This study examines the relationship between school support, family support, community support, teen parenting programs and postsecondary education among teen mothers in North Carolina. The sample consisted of 212 participants who became teen mothers between the ages of 13-19 and have since attained postsecondary education. The variables used for the study included the following: school support, family support, community support, teen parenting programs, resilience, and mentoring. The research employed a 33-item, five-point Likert scale questionnaire. Explanatory design was utilized to create the study. Purposive and snowball sampling was utilized to gather the data. The findings of the study, overall, indicate that majority of the participants believe that school support, family support, community support, teen parenting programs, resilience, and mentoring helped them to attain postsecondary education.
A STUDY OF THE RELATIONSHIP BETWEEN SCHOOL SUPPORT, FAMILY SUPPORT, COMMUNITY SUPPORT, AND POSTSECONDARY EDUCATION AMONG FORMER TEEN MOTHERS IN NORTH CAROLINA

A DISSERTATION
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CHAPTER I

INTRODUCTION

Seventeen will be the hardest year of your life. It will grow you up almost immediately. You will lose your best friend whom you love so much to gun violence in a single moment, and give birth to a new one within a year. You will be terrified, and it’s ok that you don’t know what the future holds. Some people will count you out because of the decision you’ve made to bring another life into the world so young, but you made the decision out of love and will live with the decision in love. (Knowles, 2017, para. 18)

Teenage childbearing has been a public concern for many years and it continues to be a matter of concern nationwide. Countries, such as Azerbaijan, Georgia, and Kyrgyzstan, had the highest adolescent fertility rates compared to other developed countries, according to the United Nations Economic Commission for Europe (UNECE) in 2015. There is reliable evidence that Hungary has the highest fertility rates among children between the ages of 10 to 14 (Sedgh, Finer, Bankole, Eilers, and Singh, 2015). However, the United States has a substantially higher rate of teen pregnancy than any other western industrialized nation despite a decline over the past decade (Dangal, 2006; Farber, 2003; Smithbattle, 2003; Spear, 2004). In 2016, there were 209,480 babies
born to women aged 15-19 years of age, totaling 20.3 per 1,000 births to teen mothers in the United States. The birth rate for females aged 10-14 in 2016 was 2,246 totaling 0.2 births per 1,000 teenage girls in the United States (Hamilton, Martin, Osterman, Driscoll, and Rossen, 2017).

Teen birth rates vary substantially by racial and ethnic group. African American teen pregnancy rates are twice as high as any other races, according to the Centers for Disease Control and Prevention (CDC, 2015). The National Campaign (2016) reports that the teen birth rates for African American teenage girls in 2014 rated at 34.9 births per 1,000 girls between the ages of 15-19. Roughly, 4 in 10 African American females will become pregnant at least once before the age of 20 (National Campaign, 2016).

In 2015, 43 per 1,000 Hispanic females between the ages of 15-19 became pregnant, and 17 White females between the ages of 15-19 became pregnant giving North Carolina a 66% overall decline in the teen pregnancy rate amongst all ethnicities from the peak year of 1988. However, there were still 7,641 births to teens in 2015, and 16% of these births were repeat pregnancies (National Campaign, 2016). Overall, women in North Carolina of all ages report their pregnancies as unplanned. In 2010, the most current data concerning unplanned pregnancies shows that 54% of the pregnancies in that year were unplanned (National Campaign, 2016).

North Carolina is one of the nation’s most advanced states when it comes to collecting teen pregnancy data. Many states only collect teen birth rates, but North Carolina collects teen pregnancy rates that includes abortions, fetal deaths, and births to give a better sense of how to approach prevention. In 2015, there were 21.9 per 1,000
African American females that had an abortion. This rating was the highest amongst all ethnicities. Ratings of abortion prior to the year of 2015 are unreliable due to underreported forms of induced termination of pregnancies (North Carolina State Center for Health Statistics, 2015).

Cost in relation to teenage childbearing is also a national concern. Between 1991 and 2010, teen births in North Carolina, cost taxpayers a total of $8.4 billion. Statewide, teen childbearing has cost taxpayers at least $9.4 billion each year at the federal, state, and local level. Nationally, most of the costs of teen childbearing are associated with participation in child welfare, criminal justice, and public health. Teen childbearing costs have also been associated with children born to teen mothers, participation of teen mothers in public assistance, lost tax revenue associated with reduced education and earnings amongst teen mothers (National Campaign, 2015).

Tang, Davis-Kean, Chen, and Sexton (2014) state that teenage mothers are less likely to complete high school and obtain a college education than their counterparts who delay pregnancy. Nearly 90% of those who delay childbirth attain a General Education Diploma (GED) or high school diploma in comparison with only 50% of teenage mothers (Tang et. al, 2014). Low educational attainment reduces the employment prospects of teenage mothers limiting their resources to be able to support their children and their children’s development. When teen mothers remain connected to their high schools, they have fewer repeat pregnancies, better long-term economic outcomes for their family, and better behavioral, social, and academic development of their children (Sadler, Swartz, Ryan-Krause, and Seitz, 2007).
Barr & Simons (2012) state that early childbearing has a negative effect on college education attainment and the negative outcomes that are attached to teenage pregnancies can be attributed to the high level of disadvantages that some teenage mothers already experience prior to becoming pregnant. Most teenage mothers come from underprivileged households and neighborhoods and are more than likely not to have an attachment to school prior to pregnancy and their families are already depending on welfare (Barr & Simons, 2012).

Low postsecondary education attainment has been proven to be a risk factor for teen mothers. There is an assumption that teen mothers do not have the ambition to become educated (Barr & Simons, 2012). However, there are many positive outcomes for teen mothers that incorporate postsecondary educational attainment. Researchers have identified that some of the factors that contribute to postsecondary education attainment include policy support, program response, school support, family support, and community support during and after pregnancy.

**Statement of the Problem**

Three in ten girls in the United States become pregnant at least once by the age of 20 (National Campaign, 2010). There is a dearth of studies that focus on the phenomenon of teenage pregnancy and postsecondary education from a strength’s perspective. Although there are several school-based, nonprofit organizations, such as Child Trends and SHIFT that focus on improving the lives of adolescent parents and their educational experience there is still a low rate of teen mothers that successfully complete postsecondary education.
According to the CDC (2015), two-thirds of teen mothers will never receive a high school diploma or GED, and there is a strong possibility that they will end up on public assistance versus those who choose to delay pregnancy as a teen. The National Campaign (2012) reports that 63% of teen mothers receive some type of public assistance within the first year after their child is born. Young parents who complete postsecondary education are more capable of taking better care of their children without public assistance (Kahn & Reeg, 2008). There is an inadequate number of teen parenting programs that promote postsecondary education and several issues cause division amongst politicians, policy makers, school boards, and the public when it comes to the most effective programs (Frost & Forrest, 1995).

Many teen parenting programs only promote the completion of high school, and the few that does exist only serves a limited number of teens (Costello, 2014). Most teen mothers are already interested in returning to school to attain a high school diploma, but the school shows little support to help teens achieve in this area (Chigona & Chetty, 2008). The shortage of research on influences that promote postsecondary education affects teen parenting programs and what they offer. Researchers suggest that provisions should be made to national programs to ensure the support teen mothers need to succeed educationally (Chigona & Chetty, 2008).

Family support represents another component of academic success of teen mothers. Teen parenting affects every family member in the same household. Childcare and attention for the new addition are a few of the issues that tend to cause disruption amongst the family (East, 1999). In most families, the responsibility of the teen mother
shifts to the mother of the teen. This causes the mother of the teen to neglect the other teens in the household. In many cases, the mother of the teen lacks postsecondary education and is incapable of assisting the young mother in steps that should be taken to succeed in postsecondary education (East 1999).

Community support is a formal support that can be provided by professional services or programs for teen mothers. According to Brosh, Weigel, and Evans (2007), the most popular community support that teen mothers utilize is alternative schools. However, there is a robust disconnect between the needs of teen mothers and community support (Brosh et al., 2007). Teen mothers are receiving inadequate support from the community concerning plans and aspirations for their educational goals (Brosh et al., 2007). Home visiting has been identified as another effective community support that few communities offer. Teen mothers that have high achievement goals and depend on community support to aid in their educational needs are more inclined to complete postsecondary education (Brosh et al., 2007).

**Purpose of the Study**

Majority of the literature on teenage pregnancy and education attainment focuses on the completion of secondary education. Most research shows fatalistic results of adolescent childbearing while exploration of individuals who successfully completed postsecondary education is minimal. With the intentions to contribute to the limited frame of knowledge on African-American teenage mothers and postsecondary education attainment, the purpose of this study is to investigate the factors that contribute to postsecondary education attainment by exploring the views of former African American
adolescent mothers who have successfully completed postsecondary education. The participants in this study are African American females who became a mother between the ages of 13-19 while residing in the state of North Carolina. This study will contribute to the literature on teen mothers and factors that influenced postsecondary education attainment that helped them to become contributors to society without the need of public assistance.

**Research Questions and Hypotheses**

The research questions (RQ) of this study are as follow:

**RQ1:** Is there a statistically significant relationship between school support and postsecondary education attainment among teen mothers in North Carolina?

**RQ2:** Is there a statistically significant relationship between family support and postsecondary education attainment among teen mothers in North Carolina?

**RQ3:** Is there a statistically significant relationship between community support and postsecondary education attainment among teen mothers in North Carolina?

**RQ4:** Is there a statistically significant relationship between teen parenting programs and postsecondary education attainment among teen mothers in North Carolina?
RQ5: Is there a statistically significant relationship between resilience and postsecondary education attainment among teen mothers in North Carolina?

RQ6: Is there a statistically significant relationship between mentoring and postsecondary education attainment among teen mothers in North Carolina?

As a result of these questions, this study tested the following hypotheses (Ho):

Ho1: There is a statistically significant relationship between school support and postsecondary education attainment among teen mothers in North Carolina.

Ho2: There is a statistically significant relationship between family support and postsecondary education attainment among teen mothers in North Carolina.

Ho3: There is a statistically significant relationship between community support and postsecondary education attainment among teen mothers in North Carolina.

Ho4: There is a statistically significant relationship between teen parenting programs and postsecondary education attainment among teen mothers in North Carolina.

Ho5: There is a statistically significant relationship between resilience and postsecondary education attainment among teen mothers in North Carolina.
Ho6: There is a statistically significant relationship between mentoring and postsecondary education attainment among teen mothers in North Carolina.

**Significance of the Study**

Empirical research paints a picture that views adolescent parents as liabilities instead of productive individuals that can contribute to society. Stereotypical views from society show that there are still limitations in support systems for teenage mothers. There is a dearth of information on the success of teenage mothers and postsecondary education and factors that influenced successful postsecondary education attainment. This study will seek to contribute to the literature that teenage childbearing can have a positive outcome when they remain connected to school and have a stable support system.

Using a strengths-based approach to examine the postsecondary educational success of former teenage mothers cannot be disregarded because policymakers, politicians, and developers of teen programs nationwide are consistently looking for innovative ways to improve the lives of teenage mothers and their educational attainment. This study will contribute to the limited research on factors that contribute to postsecondary educational success for teenage mothers. This study is important as the teenage pregnancy and repeat pregnancy rates are constantly fluctuating in many states (Lopoo & DeLeire, 2006). The knowledge received will provide important data on the academic success of teen mothers that assisted them in living meaningful lives and strong contributors in society.
By examining the responses of former teenage mothers who have successfully attained postsecondary education can lead to enlighten teen pregnancy programs, mold policies that target teen mothers, and effectively support current and future teen mothers in their goals to achieve academically and economically. This study is designed to expand the knowledge of current studies on teenage parenting from a strength’s perspective and the components that contribute to favorable outcomes towards postsecondary education.

**Definition of Terms**

This study is focused on teen parenting and college education among African-American females. That being the case, it is critical to provide consistent definitions that are present throughout this study.


*Former teen mother:* any female who gave birth to and reared a child between the ages of 13-19 years old.

*Early childbearing:* a pregnancy that occurs at or before the age of 19.

*Teen pregnancy rate:* pregnancies accounting for births, abortions, and miscarriages per 1,000 teenage females aged 15 to 19.

*Birth rate:* live births as a result of a pregnancy per 1,000.

*Policy response:* a result of plan actions by a dialogue between policy makers and implementers who devise educational targets and programs.
Program response: the developing of programs to reduce the negative consequence of certain behaviors.

School support: instructional methods, educational services, or school resources provided to students in the effort to help them accelerate their learning progress, catch up with their peers, meet learning standards, or generally succeed in school.

Family support: to provide needs and support to assist in achieving full potential.

Community support: providing resources to increase the quality, quantity, and awareness of services.

Postsecondary educational attainment: an apprenticeship, trade, college, or other non-university certificate or diploma programs.
CHAPTER II
REVIEW OF THE LITERATURE

This review of the literature presents a detailed evaluation of previous research on teen parenting and postsecondary education. To be more specific, it systemizes, consolidates, and assesses previously published scholarly material on teen parenting and postsecondary education, with an emphasis on African American females. This review covers the historical perspective of teen parenting; the effects teen parenting has on postsecondary education attainment; critical policies towards teen parenting and postsecondary education attainment; programs towards teen parenting and postsecondary education attainment; school support towards teenage parenting and postsecondary education attainment; family support towards teen parenting and postsecondary education attainment; community support towards teen parenting and postsecondary education attainment, and the theoretical frameworks used to guide this research investigation.

The Historical Perspective of Teen Mothers

To better understand teenage parenting and the current nationwide involvement, this section will cover the historical context of teenage pregnancy. The issue of teen parenting has been a major part of the national policy platform since the 1970s and because this phenomenon continues to exist today, this issue still reserves a space on the state boards, local boards, national level, and organizational level.
Historically, society had extreme stigmas concerning teen mothers. Many women were ostracized for being unmarried and pregnant. In many instances, women were hidden away and shamed by their families and community. The ostracism of an individual occurs when one is simultaneously excluded and ignored by one or more members of his or her social group (Williams, 2001).

