy and motherhood may not be an ideal situation for a young girl, the situation does not have to be viewed as a tragedy or misfortune (Magness, 2012). Magness (2012) presented that for health care providers can be very useful in advocating for post birth support programs for teen mothers such as school-based support, parent-support, and child care centers. Such programs can help to brighten the outcome of the teenage mother and her child (Magness, 2012). Support programs can help to increase high school attainment rates as well as the rates of good employment opportunities (Magness, 2004). Although teenage mothers may have a great amount of difficulties in their lives, some of them are resilient and determined to succeed over the many adversities they may encounter (Mollborn & Jacobs, 2011; Wolin et al., 1998).

“We’ll figure a Way: Teenage Mothers” is literature that addressed the experiences of teenage mothers in a shifting social and economic context by analyzing the economy and social context that calls for a renewed assessment of the consequences of early motherhood (Mollborn & Jacobs, 2011). Mollborn and Jacobs discussed how the economy and social strains on teenage mothers have become intertwined based on the Welfare Reform Act of 1996 (Mollborn & Jacobs, 2011). Becoming a mother at an early age can be particularly stressful on the teenage mother; they need the financial and material support of others to be successful mothers (Mollborn & Jacobs, 2011). Teenage mothers often must rely on their families and the father of the child for support.
Schoon and Polek (2010) commented on the challenges associated with teenage pregnancy, but these researchers chose to focus on the strength of teenage mothers as opposed to their misfortunes and deficits. The main goal of Schoon and Polek was to address the pathways of economic well-being in teenage mothers. The researchers revealed that the primary factor in teen mothers obtaining success was economic and psychological wellbeing (Schoon & Polek, 2010).

Teenage mothers who can overcome challenges associated with teenage pregnancy are the ones who are able to continue their education and obtain employment (Schoon & Polek, 2010). SmithBattle (2006) suggested that the chances of teenage mothers finishing high school, attending college, or obtaining a good education, are very unlikely. However, high school nurses could help teenage mothers accomplish their dreams of completing high school and teach them the skills needed to be a good mother (SmithBattle, 2006). The role of the high school nurse can also instrumental in directing teenage mothers to resources for gainful employment opportunities (SmithBattle, 2006).

Taylor’s (2014) research on the challenges of three women who were teenage mothers revealed how these women could overcome their challenges and make a successful life for themselves and their children. The researcher indicated that support from family and a desire to obtain more for themselves and their children motivated the women to succeed. These women were all able to receive a higher education and obtain good employment (Taylor, 2014). One of the women is now the founder of a girl’s support group which is designed to help girls follow their dreams and reach their goals (Taylor, 2014).
Summary

The United States continues to have the largest rate of teenage pregnancy of any other industrialized country (Hamilton, et al., 2015). Teenage pregnancy is a national concern in the United States because of the social and economic ramifications involved. Teenage pregnancy may cause short term economic disadvantages, but the long-term ramifications are much better. Researchers have presented that by the time these teenagers reach a mature adult status they are as financially stable as their peers who did not have babies at an early age. In addition, the responsibility which comes with being a young teenage parent may force the teenager to grow up sooner than they would have normally. Often their tenancy and resilience are factors that causes unexpected respect from their environment. Though teenage pregnancy is not an ideal situation, it does not have to be viewed as a totally negative situation. Chapter 3 discusses the research methodology that was used for this study.
Chapter 3: Research Method

Introduction

Teenage pregnancy is defined as a teenager becoming pregnant between the ages of 15 and 19 (Ventura & Hamilton, 2013). Researchers indicate that approximately one third of teenagers in the United States will become pregnant again after having their first child (Basch, 2011). Teenage mothers face more socioeconomic disadvantages in comparison to women who delay motherhood until later in life (Wildsmith et al., 2012). Wildsmith et al. (2012) indicated that the reason for the socioeconomic disadvantage is the result of the lack of sufficient educational attainment and thus the lack of sufficient employment, which may lead to a life of insufficient means and poverty.

The primary purpose of this qualitative research was to determine what factors enabled former teen mothers to overcome the challenges of teen parenting and become successful, financially independent adults. The findings from this study are instrumental in addressing a gap in literature that addresses the personal strengths that enable teenage mothers to overcome obstacles and challenges to become successful. Success in this research is defined by the mothers being able to financially provide for themselves and their children without the aid of government assistance.

In this chapter, I present details of the selected research design, the rationale for the research design, my role as a researcher, as well as the research approach that was used in this study. I also present information on the data collection procedures, the processes used to recruit participants; as well as the instrumentation and techniques used to gather data and analyze data. I also address issues related to how the trustworthiness of
the data were addressed. In addition, I discuss the ethical issues and considerations that were taken as well as a discussion on trustworthiness.

**Research Design and Rationale**

The purpose of this qualitative, descriptive phenomenological study was to explore the lived experiences of women who were teenage mothers and who subsequently overcame the challenges of teen pregnancy to become financially independent adults. The following research question was addressed: What factors enabled former teen mothers to overcome the challenges of teen pregnancy and parenting to become successful, financially independent adults? Success was defined as the teenage mother being able to obtain a high school education, secure gainful employment, and provide financial support for herself and her child(ren) without the aid of government assistance (i.e., Medicaid, Aid for Dependent Children, food stamps, or Electronic Benefits Transfer card).

The qualitative research design provides an effective method for examining the behaviors, values, and morals of an individual or group, in relation to social or human problems; and it also enables researchers to gain some insight into the experiences of participants by examining the participants’ stories (Cokley & Awad, 2013; Creswell, 2009). The qualitative method was the best research method for this study because it enabled me to analyze the similarities and differences in a teenage mother’s successes or failures to determine the factors that were instrumental in enabling them to become financially independent. The phenomenological approach takes into consideration the humanistic aspect of the phenomenon for collecting and analyzing data and results; it also
allows for the interpretation of the lived experiences of a population (Davidsen, 2013). This approach was useful in my research in terms of identifying the common factors that impacted the success of teenage mothers (Davidsen, 2013).

The descriptive phenomenological approach best served this research because the study was primarily a nonnumeric and inductive type of framework that used descriptive knowledge for interpretation of meaning on participants’ (Landrum & Garza, 2015). The descriptive approach was very useful in providing detailed data regarding the successes of teenage mothers and how the success was obtained. These data were reviewed to identify variables in the lives of the successful teenage mothers that were parallel and related (Davidsen, 2013).

