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SUPPORTING TEEN PARENTS AND THEIR CHILDREN

By

Heather Lewis

Project submitted in partial fulfillment of the

Requirements for the

Bachelor of Integrated Studies

Continuing Education and Academic Outreach

Murray State University

April 18, 2018

**Field of Study
Project Approval**

I hereby recommend that the project prepared under my supervision by

Heather Lewis

_____,

entitled Supporting Teen Parents and their Children

_____, be

accepted in partial fulfillment of the requirements for the degree of

Bachelor of Integrated Science

_____.

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Abstract

The purpose of this action research project was to explore pregnant and parenting teens. The focus is a skill-building foundation to help teen mothers and fathers develop self-sufficiency to enable them to become successful and engaging parents. The study includes relative research related to teen pregnancy, the role teen parent programs serving pregnant women and their children under the age of three, personal experiences, case studies, and interviews to support a better understanding of teen pregnancy and parenting. Research shows the positive impact of teenage parents and pregnant women enrolled in an Early Head Start program. By reflecting on personal experiences with each of the participants in an Early Head Start Program and applying current research, program processes, outcomes, and areas for improvement were explored.

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Introduction

In 1999, I started working as a part-time caregiver at a local childcare center, Helping Hands. The center is located in a small rural county. Helping Hands was licensed to provide care for children from six weeks to school age children. I worked there for six years in classrooms with various ages of children. We established good relationships with hard working middle class families the program service. While working in the program, I learned the foundations of early childhood development along with licensing regulations and the quality rating system qualifications for centers. I began to have a passion for learning with children and wanted to go to college to pursue formal education.

In 2004 I enrolled in Henderson Community College to complete a degree in Interdisciplinary Early Childhood Education (IECE). As I took the education classes I started to get a deep understanding of early childhood development and wanted to improve my qualifications as an educator, no more did I want to see myself as a daycare worker. In 2005, I started working at Henderson Community College Head Start working as a part-time teacher assistant in a preschool classroom serving children ages three to five years of age. It was the first time I was exposed to altogether new learning environment, the Reggio Emilia Inspired Approach. This approach features aesthetically pleasing environments of natural beauty and extensive documentation of the children's learning experiences. As a new teacher I learned from my colleagues how to listen to children's thoughts, questions, fears, and how to support them. I learned that children are seen as powerful, curious, and are capable of learning at any age. The staff viewed parents as partners in their child's education. Family meetings were held where families exchanged ideas and engaged in projects to support the classroom.

After I graduated in 2007, with my A.A.S. degree in IECE, I started a new job as a lead teacher in an infant/toddler classroom in my hometown of Morganfield, KY. Union County Family Development Center is an Early Head Start program, serving children from six weeks to three years of age. I wanted to continue what I had learned from Henderson Community College to inspire this new set of families as partners in their child's education in this school. So the first thing I did was create a Family Interest Survey so that I could see the parents' interests and hobbies. Through this survey I could invite parents to the classroom to be involved in their child's education.

In 2015 I took on a new job at our local high school working in a Teen Parent Program through Audubon Area Head Start. The Teen Parent Program is an Early Head Start program serving pregnant participants and children birth to three years old. The Teen Parent Program is a great way to support young parents to finish high school or continue their education through college or vocational school, or start working. The program is free and provides all baby care needs for the child. The program is very challenging working with young teen parents but I want to continue to learn more about how I can support these young families.

I have more responsibilities other than being the lead teacher. I am responsible for Family and Health Services. Also within our Teen Parent Program our curriculum is based on the study of the Reggio Emilia Approach, we view every child as gifted with tremendous potential. Over the last three years as I have worked with teen parents it has opened my eyes to what is involved in being a teen parent and being pregnant as a teen. First I strive to establish a warm, supportive, and empowering relationships with these teens so they can build a strong foundation of parenting skills. I have continued the aspect of parents as partners in their child's education. I have establish parent meetings, a parent committee, family events, and prenatal and

parent education trainings. I have a strong desire to support these young parents and their children.

This study includes relative research related to teen pregnancy and the role of teen parent programs serving pregnant women and their children under the age of three. I have analyzed my personal experiences through case studies and interviews to support a better understanding of teen pregnancy and parenting.

National and State Statistics on Teenage Pregnancy

According to Ventura, Hamilton, & Matthews (2014), teen childbearing in the United States has been declining for more than a half century. Except for the brief but steep increases in teen birth rates from 1986 to 1991 and smaller upturns during 1969-1970, 1979-1980, and 2005-2007, birth rate for U.S. teenagers have fallen since 1957. According to their report, the birth rate in 2013, 26.6 births per 1,000 teenagers aged 15-19, was less than one-half of the rate in 1991 (61.8 per 1,000) and less than one-third of the rate in 1957 (96.3 per 1,000), when the United States was at its peak. They also concluded teen birth rates vary considerably across states, with nearly a four-fold range from the lowest to the highest rates. Rates are consistently highest across the southern and southwestern United States, and lowest in the Northwest.

Numerous factors have been credited with a role in the downward trend in teen rates since 1991, and the intensified declines since 2007. The data from the National Survey of Family Growth (NSFG) showed a two-decade gradual decline in the proportion of teen females who are sexually experienced. NSFG also reported significant increases over the last two decades in the use of contraception at first sex and at most recent sex. An analysis of data from two cycles of NSFG concluded that improved contraceptive use may have been the key factor behind the declines in teen rates of pregnancy.

According to the National Vital Statistics report, “In 2015, a total of 229, 715 babies were born to women aged 15-19 years, for a birth rate of 22.3 per 1,000 women in this age group.”

This research has shown another record low for U.S. teens aged 15-19 years and has dropped 8% since 2014 (Martin, Hamilton, & Osterman, 2017). This evidence suggests this decline is due from more teens not participating in sexual intercourse and if they are participating they are using birth control more than in previous years (Santelli, Lindberg, Finer, & Singh 2007).

In regards of these declines, the U.S. teen birth rate still remains one of the highest in all other western industrialized nations (Sedgh, Finer, Bankole, Eilers, & Singh 2015) From 2014-2015 all races and for Hispanics birth rate declined among teens aged 15-19 years, 10 percent for Asian/Pacific Islanders, 9 percent for non-Hispanic blacks, 8 percent for Hispanics, 8 percent for non-Hispanic whites, and 6 percent for American Indian/Alaska Natives, according to the National Center for Health Statistics (Martin, Hamilton, & Osterman, 2015) (see Table 1).