In past studies of adolescent pregnancy, there were reports of low levels of sexual education, ignorance of sexual physiology, lack of information about contraceptives, lack of conscious wishes to be pregnant, and emotional disturbance (Kane and Lachenbruch, 1973). Two national probability household sample surveys conducted in the United States (1971 and 1976) of women aged 15-19 revealed that there were rapidly increasing premarital sexual activity accompanied by a pronounced shift towards the adoption of modern methods of contraception (Zelnik and Kantner, 1979).

Historically, pregnancy and childbearing among African Americans was of great concern due to the disproportionate ratings compared to other races. Minority children were considered at an increased risk for adverse child health outcomes regardless of the age of the mother (Report of the Secretary’s Task Force on Black and Minority Health, 1986). In the 1980’s, sizable differences existed in the rate of both marital and nonmarital childbearing between African American and white teenagers. The total birthrate of African Americans was somewhat more than twice as high as the rate for whites (Furstenberg, 1987).

Hardy & Zabin (1991) expresses the issue of costs associated with teenage pregnancy stating that societal costs are large in financial and human terms. Over the
past decades, studies show that there is deprivation educationally, economically, and socially among adolescent mothers which contribute to financial costs. In 1985, the public costs for medical care and social support of families that included a teenage parent estimated to be $16.6 billion dollars and this amount has increased over the years. These financial costs would be lower if teen pregnancy prevention strategies were more effective (Hardy & Zabin, 1991). However, scholars are more interested in heightening awareness of the situation and educating society on understanding adolescent childbearing.

From 1990 to 2012, the teen birth rate declined from 59.9 births to 29.4 births per 1,000 teenage females, but rose again in 2012 with rates much higher, especially for African American teens (Costello, 2014). According to the Center for Disease Control (CDC, 2013), an analysis of the 2010 data from the National Vital Statistics System (NVSS) from all 50 states and the District of Columbia found that almost one in five births to teens were repeat births. One of the causes of repeat births is related to the method of contraceptive use. Only one in five teen moms use the most effective method of contraception, although 91% of sexually active teen mothers use birth control in the postpartum period (CDC, 2013).

**Out-of-wedlock Births**

Out-of-wedlock births have increased tremendously over the years. Between 1960-1982, out-of-wedlock births to teens between the ages of 15-19 increased from 15.3% to 28.9%. Hanson, Myers, and Ginsburg (1987) state that knowledge of sex
education and the attitudes of these individuals are predictors of this occurrence. Also, strained parent-child interaction and lack of parental supervision has become a determinant of adolescent pregnancy (Hanson et. al, 1987). According to Martinez, Copen, Abma, and National Survey of Family Growth U.S. (2011), having a mother with low levels of education increases the probability that a teen mother will have a birth in her teen years as well. There were gaps and methodological pitfalls in historical research in relation to adolescent pregnancies due to absences of control groups, small non-probability samples, and limited attention to respondent characteristics that might bias the results of the study (Hanson et al., 1987).

Researchers suggested that babies were born out of wedlock due to a lack of knowledge and understanding of the likelihood of becoming pregnant (Hanson et. al, 1987). This lack of knowledge and understanding leads to a lack of contraceptive use because there were no desires not to become pregnant (Hanson et al., 1987). Zelnik & Kantner (1980) conducted a survey in 1979 on teen parents in high school between the ages of 15-19 concluding that majority of the teen parents stated that their pregnancy was unintended, but only 30% of the participants used contraceptives. In states, such as Texas, there is a parental consent requirement for state-funded contraceptives given to minors which increases the chances of out-of-wedlock pregnancies (Girma & Paton, 2013).

Hanson et al. (1987) state that the conclusion of the teen pregnancy crisis in the 1960s-1980s were that most women have no desire to become pregnant but put themselves at risk by not using contraceptives due to inaccurate knowledge about birth
control. Sex education and information had to be presented in the context of human values for it to be effective (Hanson et al., 1987). Most of the programs from the 1970s that were used to reduce teenage pregnancy lacked the clinical services needed and they were weak in design. There was a lack of randomization, poor pregnancy reporting, absence of control groups, and short time frame in these programs giving others no confidence in their findings (Hanson et al., 1987).

In the past, research on out-of-wedlock births showed that most of the parents came from disadvantaged families and they believed that they had few options in life which included school and employment. Findings showed that there was at least one adolescent pregnancy that already existed within the family, and little value was placed on education and intellectual development. On the other hand, teenagers that have responsible attitudes, no matter the social class, are aware of opportunity costs and the consequences of early pregnancy and this is largely based on morals and values taught in the home (Hanson et al., 1987). In 2016, there were 1,565,931 out of wedlock births to women aged 15-44 (Hamilton et. al, 2017).

**Eugenics Movement**

In 1883, Sir Francis Galton coined the term *eugenics* defining it as the scientific study of inherited characteristics with a focus on encouraging “wellborn” people with desirable traits to propagate, while discouraging, even prohibiting, the “unfit” from having children (Haller, 1963). Eugenic ideas became influential and popular, shaping the public discourse and the work of social scientists, politicians, social reformers, and
social workers of many different political persuasions (Leonard, 2005). During the Progressive Era, the United States eugenics movement shaped many early social workers’ beliefs about and approaches to social problems (Kennedy, 2008).

Scholars, such as Charles Darwin and Herbert Spencer, contributed to Galton’s work on eugenics and shortly thereafter, criminal anthropology emerged as an influential discipline (Haller, 1963). Italian criminal anthropologist, Cesare Lombroso, examined the hereditary aspects of criminals and concluded that criminals were characterized by an animalistic appearance and behavior that is hereditary and incurable (Haller, 1963). Galton, cousin of Darwin, devoted much of his life’s work to advocating that the future of the race was dependent on curtailing the birth rate of the unfit through social controls while simultaneously increasing the reproduction of the fit (Haller, 1963).

The American Breeders’ Association, the first national American eugenics organization in the United States, was formed in 1903. This association included a Committee on Eugenics convened to examine heredity and to emphasize the importance of “superior blood and the menace to society of inferior blood” (Haller, 1963). Some of the lead eugenicists who participated in the association included Charles Davenport and Harry Laughlin. They fought to pass eugenic public policies (Haller, 1963).

During the Progressive Era, those categorized as being unfit included those who were sexually active, unmarried women, and adolescent girls who were later referred to as delinquent (Haller, 1963). African Americans were considered inferior racial types and categorized as degenerates (Brice, 2005). Poor, morally deficient females were considered dangerous to society, because they would “become the mothers of illegitimate
children soon after reaching the age of puberty,” children whose “helplessness, pauperism, and ruin” would consistently supply the “elements of degeneracy” to the community (Davies, 1959).

Women and girls, especially African Americans, were conceptualized as being the primary carriers of bad blood and the fundamental socializing agents of children (Rafter, 1992). They were, also, believed to be the fundamental reproducers of pauperism, a major social problem that was understood by many to be hereditary (Rafter, 1992). Women considered to be unfit were perceived to be debauchers of men and boys and polluters of society who required punitive social control (Pickens, 1968). Rapid demographic changes in urban areas shifted the eugenics focus to young women (Kennedy, 2008).

By the end of the 19th Century, young women aged 15-24 made up over a third of the female population with 72% being unmarried in large urban areas. During this time, perceived changes in birth rates gained the attention of eugenic advocates (Kennedy, 2008). The perception of eugenic advocates was that ratings of nonmarital births appeared to be increasing, and the unfit seemed to be “breeding rapidly with no regard for consequences” while the wellborn were thought to be having fewer children, indicating that society was heading toward race suicide (Davies, 1959).

During the Progressive Era, sterilization was legitimated by the state, and 17 states enacted legislation that mandated the sterilization of many groups who were deemed unfit. As a result, more than 3,000 people were sterilized between 1907 and 1921 (Haller, 1963). Case studies were examined that revealed that adolescent girls were
at risk of sterilization because of their failure to conform to gender expectations compounded by their poverty and their minority status (Haller, 1963). In North Carolina, three young women were recommended for sterilization for reasons pertaining to sexual delinquency. Similarly, women in California, the leading state in terms of eugenic sterilization, were recommended for sterilization for the same reasons (Davies, 1959). In Virginia, those recommended for sterilization were considered feebleminded and sexually licentious (Davies, 1959).

By 1920, social work professionals took part in major social reform efforts, such as the child-saving movement and the social purity/social hygiene reform movement (Kennedy, 2008). Often, there was common ground among social reform efforts and eugenics. William Snow was the president of the American Social Hygiene Association in 1916, as well as, the vice president of the Eugenics Society. Jane Addams was also an honorary vice president of the American Social Hygiene Association (Haller, 1963). The goals of the American Social Hygiene Association included encouraging education on heredity for youths, minimizing marriage between the venereal sick and the well, preventing reproduction of defectives, and safeguarding children (Haller, 1963).

Many social worker visionaries, such as Jane Addams, focused on degenerate adolescent and young women, advocating the need for social control. The opinions of these visionaries contributed to emerging practice approaches and social policies that were aimed at adolescent and young women (Kennedy, 2008). In 1917, American social work pioneer, Mary Ellen Richmond, wrote a book titled Social Diagnosis that focused
on unmarried adolescent mothers. She suggested that school evidence plays a major role in the discovery and segregation of defectives (Kennedy, 2008).

Eugenic ideas, which were reflective of the Progressive Era’s dominant understanding of gender, race, ethnicity, and class, were key aspects that social workers applied by rounding up, testing, diagnosing, and institutionalizing young women. Social workers during this era became powerful agents of social control (Kennedy, 2008). Leading visionaries, such as Richmond and Addams, were actively involved in furthering the eugenics agenda with young women. However, social workers that struggled to define themselves as experts and distance themselves from the eugenic ideas, embraced a new scientific approach that was grounded in the exhaustive assessment of mental, physical, and social functioning. This new scientific approach led to more Draconian interventions. However, notions about morality and degeneracy are still alive today, continuing to shape the perception from society of young people in relation to their sexuality and childbearing (Kennedy, 2008).

**Religion**

One of the most prominent formal mechanisms instrumentally used in promoting resiliency and hope among African American youth is the Black Church. From a historical context, the Black Church, also interchangeably used with the African American Church, in America is a religious institution that developed out of the need for a safe haven during the time of slavery and it continues to be key in religion, spirituality,
and socialization of African Americans (Barnes, 2005; Elliott, 1989). The assumption is that those who engage in religious practices are doing so to increase spirituality.

Elliott (1989) indicates in his discussion of Black theologians, theology, the church, and spirituality where he highlights Cone’s Christocentric theology that Jesus Christ is the center of spirituality. Cone (1970) states that Black history is related to Black theology and that Black consciousness is the Black community focusing on its blackness in order that Black people may know not only why they are oppressed, but also be conscious about what they should do with that oppression. Doswell, Kouyate, & Taylor (2003) defines spirituality as one’s ability to stay centered no matter how severe one’s life circumstances and how conflicting the messages coming from one’s personal, family, and community are. Other researchers define spirituality as the personal growth of an individual; moving towards a relationship with God; growing in a relationship with God; increased understanding of the meaning of life and death; a greater meaning to life than self; and behaviors which indicate a spiritual connection to God (Chandler, Holden, & Kolander, 1992; Donahue, 2009; Good & Willoughby, 2008).

There are various writers who indicate that spirituality is a strength and protective factor for African American families (Haight, 1998; Hill, 1972; Logan, 2001). Manning, Cornelius, & Okundaye (2004) states that spirituality in the lives of African Americans suggest that they view the church as a resource and coping strategy. They also view the church as a place they attend to participate in activities that reinforce their belief in God, such as, praise and worship. In the study conducted by Harley & Hunn (2014), findings showed that faith was viewed as the mechanism for overcoming difficult or stressful
situations and activities, such as prayer and praise and worship give hope and assist them in reaching their future goals.

Harley & Hunn (2014) state that social work practitioners who work with adolescents can use spirituality as a tool to help adolescents who have barriers to psychological, sociological, and biological development to focus on what is important and how to begin to achieve self-mastery. Logan (2001) states that spirituality and participation in positive activities are shielding factors for African American youth to stay in school, for positive role modeling, mentoring, and to reduce pregnancy (McAdoo & Crawford, 1991; Raider & Pauline-Morane, 1998).

Many churches offer Vacation Bible School and even operate schools for youth of all ages to offer some of these positive activities. African American churches also often sponsor recreational athletic teams for youth, as well as, social groups such as Boy and Girl Scouts to encourage post-secondary educational attainment. These types of churches often offer college scholarships and arrange pre-college tours, and many refer to these churches as protective mechanisms for promoting hope among African American adolescents (Harley & Hunn, 2014).

Research studies indicate that spiritual involvement is a meaningful indicator to promote academic success and goal achievement among African American students in the face of adversity (Blau, 1981; Sanders, 1998; Toldson & Anderson, 2010). Studies also show that there is a positive relationship between spirituality and mental health (Frankel & Hewett, 1994; Holder, Coleman, & Wallace, 2010; Good & Willoughby, 2008; Ryan, Rigby, & King, 1993). Cavalletti (1992) states that when it comes to
children, a belief in God and His unconditional love for them helps one to develop their self-identity, as well as, build and sustain self-esteem. Therefore, spirituality, belief in God, and spiritual activities can promote teen mothers to succeed in postsecondary education attainment through strength and positivity.

**Perceptions of Teen Mothers**

In recent studies, teenage pregnancy amongst females between the ages of 15-19 has been perceived as too early due to physical and emotional maturity levels. However, many scholars, such as Hoga, Borges, and Alvarez (2009), stated that this age group is accepted and ideal for a female to give birth. Several adolescents view teenage pregnancy as permission to become an adult or to become involved with more complex dimensions that are associated with a change in the status and assurance of projects of upward mobility (Hoga et al., 2009). It is still common for pregnant and parenting teens to be teased or gossiped about (Luker, 1991).