**Role of the Researcher**

The role of the researcher is one that is very important in qualitative phenomenological research; and my role required me to thoroughly examine the phenomenon by adapting an attitudinal shift in how I viewed teenage pregnancy (Patton, 2002). Patton (2002) considered the phenomenological attitude as the attitudinal shift needed by the researcher to effectively analyze data in a nonprejudice manner. The priority of the researcher in phenomenological analysis is to use epoche (Patton, 2002). Epoche was defined by Patton as the process that enables a researcher to refrain from judgment and to perceive data in a nonjudgmental, nontraditional manner. This attitudinal shift enables a researcher to be aware of any personal prejudices, assumptions, and viewpoints about the phenomenon. It is also the role of the researcher to identify and
address his or her own personal values, biases, and assumptions at the beginning of the research.

Epoche helped me to achieve a nonprejudicial attitude by taking an internal analysis to determine my own biases and prejudices and put them aside (Patton, 2002). As a researcher, my role was to collect data via interviews and questionnaires as well as to determine the tool that would provide the best efficiency for the collection of data. It was also my responsibility as the researcher to provide an analysis and categorize the data to ensure that all ethical guidelines had been met to protect the safety of the participants.

**Methodology**

**Participation Selection Logic**

The targeted population of participants for this study were women between the ages of 20 and 45. The participants could no longer be teenagers, and a crucial factor in purposeful research is for the participants to all be within context (Patton, 2002). The participants must all fit within a category or group (Patton, 2002). Participants had to be fluent in English and had to be residents of the United States. As a part of the inclusion criteria, the women had to currently live independently (not with parents) and must have been single at the time of their child’s birth (unwed teenage mother). The participants must have been unmarried teenage mothers who gave birth to their first child when they were between the ages of 13 and 19 years old. The women must have kept and raised their child(ren). Lastly, the participants must have been healthy adults and must not have had any emotional/mental disabilities.
Participation in the study was voluntary, and I had no any way of knowing whether volunteers had any emotional or mental disabilities. The research risk was minimal, and participants could drop out of the research at any time. The participant recruitment process focused on women who were previously teenage mothers but who became financially independent women. For this research study, success was defined as financial independence; this state of independence was established by the mother being able to provide for herself as well as her children without the aid of government assistance or other welfare program.

**Participant Recruitment**

Participants for the study were recruited from a church located on the north-end of Detroit, Michigan, and from the Walden participant pool, which consisted of participants from various locations within the United States. I obtained a letter of cooperation from the church to recruit participants. The approval letter from the church may be found in Appendix A. Flyers were posted on the church’s bulletin boards. My email address and phone number were included on the flyers as contact information for individuals who were interested in participating in the study. A copy of the recruitment flyer can be found in Appendix B. Want ads were placed in two local newspapers within Macomb County, Michigan. A copy of the want ad can be found in Appendix C.

**Sampling Strategy**

Purposeful, convenience, and snowball sampling were used to recruit participants for this study. Purposeful sampling is useful in qualitative research because it provides an effective method for recruiting only the participants that fit the participant inclusion
criteria for the study (Creswell, 2009). Purposeful sampling is the process used in qualitative researcher that enables the researcher to recruit the participants that will best serve in helping the researcher to understand the problem and research question (Creswell, 2009). Convenience sampling allows the researcher to select participants in a convenient and inexpensive manner by utilizing participants who are conveniently available (Stangor, 2011).

Both purposeful and convenience sampling allowed me to recruit only the participants that fit the criteria of financially successful women who were teenage mothers. Snowball sampling is considered as a form of convenience sampling that is useful in reaching a diverse or difficult to reach population (Handcock & Giles, 2010). The participant recruitment process also involved in snowball sampling, which is a type of sampling that enlists the initial participants in a study identify and recruit others who met the inclusion criteria for participating in the research (Handcock & Gile, 2010).

**Sample size.** Patton (2002) indicated that a small sample size in research allows the researcher to focus on participants in depth and in careful detail; therefore, the sample size was 15 participants. The goal of sampling in qualitative research is to ensure that the sample is not too small to achieve saturation and not so large that it is difficult for the researcher to do deep case analysis (Onwuegbuzie & Leech, 2007). Patton (2002) explained that the goal the goal in qualitative research is to achieve redundancy to the point that sampling is completed because of no additional information being obtained.

**Institutional Review Board for Ethical Standards in Research (IRB).** Per Walden’s information on research ethics and compliance, I had to obtain IRB approval
before any data could be collected, my IRB approval number is 09-19-17-0135119. I submitted my IRB application along with my proposal and my dissertation checklist. The proposal was submitted to the IRB through email irb@waldenu.edu. The purpose of the IRB is to review and check for compliance with ethical procedures and guideline on research conducted utilizing human subjects (American Public University Systems, 2016).

**Data collection.** Before data was collected from participants, I conducted a screening process, because to participate in the research study the participants had to meet a specific criterion. The screening process, which consisted of a group of demographic questions, was given to the prospective participants. The questionnaire highlighted those individuals who met the required criteria and eliminated those who did not meet it. Women who were not single teenaged mothers; who did not raise their own children; or who were not able to obtain financial independence were screened from the process. A copy of the demographic questionnaire can be found in Appendix D.

Data for this study were collected through semi-structured interviews that were conducted in accordance with the interview protocol. The interview protocol is a guide designed to enable the researcher to stay focused, on course, and consistent with the interviewing process. The interview protocol helps the researcher to be consistent in the questioning of the participants (Patton, 2002). A copy of the interview protocol can be found in Appendix E. Interviews were conducted via telephone, in my home office.

Field notes of each participant interview were taken in a focused and strategic manner. To ensure documenting exactly what was said, I used a recording device and
added side notes to illustrate emotions, key phrases, and vocal tones. Taking notes can assist in leading to additional questions regarding previous interview questions (Patton, 2002). In addition, the participants were advised of their interview being recorded as a means of insuring accuracy.

There was a pre-determined time limit per interview to allow for structure and consistency, as well as for respect and consideration for the participant’s time. I anticipated that the interviews would take between one and two hours. However, the time limit allowed for flexibility and did not take more than 30 minutes. During the interviews, participants were given the opportunity to discuss factors that may have been instrumental in their success of overcoming the challenges associated with teenage motherhood. At the end of the interviews, the participants went through a prompt debriefing process where they were given the opportunity to ask any questions regarding the research (Bersoff, 2008).

I took field notes to record information in addition to the use of a recording device because a recording device cannot capture certain factors, such as any emotions, changes in voice, that the participants might display during the interview. This information is important in helping to establish honest and concise information (Patton, 2002). Patton (2002) presented that field notes are a crucial factor in the research process because they allow the researcher to provide a description of what is happening during the interview; field notes is also where the researcher documents everything that they think is noteworthy during the interview (Patton, 2002). However, all interviews were taken over the telephone so the content for field notes were limited.
**Instrumentation.** The primary data for this research was collected using a semi-structured interview and a demographic questionnaire. An interview protocol which included open-ended questions was used as a guide for the interviews. An important advantage to using an interview guide is that it helps the researcher to stay on course by asking consistent questions to all participants. In addition, the interview guide affords the researcher the advantage of using their limited time in the most effective manner (Patton, 2002). A copy of the interview guide can be found in Appendix E and a copy of the demographic questionnaire can be found in Appendix D. The frequency of the interview sessions was only once per participant, no additional contact was needed for clarity. The semi-structured interviews were collected by me, the researcher, with the aid of a recording device.