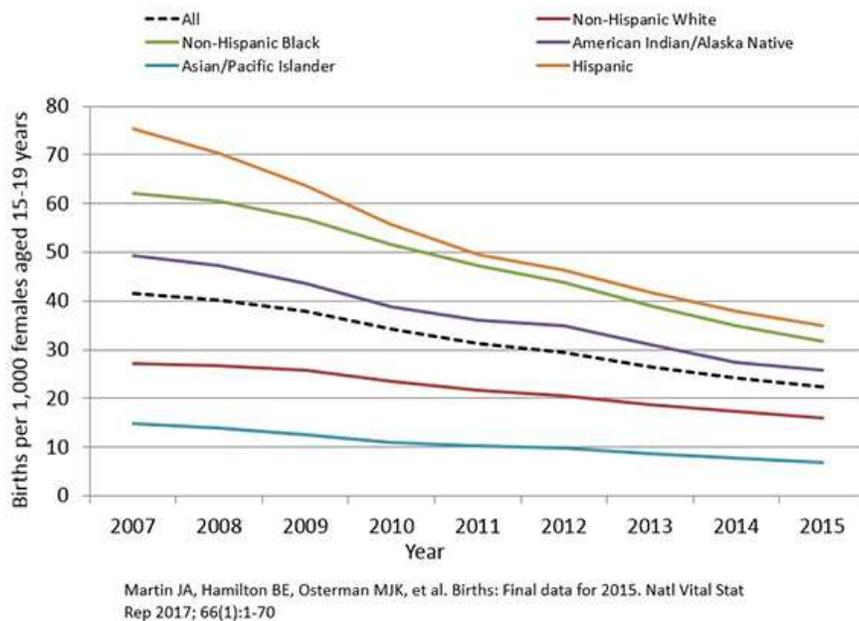


Table 1 – Births per 1,000 females aged 15-19 years, by race and Hispanic Ethnicity 2007-2015

According to an article, *Teen Pregnancy on the Decline Nationally, but Less so in Kentucky*, research shows teen pregnancy is at an all-time low, dropping by half since its peak in 1990. Despite this decline, Kentucky is in the top 10 states with high teen pregnancy rate, ranking eighth, according to the National Campaign to Prevent Teen and Unplanned Pregnancy (Slocum, 2015).

In Kentucky recent statistics show:

- There were nearly 5,300 births to Kentucky teens in 2013. 17 percent were repeat pregnancies.
 - In 2013, 44 percent of students in grades 9-12 reported having sexual intercourse. Nearly 21 percent of Kentucky 12th graders identified as having four or more sexual partners.
 - 67 percent of births from unintended pregnancies are publicly funded at an estimated cost of 14, 887 per birth through the first year of life.
 - Teen childbearing cost Commonwealth taxpayers at least \$158 million in 2010. The majority of these cost are associated with negative consequences for the children of teen mothers, including health care costs, foster care, incarceration, and lost tax revenue.
- (Slocum, 2015)

According to the article, *Kentucky Teen Birth Rates Declining Faster in Urban Counties*, the CDC report looked at the differences between teen birth rates in rural and urban areas from 2007 to 2015 and found that among teen ages 15 to 19, birth rates in Kentucky's urban counties dropped 43.9 percent, and 31.8 percent in its rural counties (Patrick, 2016). In Kentucky, the teen birth rate in urban counties was 26.4 births per 1,000 females in 2015, a reduction of 44 percent from the 47.1 reported in 2007. The state's rural teen birth rate was 40.9 per 1,000 in 2015, a 33 percent reduction from the 60 per 1,000 in 2007.

While teen birth rates have dropped significantly in Kentucky in recent years, they remain higher than the national average of 22.3 per 1,000. The CDC report found that teens in rural areas have reduced access to health services that offer contraception, have fewer college opportunities, have higher uninsured rates, have higher poverty rates and have fewer positive recreational outlets, which is associated with increased risk taking. In Kentucky, teens in rural counties have access to contraception at local health departments, which can provide a broad range of contraceptive choices to teens without parental consent. However, the National Campaign report found that rural teens often face transportation barriers. Another challenge facing Kentucky teens is a possible lack of reliable information about sex because the state only requires abstinence be taught in the classroom during mandated sex education classes for fact-based, comprehensive sex education.

Contributing Factors to Teenage Pregnancy

According to Langham (2015), some of the issues related to teenage pregnancies are peer pressure, absent parents, lack of knowledge, sexual abuse or rape, and teenagers experimenting with drugs and alcohol. During a teenager's life, teenagers may often feel pressure to fit in with their peers. Many times these teens let their friends influence their decision to have sex even when they do not fully understand the consequences associated with the act. Some teenagers have sex to appear cool but the end result may be an unplanned pregnancy.

The Kaiser Family Foundation (1998) stated that more than 29 percent of pregnant teen reported that they felt pressured to have sex, and 33 percent of pregnant teens stated that they felt that they were not ready to for sexual relationship but proceeded anyway because they feared ridicule or rejection. With some teenagers a lack of knowledge about sex can result in an unintended pregnancy. According to Langham (2015), "Some teens do not fully understand the

biological and emotional aspects associated with having sex.” Teens may get a lot of misconceptions through friends, videos, sitcoms, and/or movies that can lead to irresponsible decisions about sex.

Some teens can become pregnant as a result of sexual abuse or rape they have encountered. The Guttmacher Institute (1996) stated that between 43 and 62 percent of teens acknowledge that they were impregnated by an adult male, and two-thirds report their babies’ fathers are as old as 27.” Additional studies found “over 65% of adolescent mothers had babies by men who were age 20 or older.” Klein (1997).

Many teens experiment with drugs and alcohol, which may lead to an unintended pregnancy as well. Langham (2015) says, “Teen drinking can cause an unexpected pregnancy because drinking lowers a teen’s ability to control her impulses, contributing to 75 percent of pregnancies that occur between the ages 14 and 21. Approximately 91 percent of pregnant teens reported that although they were drinking at the time, they did not originally plan to have sex when they conceived.”

According to Winter (1997) many adolescent females become pregnant intentionally because they see no other life goals within their reach. Coles (2005) found “usually adolescents who become teen mothers are already experiencing academic difficulties in school, have low educational expectations, and are not confident they will graduate from high school. When teens face impoverished living situations and absent parents, teenage girls may decide to become pregnant and see this as a way out.”

Characteristics such as family structure, age at first intercourse, goals, and child sexual abuse have been associated with adolescent pregnancy. (Domenico & Jones, 2007). Family structure is considered a major factor contributing to adolescent pregnancy and motherhood.

Rosen (1997) found “a growing number of American adolescent females lived in relatively unstable family situations and many became sexually intimate for a short-term sense of comfort.” She concluded the absence of a father was the primary factor in teen girls becoming pregnant.

Teen girls are more likely to get pregnant when they have absent parents and little guidance from them as well. When a teen girl does not have that open communication with her parents she is more likely to turn to her friends for direction on whether or not to have sex, which may then result in an unintended pregnancy (Langham, 2015).

Today puberty occurs much earlier in adolescents, and the first time sexual encounters are taking place at younger ages, resulting in more sexually experienced adolescents. (Domenico & Jones, 2007). Usually adolescents who became mothers experienced academic difficulties in school, or they attempted to escape abusive home situations.

Pregnant adolescent students have been found that their future is not worthy, face lower career aspirations, and feel their future job choices are limited when compared to their non-pregnant peers. They were less likely to get a job or attend college. Sawhill (2000) found “because adolescent mothers often lack work experience, educational skills, and job training, their future employment levels and earnings are minimal. Many men responsible for children born to adolescent mothers provide little or no child support; thus a large number remained disproportionately poor, depending on public assistance to support them economically.” Rosen (1997) found “that many poverty-stricken adolescents accepted their pregnancy and viewed it as a means of improving their lives.”

As teenagers face the challenges of growing up in poverty, absent and single parents, having poor performances in school, and parents with low levels of education, they will continue to be at a greater risk for pregnancy (Martin, Hamilton, & Osterman 2015).

Effects of Teenage Pregnancy

According to the U.S. Department of Health & Human Services there were nearly 250,000 babies born in 2014 to teen moms and about 77 percent of these pregnancies were unplanned (Hamilton, Curtin, Martin, & Osterman 2015). A teenage pregnancy can change the course of a young mom's life. It puts her in a place where she's responsible not only for herself, but also for another human being. Carrying a baby and becoming a mom not only creates physical changes, women also can go through mental changes. Young moms face added stress from: sleepless nights, arranging child care, making doctor's appointments, attempting to finish high school (Nall 2016).