Letourneau, Stewart, and Barnfather (2004) states that teen mothers are susceptible to live in poor conditions, suffer high stress, lack adequate financial resources, and have limited educational opportunities. Teen mothers are much poorer and tend to have more children and less education than other women on welfare (Fielding & Williams, 1991). Teen mothers form an essential core of those who receive welfare generation after generation, and they account for a great number of the 40% of all African American children living in poverty (Fielding & Williams, 1991). Historically, it has been the perception from society that adolescent mothers are unable by nature to provide
for the needs of a child because they are consumed with meeting their own needs (Solomon & Liefeld, 2001). Ries (1989) states that not all adolescent mothers are unprepared for parenting responsibilities, and in fact, some parent well. Some young mothers even proceed to lead highly productive and meaningful lives (Letourneau et al., 2004).

In 2013, the New York City Human Resources Administration (HRA) initiated an approach to prevent teenage pregnancy which was perceived as hostility towards teen parents (Vinson & Stevens, 2014). The HRA campaigned posters that featured photographs of babies alongside statements that targeted teen parents. According to Vinson & Stevens (2014) one of the posters included an image of a baby crying alongside a statement that read, “I am twice as likely not to graduate high school because you had me as a teen.” Another poster featured a baby alongside a statement that read, “Honestly Mom, chances are he will not stay with you. What happens to me?” (Vinson & Stevens, 2014).

The National Women’s Law Center, along with other organizations that support pregnant and parenting teens, publicly analyzed the HRA’s campaign stating that this deficit perspective could lead to detrimental and discriminatory practices that would affect the life outcomes of teen mothers (Vinson & Stevens, 2014). Many researchers have questioned the statistics used to associate mischiefs with the timing of a woman’s birth and argue that the statistical outcomes of a teen mother are not related to childbirth but to poverty (Vinson & Stevens, 2014). For example, feminist researchers illuminated that negative representations of teen mothers encourage the ongoing stigmatization of
pregnant and mothering young women (Vinson, 2013). This stigmatization also creates ineffective policies regarding pregnant and parenting teens and the continuation of racialized and gendered representations of deviant sexuality (Vinson, 2013).

Many teen mothers are less knowledgeable about child development and they hold more punitive attitudes toward childrearing (Solomon & Liefeld, 2001). Adolescent mothers are also more depressed than those who become a mother at an older age (Solomon & Liefeld, 2001). Some adolescents perceive teen parenting as a “career choice” or a “rite of passage” in creating an adult identity (Merrick, 1995). Bickel, Weaver, Williams, and Lange (1997) suggests that the presence or absence of opportunities for valued participation within the social contexts of family and community has been found to be associated with school success or failure.

Kane, Morgan, Harris, and Guilkey (2013) state that the effects that teen mothering has on postsecondary education varies widely by marital status at the time of conception, socioeconomic background, and time periods making it unclear whether there is a causal relationship. Policy makers typically operate under the assumption that teen parenting has negative consequences for women and, as a result, organize many efforts to prevent teen pregnancies. However, this assumption is not necessarily true when it comes to postsecondary education attainment (Kane et al., 2013).

There is a thriving consensus among economics that teen parenting has possibly zero causal impact on the mother’s educational outcome (Lang & Weinstein, 2015). According to Perper, Peterson, and Manlove (2010), African American teen mothers are more likely than white or Hispanic females to earn a high school diploma or GED by the
age of 22. However, Fletcher & Wolfe (2009) states that teen parenting reduces the probability of receiving a high school diploma by 5 to 10 percent and decreases the chances that they will attain postsecondary education.

**Deficit Perspective**

The phenomena issue of teenage pregnancy started with worries about black family structure in the 1960s with the Moynihan Report before it became a public concern in the 1970s (Williams, 1991). In 1965, Daniel Patrick Moynihan wrote a report titled *The Negro Family: The Case for National Action*. The Moynihan report suggested that African American families operated on a principle that is contrary to the norm. Moynihan suggested that the African American family was matriarchal where the norm then held that the father was the head of the family. Moynihan supports his idea of a woman-centered family structure within the black family by census and labor market data. Since this report, society has viewed teenage pregnancy from a deficit perspective. Most of the research and public policy, historically and currently, on teenage pregnancy among African American females has been deflected by an emphasis on the public costs and fatalistic tragedies of teen childbearing (Williams, 1991). This deficit perspective of cultural influences, poverty, and racism has shaped the stereotypical views of the sexual behavior of African American teenage mothers (Williams, 1991).

African American families were associated to and often determined by illegitimacy, poverty, joblessness, and a multitude of other issues that confronted the black community (Williams, 1991). In the Moynihan Report, he states that African
American youth were caught in “a tangle of pathology” that is repetitive generation after generation. During the 1970s, female-headed households came into existence as families began to break apart and a vast number of women were going into the workforce. Moynihan drew attention to this disadvantageous economic position causing negative reactions from those who did not support him (Williams, 1991).

**Attitudes towards Teen Mothers**

Teen pregnancy has been one of the greatest public health challenges over the course of history (Kappeler, 2015). The U.S. Department of Health and Human Services has identified the unintended pregnancies of adolescent teens as a priority for a nationwide health improvement. Barber, Yarger, and Gatny (2015) states that the racial disparities in unintended teen pregnancies is more than twice as high for African American females versus white females. According to Avery and Rendall (2002), black women experience more poverty, less education, more unemployment, lower quality early education, more discrimination, and fewer opportunities than white women. These findings alone may affect attitudes toward contraception (Avery & Rendall, 2002).

Most researchers suggest that attitudes towards sex, contraceptive use, and pregnancy plays a major role in unintended adolescent pregnancies (Barber et al., 2015). According to Barber et al. (2015), the differences in those attitudes based on family background, economic opportunity, and the legacy of forced sterilization among African Americans along with other minority populations is the cause of the racial disparities of adolescent pregnancies in the United States.
In recent years, teen birth rates, overall, in the United States have declined since the 1990s. The birth rate for females aged 15-19 declined from 89.1 births per 1,000 females in 1960 to 26.5 births per 1,000 females in 2013 (Kappeler, 2015). This is an historic low for the United States, although, the percentage increased by 10% from 2012 to 2013 (Kappeler, 2015). When the social support of a teen mother is limited, their effectiveness medically, psychologically, and educationally is challenged. Social Support is defined as interactions with friends, peers, family members, and health professionals that communicate information, esteem, aid, and understanding (Letourneau et al., 2004).

In 1997 and again in 2001, the New Labour government was elected, ending two decades of Conservative rule (Arai, 2009). One of the focal points of the New Labour government was the teenage pregnancy policy. In the beginning of the first term, the New Labour government made a reduction in teenage pregnancy, a task that the previous Conservative administration was not able to achieve (Evans, 2006). Previous political stances on teenage pregnancy and young mothers under the Conservative administration were found to be judgmental (Arai, 2009). The New Labour’s approach to the teenage pregnancy policy sought to change the perception of youth pregnancy not as a problem of sexual morality but as a cause and consequence of health and socioeconomic inequalities (Arai, 2009).

Since 1988, the proportion of American adolescents who were having sex at early ages has decreased, and the use of contraceptives has increased since the 1990s (Kappeler, 2015). Despite the positivity in these trends, 273,105 infants were born to teen mothers in 2013 and the birth rate in the United States remains higher than any other
country (Kappeler, 2015). The U.S. Department of Health and Human Services (HHS) Office of Adolescent Health (OAH) is tasked with supporting a national, evidence-based program called Teen Pregnancy Prevention (TPP) that gives hard evidence of what works, supporting the testing of new approaches, investing in evaluation, and fostering a culture of learning (Kappeler, 2015).

**Policy Response towards Teen Mothers**

It is with great effort that the strive nationwide is to prevent teen pregnancy, but regardless of the efforts, many teens in the United States become pregnant each year. In 2006, the decline that had persistently taken place over the past 15 years in the teen pregnancy rate in the United States was reversed. There were 41.9 births per 1,000 females between the ages of 15-19 that took place that year (Kahn & Reeg, 2008). Due to the constant rise and fall of adolescent pregnancy, teen pregnancy prevention must remain a major focus of public policy pertaining to child, youth, and family health and wellbeing (Kahn & Reeg, 2008). The United States as a nation must also commit to its responsibility to provide equal opportunities to those who do become teen parents, as well as, their children (Kahn & Reeg, 2008).

After 40 years of research on teen childbearing, the magnitude of the causal relationship it has with postsecondary education remains unclear (Kane et al., 2013). Most policy efforts aim to target high school completion or a work-based training program when it concerns teen mothers and educational attainment (Kane et al., 2013). Policy makers commonly operate under the assumption that teen childbearing has
adverse consequences for women and as a result, they establish efforts to prevent teen childrearing. However, this may not be accurate when it comes to educational attainment (Kane et al., 2013).

The specialized service needs of young families are often disregarded in both family and youth policies and practices, even when it pertains to postsecondary education (Kahn & Reeg, 2008). Postsecondary education is a benefit that allows young parents to attain stable employment and a living wage that will provide for themselves and their children (Kahn & Reeg, 2008). Workforce and Life Skills Development, a training that affords growth, is also a part of postsecondary education that young parents benefit from and can support their family without the intervention of public assistance (Kahn & Reeg, 2008). Current federal policy requires that pregnant and parenting teens be treated equally in education and supports for labor and delivery (Kahn & Reeg, 2008).

**Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA)**

The Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996 has nine different titles that address a range of low-income programs from child protection to food stamps (Levin-Epstein, 1996). In November of 1996, Teen Parent Provisions were made to this act on the heels of a steady decline in the teen birth rates that took place between 1991 and 1995 (Levin-Epstein, 1996). Research shows that the reason for the decline in the teen pregnancy trend is not known. However, the drop took place in 46 states and it has been determined that no policy or program is
due credit for this (Levin-Epstein, 1996). Given that the trend occurred in 46 states, the conclusion was made that the credit belongs to broad societal trends rather than one state’s program or policy (Levin-Epstein, 1996).

The Teen Parent Provisions added to PRWORA, focuses on provisions through the law that targets teens, teen parents, and teen pregnancy prevention (Levin-Epstein, 1996). Many of the provisions are geared strictly towards teen parents, such as, the stay-in-school requirements for minor teens and the bonus that rewards states that reduce total out-of-wedlock births and abortions (Levin-Epstein, 1996). The stay-in-school requirement precludes any teen parent from receiving Temporary Assistance for Needy Families (TANF) if they do not “participate” in education and their child is 12 weeks of age or older. If a teen parent has already dropped out of school, they are not eligible for TANF unless they return to school (Levin-Epstein, 1996).

**Title IX Amendment Act of 1972**

Public education in the United States was non-existent until well after the birth of the nation, but as the financial foundation of the nation began to become industrial, education gained importance, and the value of education for girls began to rise (Fershee, 2009). During this time, premarital sex began to rise at dramatically high rates resulting in more pregnancies among teens. From the 1940s to the 1970s, boys were treated with a better regard than girls in public schools, and there were no exceptions to pregnant girls (Fershee, 2009). The pregnancy stigma reached beyond the female as an individual. The perception was that the pregnancy could also stain the school’s reputation and the teen’s
family name (Fershee, 2009). In American society during the 1940s and 1950s, image was a huge part of survival and school officials feared that pregnancy would be contagious and result in more pregnancies. As a result, principals would go to great lengths to avoid the stigma of a school where young girls got themselves into trouble such as this (Fershee, 2009).

Teen mothers suffered terrible treatment from their educators in the 1970s. Some were even sent to homes in distant towns when their pregnancies became visible to the public (Fershee, 2009). The Department of Health, Education, and Welfare (HEW) enacted Regulations to clarify the rights and responsibilities of the schools and students, including pregnant teens (Fershee, 2009). According to Fershee (2009), the Title IX has weak provisions when it comes to pregnancy discrimination in the education system because the protections in the Regulations are not adequate to educate, identify, and punish school administrators who treat pregnant teens unlawfully (Fershee, 2009).

In the 1970s, teenage pregnancy was perceived as morally and socially deviant behavior (Hunter, 2007). Missionaries and social workers worked to frame social policies geared towards teen parenting. In the late nineteenth century, women of evangelical reform were the first to draw attention to teen pregnancies, and these women gave funding to maternity homes with the intentions of redeeming and reclaiming teenage mothers (Hunter, 2007).

Adolescent pregnancy was such a crisis, it was often referred to as an epidemic or plague (Fershee, 2009). However, by the 1980s, the teen pregnancy rates started to recede, but the rates were still extremely high, especially for African American females.
In 1985, African American females had the highest percentage of out-of-wedlock teen pregnancies, according to Jones & Battle (1990). The number of out-of-wedlock teen pregnancies even tripled between 1960-1981 for African American teenage females, and because of this disproportionate percentage, the concern for African American teen parents has heightened (Jones & Battle, 1990).

Congress started to recognize the unequal treatment of pregnant teens in America in the early 1970s and began to address it by guaranteeing all girls, whether pregnant or not, a right to equal education (Fershee, 2009). In 1972, President Richard Nixon signed the Title IX Educational Amendments to the Civil Rights Act, guaranteeing pregnant teens the same rights as their peers to education (Guldi, 2016). Prior to the Title IX Educational Amendment, teenage mothers were removed from school and they did not have the ability to participate in extracurricular activities. It was very common to see teen mothers expelled from school or forced to attend an alternative school prior to the Title IX Educational Amendments (McNeeley, 2007). The justification behind removing teenage mothers from school and extracurricular activities was based upon the fear that teenage mothers would contaminate their peers with sexual immorality (Hunter, 2007).

From 1971-1981, there was a decline in teen pregnancies among African American females. There is a combination of factors that influenced the downward trend of the teenage pregnancy rate during this time. According to Jones & Battle (1990), some of the factors that contributed to lower teen pregnancy rates were increased use of contraception, self-esteem, and a change in the patterns of sexual activity because teens were appearing to have more control over their attitudes. Jones & Battle (1990) states
that the reason for the decline of out-of-wedlock teen pregnancies among African American females during that time was due to concerted efforts through various social programs.