**Exit strategy.** The exit strategy included a debriefing that reiterated the purpose of the research, a reviewing process of the notes to ensure correct information, as well as to reiterate the participant’s role in the research. In addition, the exit strategy included a reminder that confidentiality is a priority. Confidentiality was maintained through the limited use of names and any personal identifying information regarding the participants. No names were shared with professors or peers. In addition, all documentation was stored in a locked and secured location (keyed file cabinet) and any unnecessary information that was not pertinent to the research was shredded. During this debriefing, any misconceptions was addressed to ensure clarity of the research and their contribution to the study (Bersoff, 2008).
Data analysis plan. The primary step in the data analysis is to have the interviews recorded and then to organize the data by comparison of specific cases (Patton, 2002). The second step in the data analysis plan was to organize the data into a coherent framework that facilitated the actual data analysis (Patton, 2002). An effective method for initially organizing data is to organize according to the questions used during the data collection (Patton, 2002). During the first step of data analysis, I used research questions as an organizational tool to arrange participants’ responses to each interview question in a manner that will facilitate subsequent data analysis.

The data was coded via Statistical Package for the Social Sciences (SPSS) Text Analytics. This software was used to identify similarities between the participants that may have contributed to their successes as well as themes between participants and interviews. Any discrepancies or ambiguous information was addressed when found through interview validation with the participant.

Process and Steps of Analysis

The data was analyzed using a qualitative method because this study is to determine the commonalities involved in teenage mothers becoming successful women. Creswell (2009) recommended presenting the steps involved in the analysis in a step by step manner to allow the reader to follow the analytical process. Notes were taken during the interview process that indicated a connection to the research question. Inductive analysis is one of the key functions of qualitative research (Patton, 2002). The process of inductive analysis involves identifying themes, similarities, as well as discrepancies. After similarities had been identified, the significance of the similarities was reviewed to
determine their relevance to the research. The actual coding process consisted of the categorization of significant themes which were research relevant.

Outline of data steps and process.

Step 1: Review collected interview data

a. Listen, transcribe and take anecdotal notes

b. Prepared interview details through individual participant stories

Step 2: Analysis of interviews

a. Research questions

b. Look for emergent themes and differences

St. Pierre and Jackson (2014) suggest that acquired data must be dissected into smaller pieces to thoroughly examine and compare similarities, as well as dissimilarities, before labelling and coding for analysis identification. The labelling of words is considered as coding, and can be done through numbers; thus, I was able to count the codes as a way of determining a theme (St. Pierre & Jackson, 2014). Coding is also inclusive of identifying a pattern involving frequency, correspondence, and causation (Strauss, 1987). The comparison and analysis of data involves labelling and categorizing the data (Cho & Lee, 2014).

Cho and Lee suggested the following steps for data analysis:

a. Compare incidents applicable to each category

b. Integrate categories and properties

c. Delimitation of the theory

d. Writing the theory
After the process of coding was completed, I sorted words or phrases into categories, and then put into themes (St. Pierre & Jackson, 2014).

**Issues of Trustworthiness**

Trustworthiness in qualitative research is important because it addresses the researcher’ credibility and accuracy in reporting the testimonies and experiences of the participants in a fair, balanced, conscientious, and objective manner (Patton, 2002). Patton (2002) stated that the trustworthiness of data is directly related to the trustworthiness and competence of the researcher. Trustworthiness is comprised of four specific elements: credibility, transferability, dependability, and confirmability (Patton, 2002). There are specific tools and processes that researchers can use to enhance each element of trustworthiness in qualitative studies (Patton, 2002).

**Credibility**

Credibility in research is the process of ensuring that the information being reported is credible or believable (Nutt-Williams & Morrow, 2009). In this research, I addressed the issue of credibility by using the three common techniques for assessing trustworthiness as suggested by Nutt-Williams and Morrow: (a) integrity of data; (b) ensuring a balance between reflexivity and subjectivity (c) and communicating clear findings.

Credibility can also be accomplished through researcher reflexivity and subjectivity (Nutt-Williams & Morrow, 2009). Reflexivity considers how the researcher perceives the participant’s meaning of a statement; and subjectivity is defined as the researcher’s interpretation of the participant’s statement. There must be a balance
between reflexivity and subjectivity. The process of being reflective involves the researcher evaluating the research from time to time as it begins to take shape. Shenton (2004) indicates that the reflective process may be magnified as the researcher indicates their initial impression of the data and the patterns that evolve as more data is collected. To ensure reflexivity, I had pre-selected “milestones” after each interview, where I took inventory of the data interpretation. Each interpretation was compared to the previous ones as I advanced forward.

As a researcher, it was necessary that I stay neutral and objective in the entire researching process. My own values, thoughts, and opinions had no place in research. It was also imperative that I remembered to stay in touch with my own perspectives on the research topic. A very important tool that enabled me to stay neutral regarding my research was to stick to the facts with the use of triangulation. By only reporting the data that had been acquired from and by the participants, and only using supporting documentation enabled me to remain neutral.

Objectivity refers to a researcher’s ability to reframe from the influence of personal self in the research process (Kayes & McPherson, 2009). To maintain objectivity, I had to refrain from imposing my own ideas, thoughts, and opinions on the subject. I also strived to analyze the findings in a nonpartial and nonjudgmental manner. Throughout the process, I made mental notes to myself that I am not here to judge, but rather to gather useful information regarding teenage mothers.

Another aspect of credibility relates to the value the research would be to society. It is important that the researcher communicates the findings and importance of the
findings in a clear manner (Nutt-Williams & Morrow, 2009). The interpretation of the
document must be clear; with evidence indicating that the research question was
answered (Nutt-Williams & Morrow, 2009). Triangulation was also used to enhance the
credibility of my research.

Triangulation is a strategy that is instrumental in qualitative research because it
helps to provide credibility (Shenton, 2004); “Triangulation strengthens a study by
combining methods. This can mean using several kinds of methods or data, including
using both quantitative and qualitative approaches” (Patton, 2002, p. 247). Per Patton
triangulations may consist of the comparison and integrating of data collected via
qualitative methods. The triangulation I used for this research was the data collected from
participant interviews, literature and supportive theories.