In their study, Hodgkinson, Beers, Southammakosane, & Lewin (2013) reported that teen mothers face significant levels of stress that can lead to increased mental health concerns. In addition to higher rates of postpartum depression, teenage mothers have higher rates of depression. Teen mothers are more likely to experience posttraumatic stress disorder (PTSD) than other teenage women, this could be because teen moms are more likely to have gone through mental and /or physical abuse.

Numerous studies found an association between maternal depression and insecure attachment in young children (Cicchetti, Toth, & Rogosch, 1999; Coyl, Roggman, & Newland, 2002; Campbell, Brownell, Hungerford, Spieker, Mohan, & Blessing, 2004). Because teen mothers more often than adult mothers may lack the cognitive or social-emotional resources to provide the sensitive and responsive parenting necessary for a secure attachment. On the other hand, a positive and supportive relationship between the teen mom and her mother and the infant's father has been repeatedly found to be a protective factor for teen mothers and their children (Hodgkinson et al., 2014).

Hoffman & Maynard (2008) found around 50 % of teen moms have their high school diploma by age 22 and only 30 percent have earned a General Education Development (GED) While there are certainly exceptions, high school completion and higher education is typically associated with a greater ability to earn more income over the course of a lifetime.

According to a study published in Maternal Child Health Journal, teenage mothers had the poorest physical health of all categories of women studied. Teenage mothers may neglect their physical health while caring for their babies. They may also not have access to or know about healthy foods and eating (Patel, P., & Sen, B., 2012).

Teenage motherhood doesn't have to mean a young woman will not be successful in life. But it's important they consider what other young mothers before them have faced related to overall health, financial stability, and the health of their child. Nall (2016) made the following suggestions:

1. Seek support from others. This includes the support of: parents, grandparents, friends, adult role models, physicians and other healthcare providers.
2. To have a healthy birth and a healthy baby seek prenatal care as early as recommended, usually in the first trimester.
3. Finish high school. Teenage moms are more likely to have positive mental health and financial outcomes when they finish high school.

Repeat Births among Teenagers

While the number of teenagers giving birth in the United States has fallen in recent years, the number of mothers who have a second baby in their teens remains high. O'Connell reported in 2010, 18.3 percent of babies born to teenagers were repeat births, according to data from the Centers for Disease Control and Prevention's National Vital System. O'Connell (2013) says,

Among the 364,859 births to teens 15-19 years old, 66,761 were repeat births. The majority of repeat births, 85.7 percent, were second child, but 12.6 percent were a third child and 1.7 percent a fourth to sixth child, according to the CDC. Nearly 91 percent of teen mothers who were sexually active used some form of contraception in the postpartum period, but only 22 percent used contraceptives considered to be most effective, according to CDC statistics.

Early Head Start

The federal Head Start program provides comprehensive early education and support services to low-income children and their families. Head Start began in 1965 as a preschool program for four-year-olds. Since that time, Head Start has grown to serve pregnant women and children birth to five (Shonkoff, & Phillips, 2000). In 1995, policymakers created Early Head Start (EHS) to reach children under age three and pregnant women through grants provided directly to local programs. . The program was created as a response to research on brain development and the importance of children's earliest relationships. EHS serves pregnant women and very young children which include parenting resources, nutritious meals, health education, comprehensive medical and dental, mental health supports, and referrals for follow-up treatment; access to pre-and post-natal care for pregnant women; and social services and referrals for the entire family (Shonkoff & Phillips, 2000).

Families headed by teenage parents face multiple risk factors and may need services tailored to meet their unique needs. In addition, emerging research shows teens are still developing cognitively, physically, and emotionally and therefore may require approaches to learning how to be better parents that are geared toward their development level (CLASP, 2007). Even though EHS is not designed specially to meet the needs of teenage parents, the program has significant positive impacts on teenage parent families.

Early Head Start programs choosing to work with teen parents have a number of special considerations to keep in mind when working with teen parents. Such considerations include the need to provide supportive staff training; understanding the challenges and risk factors for teen parents and their babies, programs should provide appropriate training, and support to build and maintain the staff abilities to address teen parents' needs (United States. Office of Head Start, 2013).

The Center for Law and Social Policy (CLASP) report (2007) and the research around teen parent families pointed to a number of recommendations. Two recommendations were:

1. EHS programs should develop partnerships to help identify and reach out to teen parents with disabilities.
2. EHS programs should be encouraged to form partnerships with the schools serving teen parents.

Teen Parent Program

In 2015 the Early Head Start-Teen Parent Program partnered with Union County Public Schools to serve pregnant women participants and teen parents. The Teen Parent Program is a great way to support young parents to finish high school or continue their education through college or vocational school, or start working. The program is completely free along with all the baby care needs provided. Parents must be twenty-one or younger and be doing the following: attending middle or high school, Victory Tech (Job Corp), attending GED classes, attending vocational training/college, or working.

Family Engagement is ongoing, goal directed relationships between staff and families that are mutually, culturally responsive, and that support what is best for children and families both individually and collectively. Each parent will have an opportunity to complete a Family

Interest Survey along with a Parent Training Survey of trainings that would like to see for this up-coming year. It's our goal at Union County High School Child Care Center that families have a partnership in their child's education.

Family Services

Family services are provided to pregnant teen participants and families through a family participant agreement, a pre and post assessment, family goal, resources, and referrals. Services are available throughout the year. We have established a Parent Committee so that every parent can share ideas, get to know each other, and have fun learning new things together as parents. Within that Parent Committee along we have plan parent group meetings, a variety of parent trainings, and gathered ideas for family events. This includes engaging fathers from the beginning. Also we have started some fun father/father figures activities to promote the importance of fathers or a father figure in a child's life. These early experiences help children reach their full potential in school and in life.

Health Services

Health Services are provided as well to pregnant women participants by supporting healthy beginnings for infants and their families. With each pregnant participant we use a research-based curriculum series from the book, *Partner for a Healthy Baby*, (2010) to help pregnant women understand the link between prenatal development and school readiness. Through our time spent together in prenatal classes I work to make any referrals if needed. Also I include information about labor and delivery, the benefits of breastfeeding, substance abuse, father engagement, infant care and safe sleep practices, postpartum recovery, parental depression, and fetal development. Within two weeks after the baby is born I will visit with mom and newborn to complete a two-week newborn checklist along with using a validated tool,

Edinburgh Postnatal Depression Scale (1987) to screen for maternal and paternal depression. Once the baby is enrolled all current immunizations, well child exams, and any screenings requested will be completed as needed.

Education Services

Experiences in the first three years of life have a strong impact on brain development and learning. We have a unique school that does provide all these wonderful things for pregnant participants but at the same time we are engaging in wonderful experiences with children and families. The children are seen as powerful and resourceful, bringing with them preparedness, curiosity, and strong interest in constructing their own learning experiences. Our curriculum is based on the study of the Reggio Emilia Approach, we view every child as gifted with tremendous potential. The curriculum emerges through careful and thoughtful observations of the children, their play, their investigations, and their interactions with their environment and with one another.

Topics of study are captured from the conversations of the children, through family events, parents interactions, from the community in which our school is located as well as typical interests of young children. Also we are responsible for assessing the children's growth and development. An on-line software program, Teaching Strategies Gold (2010), is used by all Audubon Area Head Start teachers to track the children's development and progress. The information is entered into the computer four times each school year. The teachers will review the portfolio entries and the learning objectives with the parents during conferences and home visits per year. Also we are responsible for two home visits and two parent teacher conferences throughout the school year with families.