Jones & Battle (1990) states that African American teens had social problems that contributed to desperate predicaments. They explain that perverse demographic trends, deteriorating local economies, and functional transformations in the structures of urban areas is part of the contributions. Jones & Battle (1990) suggest that improving or possibly eliminating early pregnancies among African American teenagers would mean to improve their access to quality education, employment opportunities, and to make them prospects for decent incomes.

Programmatic Response towards Teen Mothers

Many teen mothers have academic difficulties, but it has become clear that there are improved outcomes for teen mothers and their children educationally. Sadler et. al (2007) conducted a study in a large urban high school in New Haven, Connecticut that included 65 adolescent mothers enrolled in a parent support program. The school offers a comprehensive teen parent support program for pregnant and parenting teens that includes parent support, voluntary parenting classes, outreach, transportation, legal services, family counseling, mental health services, housing assistance, and an on-site child care program that serves infants and preschool-aged children. The study concluded that high-quality school-based programs that provide support for teen mothers
demonstrate good rates of high school continuation and goals toward attaining postsecondary education.

Teen mothers have academic difficulties in relation to childbearing. However, some studies show that outcomes are improving for both teen mothers and their children when the young mother remains in school and successfully completes postsecondary education. When teen mothers obtain a high school education, they are in a better position to prepare for college, specialized training, or employment (Sadler et al., 2007). High-quality school-based programs, serving the teen mother and her child, provides support for increased postsecondary education success (Sadler et al., 2007).

According to Elster, Lamb, Tavare, and Ralston (1987), very few programs historically have established long term success with pregnant and parenting teens in terms of preventing repeat pregnancies, helping them to achieve a higher educational status, and leaving the welfare rolls. The goal of programs serving pregnant and parenting teens is to prevent repeat pregnancies or improve the health outcomes of the children born to adolescent teens, however, there are few programs that have this focus. Some programs include educational goals that focus only on high school completion (Costello, 2014). Klerman (2004) assessed the evaluation of literature pertaining to pregnant and parenting teens programs and found that more than half of the 19 studies reported postponed repeat pregnancies but only three of the studies had utilized, controlled designs.

Healthy Teen Network (HTN) conducted a review of program evaluation literature in 2007 and found that all school-based programs showed positive results (Knowles, 2007). Two key factors in this success were the location of the programs
being on the high school campus and empathetic case managers (Knowles, 2007). Both factors encouraged pregnant and parenting teens to return to school after the birth of their child and they provided the mothers with individualized support to meet postsecondary educational goals (Knowles, 2007).

There are a few issues that divides politicians, school boards, policymakers, and the public when it comes to out-of-wedlock teen pregnancies (Frost & Forrest, 1995). One of the questions that derives out of the issues is which programs are the most effective in preventing unintended teen pregnancies. There is also the dilemma of which programs should be invested in that will teach skills and provide contraceptives (Frost & Forrest, 1995). According to Frost & Forrest (1990), if programs available for teens would have promoted more responsible sexual conduct, the widespread implementation on teenage pregnancy prevention would be an important first step in reducing the high rates of adolescent pregnancies and childbearing.

Over the years, there have been few programmatic approaches and policy initiatives for improving high school completion and postsecondary education among parenting teens (Costello, 2014). Some studies have been conducted to prevent repeat pregnancies among parenting teens, but research is lacking effective approaches to prepare parenting teens for postsecondary education (Costello, 2014). Postsecondary education provides strategies for economic security for young families, especially if the young parents focus on degrees or certificates with a high labor market value (Costello, 2014).
Childcare is one of the dilemmas parenting teens face when trying to attain postsecondary education. The Institute for Women’s Policy and Research identifies eight programs that provides a range of support, such as academic achievement and comprehensive wrap-around services, to support the pathways to postsecondary education for parenting teens. To improve the ratings of postsecondary education attainment among parenting teens, future data collection and research are needed to develop a clear picture of what the barriers are to academic success and the program components associated with high school completion and the transition to college (Costello, 2014).

Postsecondary education attainment is closely tied to income because many of the parents of teen mothers did not complete high school themselves (Kearney & Levine, 2012). There are very few teen parents that proceed to complete postsecondary education and only half of them receive a high school diploma by their 22nd birthday (Perper et al., 2010). The probability that teen parents and their children will remain poor is high if they do not attain postsecondary education because studies show that a high school degree is no longer sufficient to support a family (Costello, 2014).

Carnevale, Jayasundera, and Hanson (2012) states that in 2011, research shows that over the past decade, the wages of recent high school graduates dropped by 12% resulting in an annual income of $19,400 and a median lifetime earnings of $1,544,000 which is below the poverty threshold for a family of four. It was also discovered that women with an associate’s degree would receive a median lifetime earnings of
$1,544,000 and those with a bachelor’s degree would have a median lifetime earnings of $1,939,000 (Carnevale et al., 2011).

The Center for Assessment and Policy Development (CAPD) identified core components that programs serving pregnant and parenting teens should incorporate. According to Stephens, Wolf, and Batten (1999), those components include flexibility, quality educational options, affordable and quality child care, access to prenatal and family planning services, case management, family support services that include the student’s parents and the child’s father, parenting education, support services for transportation, and support in transitioning to a postsecondary education or career institution.

There is a scarcity of programs that support transitions to postsecondary education (Costello, 2014). The few programs that do support the education of pregnant and parenting teens focus only on high school completion and only serve a limited number of teen mothers. Policies should be implemented to encourage postsecondary education for pregnant and parenting teens and the programs overall should be more developed and strengthened to promote pathways to postsecondary education among pregnant and parenting teens (Costello, 2014).

**School Support**

Teenage Pregnancy is one of the major obstructions to educational success and in many cases the birth of a child symbolizes the end of schooling and those who return to school after giving birth face challenges that makes it hard for them to continue their
education (Chigona & Chetty, 2008). According to Kahn & Reeg (2008), school policies make it more difficult for teenage mothers to complete their education attempting to discourage teen pregnancy. This type of approach is punitive and can be harmful for those teen mothers that are trying to succeed to have meaningful lives for themselves and their child. There is a dearth of research on the impacts of teen motherhood on postsecondary education (Eloundou-Enyegue, 2004).

Teen mothers face many disruptions when it comes to school attendance and they need much support concerning their education (Chigona & Chetty, 2008). Refusing teen mothers the support needed to pursue education condemns them and their child to the circle of poverty and ignorance (Kunio & Sono, 1996). If society expects teen mothers to succeed educationally, provisions must be made for meeting their needs through support programs (Chigona & Chetty, 2008). The Office of Adolescent Health (OAH) suggests that the focus of high school administration for pregnant and parenting teen mothers, should not rest at high school completion as a final goal, but postsecondary education (Costello, 2014).

According to Costello (2014), school systems are continuing to discriminate against pregnant and parenting teens although the Title IX Amendment prohibited this discrimination. The National Women’s Law Center (NWLC) found that pregnant and parenting teens have been placed in unequal, alternative, or separate schools through inflexible and punitive policies (NWLC, 2012). The Title IX requires that separate programs or schools for pregnant and parenting teens must be voluntary and offer
academics and opportunities that are equivalent to their non-parenting peers (Costello, 2014).

Absences from school due to pregnancy, childbirth, or a child’s illness can sometimes make things difficult for parenting teens. However, under the Title IX Amendment, these types of absences are excusable (Costello, 2014). The NWLC (2012) has received a massive amount of pregnancy-related complaints that schools nationwide are pressuring students to attend alternative schools and lower-quality programs. Additionally, schools are refusing to excuse absences related to pregnancy and childbirth and to allow students to make up tests. Pregnant and parenting teens are supposed to receive the same accommodations as those who are temporary disabled for reasons other than pregnancy (NWLC, 2012).

Teen childbirths are associated with weak links to school and chronic school absences (Manlove, 1998). In many different high schools that are attended by lower-income students, the college counselors have more students to counsel, less training, and few resources to assist students with the process to transition to college (White House Task Force on Middle Class Families). Oseguera (2012) analyzed a national cohort of students to examine the impact of socioeconomic status and high school coursework on the transition into postsecondary education. This analysis resulted in finding that students in low poverty areas were less likely to complete college preparatory courses in high school compared to their peers who were not living in poverty.

Feliciano and Ashtiani (2012), states that the attention focus for pregnant and parenting teens should be geared towards the process of schooling and competing
obligations that are experienced outside of school to understand the influence of socioeconomic background on postsecondary education attainment. Feliciano and Ashtiani (2012) states that competing obligations, such as full-time employment and joining the military, are important factors in explaining the low rates of college enrollment among parenting teens. Limited access to affordable child care, discrimination in educational institutions, and the risk of having another child are also obstacles faced by parenting teens to prepare them for the transfer into postsecondary education (Costello, 2014). Only 17% of postsecondary institutions in the United States offer child care to students (Miller, 2010).

Some schools are not willing to provide childcare and teenage parenting programs (TPP) onsite because they do not want to propose that they support teenage pregnancy and parenthood (Vinson & Stevens, 2014). However, it was found that having these services onsite helps participating students identify and apply for services available to them (Vinson & Stevens, 2014). In a high school that provides childcare and TPP for teen mothers, an administrator reported that students are required to go to the child-care center to feed and diaper their children during their study hours. They must also eat lunch with their child assuring that their child’s nutritional needs are met before their own (Vinson & Stevens, 2014). The existing childcare and TPP for adolescent mothers seem to be more punitive and stressful for the student than supportive. Schools should avoid pedagogical strategies, such as this, that stigmatize pregnancy at school (Vinson & Stevens, 2014). The implementation of Title IX requires all federally funded schools to
provide equal educational opportunities to students regardless of their pregnancy or parenting status (Vinson & Stevens, 2014).

Family Support

When an adolescent becomes pregnant and gives birth, it is expected to affect the entire family and a vast amount deals with the care and attention of the new addition (East, 1999). Historically, the family in which the teenager bears a child has been characterized by grandparental childbearing systems where the teen’s mother typically provides the primary care of the teen’s child (Burton, 1996). These grandparenting duties interfere with the mother monitoring or supervising the other children in the home (East, 1999). Parents are often disappointed initially when it has been discovered that a teenage daughter gives birth (Furstenberg, 1980).

In some single parent homes, teen pregnancy is feared because of the prevalent moral principles with a negative effect on the concept of family in their social group (Hoga, et al., 2009). Advice is given to avoid early pregnancy in some homes because it is perceived as an embarrassment and a sign of disrespect to the family and social values. Some single mothers resort to prayer attempting to lessen the chances of early teen pregnancies in the home (Hoga, et al., 2009). Early childbearing within the family may indicate to the mother of the teen that real-life options are no longer available causing them to rationalize their daughter’s teenage parenting as a satisfactory response to their disadvantaged socioeconomic circumstance (East, 1999). Leon Festinger developed a theory in 1957 calling this type of attitude change the theory of cognitive dissonance.
According to Festinger’s theory, the tension shaped by contrasting attitudes and behaviors motivates a change in either the behavior or the attitude (East, 1999).

According to Oberlander, Black, and Starr (2007), residence has been determined to be an important factor for postsecondary education attainment for adolescent mothers. The PRWORA of 1996 required all mothers under the age of 18 to live in an adult-supervised home to receive assistance under the assumption that this would promote educational and economic attainment (Kalil & Danziger, 2000). There is evidence in research that suggests that when adolescent mothers live at home, they will complete their education, fulfill their own developmental needs, and become proficient parents (Spieker & Bensley, 1994). Researchers suggest that co-residence allows low-income families to manage limited resources and help adolescent mothers attain postsecondary education through family networking (Spieker & Bensley, 1994).

According to Barnet, Liu, DeVoe, Alperovitz-Bichell, and Duggan (2007), adolescent mothers are at risk for repeat pregnancies, school dropout, poor parenting, and depression. Campbell-Grossman, Hudson, Kupzyk, Brown, Hanna, and Yates (2016) states that many mothers who drop out of school are depressed with stressors relating to becoming a parent and stressors from school. According to Edwards, Thullen, Isarowong, Shiu, Henson, and Hans (2012), studies show that 49% of African American teen mothers report depression symptoms after giving birth and research shows that this can be linked to a lack of social support. Insufficient social support and problematic support have been identified as two factors that are associated with stress among adolescent mothers (Campbell-Grossman et al., 2016). Problematic support has been
identified as social support given by providers who mean well, but is perceived as unhelpful by the adolescent mother. This happens when potential supporters do not understand that certain situations affect people in different ways (Hudson, 2012).

Adolescent pregnancies, repeat pregnancies, and a lack of postsecondary education attainment gives adolescent mothers limited alternatives to succeed, and places them in position to be dependent on welfare (Taylor, 1990). A portion of teen mothers with low-income backgrounds will not pursue postsecondary education due to lower educational expectations of their parents (Feliciano & Ashtiani, 2012). Many parents of low-income students did not attend college themselves and sometimes find it difficult to assist their children with college and financial aid applications (Costello, 2014).

The family support center approach relies upon an ecological model that recognizes the contexts of family and neighborhood as two of the most important influences on a teen mother’s life (Solomon & Liefeld, 2001). Dunst, Trivette, Starnes, Hamby, & Gordon (1993) states that family support is based on the premises of adopting a socioecological perspective of human development, a community-based focus and orientation, the importance and value of diverse forms of social support for strengthening family functioning, a developmental perspective of parenting, and the value and importance of affirming, promoting, and strengthening cultural diversity.

Community Support

Supporting a teenage mother can be formal or informal, according to Brosh et al. (2007). Community support is considered formal support that consists of support
provided by professional services and programs (Brosh et al., 2007). The alternative school system is one of the more popular forms of community support utilized by teen mothers (Brosh et al., 2007). When teen mothers become pregnant and become participants in public assistance programs, they often revert to an alternative school setting (Brosh et al., 2007). According to Saunders and Saunders (2002), alternative schools were established because of the concerns that traditional high schools could not meet the needs of pregnant and parenting teens.