**Transferability**

Transferability addresses whether findings from the research can be duplicated
on a wider population (Shenton, 2004). The specific strategies that I used to establish the
potential for transferability are outlined below:

1. Reporting the number of participants who participated in the research,
   including demographic information about the participants.
2. Documenting the amount and length of research data collection (the length of
time in days that was involved in the interviewing/data collection process).
3. Specifying he period of data collection.
4. Providing a full description of the research methodology used in the study
Dependability

Dependability in qualitative research addresses the issue of replication or the degree to whether similar findings would be obtained if the research was repeated using the same methods and participants (Shenton, 2004). It is essential that the process used in the research is reported in depth as a prototype model; so, that the process may be easily duplicated in future research (Shenton, 2004). Dependability in research is defined as the research or process being reported in such great and accurate detail that it is capable of duplication with the same results (Shenton, 2004). Each step of the research process was documented to ensure that the research demonstrates dependability.

Confirmability

Confirmability in research is associated with objectivity of the research and that the researcher confirms that care was taken to ensure that the results of the research are the same results of the interviewed participants lived experiences and ideas (Shenton, 2004). The main objective in confirmability is for the researcher to present themselves in an objective manner (Shenton, 2004). Shenton stated that triangulation is very useful in helping the researcher obtain confirmability and reduce the possibility of any biases by the researcher. Confirmability is defined as one being able to deal with a situation in a non-reactive or non-interactive manner (Patton, 2002); or the process of the elimination of personal biases, emotions, and involvement; in other words, to be objective, and ensure the information is transcribed verbatim. Good interpretation of collected information is an efficient way of verifying and confirming results. As a researcher, it is
important to constantly research to achieve confirmability, and to constantly request clarity to verify their meaning.

**Ethical Procedures**

I submitted my research plans to the Walden University Review Board (IRB) for review in accordance with federal regulations, which are designed to protect against human rights violations. After an approval to continue with the research was obtained from the IRB, letters of cooperation to recruit participants were obtained.

To ensure the privacy and confidentiality of the participants, no individually identifying information was reported for the participants. Numbers were used to replace the participant’s actual names. All records with identity information were stored in a locked cabinet within my office that is in my home. None of the participant’s names or other personal identifiable information were disclosed in my writing (Bersoff, 2008). I also ensured that there was no deception in the research or any other misconception that the participants may have by reiterating and repeating what the participant had stated during the interview. All research data was stored in a secured locked location where it will remain until after the specified amount of time (5 years) for research and dissertation storage. The participants were informed of their ability to withdraw from the research at any time during the research.

Data will be dissemination via the internet, which is the fastest mode of communication that can reach large volumes of people at a time. Because the research was disseminated via the internet, it will be available to a great deal of individuals including students, professors, and teenagers. After the completion of the research and
the dissertation, I will retain all data for a minimum of 5 years in accordance with the guides of the IRB board. All research data will be shredded, and electronic data deleted, after the 5-year retention period has expired.

Summary

Chapter 3 began with the research and rationale of the study, followed by the research design and the role of the researcher. The methodology that was used in this research was also indicated in this chapter, followed by methods of trustworthiness that were outlined in this chapter; as well as the ethical procedures that were used in the research. The social change that this research is to bring about is a positive and unique point of view by society regarding the perceived and expected outcomes of teenage mothers. The results of this research study are addressed in Chapter 4.
Chapter 4: Results

Introduction

In this study, I used a qualitative phenomenological approach to address the following question: What factors enabled former teen mothers to overcome challenges of teen parenting to become successful, financially independent adults? In this chapter, I present the findings from the data analysis of 15 individuals who participated in the study. The participants’ lived experiences, challenges, and accomplishments are discussed regarding support they may have received from the child’s father, the paternal and maternal grandparents, the school systems, the government, and the community in which they lived. I begin this chapter with the description of the setting of the interviews and the demographics of the participants, which may have an impact on the findings of the study. Data collection and data analysis are then discussed, followed by the evidence of trustworthiness, the interview results, and emergent themes.

Data Collection

Data were collected for this study through semi-structured interviews. The interviews were conducted by me, in my home office, via telephone with the aid of a voice recorder. The targeted population of participants for this research study were women between the ages of 20 and 45 years who resided in various locations within the United States. The participants were fluent in English as well as residents of the United States. As a part of the inclusion criteria, the women were single, unwed teens at the time of their first child’s birth. Participants had given birth to their first child when they were between the ages of 13 and 19 years, and the women must have kept and raised their own
child(ren). Lastly, the participants were healthy adults and did not have any emotional/mental disabilities.

Participation in the study was voluntary, and I had no any way of knowing whether volunteers had any emotional or mental disabilities. The risk involved in the research was minimal, and they were advised that they could drop out of the research at any time. The participant recruitment process focused on women who were previously teenage mothers who became financially independent women. Success was defined in this research study as obtaining financial independence; this state of independence was identified by the mother being able to provide for herself as well as her children without the aid of government assistance or any other welfare programs.

I began the interviews by describing the purpose of the study and going over the consent form. Participants gave verbal consent to participate in the study. Demographic data were collected during the first part of the interview and recorded on a demographic information sheet. After obtaining all the demographic information, the participants were then asked the open-ended questions on the interview protocol. I completed the interview protocol while taking notes and recording the interviews. Their demographic data (age, education, race, and years to independence) were entered into the “Input” of the International Business Machines (IBM) SPSS application. The demographic information was then produced in the “variable view” of the application. After all the data were entered for each participant, all the information was highlighted, and then the analyze tab was selected from the tab bar at the top of the application, followed by the selection of
reports, then descriptive statistics, and finally the frequencies tab. These steps produced a calculation of the percentage rates for each demographic category.

**Demographics**

A total of 17 women responded to the invitation to participate in the research study, but only the first 15 who responded were selected because I needed to keep the sample size small enough that I could effectively handle the research process, but large enough for the data to reach saturation. According to Patton (2002), smaller sample sizes can be valuable to research when the information is in-depth. Table 1 presents demographic information for the participants. The participants’ ages at the time of pregnancy ranged from 13 to 17 years.

The race of the participants varied, with the largest number of participants being African American (53%), followed by White at 10.7%, and Mixed and Hispanic both at 7.1% each. None of the participants had more than four children. All participants reported having completed their high school education, and most went on to achieve at least some formal education beyond high school.