During the summer I continue to do weekly home visits and three socialization days so that I can continue my relationships with the families, children, and pregnant participants. Our goal is to continue education and summer readiness goals that are formed through the last individual child report. I continue my prenatal care classes as well with any enrolled pregnant participant.

The Goals of Prenatal Care at UCHS Child Care Center

The primary goal of prenatal classes is to help ensure a healthy pregnancy and a healthy baby. This may be achieved by encouraging the teens to attend regular prenatal appointments, embrace a healthy lifestyle, and eat nutritiously. Also by helping the teens reduce stress, overcome challenges in their lives, and identify any problems in their pregnancy. My goal is to support them but state goals within our program and set goals accordingly to the families' specific needs.

I work closely with the Family Resource Youth Service Coordinator (FRHSC) at Union County High School as she makes me aware of any student that has been confirmed pregnant. Once she has contacted me we meet with the student face to face so that I can introduce myself and speak with the expectant mother about the Teen Parent Program. After discussing the program expectations and if they are interested in the program the next step is to fill out an application. Once the application has been processed I meet with the student to set up a convenient time to begin prenatal classes. When asked about the impact of the Teen Parent Program at UCHS, the FRYS Coordinator responded:

“I believe that the greatest impact has been the ability to keep teen mothers in school.

Along with the student's ability to be able to stay in school, the teen parent program also is able to provide the students with collaboration with community organizations, onsite

child care, onsite mentoring, on site academic sessions, and home visits. All of these things provide a wonderful wrap around for these students in need. I think that by creating a positive climate in all areas of the school setting is imperative to facilitate the teen parent's engagement and connectedness to the program so that they are able to feel involved and invested in achieving their short and long term goals with their education and with parenting.”

What is my role with expectant families?

I believe I have many roles with the expectant families. The first thing I do is offer support and information to assist them in achieving a healthy birth. As a family advocate I am advising the pregnant participant about prenatal appointments and other community services that may help her in the future. With being their coach I am actively listening to what families need and want and help them to obtain it. I work with community resources to help educate them about what the community has to offer them as new parents. Through many conversations I consult with my families to help them find answers to their questions. As a facilitator I am empowering the mothers-to-be to acquire what they need to accomplish in their goals and dreams. I help to motivate the families to make lifestyle changes and engage in healthy behaviors, with the ultimate goal of having a healthy baby. I encourage and help my mothers-to-be to complete all assigned tasks and support being there for the families when they need me. When the mothers-to-be observe in the classroom they see me as a teacher to help them develop the skills they need to achieve their goals.

How do I build a trusting relationship?

The first thing that I do to build a trusting relationship is explaining my roles as a supporting teacher and as a family advocate to the families. While spending time with the

mothers-to-be through prenatal classes I invest in a lot of time getting to know them. I enjoy getting to know them early on and building this trusting relationship way before they baby starts in our program. I learn their fears, ups and downs in their life, and share in their excitement about this baby that is growing inside them. Through some of these prenatal classes it has been heart breaking to find out when they decide they don't want to bring their baby to the center because of unfortunate circumstances: dropping out of school, having a relative to watch the baby, or moving to a different location. I do hope when they leave the program they have some understanding that their role as a parent is very important. Also I hope that I have influenced them in some way. I tell them to call me if they have any questions or concerns about being a parent. As far as the ones that have been through the prenatal classes and have enrolled their child I believe we have a better trusting relationship that keeps growing.

Who should participate in the prenatal classes?

My goal is to have both mother-to-be and fathers to be involved in the prenatal education classes but that is not always been the circumstances thus so far. As of now I have only meet with the mothers-to-be but would like to see change in this area of educating both parents if it is possible. I do educate the expectant mothers about the importance of father involvement in the pregnancy and into parenthood. I review with the mothers-to-be as well as send home resourceful information handouts to the fathers so they can read about their important role as a father. Most of my fathers have quiet school or are no longer attending high school.

As my research highlighted, I am highly encouraged to work with teen moms that have developmental delays and need extra assistance with parenting skills. When this occurs I work directly with the special education teacher to make sure I provide the teen with the right materials for her to learn how to be a successful mother. The student spends time in the

classroom where we work to show and model for her good parenting techniques. Also we model the appropriate ways to help her child reach her milestones.

As also covered in my research, I have faced the issue of multiple pregnancies while working with teen parents. I have experienced four teen mothers in this situation. Those repeat pregnancies have occurred within only a few months to two years of having their first child. All of these teen moms except for one are no longer in our program because of poor attendance and/or moved away. Recently one of my teen moms that has been with our program for a year and a half has found out she is expecting again. She is feeling overwhelmed but is determined to continue with her CNA classes and then continue her education at the community college. She is in hopes that her newborn will be able to attend our program since she has established a trusting relationship with all the staff. Also she has informed us as how her first child has grown and experienced success while attending child care.

How do I use the Curriculum?

In order to achieve the program goals and help families meet their goals, I have to be knowledgeable about a variety of topics that impact expectant families. The curriculum series from the book, *Partners for a Healthy Baby*, 2010 was developed to fill the need for a comprehensive prenatal home visiting curriculum that provides a clear focus on the expectant family. Topics that are discussed through these visits are Family Development, Maternal and Family Health, Preparing for Baby/Caring for Baby, and Baby's Development. The book begins with discussing the first trimester and then leads into the each fetal development. Each tabbed section includes a lists of purposes for visits, a lists of information regarding each purpose, handouts that summarize critical points of each topic, and lists of resources that can further help your families.

Within each prenatal month the information is designed to help me plan the purpose of my class so that I can go over critical topics designed for the families I serve. There are additional resources that are listed at the end of each page that include websites, books, pamphlets, YouTube videos, and movies to view to help support the expectant families. I record and keep track of topics that I cover with each family so that I can plan for future classes. When any health concerns are discussed I note them as well as help them to consult their health provider so they can be aware of any health concerns. I encourage my expectant families to change to a healthy life style along with eating nutritious when I am discussing health topics. With every class I include fetal development and go over the changes that occurring in the expectant mother's body. The purpose of the handouts is to help families learn how to have a healthy pregnancy and healthy birth. I encourage the mothers-to-be to keep the handouts in their folders for future resources and to share with family members. I encourage them to share their goals and dreams on their handouts and help them to achieve them. The handouts help young mothers improve their self-esteem by focusing on a better lifestyle.

What are the keys to using the curriculum for effective outcomes?

The most essential and important component is fostering relationships with the expectant families. As I spend time weekly getting to know these young families I want to nurture our relationships. I find every opportunity to empower them to achieve their goals and reward them when they do. I strive to make the education classes fun through YouTube videos, role playing, and educational trainings that I help to develop. The educational trainings are designed and pulled from my community resources guide that I help to develop since I believe our community helps us as citizens to be the best parents that we can be. I seek opportunities to get to know

these resources: nurses, health consultants, and child development specialists to help me and to help the expectant families I serve.

Each year representatives from Green River District Health Department in Owensboro, KY come to discuss the following: Pediatric Head Trauma, Safe Sleep, and explain the Kentucky Health Access Nurturing Development (HANDS) program. They also discuss the referral process for HANDS. The parents and pregnant girls receive a folder full of pamphlets and a DVD to watch about how to soothe a crying baby. Representatives from the Union County Health Department also come talk to the expectant mothers about the importance of breastfeeding. They come to share the benefits of breastfeeding your newborn and give them a wealth of information along with handouts, books, and pamphlets.