Brosh et al. (2007) states that low educational levels are continuously low regardless of community programs, such as alternative schools. There is a strong disconnect between the needs of teen mothers in achieving goals and the sources or types of community support they receive (Brosh et al., 2007). It has been found that teenage mothers receive inadequate support according to their aspirations and plans (Brosh et al., 2007). Teachers and programming staff place more importance on simple life skills and parenting topics rather than educational support and employment goals.

Camerana, Minor, Melmer, and Ferrie (1998) conducted a study of teen mothers using semi-structured interviews and determined that access to community programs, such as daycare, were highly treasured in achieving their educational goals. The researchers in this study also found that informal support, such as family and friends, were not supportive of the educational aspirations of teen mothers. Teen mothers with a higher achievement goal and depend on educational community support are more inclined to complete higher educational goals than teen mothers who allocate more importance on informal supports (Brosh et al., 2007).
Home visiting is another formal type of community support. It is a community-based approach to support adolescent mothers and the furthering of their education (Barnet et al., 2007). According to Barnet et al. (2007), home visiting strategies is a functioning mechanism for teen mothers who are hard to engage, at high risk, and living under adverse circumstances. Home visiting is an in-person contact between the home visitor and the adolescent mother where the mother receives mentoring and case management (Barnet et al, 2007). Community-based home visiting improves the attitudes and beliefs of adolescent mothers and increases the chances of postsecondary education success (Barnet et al., 2007).

**Theoretical Framework**

The volume of literature on parenting teens has grown tremendously in fields such as social work, psychology, and nursing and despite the amount of research on this phenomenon, there has been no formulation of a well-accepted theory of adolescent pregnancy (Bingham, Miller, & Adams, 1990). However, resilience theory, ecological theory, and the Afrocentric perspective guided the framework of this study. Former teen mothers who have attained postsecondary education illustrate these theories because they were able to succeed educationally despite the challenges they faced as a parenting teen. Recent studies show variability in long-term outcomes, suggesting that many teenage parents overcome the challenges associated with teenage parenting by resilience.

According to Hurd & Zimmerman (2010) resilience is having the capacity to recover from difficult situations in a timely manner. Fergus & Zimmerman (2005) states
that resilience is the process to overcome the negative effects of risk exposure, coping successfully with traumatic experiences and avoiding the negative trajectories associated with risks. A key requirement of resilience is the presence of both risks and promotive factors that either reduce or avoid a negative outcome or help to bring about a positive outcome. Although resilience theory is concerned with risk exposure among adolescents, it focuses on strengths rather than deficits (Fergus & Zimmerman, 2005).

Research on resilience has increased over the years focusing on psychopathology rather than behavior (Fergus & Zimmerman, 2005). Resilience theory provides a framework for considering a strengths-based approach to understanding child and adolescent development and informing intervention design (Zimmerman & Brenner, 2010). According to Masten, Cutuli, Herbers, and Reed (2007), resilience theory supplies the conceptual scaffolding for studying and understanding why some youth become healthy adults despite risks exposure.

Across most risk factors, such as sexual behavior, parental factors have been vital in helping youth become resilient. Based on resilience theory, assets and resources help youth to overcome negative effects of risk exposure (Fergus & Zimmerman, 2005). Resilience theory is useful for public health education because it helps to develop an analytic approach that cuts across the specific issue to build knowledge and inform practice using a strength-based paradigm (Zimmerman, 2013).

Factors associated with adolescent childrearing may encourage women to pursue postsecondary education (Diaz & Fiel, 2016). Leadbeater & Way (2001) conducted a six-year study of 126 teen mothers and their children and concluded that resilience does
not appear in an individual. Instead, dynamic, multidimensional processes characterize resilience in an individual. Leadbetter & Way (2001) states that it is important to examine the behavioral, physical, and psychological dimensions of each teen mother’s resilience and the factors that permitted these factors to display.

Another theory examined in this study is ecological theory. Ecological theory was developed and adapted by Urie Bronfenbrenner in the 1970s from the physical sciences to human behavior (Corcoran, Franklin, & Bennett, 2000). Bronfenbrenner discussed the different systems levels as microsystem, mesosystem, exosystem, and macrosystem. The microsystem involves the characteristics and roles of a developing individual (Corcoran et al., 2000). It encompasses the interactions and relationships a child has with her immediate surroundings. The older a teenager is, the more likelihood that she may become pregnant (Landry, Bertrand, Cherry, & Rice, 1986; Mayfield-Brown, 1989).

At the mesosystem level, broader social environmental influences will influence functioning. For example, the amount of income within a family unit will dictate the extent a teen mother will have financial support from a family member. The exosystem level suggests that an individual interacts indirectly, but an individual’s development is still affected (Corcoran et al., 2000). For example, a teen mother’s working hours is an indirect interaction between a teen mother and her parent. However, the teen is affected, whether positively or negatively behind this.

The socioeconomic status and race has been discussed at the macrolevel of the ecological theory as significant factors in contributing to premature pregnancy and
childbearing (Abrahamse, Morrison, & Waite, 1988; Barnett, Papini, & Gbur, 1991; Hanson, Meyers, & Ginsburg, 1987). Cultural patterns and racial differences in adolescent behavior is attributed by socioeconomic status and race (Bingham et al, 1990; Furstenburg, Brooks-Gunn, & Morgan, 1987; Hogan & Kitagawa, 1985). Furthermore, adolescent mothers who lack a robust ecological system are more than likely to be dependent on public assistance, suffer from mental health issues or refrain from seeking postsecondary education (Lerman, 1997; Maynard, 1997).

**Afrocentric Perspective**

The term Afrocentric portrays the unique worldview of people of African descent and provides historians with a tool for analyzing the intellectual history of African nationalism (Israel, 1992). According to Asante (1987), African people have developed their own perspective of history and culture, distinct from the perspectives of others, and the interpretation of African historical data has been written from a Eurocentric perspective with the result being intellectual conflict based on incorrect premises. The Eurocentric perspective of African history has distorted the analysis of the African past and has negatively affected modern African historiography (Israel, 1992).

The Afrocentric perspective, established at Atlanta University School of Social Work, was established by a new generation of African American social scientists to challenge Eurocentric hegemony by building conceptual paradigms that support the history, traditions, and visions of individuals of African descent (Schiele, 1997). The
cause for this establishment was due to the concern of the hegemony and universalization of Eurocentric perceptions and concepts in the social sciences (Schiele, 1997).

The Afrocentric perspective was a response to what the faculty and student body of the school perceived as overwhelming superiority Eurocentric perceptions and paradigms that are used to address social issues experienced by diverse populations who were not always of European origin (Adams, 1981). Mazama (2001) states that Afrocentricity opposes that the issue African Americans have is unconsciously adopting the western worldview and perspective and their attendant conceptual frameworks. The list of theories and ideas that have invaded our lives as normality or ideal is infinite. In other words, we exist on borrowed European terms, according to Mazama (2001).

According to Wright (2013), the Afrocentric perspective sought to transcend the conventional pathological view that African Americans, poor or oppressed groups due to race, ethnicity, gender or sexual orientation, experience social dysfunctioning, mainly due to internal deficits and character disorders. The Afrocentrist social scientists placed traditional Africa at the center for analyzing the Afrocentric perspective with an emphasis on worldviews to explain how it conceives social welfare philosophy and what social welfare policies it would support (Schiele, 1997). The Afrocentric idea is a powerful idea that represents the strongest challenge to the European power structure (Kwame Nantambu, 1996).

The purpose of the Afrocentric idea is to give African Americans their African, victorious consciousness back (Mazama, 2001). In relation to social work, Afrocentric social work can be defined as a method of social work practice based on traditional
African philosophical assumptions that are used to explain and to solve societal and human problems, oppression, and spiritual alienation. Values of the Eurocentric worldview, such as spirituality, collectivity, mutual aid, and cooperation, leads to oppression and created spiritual alienation because they are de-emphasized and underdeveloped (Schiele, 1997).

In 1983, the Association of Black Social Workers and Allied Professions (ABSWAP) provided evidence to the House of Commons Social Services Committee emphasizing the plight of African American children in the care system and identified the need for a legislative framework that addresses race, culture, and language in the provision and delivery of services. The Afrocentric perspective has the guarantee of equal opportunities for all individuals in a given society to maximize their talents and skills (Schiele, 1997). To enhance educational opportunities, the Afrocentric paradigm advocates collective responsibility for the cost of higher education, making the high school training more akin to college training with inclusion and affirmation of multicultural curricula (Schiele, 1997).

Several of the principles that govern the development of the Afrocentric perspective in education were first established in 1933 by Carter G. Woodson in The Mis-education of the Negro (Asante, 1991). Woodson reveals that African Americans in America have been educated away from their own culture and traditions and attached to the fringes of European culture (Asante, 1991). Providing philosophical and theoretical guidelines and criteria that are centered in an African perception of reality and placing the African American child in his or her proper historical context and setting, Afrocentricity
is needed for African Americans to facilitate academic success and to move away from the cycle of miseducation and dislocation (Asante, 1991). However, there are critics who believe different about the Afrocentric perspective, such as Kwame Anthony Appiah. Appiah completed an essay that argues that the current Afrocentrism model is basically ethnic philosophy discourse. Appiah states that Afrocentrism uses a paradigm that mirrors Eurocentric constructions of race and a preoccupation with the ancient world of Africa that no longer exist as a basis on which to develop its frame of reference (Appiah, 1992).

In relation to teen mothers, the Afrocentric perspective has an overall principle to provide equal opportunity for all individuals to amplify their skill set and abilities so that everyone has a fair chance at being successful. Grounded in its humanistic values, the Afrocentric perspective prepares and allows teen mothers to maintain their humanity in the constant face of dehumanizing conditions and challenges they face as being teen parents. The Afrocentric perspective allows teen mothers to view their self-worth, self-value, and equal ability potential giving them the same opportunities as their non-parenting peers.

Schiele (1997) states that since we all are connected in some form, society cannot consider itself as effective if the needs of others are not met. Success and failure is reflective of the success and failure of each other. The utilization of the Afrocentric perspective allows individuals, particularly school officials, to understand that participation in the decision-making process towards postsecondary education attainment
is essential for teen mothers as it will give them the ability to apply the basic tenets of the Afrocentric perspective to their lives themselves.
CHAPTER III
METHODOLOGY

The major objective of this chapter is to present the research method utilized to conduct this study and the appropriate procedures for data analysis and presentation of findings from this study. This study serves the purpose of exploring survived experiences of former teen mothers who have successfully attained postsecondary education and to understand the factors that aided their success. The following sections are included in this chapter: research design; description of the site; sampling and population; instrumentation; measurements; data analysis; treatment of data; and limitations of the study.

Research Design

An explanatory research design was employed in this study. This study was designed to explain data that identifies and examines the perceptions of former teenage mothers regarding their strategies of resilience and their ability to succeed in attaining postsecondary education despite any challenges they faced as being a parenting teen. According to Given (2008), explanatory research suggests that the research in question is intended to explain rather than simply describe the phenomena studied. Explanatory research has been quantitative in nature and has typically tested prior hypotheses by measuring relationships between variables using statistical techniques (Given, 2008).
The survey design used in this study theorizes former teen mothers’ perceptions and their beliefs of components that impelled them towards becoming successful in the attainment of postsecondary education. The following are factors that influence postsecondary education attainment: Policy response, Programmatic response, School support, Family support, and Community support. Explaining these factors from the perception of successful, former teen mothers can help policy makers, school administrators, social workers, and society better understand the needs of teen parents to support them in reaching their goals towards postsecondary education attainment.

**Description of the Site**

The research was conducted in the state of North Carolina. North Carolina is one of the most progressive states when it comes to reporting teen pregnancy data. Participants were recruited via Facebook and Instagram. According to Akard, Wray, and Gilmer (2015), social media recruitment may be used as one strategy to recruit a more diverse or large sample of participants, and Facebook ads have been used as a time-efficient and inexpensive recruitment method.

**Sample and Population**

The target population for this study was African American former teen mothers who gave birth between the ages of 13-19 years of age and have since succeeded in postsecondary education attainment from an accredited institution of higher education. However, the survey was open for former teen mothers of all races to participate in completing the survey if they met the criteria. Purposive and snowball sampling method
was utilized to recruit participants via Facebook and Instagram. Guarte & Barrios (2004) states that purposive sampling is described as a random selection of sampling participants within the segment of the population with the greatest information on the characteristic of interest.

Snowball sampling is a method of recruitment that employs research into the participants’ social networks to retrieve access to a specific population. Snowball sampling is often utilized when a population under investigation is hidden due to low numbers of potential participants or the sensitivity of the topic (Browne, 2002). The researcher randomly selected participants by posting a flyer to the researcher’s Facebook page that gave a brief description and purpose of the study, as well as, the criteria that had to be met to qualify for participation. Respondents were asked to simply send their email address to the researcher if they met all qualifications to participate in the study and were voluntarily willing to participate. Once the email addresses were received by the researcher, the link to take the survey was sent to each participant via an online survey development software called SurveyMonkey. The researcher resulted to using snowball sampling to solicit more participants for a total of 212 participants.

**Instrumentation**

The research study employed a survey questionnaire titled *Teen Mothers’ Educational Success Survey* (see Appendix B). The survey was constructed in consultation with research advisors at Clark Atlanta University and pre-tested on four randomly selected former teen mothers, that qualified to take the survey, before it was finalized. The instrument consists of two sections with a total of 33 items. Section I
consists of questions regarding demographic information about the participants regarding their current age, the age when they had their first child, gender, highest level of education obtained, marital status, and ethnicity. Section II consists of questions concerning the level of factors that influenced postsecondary education attainment as a teen mother.