Most of the participants reported being in a partnership relationship. The ages of the women at the time they reached financial independence ranged from 19 to 30 years, with 25 years being the average age. The amount of time taken to become financially independent varied from 5 years to 10 years.
### Participant Demographics

<table>
<thead>
<tr>
<th>Age at first child’s birth</th>
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<th>Education</th>
<th>Number of children</th>
<th>Marital status</th>
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Participants for this study were recruited from the Walden participation pool, through “The Mount Clemens-Harrison Township Journal,” a local paper in Mount Clemens, Michigan (Appendix C), and posted fliers (Appendix B). Some participants were recruited through snowball sampling (participants referred by other participants meeting the criteria). The time frame of the recruitment process and data collection was 2 weeks. The interviews were conducted via telephone, and although the participants were asked to allow at least an hour for the interviews, the average length of time for the interviews was 35 minutes. Because the interviews were conducted on the phone, I was not able to see any evidence of emotions or physical reactions to the questions. I began each interview by thanking the participants for agreeing to partake in the research, after which I advised them to just relax and try to provide me with the most accurate answers they were able to recall. I then provided them with an explanation of the research and the purpose of the research.

The participants were first given a nine-question demographic questionnaire (see Appendix D), which I read to them and recorded their responses. I then conducted the interviews with the assistance of the interview protocol as a guide for the questions (see Appendix E). The interview protocol consisted of a series of eight open-ended questions. A recording device was used to record verbatim what the participants said as a quality control procedure, and notes were taken to identify themes, discrepancies, as well as any additional information not included on the interview protocol. The recording device was used with the knowledge and permission of the participants. Each interview was
transcribed within a brief time after the interviews. Then the interview data were cleaned to remove their names (replaced with numbers to ensure the utmost confidentiality).

**Data Analysis**

The analytical process was initiated by first organizing the participants’ responses according to the research questions; and each question was categorized by the theme, similarity, or discrepancy that was identified by their response. The analytic process included spotting themes by using the coding, sub coding, and common phrases process. Common phrases, such as: “no support”; or “not much support” identified themes in the interviews as well as “they were very supportive”.

I reviewed the notes taken during the interviews and the interview responses on the recordings to identify and categorize recurring themes found in the interviews. Yellow, green, and red highlighters were used to identify interview themes. Yellow indicated occasional support, red indicated no support, and green indicated dedicated support. The types of support categories were then totaled (total of yellows, total of reds, and total greens) to determine any themes or discrepancies for each category. After the colors were totaled (how many of each color) a sub category was created using numbers to get a more descriptive view on the themes. For example, the group under green consisted of sub-categories of numbers 1 and 2. The number 1 indicated complete support (shelter, food, clothing, etc.), number 2 indicated partial support such as some finances (less than complete). The total of each category was then totaled to determine the theme (or discrepancy) for that research question. The amount of years needed to reach financial independence was separated into categories and labeled by numbers, 1-3 years = number
Ten years was the longest amount of time the women needed for financial independence from any external support system. An analysis of the interview data was completed with the use of the percentage rates that were calculated by the SPSS application, along with the themes and discrepancies that were identified during the interviews.

**Evidence of Trustworthiness**

Trustworthiness in qualitative research is important because it addresses the researcher’ credibility and accuracy in reporting the testimonies and experiences of the participants. Trustworthiness ensures that the information is reported in a fair, balanced, conscientious, and objective manner (Patton, 2002). The components of trustworthiness include confirmability, credibility, transferability, and dependability (Patton, 2002).

**Credibility**

To illustrate credibility, I utilized the 3-technique process that is suggested by Nutt-Williams and Morrow (2009). The credibility process included having integrity of data; ensuring a balance between reflexivity and subjectivity and communicating clear findings. To obtain integrity of data, via credibility, while ensuring that the collected data was reported in an objective manner, I had to first examine my own thought process regarding teenage pregnancy and motherhood. This process was inclusive of acknowledging and figuring out the reasons for my attitude on the situation and putting aside my own thoughts and opinions on the topic. In addition, to help with the assurance of research credibility, I did not use any of my own words or interpretations in this research.
All interview data were reported exactly as reported by the participants with the use of a recorder during the interview process along with manual notes taken by me. Patton (2002) indicated that due to the nature of qualitative research, credibility can be a bit ambiguous; however, communicating the research findings in a clear manner will help with credibility. To assist with credibility, I also asked for clarity when responses were ambiguous as well as asking for examples of the situation they were discussing.

Reflexivity and subjectivity were instrumental in me obtaining credibility because I had to find a balance between what the participants stated and my perception of what they stated, as well as their meaning and my interpretation of their meaning. When clarity was needed I asked the participants if they could clarify what they meant by their statement. In addition, if there was a statement made by a participant that caused me an internal reaction, I made a note of that along with the statement made so that I could revisit it, and work on my thought process to stay neutral. The one thing that helped me to stay objective was to recall the fact that my own teenage daughter was a mother at the age of 15. Because I had a personal relationship with a teenage mother, I was able to be to be more understanding and objective with other teenage mothers.

The realization and recognition of my own set of values and subjectivities, enabled me to consciously acknowledge my own biases, such as the morale implications of having children out-side the bonds of matrimony and address my biases (these are my own opinions; it is neither wrong nor right; it happens). I had to dismiss my own subjectivities (analyze the facts of the situation) from my thoughts to conduct the research using an objective approach. Finally, because part of credibility is
communicating clear findings, I reported my findings in a clear and concise manner exactly as they were reported by the participants (not added or deleting anything from their words).

**Transferability**

Transferability addresses whether findings from a study could be duplicated on a wider population (Shenton, 2004). To ensure that this research could be duplicated by other researchers, I first described the research topic, followed by the interview process: The participants and their demographics, the interview process (setting), the tools used for the process (demographic questionnaire, voice recorder, and interview protocol) and how findings from the study could possibly be used to promote social change. I then reported step-by-step descriptions of data involved in the research that enables transferability of the research.

**Dependability**

To ensure possible duplication of this study, I described in detail the data collection process, data coding, and data analysis in a step-by-step manner. All my research information, along with the transcribed interviews, interview notes, demographics, and any other research related documents will be filed away in a locked file cabinet in my office.

**Confirmability**

The main objective in confirmability is for the researcher to present themselves in an objective manner (Shenton 2004). Confirmability was achieved in this research by me reviewing and staying consistent with the demographic forms, the interview protocols,
the voice recordings, along with my reflective notes which helped to strengthen my objectivity.

**Results**

The results are reported according to the support that participants received in terms of the father’s support, family support, government support, and community support. The main themes are discussed along with any quotations given by the participants that support or demonstrate the themes.

**Father Support**

The first interview question required participants to describe the level of involvement of the child(ren’s) father. The primary theme that evolved from this research question was that the fathers started out strong in their support, but their level of support decreased as the relationships declined, and the babies got older. Below are some quotes from the mothers:

- The relationship was frustrating, heart-breaking, with no assistance; It was very stressful
- He was an absentee father, just in and out of my child’s life.

However, the secondary theme did indicate support from the fathers and the support received was instrumental in the mothers obtaining financial independence. Only 3 of the 15 participants, or 20%, reported continued support from the fathers. Two participants reported marrying the baby’s father, and the third father paid child support only, but provided no child care.