A Women, Infants, and Children (WIC) Program Navigator from Green River District comes to conduct an informal WIC training. He starts with an overview of all WIC and what all it provides for women, infants, and children. He brings several WIC pamphlets to give to the families along with showing how to use the WIC shopper app to shop for items that are listed on WIC approved items in our local grocery stores. The WIC Facebook page has fun recipes that can be done with children. He asks for any struggles or comments about WIC and the girls participate with questions.

Parent Engagement at Union County Child Care Center

Getting the teens involved in their role as parents can be a challenge. My parent engagement strategies consist of three aspects: 1) involving expectant and parents in the process of identifying interests/talents and setting up a parent committee, 2) developing agendas and activities for parent meetings and family events, and 3) participating in parent training.

Implementing a Parent Committee

In the summer of 2017 I wanted to look ahead to the next school year with more family participation. At the end of the summer I started planning and gathering information on how I could get more parents involved in their child's education. I wanted to create a Parent Handbook to incorporate the Prenatal, Health, and Family Services along with the Reggio Emilia Approach. By giving them this handbook it would show we provide a comprehensive service to all families. Then I considered having my own small parent committee because of the classroom dynamics and having the teen voices being heard. I wanted my teen parents to feel important and that their voices matter for such a small group. Also I wanted my previous parents to uplift my new teen parents in ways they needed comfort and reassurance.

In August during Parent Orientation we went over the new forms: Parent Committee – A Good Idea! Parent Interest Survey, Parent Committees, and Parent Survey (Appendix A, B & C). We discussed each form and asked the parents about how they felt about having a parent committee for their child school. I explained the responsibilities of the Parent Committee and that every parent is automatically a member of the Parent Committee. With some of those responsibilities I discussed that we would gather during the year six times for parent meetings to share ideas, hopes, and dreams for their child's school. We encouraged that every parent has interests and ideas to share and by establishing a parent group it helps to grow relationships within the classroom as well with each other. We expressed that the members of the parent committee would plan family events and activities throughout the year. They were excited and began filling out their Family Interest Survey along with the Parent Survey of what type of trainings they would like to see this upcoming year.

Parent Group Meetings and Family Events

After the year got started we had some struggles with getting the first parent meeting to begin but when we did have the first meeting four out of five parents attended. They were excited to get the year started with family events, scheduling educational trainings, and continuing our parent group meetings for the rest of the school year. During our first group meeting, one parent enthusiastically wanted to have a Family Christmas Party. The rest of the members agreed and were excited to start planning for the event in December with food, a gift exchange with the children, and a time of sharing with each other.

In our second parent group meeting I had three fathers attend and they were excited to hear that I would like to add some father/father figure events or activities throughout this school year. The fathers agreed to have Daddy Play Days, where the father/father figures could visit the classroom to play with their child.

In January of 2018 a third parent group meeting was held with two parents attending the meeting to discuss plans for the rest of the school year. We planned a special family event that surrounded the children's interests of playdough. The parents would get to experience with their children the wonder of playdough and materials. We did plan for the younger children who were not exploring playdough we would have the storytelling baskets accessible for them to explore with their children.

As the school year continued we were persistent about our parent meetings to further discuss our family events and parent trainings that the parents wanted to see happen. In our fourth meeting two young mothers, decided they wanted to have a celebration outdoors on the playground in May of 2018. They both decided to call the event, Picnic on the Playground and for the parents to bring baskets of food, lawn chairs, and blankets. Both mothers appointed their

boyfriends for grilling the food. They wanted to have outdoor activities for the children as well as the playground equipment.

With each parent group meeting I believe the parents are getting comfortable with their ideas and are eager to share them. This is the first year we have establish a parent committee. I have had some willing participation but would like to see more than the same two or three participants.

Within these parent group meetings I want to empower the parents each time to share their ideas and come up with meaningful family events. I show them I value their time by explaining the best way they can express their interests or hobbies within the classroom. I encourage everyone to participate in what makes him or her feel comfortable within the classroom. We all work together to set the next parent group meeting and family events. I encourage the parents to make decision on what they would like to do as family events by showing them the interests of the children as well as support their ideas.

For each parent group meeting a parent member is designated to take the minutes. I have been leading the parent group meetings but would like for the parents to take more ownership in this process of facilitating the meetings. A parent member is designated to ensure attendance sheet is signed. After the parent member takes the minutes I record the minutes on the Parent Committee Meeting Minutes and send out a copy of the meeting summary to all parents that attended as well as the ones that did not attend.

Parent Trainings

Through building the community resources guide, parent surveys, and parent group meetings the parents help guide the type of parent trainings they would like to be educated on. I have struggled with parent participation through these last two years but will not give up on ways

that I can improve on this. I get discouraged when I spend time making arrangements for a guest speaker and then only a couple show up. This year I considered scheduling parent trainings at night for my working families. This way my prenatal participants and student parents could come during the day while at school for the day trainings and for my working parents would have a chance to come at night for parent trainings. I've worked to plan most of these in advance so the parents can ask off of work but I am still struggling. I have thought that next year I will ask my returnee parents to help assist in the planning and be involved as much as possible during these parent trainings.

When I send out a training invitation I explain who will be leading the training and how it will benefit them as a new parent. Also I send a friendly reminder in hopes of seeing them at the training. After the parent training the parents are given a parent training evaluation form so we can get a sense of how they liked it and/or how we can improve on the next training. Through these parent trainings parents are given many resources and handouts to inform them.

In one of our parent meetings the parents wanted to become knowledgeable about CPR, since some worry about their children choking on foods. I arranged for a First Aid CPR Instructor to come discuss some basic knowledge of CPR for infants and children and some First Aid precautions to consider for young children. The participants asked questions about the biggest fears of having their children and not knowing what to do. The Instructor helped to ease their fears by providing them with the knowledge in these types of circumstances. She talked about water safety since the children will start to experience the water this summer. She gave them both a packet of references to have about First Aid/CPR in case they wanted to read more about it. The girls loved it and said it was very informative.

Case Study of UCHS Child Care Center Families

In the last three years I have worked with teen parents and I have found it to be difficult to serve the unique needs of teen parents. I have seen the teen parents struggle to be parents, establish independence, and self-reliance. Most struggle with their new role as a parent because they are still a child themselves. Many of the teen parents I serve have no idea how to be parents because they have absent parents or their parents are not willing to guide them into the appropriate ways of parenting.

I chose to conduct research through a case study of the families and pregnant participants that I serve within the Teen Parent Program with the explicit purpose of gaining understanding of each unique individual. I feel this will enable me to fully meet the need of each participant in a unique and meaningful way. Furthermore, I will gain a deeper perspective on how to improve my overall program.

Within the individual cases I have used pseudo names to protect the privacy of the teens I am serving. I wrote specific questions for each of my teenage families since all my families have unique backgrounds and are at different eras in their life and with parenthood. When I announced to my families and pregnant participants that I would be gathering interviews for this research paper they were excited to share their stories. While conducting these interviews some of the parents opened up more to me by telling me their fears but hopes for a better future for themselves and for their children.

Within the program I am currently serving six children with families and two pregnant women participants. Four of my families attend high school while the other four have continued their education or are working. My cases are very unusual since I have known four of my parents since they have attended Helping Hands Child Care when they were very young children.

When they attended Helping Hands Child Care I was their caregiver and began a relationship with them and their families. I have seen these families from time to time and now I have reunited with them. Now these little girls are all grown up with their own children and I am taking care of their children.

Case #1: Amy

I met Amy at Union County High School as she was a senior and six months pregnant. Amy was excited to start the Teen Parent Program and get started with the prenatal care classes. She was very talkative, immature, but had a willingness to learn the importance of having a healthy pregnancy and a healthy baby. I had decided to have Amy along with two other girls that were expecting to come together for prenatal care classes once a week. This was the first time I had ever conducted prenatal classes like this so I was learning along with them.