Section II consists of 26 questions (7 through 33) that collected data utilizing a Likert scale to measure factors from the perspective of former teen mothers that influenced their success towards postsecondary education attainment. These questions measured the following standards: Policy response, School support, Family support, Community support, Teen parenting programs, Resilience, and Mentoring. Questions regarding Policy Response were created based on the mandates of Title IX of the Educational Amendments to the Civil Rights Act of 1972. Questions addressing School Support were adopted from a study titled Supporting the Academic Success of Pregnant and Parenting Students (U.S. Department of Education, 2013). Questions that addressed Family and Community Support were adopted from Brosh et. al (2007). Questions regarding Teen Parenting Programs were adopted from Baytop (2006), a study on the evaluation of several teen parenting programs and the educational attainment of unwed teen mothers.

Questions that addressed resilience were developed based on Zimmerman’s study on Resilience Theory. According to Zimmerman (2013), Resilience Theory supplies a strengths-based approach to understanding child and adolescent development and informing intervention design. The questionnaire for the study was revised based on
feedback from four participants through a pretest. Section II composed of data that utilized the Likert scale on a five-point continuum: 1 = Strongly Disagree; 2 = Disagree; 3 = Neither Disagree or Agree; 4 = Agree; and 5 = Strongly Agree.

**Measurements**

The dependent variable measured in this study is Postsecondary Education attainment. Postsecondary education is a two or four-year institution of higher education or a vocational, adult education institution (Grigal, Hart, & Weir, 2012). Postsecondary education consists of broad liberal arts or career focused education. State, federal, and local governments combined contribute one percent of the nation’s gross domestic product to postsecondary education to address long-standing economic inequalities and leads to economic growth (Barrow, Brock, & Rouse, 2013). State, federal, and local government have increased efforts to aid in the affordability of postsecondary education beginning with Title IV of the Higher Education Act of 1965 to develop programs, such as Pell Grants, Stafford Loans, and Federal Work-Study, to help students with exceptional financial need (Barrow et al., 2013).

The independent variables in this study include School support, Family support, Community support, Teen parenting programs, Resilience, and Mentoring. In relation to school support measurements, a school must excuse a student’s absences due to pregnancy or childbirth. Also, schools cannot exclude a pregnant student from participating in any part of an educational program and should support the student in achieving high school completion prepared for college or a career (U.S. Department of Education, 2013). Family support was measured according to the support that the teen
mother received as a teen mother. Family support can be defined as a network in which
ten mothers perceive love, care, and guidance for help with daily tasks. Family support
is substantial in offsetting the stress of a parenting teen (Schrag & Schmidt-Tieszen,
2014). Community support includes housing, educational support, relationship support,
parenting education, and transportation to health services. Community support helps to
build strong families and breaks the cycle of dependency associated with teen parenting
and the persistency of poverty (Hudgins, Erickson, and Walker, 2014). Community
support was measured based on these meanings.

**Reliability of Measurements**

Social media can be defined as any online and mobile resource that provides a
forum for generating, sharing, or discussing ideas, and content (Gelinas, Pierce, Winkler,
Cohen, Lynch, & Bierer, 2017). The participants in this study were recruited via social
media, Facebook and Instagram, to reach participants across multiple counties throughout
North Carolina. Social media is often used to reach potential participants that has
historically been hard to reach. Social media and its popularity as a recruitment tool is
growing throughout the United States (Gelinas et. al, 2017). Social media recruitment is
held to the same standards as any other type of recruitment efforts including the
requirement for prospective IRB review.

Any ethical issues and concerns characterizing social media recruitment are
substantially the same as those characterizing more traditional recruitment methods
(Gelinas et. al, 2017). Social media is also subject to the same regulatory and ethical
norms as traditional recruitment including requirements of prospective review and
approval compliance with all applicable federal, state, fair, and equitable laws subject to selection, respect for the privacy and other interests of potential participants, sensitivity to the norms and values of different communities and consideration for the impacts of different recruitment techniques on public trust in the research enterprise (Gelinas et. al, 2017). Social media recruitment does not require new regulatory or ethical principles and it should be approached substantially the same way traditional recruitment methods are approached. An example of traditional recruitment versus online recruitment is that traditional recruitment solicits participants by placing flyers in places, such as, subways or buses while online recruitment solicits participants by posting flyers on social media, such as, Facebook, Instagram, Twitter, and LinkedIn (Gelinas et. al, 2017).

**Data Analysis**

The data was exported to the Statistical Package for the Social Sciences (SPSS) for the data analysis. The demographic variables were analyzed in descriptive format using the SPSS software. The SPSS software was also used to conduct the bivariate (chi-square) analysis to explain the relationship between the independent variables and the dependent variable.

**Treatment of Data**

The SPSS software was used to analyze the data in this study. The data was screened for errors which were deleted. The treatment of data employed descriptive statistics that included measurements of frequency distribution, standard deviation, and cross tabulations to explain the distribution of data. The test statistic used for this study
was chi-square test. The data collected through the instrument discussed above provide information on different measurements: nominal, ordinal, and interval. To be more specific, postsecondary education attainment and gender are examples of nominal measurements.

**Limitations of the Study**

There were two basic limitations found in this study. The first limitation of the study is that the study only collected data from participants in the state of North Carolina. Outcomes may have been different from respondents in other states. The second limitation of the study is that, although snowball sampling was useful and a necessary strategy for identifying more respondents that qualified to participate in this study, the resulting sample may be biased to the extent that only those respondents that have a Facebook or Instagram account were solicited to participate in the survey. The selection in nature limits the degree to which the findings are likely to hold different for larger populations since the sample size in this study is small. Therefore, the results of this study cannot be generalized to other populations.
CHAPTER IV
PRESENTATION OF THE FINDINGS

The purpose of this chapter is to present the findings of the study to describe and explain former teen mothers’ perception on the relationship between postsecondary education, school support, family support, and community support. This chapter presents the findings of the study that are organized into two sections: descriptive analysis and bivariate analysis.

Descriptive Analysis

Demographic Data

This section provides a profile of the study respondents. Descriptive statistics were used to analyze the following variables: if they were a teen parent; the age they became a teen parent; the age they had their first child; gender, highest education level; marital status; and ethnicity. The target population for the research was composed of former teen parents who have since attained postsecondary education. There were 212 respondents that participated in taking the survey for this study.
Descriptive results

Table 1

Descriptive Statistics

<table>
<thead>
<tr>
<th>Variable</th>
<th>Mean</th>
<th>SD</th>
<th>Min</th>
<th>Max</th>
<th>Skewness</th>
<th>Kurtosis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>36</td>
<td>10.91</td>
<td>19</td>
<td>79</td>
<td>0.96</td>
<td>1.77</td>
</tr>
<tr>
<td>School support</td>
<td>3.34</td>
<td>0.97</td>
<td>1</td>
<td>5</td>
<td>-0.477</td>
<td>-0.211</td>
</tr>
<tr>
<td>Family support</td>
<td>3.75</td>
<td>.863</td>
<td>1</td>
<td>5</td>
<td>-.618</td>
<td>.705</td>
</tr>
<tr>
<td>Community support</td>
<td>2.41</td>
<td>.947</td>
<td>1</td>
<td>5</td>
<td>.258</td>
<td>-.097</td>
</tr>
<tr>
<td>Teen parenting programs</td>
<td>2.78</td>
<td>1.14</td>
<td>1</td>
<td>5</td>
<td>.185</td>
<td>-1.04</td>
</tr>
<tr>
<td>Resilience</td>
<td>4.14</td>
<td>.907</td>
<td>1</td>
<td>5</td>
<td>-1.05</td>
<td>.998</td>
</tr>
<tr>
<td>Mentoring</td>
<td>3.31</td>
<td>1.12</td>
<td>1</td>
<td>5</td>
<td>-.537</td>
<td>-.668</td>
</tr>
</tbody>
</table>

Table 1 above shows descriptive statistics of the following variables: age, school support, family support, community support, teen parenting programs, resilience, and mentoring.

Figure 1: Age when you had your first child
**Interpretation:** In figure 1 above majority (60.38%) of the respondents indicate that the age they had their first child was between 17 and 19.

**Figure 2: Highest Education Level Attained**

**Interpretation:** In Figure 2 above, majority (47.64%) of the respondents indicate they are college graduates.
Figure 3: Ethnicity

Interpretation: In Figure 3 above, majority (71.23%) of the respondents indicate that they are African Americans.
Interpretation: In Figure 4 above, majority (45.75%) of the respondents indicate that they have never been married.

Bivariate Analysis

Chi-square test was done to answer the six research questions. There are six research questions and six null hypotheses in the study. This section provides the analytical results.

RQ1: Is there a statistically significant relationship between school support and postsecondary education attainment among teen mothers in North Carolina?
Table 2

Results of Case Processing Summary and Chi-square test of School Support

*(n=212)*

**Case Processing Summary**

<table>
<thead>
<tr>
<th>Valid</th>
<th>N</th>
<th>Percent</th>
<th>Missing</th>
<th>N</th>
<th>Percent</th>
<th>Total</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>212</td>
<td>100.0%</td>
<td>0</td>
<td>0</td>
<td>0.0%</td>
<td>212</td>
<td>100.0%</td>
</tr>
</tbody>
</table>

**School support final * Highest Education obtained: Crosstabulation**

<table>
<thead>
<tr>
<th>School support final</th>
<th>Highest Education obtained:</th>
<th>High school</th>
<th>Trade certificate</th>
<th>Some College</th>
<th>College Grad</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Count</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>9</td>
</tr>
<tr>
<td></td>
<td>% within School support</td>
<td>0.0%</td>
<td>11.1%</td>
<td>22.2%</td>
<td>33.3%</td>
<td>33.3%</td>
</tr>
<tr>
<td></td>
<td>final</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>100.0%</td>
</tr>
<tr>
<td>Disagree</td>
<td>Count</td>
<td>0</td>
<td>1</td>
<td>4</td>
<td>5</td>
<td>22</td>
</tr>
<tr>
<td></td>
<td>% within School support</td>
<td>0.0%</td>
<td>3.1%</td>
<td>12.6%</td>
<td>16.5%</td>
<td>65.8%</td>
</tr>
<tr>
<td></td>
<td>final</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>100.0%</td>
</tr>
<tr>
<td>Neither agree or</td>
<td>Count</td>
<td>0</td>
<td>1</td>
<td>9</td>
<td>22</td>
<td>34</td>
</tr>
<tr>
<td>agree</td>
<td>% within School support</td>
<td>0.0%</td>
<td>1.5%</td>
<td>13.6%</td>
<td>33.3%</td>
<td>51.5%</td>
</tr>
<tr>
<td>final</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>100.0%</td>
</tr>
<tr>
<td>Agree</td>
<td>Count</td>
<td>0</td>
<td>9</td>
<td>14</td>
<td>32</td>
<td>38</td>
</tr>
<tr>
<td></td>
<td>% within School support</td>
<td>0.0%</td>
<td>6.8%</td>
<td>15.5%</td>
<td>36.4%</td>
<td>40.9%</td>
</tr>
<tr>
<td></td>
<td>final</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>100.0%</td>
</tr>
<tr>
<td>Strongly agree</td>
<td>Count</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>6</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>% within School support</td>
<td>11.8%</td>
<td>5.0%</td>
<td>11.8%</td>
<td>36.3%</td>
<td>35.3%</td>
</tr>
<tr>
<td></td>
<td>final</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>100.0%</td>
</tr>
<tr>
<td>Total</td>
<td>Count</td>
<td>2</td>
<td>10</td>
<td>31</td>
<td>68</td>
<td>101</td>
</tr>
<tr>
<td></td>
<td>% within School support</td>
<td>6.9%</td>
<td>4.7%</td>
<td>14.6%</td>
<td>32.1%</td>
<td>47.5%</td>
</tr>
<tr>
<td></td>
<td>final</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>100.0%</td>
</tr>
</tbody>
</table>

**Chi-Square Tests**

<table>
<thead>
<tr>
<th></th>
<th>Value</th>
<th>df</th>
<th>Asymptotic Significance (2-sided)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pearson Chi-Square</td>
<td>35.158*</td>
<td>16</td>
<td>.004</td>
</tr>
<tr>
<td>Likelihood Ratio</td>
<td>22.879</td>
<td>16</td>
<td>.117</td>
</tr>
<tr>
<td>N of Valid Cases</td>
<td>212</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

a. 15 cells (60.0%) have expected count less than 5. The minimum expected count is .08.
**Interpretation:** The chi-square table indicates that there is a statistically significant relationship between school support and postsecondary education attainment among teen mothers in North Carolina, $X^2=35.15$, $p$-value$=0.004$.

**RQ2:** Is there a statistically significant relationship between family support and postsecondary education attainment among teen mothers in North Carolina?

Table 3

*Results of Case Processing Summary and Chi-square test of Family Support (n=212)*

**Case Processing Summary**

<table>
<thead>
<tr>
<th>Cases</th>
<th>Valid</th>
<th>Percent</th>
<th>Missing</th>
<th>Percent</th>
<th>Total</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
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<td></td>
<td>N</td>
<td></td>
<td>N</td>
<td></td>
</tr>
<tr>
<td>FamsupportFinal * Highest Education obtained:</td>
<td>212</td>
<td>100.0%</td>
<td>0</td>
<td>0.0%</td>
<td>212</td>
<td>100.0%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FamsupportFinal * Highest Education obtained: Crosstabulation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Highest Education obtained: High school</td>
</tr>
<tr>
<td>FamsupportFinal Strongly disagree</td>
</tr>
<tr>
<td>% within FamsupportFinal</td>
</tr>
<tr>
<td>Disagree</td>
</tr>
<tr>
<td>% within FamsupportFinal</td>
</tr>
<tr>
<td>Neither disagree or agree</td>
</tr>
<tr>
<td>% within FamsupportFinal</td>
</tr>
<tr>
<td>Agree</td>
</tr>
<tr>
<td>% within FamsupportFinal</td>
</tr>
<tr>
<td>Strongly agree</td>
</tr>
<tr>
<td>% within FamsupportFinal</td>
</tr>
<tr>
<td>Total</td>
</tr>
<tr>
<td>% within FamsupportFinal</td>
</tr>
</tbody>
</table>
### Chi-Square Tests

<table>
<thead>
<tr>
<th></th>
<th>Value</th>
<th>df</th>
<th>Asymptotic Significance (2-sided)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pearson Chi-Square</td>
<td>24.631a</td>
<td>16</td>
<td>.077</td>
</tr>
<tr>
<td>Likelihood Ratio</td>
<td>23.308</td>
<td>16</td>
<td>.106</td>
</tr>
<tr>
<td>N of Valid Cases</td>
<td>212</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*a. 16 cells (64.0%) have expected count less than 5. The minimum expected count is .04.*

**Interpretation:** The chi-square table indicates that there is no statistically significant relationship between family support and postsecondary education attainment among teen mothers, $X^2=24.63$, p-value=0.077.