- His dad was very helpful, we got married, and he continued to be a good
• He was made by my family to provide financial support.

• You see I was raped by a family member.

• He didn’t pay anything—he was black. When asked did his parents help, she stated No, they were black too.

Five of the participants reported that the fathers helped with the care of the baby or was involved while they were in a relationship together but discontinued once they were apart. The paternal grandmother seemed to be involved only when the father was involved. Three of the women reported not wanting to deal with his family. The support by the fathers ranged from them only paying child support to them being a full-time dad (both financially and emotionally). The women indicated that support (regardless of how minimal) was instrumental in them reaching financial independence. One participant stated that her child’s father provided financial support for their child during the first year of the child’s life. The help she received during that time took care of diapers and clothing for the baby. A sample of participants’ comments regarding the fathers’ support are presented below:

• Yeah, his parents were involved in the child care if I was with him, but by them babysitting my baby, I was able to finish high school.

• My child’s father only paid child support without any additional support.

**Types of Government Assistance Received**

The major theme that emerged from this question was that all the participants utilized government assistance that was very helpful in them obtaining financial
independence. All the participants reported receiving government assistance (Medicaid, cash assistance, food stamps, or Women and Infant Care-WIC); however only one person reported receiving cash assistance with the remaining having received Medicaid, food stamps, and WIC. They all reported working while receiving government assistance. The government assistance helped with health care and food for the mothers and their children. When asked how government assistance helped them, the participants gave the following statements:

- It made it possible for us to always have food, and I could save some money.
- Getting help made it possible to have food and health insurance for me and my baby.
- The welfare I received helped me to further my education, because it paid for child care while I went to school.

**Sources of Family Support**

The emergent theme for family support was that the women were able to become financially independent because of the support received from their families. Fourteen of the women reported receiving support from their families (mother, father, grandmother, brothers, or aunts). Participants stated that family support ranged from providing shelter to buying clothing, diapers and wipes, and doing whatever was needed. The support received continued until the women were financially independent. The comments below reflect the theme related to the support received from the women’s family members:
• My mother provided us with food, clothing, and shelter. She made sure the baby had everything she needed.

• My mother, father, and brothers helped me. My mother and father provided a home and everything we needed, and my brothers watched her, so I could work and graduate high school.

The participants indicated that the support they received from their mothers was not limited to finances and baby supplies, many of the women indicated that their mothers provided them with emotional support as well. Presented below are samples of participants’ comments regarding the assistance they received from their mothers. Some of the participants indicated experiencing negativity from family members because they were teenage mothers.

• You have messed up your life, and your life is over.

• Others reflected experiencing negativity from others in their community. One participants commented on how she felt the negativity by stating:

• I know people looked down on me and talked about me because I had my baby young, but it wasn’t so bad because I got having my children out the way early.

The primary emergent theme regarding maternal support was that the women were able to become financially independent because of the support received from their mothers. One participant, who had earned a PhD, stated that she was raised in a female environment which consisted of her mother and grandmother. They were always supportive of her even though she made this mistake.

• My mother is my “hero”, she has always given me emotional support
regardless of the situation. I could never have made it this far without my mother.

- The help received from my mother included child care, diapers, wipes, clothes and whatever my baby needed. She made life much easier and less stressful for me and that is the reason I was able to continue towards my goal.
- My mother allowed me to finish school, work, and she helped me to provide for my baby. She helped me financially and with childcare.

The comments from the participants attested to how encouraging and loving their mothers continued to be. Some of them stated that they would have never been able to make it without their mothers and how their mothers are still their support system. Although most of the participants indicated the positive support received from their families, there were some reports of family negativity. One participant indicated that she was determined to succeed because of the negativity she received from her mother and other family member. She went on to state:

- I don’t believe they intended to come at me from a bad place, but they were only stating what they believed to be true (that she had ruined her life).

**Other Community-Based Support**

The primary theme that evolved when the women were asked to describe any support they may have received as a teenage mother from other sources within their community, such as school was that they received no support from the school system or their communities. The secondary theme was that the women did not know of any support that was offered through the school system or in their communities. Eleven of the fifteen participants were not aware of any community support programs; however, a few
did indicate that there were some programs that taught child care, and distributed clothing, gifts, and food during the holiday seasons. One participant described community support as the people within her community (her neighborhood) who provided each other with emotional support. A sample of the participants’ statements regarding availability of community resources are presented below:

- We were like a family; we did not provide financial support, but we supported each other emotionally.

- I was new from the South and was not aware of what was available.

One participant did indicate receiving support in completing school work assignments while in main stream school. Another indicated that parenting and life skills were taught at the secondary (alternative) school. Thirteen of the participants indicated not knowing of any supportive programs within the educational system; however, one participant did indicate that with the help of the school she was able to graduate ahead of time. The participant stated that the following:

- I was not able to attend school during part of my pregnancy because I was sick. They sent school work home by my mother which helped me to graduate at the age of 17.

Another participant indicated going to an alternative school for pregnant girls because she felt as if she didn’t belong.

- Ostracized in the main-stream school system, she also added that

- Although, I felt that the academics in the alternative school were sub-standard, they did provide day care and lessons on caring for your baby. This participant
indicated that the alternative school program was an awesome program, although she did not realize it at the time.

**Different Life Decisions**

One of the final questions of the interview asked participants what different decisions they could have made that would have made their lives easier. The most consistent answers from the participants was to have waited to have sex either until marriage or just until they were older. Below are some other responses to this question:

- I should have waited to have sex.
- I should have waited until I was ready emotionally and financially.
- I should have waited until the appropriate age of 18.
- I should have known the guy that I became intimate with.
- I should have waited until I was ready or married.

**Suggestions for Teenage Mothers**

The final question asked participants what suggestions they had for teenage mothers. All the participants offered encouragement to stay focused on their goals. Below is a summary of some comments from the participants:

- Life is not over; it may be difficult at times but stay focused; and to remember that you can do it.
- Listen to parental advice and stay close to home. When asked to clarify the last statement, the participant stated that the comment was for young ladies to let their parents know of any guys who try to make sexual advances toward them.
- Keep a close relationship with your parents.
• Always figure out how to reach your goals while still being a mother and protect your child.

• Be aware of the consequences of your decisions.

At the end of the interviews I thanked the participants for participating in the study. The participants were reassured that their personal identity information would not be revealed in the research and the results would be presented in aggregate form. I also provided participants with information on how they could contact me to get a summary of results from the study. As a token of appreciation, they were also mailed $5.00 gift cards at the end of the research.