Amy was eager to join each week and was excited to learn what was going on in her body. Amy was not shy to ask questions and seemed to encourage the two other girls to ask questions as well. I learned through our time together she loved Art and was currently taking an AP Art class. She showed me several pieces of art she had done and wanted to pursue a degree in Art. Even though she was expecting a child she had dreams to continue her education once she graduated from high school.

One thing that stood out to me in our time together was Amy's willingness to lead a parent training with the other girls that were in her class. She asked if she could do a training on how to have a simple and inexpensive baby shower. Amy took the initiative to gather the information from the internet to put it all together in a handout. I purchased the materials for her to use in her training. As Amy led the training she showed the girls how to make inexpensive

decorations for a baby shower and fun games to play. They all enjoyed cupcakes, a time of sharing, and fellowship of having their babies soon.

When I look back on the time Amy and the other two girls spent together they had a special connection with each other about their pregnancies, they learned from each other and I was learning about them as well. Unfortunately the other two girls decided not to enroll their babies since they were graduating and wanted to stay at home with their children. Afterwards I believe I should have spent more one on one time with each one so that I could have built a better relationship with each one.

Through our conversations Amy has the support of Evan, the baby's father but not the support of her parents. Amy's parents have not always been there for her and are not good role models. Amy was already living with Evan, which was older than her. She confided in me that she did not trust her parents as I spent time mentoring and supporting her ideas. Through the prenatal classes Amy was excited to take the handouts home to discuss with Evan.

Before her child Emma started the child care center Amy was having transportation issues and at first thought it would be best to stay at home and not finish high school. With the help of friends and a couple of high school teachers she was able to catch rides to and from school so that she could graduate high school and Emma could start child care. Once Emma started Amy was eager to ask questions about what Emma was capable of doing developmentally.

Over the summer during our home visits I got to know Amy a little better. Through our home visits we worked together to create Emma a baby nursery. Amy and I worked to organize Emma's clothes and the furniture in her baby nursery. Also we took Emma for stroller rides, we sat out under the shade tree and played with Emma. Amy still struggled with transportation as

their only car was damaged. Once during the summer I took Amy and Emma to a well child exam. We had great conversations during that time and she had decided to go to the community college to continue her education.

When we started back in child care in the fall both Amy and Evan are growing more maturely into parents. Amy and Evan have been actively engaged in parent meetings, home visits, parent teacher conferences, family events, and parent trainings. During our first parent training Amy initiated to have a Family Christmas Party in December where parents would have a time of sharing with food, gift exchange, and conversations. Through this school year she has continued her education with attending college and working part-time as a work study student. She has accomplished her first family goal of purchasing a family car since in the beginning of the school year. She and Evan were borrowing a car from relatives to get back and forth to college and bring Emma to school. Amy's next family goal is to get her driver's license.

Interview Questions with Amy and Evan about the Teen Parent Program:

Q: Amy what did you like about the prenatal educational classes? Did you feel they prepared you for parenthood?

A: "The prenatal education classes helped me out a lot. There were things I learned at the classes that I probably would have never known if I had not attended. The prenatal classes helped me understand what was normal and what was not in my pregnancy. The classes helped me to know what was going on in my body and what was coming up next. The classes helped me to know what to expect when I finally had my baby girl. I do think they helped me prepare for Emma's arrival."

Q: What are some of the challenges you both face being parents at a young age?

A: “One of the challenges I have faced being a teen parent is trying to get my school work done while also trying to keep Emma calm and entertained. It’s challenging to try to balance Emma, work, and school. Another challenge we face is with our friends who don’t have children. They don’t understand that we can’t just always drop everything to go hang out or party. Sadly, I have even lost a few friends because of this. Some people also look down on teen parents. I have gotten a lot of funny looks from people in public when I am with Emma.”

Q: What does being a parent mean to you?

A: “Being a parent to me means not putting myself first anymore. Since I had Emma what matter isn’t me, or Evan, it’s Emma. I would do everything to make sure she has what she needs, even if that means I won’t get what I need. It is a sacrifice in a way. Being a parent also means planning ahead, and being more careful and responsible. My child is the most important job now, being a parent means loving my child unconditionally, always putting her first and keeping her safe.”

Q: What does it mean to come together as parents to plan for special family events?

A: “I think coming together as parents to plan something special for the family means good use of communication and negotiation. I think at the parent meetings we all do a pretty good job of that. We are all busy with school and work but we are willing to take time to talk it out and find something that will work together as parents.”

Q: Which particular parent training have you learned the most and why?

A: I really think I learned the most through my prenatal care classes and the WIC parent training that I recently attended. When it comes to the trainings I actually learned things I didn’t know. During my prenatal classes I learned my body was going through a lot of

changes during my pregnancy and the prenatal classes walked me through that and helped me understand what was going on and why. The WIC training taught me the benefits don't roll over to the next month. I also learned more about the program's Facebook page and the text reminders. I am glad I attended the training to learn more about the program that has helped my family out so much."

Case #2 Susan

My second case study is about Susan. I first met Susan and her parents years ago as she attended Helping Hands Child Care Center as a young child. I can remember Susan's parents bringing this sweet child to Helping Hands with those big brown eyes and long blonde hair. Susan's parents were very easy to talk to and we built a good relationship as she attended my class up until she left for preschool. I met Susan once again as she was interested in the Teen Parent Program and wanted to start prenatal care classes. She was in her first trimester and a junior at Union County High School. Susan was eager to get started and had a great spirit about her.

Susan has been great about attending prenatal care classes along with any parent training to inform her of any parenting skills. She has a great support system from her parents and from the baby's father, Curt and as well as the Curt's parents. Susan has been active with lots of questions and has researched the importance of having a healthy pregnancy and a healthy birth. Her family goal has been to create a baby nursery, which she had accomplished very early in her pregnancy.

Interview questions with Susan about the prenatal care classes:

Q: What have you liked about the prenatal care classes and why?

A: "I have enjoyed the prenatal classes and feel they have prepared me for my baby."

Q: Which prenatal care training have you enjoyed the most and why?

A: “I have enjoyed the ladies from Green River Health Department and how they informed us on what we need to know about shaken baby syndrome, SIDS, and safe sleep. I learned a lot!”

Q: Do you think the prenatal care classes have prepared you for a healthy birth and baby?

A: “Yes, I have learned so much and have enjoyed the parent trainings too.”

Q: What do you think will be the biggest change once the baby arrives?

A: “It will be a different routine with the baby but I am sure it will be fine.”

Q: What qualities do you think are important in a mother?

A: “I think being kind, compassionate, and loving.”

Case #3 Molly

I met Molly in August 1994 for the first time when she was four years old as she attended my preschool classroom at Helping Hands Child Care Center. I can remember Molly as a little girl with that long blonde hair, sweet, spunky, but could be mischievous at times. In January 2017 I was excited to enroll Molly’s son, Brent in our classroom. Molly was finishing up her senior year and working towards graduating in the spring of 2017. Molly did graduate from high school but has struggled with getting a job. I did not have Molly in prenatal classes.

Molly has had a rough year. Brent’s father, Eli, left for basic training for the Army two months after Brent was born. After he returned from basic training he has not been there for Molly and Brent, leaving Brent without a father and Molly a single mother. She has struggled with finding and keeping a job this year. She has not been actively involved in parent meetings, family events, parent trainings, and even inconsistent with home visits last summer. Brent’s

attendance at school has been poor because he is frequently sick. There is a lot of chaos going on in Molly's life. She has a good support system with her family and friends but struggles with keeping commitments. She is very independent but is challenged with balancing her role as a parent and goals for her new life with Brent.