**RQ3:** Is there a statistically significant relationship between community support and postsecondary education attainment among teen mothers in North Carolina?

### Table 4

*Results of Case Processing Summary and Chi-square test of Community Support (n=212)*

<table>
<thead>
<tr>
<th></th>
<th>Valid</th>
<th></th>
<th>Cases</th>
<th></th>
<th>Total</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>Percent</td>
<td>N</td>
<td>Percent</td>
<td>N</td>
<td>Percent</td>
</tr>
<tr>
<td>CommsupportFinal * Highest Education obtained:</td>
<td>212</td>
<td>100.0%</td>
<td>0</td>
<td>0.0%</td>
<td>212</td>
<td>100.0%</td>
</tr>
</tbody>
</table>
Chi-Square Tests

<table>
<thead>
<tr>
<th></th>
<th>Value</th>
<th>Df</th>
<th>Significance (2-sided)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pearson Chi-Square</td>
<td>101.475a</td>
<td>16</td>
<td>.000</td>
</tr>
<tr>
<td>Likelihood Ratio</td>
<td>37.938</td>
<td>16</td>
<td>.002</td>
</tr>
<tr>
<td>N of Valid Cases</td>
<td>212</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

a. 15 cells (60.0%) have expected count less than 5. The minimum expected count is .05.

Interpretation: The chi-square table indicates that there is a statistically significant relationship between community support and postsecondary education attainment among teen mothers in North Carolina, $X^2=101.47$, p-value=0.00.

RQ4: Is there a statistically significant relationship between teen parenting programs and postsecondary education attainment among teen mothers in North Carolina?
Table 5

Results of Case Processing Summary and Chi-square test of Teen Parenting Program

\(n=212\)

### Case Processing Summary

<table>
<thead>
<tr>
<th>Cases</th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Valid N</td>
<td>Valid %</td>
<td>Missing N</td>
<td>Missing %</td>
<td>Total N</td>
<td>Total %</td>
</tr>
<tr>
<td>TeenParentprogramFinal *</td>
<td>212</td>
<td>100.0%</td>
<td>0</td>
<td>0.0%</td>
<td>212</td>
<td>100.0%</td>
</tr>
<tr>
<td>Highest Education obtained:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### TeenParentprogramFinal * Highest Education obtained: Crosstabulation

<table>
<thead>
<tr>
<th></th>
<th>High School</th>
<th>Trade Certificate</th>
<th>Some College</th>
<th>College Grad</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly disagree</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td>4</td>
<td>15</td>
</tr>
<tr>
<td>% within TeenParentprogramFinal</td>
<td>0.6%</td>
<td>4.0%</td>
<td>4.0%</td>
<td>16.0%</td>
<td>76.0%</td>
</tr>
<tr>
<td>Disagree</td>
<td>0</td>
<td>4</td>
<td>16</td>
<td>24</td>
<td>41</td>
</tr>
<tr>
<td>% within TeenParentprogramFinal</td>
<td>0.6%</td>
<td>5.1%</td>
<td>12.7%</td>
<td>30.4%</td>
<td>59.9%</td>
</tr>
<tr>
<td>Neither disagree or agree</td>
<td>0</td>
<td>1</td>
<td>8</td>
<td>9</td>
<td>19</td>
</tr>
<tr>
<td>% within TeenParentprogramFinal</td>
<td>0.6%</td>
<td>2.7%</td>
<td>31.5%</td>
<td>24.3%</td>
<td>51.4%</td>
</tr>
<tr>
<td>Agree</td>
<td>0</td>
<td>3</td>
<td>11</td>
<td>23</td>
<td>59</td>
</tr>
<tr>
<td>% within TeenParentprogramFinal</td>
<td>0.6%</td>
<td>5.1%</td>
<td>18.8%</td>
<td>39.0%</td>
<td>47.3%</td>
</tr>
<tr>
<td>Strongly agree</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>8</td>
<td>12</td>
</tr>
<tr>
<td>% within TeenParentprogramFinal</td>
<td>16.7%</td>
<td>0.3%</td>
<td>0.3%</td>
<td>66.7%</td>
<td>9.9%</td>
</tr>
<tr>
<td>Total</td>
<td>2</td>
<td>10</td>
<td>31</td>
<td>68</td>
<td>101</td>
</tr>
<tr>
<td>% within TeenParentprogramFinal</td>
<td>0.9%</td>
<td>4.7%</td>
<td>14.6%</td>
<td>32.1%</td>
<td>47.5%</td>
</tr>
</tbody>
</table>

### Chi-Square Tests

<table>
<thead>
<tr>
<th>Value</th>
<th>Df</th>
<th>Asymptotic Significance (2-sided)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Pearson Chi-Square</td>
<td>58.207*</td>
<td>16</td>
<td>.000</td>
</tr>
<tr>
<td>Likelihood Ratio</td>
<td>41.560</td>
<td>16</td>
<td>.000</td>
</tr>
<tr>
<td>N of Valid Cases</td>
<td>212</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

\* a. 13 cells (52.0%) have expected count less than 5. The minimum expected count is .11.
Interpretation: The chi-square table indicates that there is a statistically significant relationship between teen parenting programs and postsecondary education attainment among teen mothers in North Carolina, $X^2=58.20$, p-value=0.00.

RQ5: Is there a statistically significant relationship between resilience and postsecondary education attainment among teen mothers in North Carolina?

Table 6

Results of Case Processing Summary and Chi-square test of Resilience (n=212)

<table>
<thead>
<tr>
<th>Case Processing Summary</th>
<th>Valid</th>
<th>Missing</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>Percent</td>
<td>N</td>
</tr>
<tr>
<td>ResilienceFinal * Highest Education obtained:</td>
<td>212</td>
<td>100.0%</td>
<td>0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ResilienceFinal * Highest Education obtained: Crosstabulation</th>
<th>Highest Education obtained:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>High school</td>
</tr>
<tr>
<td>Strongly disagree</td>
<td>Count</td>
</tr>
<tr>
<td>% within ResilienceFinal</td>
<td>0.0%</td>
</tr>
<tr>
<td>Disagree</td>
<td>Count</td>
</tr>
<tr>
<td>% within ResilienceFinal</td>
<td>0.0%</td>
</tr>
<tr>
<td>Neither disagree or agree</td>
<td>Count</td>
</tr>
<tr>
<td>% within ResilienceFinal</td>
<td>0.0%</td>
</tr>
<tr>
<td>Agree</td>
<td>Count</td>
</tr>
<tr>
<td>% within ResilienceFinal</td>
<td>0.0%</td>
</tr>
<tr>
<td>Strongly agree</td>
<td>Count</td>
</tr>
<tr>
<td>% within ResilienceFinal</td>
<td>2.3%</td>
</tr>
<tr>
<td>Total</td>
<td>Count</td>
</tr>
<tr>
<td>% within ResilienceFinal</td>
<td>0.9%</td>
</tr>
</tbody>
</table>
Chi-Square Tests

<table>
<thead>
<tr>
<th></th>
<th>Value</th>
<th>Df</th>
<th>Asymptotic Significance (2-sided)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pearson Chi-Square</td>
<td>22.714a</td>
<td>16</td>
<td>.122</td>
</tr>
<tr>
<td>Likelihood Ratio</td>
<td>22.319</td>
<td>16</td>
<td>.133</td>
</tr>
<tr>
<td>N of Valid Cases</td>
<td>212</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

a. 17 cells (68.0%) have expected count less than 5. The minimum expected count is .03.

**Interpretation**: The chi-square table indicates that there is no statistically significant relationship between resilience and postsecondary education attainment among teen mothers in North Carolina, $X^2=22.71$, p-value=0.122.

RQ6: Is there a statistically significant relationship between mentoring and postsecondary education attainment among teen mothers in North Carolina?

Table 7

*Results of Case Processing Summary and Chi-square test of Mentoring (n=212)*

<table>
<thead>
<tr>
<th>Case Processing Summary</th>
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<th>Cases</th>
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<td>Percent</td>
<td>N</td>
</tr>
<tr>
<td>MentoringFinal * Highest Education obtained:</td>
<td>212</td>
<td>100.0%</td>
<td>0</td>
</tr>
</tbody>
</table>
### Chi-Square Tests

<table>
<thead>
<tr>
<th></th>
<th>Value</th>
<th>Df</th>
<th>Asymptotic Significance (2-sided)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pearson Chi-Square</td>
<td>37.525</td>
<td>16</td>
<td>.002</td>
</tr>
<tr>
<td>Likelihood Ratio</td>
<td>27.190</td>
<td>16</td>
<td>.039</td>
</tr>
<tr>
<td>N of Valid Cases</td>
<td></td>
<td></td>
<td>212</td>
</tr>
</tbody>
</table>

a. 12 cells (48.0%) have expected count less than 5. The minimum expected count is .15.

**Interpretation:** The chi-square table indicates that there is a statistically significant relationship between mentoring and postsecondary education attainment among teen mothers in North Carolina, $X^2=37.52$, $p$-value=0.002.
CHAPTER V
DISCUSSION, CONCLUSION, AND RECOMMENDATIONS

The purpose of this study was to examine the relationship between school support, family support, community support, and postsecondary education attainment among African American teen mothers. The research design for this study was explanatory. The conclusions and recommendations of the findings of this research are presented in this chapter. This chapter will conclude with a discussion in relation to recommendations for future discussions for policy makers, social work practitioners, and administrators. The summary and conclusions of the research findings will also be presented in this chapter.

There was a total of 212 former teen mothers that participated in this research. These participants responded to a flyer that was posted on the researcher’s Facebook and Instagram page. The flyer was developed with detailed information regarding the study and the fact that all responses would be kept confidential. There was detailed information provided in the flyer that gave instructions to simply email the researcher if they were interested in participating in the study. To gain more participants, the researcher included snowball sampling in addition to purposive sampling by having friends of the researcher to share the flyer onto their Facebook and Instagram page.
The survey was administered to the participants via Survey Monkey, an online software. Each participant received an email with the link to the survey that directed them straight to the survey on the Survey Monkey website. Each participant was a former teen parent that became a mother between the ages of 13 to 19 years of age. Although the study focused on African American females, former teen parents of all ages were able to participate. Data analysis was conducted at the levels of descriptive, which employed frequency and percent distributions of the participants’ responses, and analytical procedures, which included the chi-square statistical test.

The participants in this study range from 19 to 79 years of age with the mean age being 36. One of the major findings of this study is that most of the participants, 60.38%, became a teen mother between the ages of 17 to 19 years of age. Martin, Hamilton, Ventura, Osterman, Wilson, and Mathews (2012) suggests that the vast majority of teen births occur to older teens confirming what has been found in this study. There were some participants in this study that were teen parents in the 1970s and even during this time period, the majority of those who became pregnant were older teens (Zelnik & Kantner, 1979). There were two national probability household sample surveys taken in 1971 and 1976 that indicated more women between the ages of 15 to 19 were rapidly increasing in premarital sexual activity (Zelnik & Kantner, 1979).

Another major finding in this study indicated that almost half of the participants, 47.64%, had a college degree. There were 32.08% that achieved the attainment of some college while 14.62% have a trade or certification of some kind. Most researchers found that the average teenager is associated with worsened educational outcomes and that this
was determined with selection bias because of unobserved heterogeneity of socioeconomic and other family and individual characteristics that could account for this suggestion (Hoffman, 1998). However, other research has found no negative effect of teenage parenting on educational measures. In other words, becoming a teen parent does not cause school dropout (Mellborn, 2007; Ribar, 1994; Upchurch & McCarthy, 1990).

This study indicated that many of the participants, 45.75%, were never married. There were 34.43% that are married and 15.09% are divorced. There was an examination of a drawing on the National Survey of Family that viewed family formation activities, such as marriage and cohabitation, of 3,945 women that were teen parents between the ages of 15 to 19 years of age from the 1990s through 2010. The examination concluded that 34%, one-third, of teens cohabitate or marry increasing their chances of becoming a teen parent (Goodwin, Mosher, & Chandra, 2010; Kennedy & Bupass, 2008; and Musick, 2008).

However, the remaining 66% did not cohabitate or marry before the birth of their first child suggesting that most teens are not married when they become teen parents (Manning & Cohen, 2015). These findings confirm what was determined in this study suggesting that most teen parents never marry before having their first child. Manning & Cohen (2015) states that race and ethnicity plays a major role in cohabitation, marriage, and teen pregnancy. African American and Hispanic teenagers are less likely to marry before their first child and less likely to cohabitate than white teenagers (Manning & Cohen, 2015).
Another major finding of this study is that 71.23% of the respondents were African Americans although the survey was open for participation from all races. There were 16.98% White participants and 9.91% Hispanics. Many researchers suggest that the rate of teen pregnancy is disproportionate when it comes to ethnicity stating that African Americans have the highest ratings of becoming a teen parent. According to Barber et al. (2015), many racial disparities are unexplained, but African American females are more than likely to become pregnant because they have higher rates of sex without contraception as a teen partly because they are more likely to have grown up with a single parent.