Summary

Chapter 4 began with the purpose of this research and the research question. The recruitment process was discussed, followed by the data collection process, a summary of the data collected as well as data on the participants. In this research I interviewed 15 women who were teenage mothers; they were asked to share their lived experiences as teenage mothers. Their experiences as a teenage mother included their support system, challenges, disappointments, and achievements that enabled them to become financially independent.

This chapter answered the research question as to what factors enabled former teen mothers to overcome challenges of teen pregnancy and parenting to become successful, financially independent adults. Although some of the women reported the support received from their children’s fathers as inconsistent, it was nonetheless supportive in them gaining independence. The emergent themes were government
support and their maternal support. The findings, limitations and recommendations are discussed in Chapter 5.
Chapter 5: Discussions, Conclusions, and Recommendations

Introduction

The purpose of this qualitative research was to determine what factors enabled former teen mothers to overcome the challenges of teen pregnancy and parenting to become successful, financially independent adults. The key findings were that the women who were previously teenage mothers were able to obtain financial independence through the support of the government (Medicaid, food stamps, cash assistance, and WIC) and their families. Although most participants indicated a lack of sturdy support from the children’s fathers, the women who did receive support indicated the support helped them reach financial independence. The research discussion will follow in Chapter 5, along with the research findings, interpretations, and the conclusion of findings.

Interpretation of Findings Relevant to the Literature

The racial demographics of participants of this study are that of the 15 women who participated in this research, eight were African American, three were White, two were Hispanic, and two were of a Mixed race. Researchers have presented that although teenage pregnancy in the United States is high among all races, the rates are highest among Hispanic and African American teenage girls (The National Campaign, 2016). Researchers have also presented that only 10% of teenage mothers’ graduate from high school (The National Campaign, 2016). However, my study did not confirm that finding. Results of the demographic data showed that 100% of the participants were high school graduates, and several participants had obtained some college education. Although reaching financial independence was the primary criteria for this research population,
which is often the results of educational attainment, the fact that all the participants were at least high school graduates may have biased the findings of this research.

There were various findings in this study. Most of the participants indicated that the fathers did participate in the finances and care of the child during the early part of the child’s life, but this discontinued as time went on, and the personal relationship between the mother and father dissolved. This is consistent with the research findings by Kiselica and Kiselica (2014) who showed that teenage fathers are normally supportive during the pregnancy and up through the first year of the baby’s life, but this support tended to end as the relationship between the parents’ dissolves over time. It is not clear how the mothers felt about the lack of support received from the fathers because they provided very little thought or opinion regarding it. They also did not indicate any adverse situations in relationship to this lack of support. These findings may be contrary to the findings of Easterbrooks et al. (2016) who found that depression as well as a poor sense of well-being was directly related to the lack of support from the fathers (Easterbrooks et al., 2016).

All the participants indicated having received some form of government assistance as a teenage mother. This finding confirms data presented by Hudgins et al. (2014) who indicated that teenage mothers are more likely to need public assistance to care for their children. However, my participants indicated that they also worked while receiving assistance. Although these women may have received support from other sources, they still needed and relied on the support received from the government.
Many participants further reported that they received various forms of support from their families, which helped them to become financially independent women. The childcare they received allowed them to complete their education as well as to work. The financial support, food, and shelter that was provided ensured them and their children having their daily necessities. This support was important because without it, it is doubtful that these women would have reached financial independence. These findings of the importance of support are consistent with Taylor (2014), who explained how the support of family and a desire to become financially independent enabled teenage mothers to obtain higher education and better job opportunities.

Most of the women stated that there was no available support or resources for them while in school as a teenage mother. Smithbattle (2006) explained how many pregnant teens may feel that they are being forced to leave school for a period because of discrimination by the public-school system. Although my findings did not indicate much support in the educational system, there is literature that explains how the proper support in the educational system can prove to be advantageous (Smithbattle, 2006).

Smithbattle (2006) indicated that available resources within the teenagers’ communities would increase their potential for success. However, the results of my research indicated that there were not any available resources within the community to their knowledge, while others indicated that there were child care classes; and food, gifts, and clothing during the holiday seasons (Thanksgiving and Christmas). One participant stated that there may have been community support available, but she did not want any help because despite the challenges of being a teenage mother, she was focused on
providing for herself and her child. Another participant indicated that although she knew of no community support because she was from the South, she was determined to complete her education so that she would be able to have a good career.

**Interpretation of Findings and Resiliency Theory**

According to Solivan, Wallace, Kaplan, & Harville (2015), the concept of resilience focuses on overcoming adversity to maintain psychological and physical well-being. The assets of resilience include the positive factors within an individual (Solivan et al., 2015). The fact that these women were able to withstand the various obstacles of teenage pregnancy and motherhood is evident of their strong, resilient disposition. Their determination included getting an education, not continuously needing government assistance, and becoming financially independent. Again, the determination of these women was consistent with the premises of resilience theory, which is part of the conceptual framework of this research. Although they may not have known about available resources, they were still determined to overcome their personal challenges and obstacles to become financially independent adults.

One participant reported not receiving any support from her family (including her mother). This woman stated that she felt like an orphan as a pregnant teenager and should have given her daughter up for adoption. However, it appeared that she did receive some support from other family members because she stated that she had to pay her family to care for her daughter while she worked. This same woman indicated that although she was a young mother with a baby, she had a strong determination to finish school, get her degree, and have a good career. She became a social worker for the state where she
resides. This mother’s story of resilience confirms the strengths of the resilience theory (VanBreda, 2001). VanBreda (2001) provided an explanation for the inner strength that enables someone to become triumphant over personal challenges and obstacles associated with them.

All the participants within this study received a high school education or higher. These women consistently stated that they would not have been able to achieve their goals had it not been for the various support systems, especially that which was within their family. These research findings do not support findings by Comlossy (2014), who stated that poor educational attainment is one of the greatest consequences of teenage pregnancy. Although there is research that indicates that teenagers who become mothers are less likely to complete a high school education, let alone to attend college, there are some who do attend college. The findings of my study suggested that the educational attainment of the participants was the result of the support received and their own resiliency.

**Limitations of the Study**

The findings of this study must be interpreted within the context of the limitations of the study. One of the limitations of this research study is the unusual fact that these teenage mothers were able to reach educational attainment beyond a high school education (Penman-Aguilar et al., 2013). This limitation may have an impact on the replication of this research. This research is also limited by a small sample size, limiting the research of other women who were possibly teenage mothers within various racial/ethnic groups. In reference to the transferability of results, this research study
consisted of 15 participants, of which eight were African American. Although, Patton (2002) stated that “there are no rules for samples size in qualitative inquiry” (p. 244), more diversity in the research would have provided better insight as to the experiences of women of other races who were also teenage mothers. Furthermore, this qualitative research was based on the reported experiences of women who were teenage mothers. Some of the facts regarding their experiences may be biased or may have become tainted over time. The limitations may include the desire of the participants to represent themselves in a positive manner; therefore, some of the facts may have been altered to represent themselves in a more positive manner (Patton, 2002).