Interview Questions with Molly about the Teen Parent Program:

Q: What are some of the challenges you face as a single parent?

A: "Some of the challenges I face as a single parent are doing things on my own. I believe a helping hand is better than one. Making decisions on my own is sometime difficult. Worrying about where Brent will go when I work. The emotional challenges of not having time to myself and having self-doubt if I'm doing enough of the right things."

Q: What do you like about the Teen Parent Program?

A: "What I like about the Teen Parent Program is that we all come together and plan for family events. Another thing I like is the educational classes we have as groups to educate us on certain things in parenting."

Q: What does it mean to come together as parents to plan for family events?

A: "Coming together and planning for family events to me is talking about what everyone likes and gathering ideas together. By gathering those ideas everyone can give ideas and get better ideas of what to do as parents."

Case #4 Jessica

In the fourth case study I actually met Jessica when she attended Helping Hands Child Care Center as a preschooler. We meet again in March 2017 when she was a senior at Union County High School. She was interested in the prenatal classes we offered with our Teen Parent

Program and was about five months pregnant. Shortly we began our prenatal care classes together and she was quiet about participating with a couple of other girls.

During our time together in the prenatal classes she seemed to be distance and in denial that she was pregnant. Jessica would discuss things about going onto college and working full time but not adding her baby in the picture. After graduation we continued our prenatal care classes as home visits through the summer. As we spent time together over the summer she confided in me that she does not have any support from her own family and was living in poor living conditions. Jessica was living with Avery, the baby's father and he was quite a bit older than her. Jessica continued to put off things to get ready for the baby's arrival. I tried to help her but she didn't want any help and said she would do it at a later time.

After the arrival of the baby Jessica was in and out of the hospital a few times and was separated from her newborn for a week at a time. When I began my home visits after the baby was born she was overwhelmed, she confided in me that Avery wasn't helping her out with the baby. I talked to her about how your baby will change your life and for them to set down together as parents and discuss the importance of parenthood. Shortly afterwards she and Avery split up, leaving her a single mother at eighteen.

Through this school year we haven't seen much of Jessica, she is working full time on third shift. Avery's parents and grandparents are Jessica's greatest support with helping her with bringing and picking up Lee Ann from child care. We see Jessica occasionally on Friday's when she picks up Lee Ann from child care. As educators we take the time to share Lee Ann's growth by pointing out documentation on the wall of Lee Ann. Also we show her daily journals of what Lee Ann is doing and how she is developing in the classroom. Jessica has been participating in home visits and parent teacher conferences when they arise. Each week I try to make an effort

to send Jessica text messages of any up-coming parent trainings, family events, meetings, or pictures from the daily journals of Lee Ann. Jessica has participated in a few things this year but has become very busy with work.

Interview Questions with Jessica:

Q: Why did you think it was important for you to receive prenatal education classes during your pregnancy?

A: “Because I am young and really had no idea what I was getting myself into, or how I was going to do it on my own. I grew up around babies my whole life but it’s so different when you have your own.”

Q: What are some of the struggles you face as a single parent?

A: “Everything honestly. Scheduling, trying to hold down two jobs to support us, trying to find babysitters, sacrificing seeing her as much as I wish I could.”

Q: How has Lee Ann changed you as a person?

A: “She has made me a better person in every way possible, a stronger person. Lee Ann makes everything better and chases away the bad thoughts that come into my head because of my depressions. It’s all about Lee Ann.”

Case #5 Morgan

I met Morgan in February 2018 as she is a junior at Union County High School and is in her first trimester in her pregnancy. Morgan is a very sweet and caring seventeen-year-old young lady but doesn’t give much eye contact when she is speaking. On the first prenatal care classes Morgan asked if the father of her baby could join us because he was very interested. Tori is a senior also here at Union County High School and would be accessible to come join us for prenatal care classes. I was so excited that a father wanted to join in on the prenatal classes and

that this would be the first time this would happen. In the next couple of weeks we made arrangements for Tori to joined Morgan for prenatal care classes. I am so grateful that he wants to participate with Morgan in this setting and it is important for them to support each other through this pregnancy.

As they are attending the prenatal care classes they are both asking a lot of questions about their pregnancy and about parenthood. Tori has been supporting Morgan since he found out he is going to be a father by going along with her to all her prenatal doctor visits and helping her with feel loved. They are both eager to learn everything there is to learn about becoming parents. I have encouraged Morgan to keep her handouts and she has by collecting them in a folder so that she can share those with her mother as well. Morgan and Tori have been participating in all the parent trainings. It is a challenge for me to support Tori into fatherhood and guide him in learning how to support his family. I want him to feel valued and welcome since he is eager to learn.

Interview questions with Morgan and Tori about the prenatal care classes

Q: Morgan and Tori what do you think is going to be the hardest challenge as new parents?

A: Tori – “I believe the hardest challenge will be that we will not be able to agree on how to parent our child.” Morgan – “I agreed with Tori and knowing how to take care of all the baby needs, like when she cries or when she is hungry.”

Q: Morgan and Tori what good qualities do you see in yourself and want to pass on to your child?

A: Tori – “I want my child to be a leader, not a follower. I want her to be able to stand up for herself too.” Morgan – “I want her to be caring and loving to others, like I am.”

Q: Morgan and Tori how has attending prenatal care classes together prepared you for a healthy birth and baby?

A: Tori – “Coming to the prenatal classes has been stressful, we are learning together and we are communicating about what we are learning. Also I have been going with her to her doctor visits and have learned a lot. One of my biggest fears is I am going to go into a deep sleep and not hear the baby or she might die of SIDS.” Morgan – “By coming to the prenatal classes it is preparing me for the birth and knowing what to do when I have my baby. We are becoming less stressful about the baby as we are learning more and more.”

Case #6 Jordyn

I met Jordyn and her mother in October 2017 at Union County High School when she was interested in the prenatal care classes. She was already six months pregnant and into her second trimester. Previously she had just started prenatal care visits with her doctor. Jordyn has some developmental delays, which means she meets with her special education teacher for extra help on assignments.

Jordyn was very quiet during our time together in prenatal care classes. I learned quickly that I needed to introduce the materials at a slow pace and show videos, since she learns best visually. I strived not to overwhelm her with a lot of information and materials all at once since it takes time for her to process new information. Through my conversations with the administration team here at the high school I found out Jordyn is coming from impoverished situations and doesn't have much support from her own family. Jordyn does have the support from the Izzy's father, Robert and is now living with him and his family. Jordyn has a hard time

trusting people but has established a really good relationship with one of her special education teachers so if I am not understanding Jordyn I asked her.

Jordyn did participate in a couple of parent trainings in our short time in prenatal care classes but soon had the baby. When it came time to do the paperwork for the baby to be enrolled into our classroom, I knew I needed to do several home visits to prepare Jordyn and Robert. At first Robert and Jordyn were overwhelmed with this new responsibility of taking care of their newborn and hesitated to enroll the baby into child care. Also Jordyn was feeling depressed and didn't want to return back to high school. After several home visits of encouraging them the important benefits it would be for the both of them to enroll Izzy and for Jordyn to return to high school they decided it was the best option.

I believe the one thing that helped them in making their decision to enroll their child was to participate in phase in days for a couple of weeks. The phase in days allowed them as new parents to see the child care setting, prepared them for a slow transition of bringing Izzy, and finish up any paperwork in a welcoming and comfortable environment. As educators we were excited to see them start this new journey into parenthood as they arrive each day.