The average age of the participants in this study is 36. This would mean that they were born in the late 1970s to early 1980s. Geronimus (1987) suggests that during this time frame, African Americans may have had an adaptive practice to become parents as a teen due to the increased chances of health issues, such as elevated blood pressure and diabetes, in their late 20s. African Americans are also more likely to receive assistance from their families and the government during their teen years versus when they become adults making it logical and practical for African Americans to become parents as teens. This concept has been termed “weathering hypothesis” (Geronimus, 1987; 1992). The concept of “weathering hypothesis” remains to be controversial as there is not enough evidence to support it (Coley & Chase-Landsdale, 1998). Hispanics represented the least percentage, 9.91%, in this study. However, Lichter (2012) states that nonmarital births among Hispanics represents about 50% of all births to teens in the United States.
Based on the findings in this study, policy response was not an issue for majority of the participants. There were 53.8% of the respondents who stated that they were given the same opportunities as their non-parenting peers according to the mandates of the Title IX of the 1972 Educational Amendments to the Civil Rights Act which gives all pregnant or parenting teens the same rights as their non-parenting peers when it comes to a federally funded educational institution. According to Guldi (2016), education policy during and after the birth of a child for a teen parent could play a major role in determining educational outcomes. Majority of the participants agreed to having support from their school as a teen parent.

According to Yanus & O’Connor (2016), there has been progress overall regarding schools complying with the mandates of the Title IX Act, but there is still more work to be done to ensure full equality in opportunity for teen mothers. Only 6% of the respondents, 13 participants, who stated that they strongly disagreed to having the same rights as their non-parenting peers. There were a few respondents that were teen parents before the Title IX was signed into law. However, it is uncertain if they were the respondents who strongly disagreed to having the same rights as their non-parenting peers.

Another major finding of this study was that there was no statistical significant relationship between family support and teen mothers’ postsecondary education attainment. A study conducted by Solomon & Liefeld (2001) also indicated that there is no statistically significant relationship regarding family support for teen mothers and the attainment of postsecondary education. Brosh et al. (2007) conducted a study that
included pregnant and parenting teens that resulted in majority of the participants stating that social support on all levels aided them in the pathways to postsecondary education. Social support could include support from family and friends or the school they are attending.

Majority of the participants agreed that community support played a part in the attainment of postsecondary education. Some examples of community support are alternative school or home visits from someone in the community. Barnet et al. (2010) also states that community support improves the success rates of school continuation for teen parents based on a study they conducted of a community-based home visiting program. Boath et. al (2013) also stated that after conducting a longitudinal study of teen mothers, the findings concluded that the former teen mothers highlighted that community support via home visits was more essential to assisting them to the continuation of schooling to attain postsecondary education. Finally, there is a statistical significant relationship between mentoring and postsecondary education regarding teen mothers. There were 45.8% of the participants that indicated mentoring as a factor in attaining postsecondary education. Teen parenting programs that includes mentoring services encourages teen mothers to attain postsecondary education, as well as, prevent repeat pregnancies (Black et al., 2006; South-Paul et al., 2014; and Key et al., 2001).

Majority of the participants, 41%, indicated that resilience did not contribute to their pathways towards secondary education and there was no statistical significant relationship. However, there was a statistical significant relationship between mentoring and postsecondary education. There were 45.8% who indicated that mentoring support
helped them in reaching their goals of postsecondary education. This confirms what Hurd and Zimmerman (2010) concluded in a study using a risk-protective model on teen mothers and the support from natural mentors. The study resulted in indicating that mentors helped protect adolescent mothers from the negative effects of stress as a teen mother which will aid them in being successful towards postsecondary education (Hurd & Zimmerman, 2010). Klaw, Rhodes, and Fitzgerald (2002) also conducted a longitudinal study on adolescent mothers that resulted in mentoring being an essential factor in the attainment of postsecondary education.

**Recommendations**

Historically, teen mothers have been viewed as individuals that will be less likely to contribute to society predicting that due to becoming a parent during their teenage years, they will more than likely not attain postsecondary education. This study views the phenomenon of teenage motherhood from a strength-based approach to examine former teen mothers’ academic trajectories and factors that many researchers have suggested should be reviewed to determine if they in fact contribute to the success of postsecondary education.

Previous studies show that African American teenagers have a higher rate of becoming a teen parent than any other race. Recent studies indicate that race may not be a factor in the likelihood of becoming a teen parent but the socioeconomic status prior to pregnancy could have an impact on whether an individual will become pregnant during her teenage years. The researcher became a teen parent at the age of 15 in the state of
North Carolina which has historically had one of the highest ratings of teenage pregnancy. Prior to becoming a teen parent, the researcher was living in a single parent home and of a low socioeconomic status. The researcher attended a high school, during the 1990s, that did not offer resources or referrals to any teen parenting programs that would assist in education continuance. The consistency of informal mentors, family support, and resiliency empowered the researcher to successfully attain postsecondary education.

Despite adversities, the researcher, along with the former teen mothers whom participated in this study, have defied the social stereotypes and stigmas by becoming academically successful which can help to shape teen parenting programs and policies that seek to contribute to the lives of pregnant and parenting teens to ensure that they become academically successful without having to be dependent on the assistance from the government.

Although teen pregnancy has declined over the past 20 years, this phenomenon still gains the attention from policy makers, grantees, and those who seek to prevent repeat teen pregnancies. The amount of money spent towards teen pregnancy is extremely high and one of the major causes of this cost derives from labor and delivery. As North Carolina is one of the most advanced states when it comes to collecting teen pregnancy data, this state’s teen pregnancy rate is at an all-time low which is one of the reasons why the researcher chose this state to conduct this study.

Research shows that although African Americans have the highest ratings of teen pregnancy, many of them still succeed in attaining postsecondary education due to their
religious beliefs that empowers them to succeed educationally. More emphasis should be placed on focusing on those with challenging backgrounds and circumstances from an Afrocentric Perspective as they work toward academic success.

An area worthy of future research would be to examine the religious beliefs, attitudes, and activities of former teen mothers who have successfully attained postsecondary education to continue to view the phenomenon from a strength’s perspective. By doing this, it will help school administrators, social workers, and policy makers to make decisions for programs already in place to assist pregnant and parenting teens. For social work practitioners, advocacy for the implementation of policies that grants pregnant and parenting teens the same rights as their non-parenting teens should be practiced more as many schools are still failing to implement the mandates of the Title IX Amendment Act while many pregnant and parenting teens are unaware of their rights causing them to participate in involuntary suggestions. As a teen parent in a small town, the researcher was not aware of any of the rights that fell under the mandates of the Title IX Act and she accepted altered plans of study given by school administrators.

As a result of the findings of this study, the researcher recommends the following:

1. The academic focus for pregnant and parenting teens, from school administrators, policy makers, and social work practitioners, should shift from high school completion to the attainment of postsecondary education.
2. Interventions from a school social worker should be implemented at notification of a reported pregnant or parenting teen for resources, referrals, to ensure college readiness, and to assist with smooth
transitioning into an accredited federally funded institution to attain postsecondary education.

3. Creating more programs that incorporates the involvement of social support from peers, family members, the absent father, and professionals for teen mothers.

4. An increase in community support, such as home-visiting programs, that includes mentoring and case management to promote a smooth transition towards postsecondary education.

5. The incorporation of a resilience paradigm in individual and group counseling sessions for teen mothers to help them in overcoming adversity and to develop into healthy, educated adults despite risk exposures they may encounter as a teen parent.

6. Social workers should properly assess for important roles that faith and spirituality could possibly serve in promoting hope among low-income African American teen mothers and their families. Social workers should be knowledgeable about specific faith-based spiritual or religious practices implemented by such families.

**Implications for Social Work Research, Practice, and Policy**

Findings from this study suggest that social workers and social work practitioners should place an emphasis on family and community involvement and the inclusion of resilience paradigms altogether, offering an ecological model of community development
for pregnant and parenting teens. A wide range of services based on resilience, strengths, and developmental needs for college readiness for teen mothers will lead to the bridging of gaps of missing services teen parents may lack.

Advocating for policies and programs in support of teen parents is key and should be championed by all social workers. Policies that target teen mothers and postsecondary education can help teen mothers to remain in school and contribute to social work leadership to help social workers understand the role of policies designed to improve economic opportunities for teen mothers.

The use of the resilience theory by social work practitioners is beneficial to the teen parents. The resilience paradigm used in activities, such as group counseling amongst pregnant and parenting teens, will bring forth positive relationships with social supports for teen mothers. More school-based childcare programs may be beneficial to teen parents giving them the ability to care for their children throughout the school day and may contribute to an increased rate of educational attainment.

Overall, providing pregnant and parenting teens with resources for themselves and their child will more than likely promote college readiness and improve socioeconomic conditions for teens giving them the ability to contribute to society without having to be dependent on public assistance. For future research, it would be important to explore the lives of former teen mothers who have successfully attained postsecondary education to determine if they avoided subsequent pregnancies after their first child. This study did not focus on repeat births. However, research suggests that
most teen mothers will more than likely experience a repeat pregnancy soon after giving birth to their first child delaying postsecondary education.
APPENDIX A

CONSENT FORM

Teen Mothers’ Success Questionnaire

You are invited to partake in a research study that seeks to gain an understanding from former teen mothers’ perspectives on what interventions worked towards postsecondary education attainment. There are no known risks to participants who concur to participate in this research. It is with great intentions that this research will help educators better comprehend how to support teen parents and to lead them down a path towards postsecondary education. This study will also help research in the field of social work curriculum development, social work education, and the professional development of social service workers in the United States.

This study is being conducted by Sibrenna George, Ph.D. student at Clark Atlanta University, Whitney M. Young, Jr. School of Social Work and approved by the IRB under Human Subjects Code Number HR2017-10-757-1. Partaking in this study is voluntary. However, all replies to the questionnaires will remain confidential.

If participants should have any questions or inquiries about this study, please contact Sibrenna George via email at: Sibrenna.shipman@students.cau.edu or Whitney M. Young, Jr., School of Social Work at Clark Atlanta University at 404-880-6600. If you have any questions now, or later, related to the integrity of this research, the rights of research subjects or research-related injuries (where applicable), you are encouraged to contact Dr. Paul I. Musey at 404-880-6829 at Clark Atlanta University.

Please mark yes or no below to signify that it is your intentions to partake in this research project.

__Yes

__No
APPENDIX B

SURVEY QUESTIONNAIRE

A Study of the Relationship Between School Support, Family Support, Community Support, and Postsecondary Education Attainment among African American Teen Mothers in the State of North Carolina

Social Work, Ph.D Program
Sibrenna George – May, 2018
Clark Atlanta University

Section I: Demographic Information
Place a mark ( * ) next to the appropriate item. Choose only one answer for each item.

1. Are you a former teen parent: 1)___Yes  2)___No

2. What is your age? ___

3. Age when you had your first child: 1)___Under 13  2)___13-16  4)___17-19

4. My gender:  1)___Male  2)___Female

5. Highest Education obtained:  1)___High School  2)___Trade/Certification

   3)___Some College  4)___College Grad

6. Marital Status:  1)___Married  2)___Never Married  3)___Divorced

   4)___Widowed, Separated

7. My ethnicity:  1)___African American  2)___White  3)___Hispanic  4)___Asian

   5)___Native American
Section II: The following statements are designed to get your opinion about your experience as a teen parent. According to Title IX of the Education Amendments of 1972, all federally assisted educational programs and activities are prohibited from discriminating against pregnant or parenting teens. Write the appropriate number (1 thru 5) in the blank space in front of each statement using the following scale. Please respond to all questions.

1=Strongly Disagree 2=Disagree 3=Neither Disagree or Agree 4=Agree 5=Strongly Agree

Policy Response

___ 8. I could participate in extracurricular activities in high school/college as a teen parent.

___ 9. As a teen parent in high school/college, I was given the same opportunities for student leadership as my non-parenting peers.

___ 10. In high school/college, I could participate in honor classes as a parenting teen.

___ 11. All of my absences in high school/college due to pregnancy or childbirth were excused.

School Support

___ 12. As a parenting teen, my high school/college encouraged me to successfully attain postsecondary education.

___ 13. As a parenting teen in high school/college, I was given referrals and resources to teen parenting programs.
APPENDIX B

(Continued)

___ 14. As a pregnant/parenting teen in high school/college, my school supported me in participating in regular school activities (such as sports or an honor society) as my non-parenting peers.

___ 15. In high school/college, I was forced to participate in special instructional programs or classes for a pregnant student that was different from what my non-parenting peers were doing.

**Family Support**

___ 16. After childbirth, I lived with a family member.

___ 17. My family was close before childbirth.

___ 18. My family was close after childbirth.

___ 19. My family assisted me with childcare.

___ 20. Becoming a teen mother conflicted with my family values.

___ 21. My parents/guardians were angry when I became a teen mother.

**Community Support**

___ 22. I received visits from home visitors who provided family-focused services during my pregnancy and/or after becoming a teen parent.

___ 23. After becoming a teen parent, I participated in an alternative school system.

___ 24. Many of the resources that helped me to achieve postsecondary education attainment resulted from community support.
APPENDIX B  
(Continued)

**Teen Parenting Program**

___ 25. As a teen parent, I participated in a Teen Parenting Program.

___ 26. The Teen Parenting Program I participated in aided me towards postsecondary education attainment.

___ 27. The Teen Parenting Program I participated in helped me to build healthy relationships with my peers and family.

**Resilience**

___ 28. Becoming a teen parent was a pivotal point for me to succeed educationally.

___ 29. As a parenting teen, I responded to obstacles by picking myself up by my bootstraps.

___ 30. My future goals in life expanded once I learned that I would become a teen mother.

**Mentoring**

___ 31. As a parenting teen, I had a mentor, whether formal or informal, during and after childbirth.

___ 32. My mentor motivated me to succeed academically.

___ 33. My mentor advocated for me in seeking community services.

*Thank You*
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