**Recommendations for Further Study**

Based on the limitations of this qualitative study, I recommend additional research on a larger sample which includes a more diverse group of women in terms of race and ethnicity. This research indicated some financial and emotional support received by teenage fathers and their families, however, additional studies should be done on the co-parenting of the child between the teenage mother and the father of the child. Perhaps this additional information could shed some light on the lack of support from the fathers.

**Implications**

This qualitative research has implications for positive social change in terms of how teenage mothers are portrayed in the United States. Findings from this study can promote social change by providing positive images of former teenage mothers who have been able to successfully achieve financial independence as adults. This social change can potentially have a domino effect on the attitudes of other pregnant teenage girls, their
children, and the families of teenage mothers; as well as communities and society.

Women such as those in this study who were former teen mothers could potentially serve as positive role models for current teen mothers. These women could mentor the young girls and help them to realize that they too could succeed and become financially independent. With proper role models who instill positive thinking regarding education, sexual relationships, career choices, and other life decisions, the children of the teenage mothers may have more positive outcomes if they can witness successful women who have overcome adversity.

Findings from this study highlights the fact that with the proper support, teenage mothers can become financially independent adults. The establishment of available resources within communities could be a very useful tool in the process of positive change. The greatest sources of support were from the government and the family system. In this research many participants indicated not being aware of support programs in the educational system or within the communities that they lived.

The educational system plays an intricate role in the education of teenagers; therefore, the focus on continuing education for teenage mothers should take precedence when a teenager becomes pregnant. Lastly, the community where one resides is an extension of the person; therefore, the community should address the needs of pregnant teenagers by providing supportive programs that will enable them to become financially independent adults.
Conclusion

Researchers who have studied teenage pregnancy indicated that thousands of teenagers become pregnant in the United States each year (Assini-Meytin & Green, 2015; Barnes & Morris, 2012; Biello et al., 2015; Children having children, 2016; Farber, 2014; Hamilton, Martin, Osterman, Curtis &Mathews, 2015;). Teenage pregnancy has been defined as an epidemic that crosses the boundaries of race, ethnicity, and culture (Comlossy, 2014). Very often teenage pregnancy is the result of an intergenerational cycle (Meade et al., 2008). Many of these teenage girls become financial liabilities for society because of their lack of education and job attainment (Penman-Aguilar et al. 2013).

This study used the phenomenological approach to study the factors that enabled teenage mothers to become financially independent women. The results indicated that with the proper support systems in place, teenage mothers are more likely to overcome various barriers and obstacles to become more resilient. These teenagers can become more determined to reach their academic and career goals that they may become financially independent women.
References


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Appendix A: Letter of Cooperation

Pentecostal Church of God
9244 Delmar Street
Detroit, Michigan 48211
Phone 865-0510

August 30, 2016

Elder Greg Duren
Pentecostal Church of God
9244 Delmar St.
Detroit, Michigan 48211
(313)717-6359

To Whom It May Concern:

Please be advised that Jeanette Ellison is currently a member of the Pentecostal Church of God located at 9244 Delmar Street in Detroit, Michigan. She has been authorized to recruit participants for obtaining research conducted regarding teenage mothers.

If you have any questions please feel free to contact me at the above number and I will be happy to address any concerns.

Sincerely

Elder Greg Duren
Pastor

[Signature]
The Successes of Women who were Teenage Mothers

Volunteers who were Teenage Mothers Needed for the Study.

Who: I am recruiting women (above the age of 18) who were unmarried teenaged mothers (between the ages of 13-17). These women must have raised their own children; be residents of United States; be fluent in English; and not currently reside with parents.

Why: The purpose of this research is to recognize the accomplishments and successes of women who were teenage mothers.
Benefits and Risks: There is unlikely to be any direct benefit or significant risk for participation in this research. The primary benefit is to gain knowledge. If you choose to participate in this research, you will be helping others in the future.

When and What: Data collection for this study will be collected through semi-structured interviews of the participants. The interviews will take place at a convenient pre-arranged location and should not exceed 2 hours. For participants who are not local or who would just prefer, interviews may be performed via telephone.

How: If you or anyone you know may be interested in participating in this study, please contact me, Jeanette Parker, Doctoral Student, of Walden University at:
Appendix C: Local News Want Ad

Participants needed for study on financially independent women who were teenage mothers.

For additional information, please contact:

Jeanette Parker
Appendix D: Demographic Information Sheet

Participant Information

Age: ______  Age at time of first pregnancy (in years): ______________

Mother’s age at the time of first pregnancy (in years): __________

Number of children: ______

Age at time of becoming financially independent: __________

Highest level of Education: ______________

Marital Status (check one):

Married_____ Never Married_____ Widower/Widow_____

Divorced_____ Separated_______ Partnership_____

Racial Status (check one):

___Caucasian  ___African American  ___Hispanic

___Asian  ___Indian  ___Mixed Race
Employment Status (check one):

___ Employed  ___ Unemployed  ___ Seasonal

_____ Full Time  _____ Part Time  _____ Temporary

Annual Income (check one):

___ Less than $20,000  ___ $20,000-$34,999  ___ $35,000-$49,999

___ $50,000-$74,999  ___ $75,000-$99,999  ___ $100,000-$149,999

___ $150,000 or more

Number of income earning adults in household ______
Appendix E: Interview Protocol

1. Describe how the involvement of your child’s father(s) enabled you to become successfully financially independent
   a. Describe any support you may have received from the father’s family that helped you become successful
   b. Who was/were the family member(s) who supported you?
   c. How long did you receive support from the family member(s)?

2. Describe the types of government assistance you may have received as a teen mother (Medicaid, Cash assistance, food stamps, WIC, etc.)
   a. How did this assistance enable your success?
   b. How long did you receive government assistance before becoming financially independent?

3. Describe any family support you may have received as a teenage mother.
   a. How did this support enable your success?
   b. Who was/were the family member(s) who supported you?
   c. How long did you receive family support before becoming financially independent?

4. Describe any support you may have received at school as a teenage mother.
   a. How did this support enable your success?
   b. How long did you receive support from school before becoming financially independent?
5. Describe the types of community support you may have received as a teenage mother.
   a. How long did you receive this community support?
   b. How did this support enable your success to become financially independent?

6. Thinking back as a teenage mother, what different significant life decisions could have made your life easier?

7. Thinking back as a teenage mother, what suggestions you would give teenage mothers regarding pregnancy and motherhood?

8. How typical was it to see a pregnant teenager when you were a teenage mother?

   Thank you for your participation in this research study.