Since Jordyn has been bringing Izzy to child care, she has been consistent with her attendance even though they have had a few struggles with transportation issues. Jordyn is spending some time in the classroom with Izzy to learn new ways of parenting a newborn.

Interview question with Jordyn about the Teen Parent Program:

Q: What do you like about Izzy coming to school with you?

A: "I like that I can see her any time I want."

Q: What do you like about the classroom environment?

A: "I like that they take care of my baby and sing songs to her."

Case #7 Sally

I met Sally and her mother when Sally attended Helping Hands Child Care Center as a toddler. I can remember Sally as a beautiful little girl with those big brown eyes, long brown curling hair, spunky, and full of curiosity. To this day she was the youngest child that I have known to be potty trained at eighteen months old. Sally's mom, Sherry was a single parent.

Sally and I reunited in August 2016 as she was interested in enrolling her child, Sue into the program and returning back to high school as a senior. Shortly Sally and Joe, Sue's father, returned to high school as seniors. Unfortunately, Joe quit high school shortly after returning his senior year. Sally continued coming to school but had a hard time her senior year. Her attendance was poor along with Sue's and she struggled with her new role as a parent. I encouraged her not to give up, to continue coming to school so she could make a better life for herself and for Sue. We encouraged her to visit the classroom to improve on her parenting skills but she continued to skip school a lot. Then the administration team at the high school advised her to attend Union County Learning Academy within the high school where she could accelerate her credits and possibly graduate early. Sally had a rocky start but was able to graduate right before spring break. By finishing up her course work early she didn't have to attend school daily but could still walk the line with her graduation class in the spring.

After Sally finished her course work early her whole demeanor changed, she was a much happier person and no longer felt the stress of attending high school. Sally improved on Sue's attendance and started volunteering in the classroom some. Finally Sally could see the light at the end of the tunnel with new adventures of parenting her sweet little girl and now is working a full time job.

Through our summer home visits I found out that both Sue and Sally are living in poor living conditions but Sally is determined to save money so that her and Sue can find a place on their own. Over the summer I could see more changes in Sally with participating in the socialization days and wanting to continue her education with attending Community College or Job Corp. With this new interest of wanting to continue her education I made arrangements with Job Corp with getting the application admissions process papers and allowed Sally to use my computer to apply for Community College. At first Sally was a little slow about getting the application process started with Job Corp. In October 2017 she began CNA course classes and would be able to complete her CNA within eight months and graduate in May 2018.

Since attending Job Corp Sally has regularly attended classes full time Monday through Friday while having a part time job. This school year both Sally and Joe have been actively involved in participating in parent meetings, family events, and parent trainings. Sally along with another parent encouraged the Playdough Play Night as a family event this year since it was a project of interest of the children. Joe has participated in Daddy Play Days by spending time with Sue at school by playing with her and reading to her friends.

Interview questions with Sally and Joe about the Teen Parent Program:

Q: What are some of the challenges you both face as young parents?

A: Sally – “Some of my challenges are having patience with Sue, since she is always running around, so busy. Other challenges would be saving money so that I can get a place for me and Sue. I go to Job Corp full time and work part time so having time to study.” Joe – “My biggest thing is not being able to support my family after losing my job. It was tough when both Sally and I lost our jobs but now we are both working and its good.”

Q: How has Sue changed you as a person?

A: Sally – “Sue has made me more loving and understanding, especially now since I am a mom I see what my mom went through as a single parent.” Joe – “I never thought I wanted a little girl but Sue has stolen my heart and I love her.”

Q: Joe how has your experience in the classroom when you came for Daddy Play Days?

A: “I really like them, seeing Sue play with her friends was fun. I liked reading to the other kids too. I think it is preparing me to see what Sue can do and what she will be able to do when she gets older.”

Q: What have liked about family events and why?

A: Sally – “What I liked the most are the memoires we are making with the children. I liked spending time with the other parents and getting to know them.” Joe – “I like coming to them, seeing the other parents and talking.”

Q: Why do you think it is important for me to continue with home visits in the summer?

A: Sally – “I believe it gives you a chance to see the kids to make sure they are in a good home environment. I think it helps with the kids remembering who you are and when they start back to school it is not so hard on them.”

Case #8 Emily

I met Cori and Emily in January 2016 as both were attending Union County High School and just enrolled their newborn, Jody into our program. Emily was a sophomore, quiet, shy while Cori was a senior that was outgoing and mature for such a young man. Shortly after they began the program we started a peer group with other teens that met a couple days a week for twenty-five minutes with others that were expecting as well as new parents. Both Cori and

Emily seemed to lead this peer group with their own experiences, their fears of parenthood, and their willingness to learn more. Now as I look back on that time we spent in the peer support group I can see they were an inspiration for both Sally and Joe. Also this is something I have been wanting to arrange again.

During their time with our program they were both great about participating in the classroom, parent trainings, and family events. The one thing that stood out to me about Cori was his responsibility as a father.

Since Cori graduated in 2016 he went on to the Marine Corp. After he went through basic training he missed his family deeply and now he is home with them every day. He said he just couldn't be away from his family so he got a full time job and has been working ever since. Emily has been with us for the last two and a half years she has blossom into motherhood. Emily has had the support of her family, Cori, and Cori's family since the very start and it shows. Emily is cautious on how she parents but is willing to ask questions for the next developmental step in Jody's life. Emily has continued to be engaged in all activities: family events, parent trainings, parent meetings and when she does miss an event, she asked, "What did I miss? I want to know what I missed." Emily continues to achieve her family goals each year of completing each grade and now is looking forward to graduation in the spring of 2018. Emily is now planning to continue her education with attending Community College and entering into the Radiologist program.

Interview questions with Emily and Cori about the Teen Parent Program:

Q: Emily and Cori how has Jody changed you as a person?

A: Emily – "She has changed me in so many ways. She has made me grow up and be mature earlier than I thought I would have to be. Jody is the reason I want to be

successful, by going onto college and making a better life for me and for Cori. She is the reason I thrive each day.”

Cori – “Jody has changed me in so many ways she is why I do what I do. She is the reason I went to Marine Corp but I am glad I am home now to watch her grow up. Jody has made me responsible nineteen year old and more mature. She is why I continue to go each day.”

Q: Emily what have you enjoyed the most as you have spent time in Jody’s classroom?

A: “I really love and appreciate everything the classroom and teachers have offered Jody and me, it has helped me as a parent by coming in the classroom every day. By seeing her each day I don’t miss her as much, I know she is safe and close by. I remember coming into the classroom for the first time I knew right then she would be in a good place and that the teachers would be able to help me as a parent. If the high school didn’t have this type of program I would have no idea where I would be in my life.”

Q: Emily and Cori what are some of the struggles you face as young parents?

A: Cori - “I have love being a dad especially with Emily as my future wife. We really work well together. I know that I always need to be ready for anything and be there for both Emily and Jody. I am learning to watch my mouth as Jody is getting older.” Emily - “Being a young parent has not been as difficult as everyone has promised me. I have always wanted to be a parent, just because I am a young parent doesn’t mean I’m a bad parent. Which is a big reason to keep me going every day. I do everything for her. She was the one to keep me going when her daddy went to boot camp for the Marines. She is and always will be the reason I succeed.”

Q: Cori what qualities do you think are important in a father?

A:” Being there for your child by playing, loving them, and getting them ready for bed creates a good quality in a father. Being a good father will help instill the qualities in your child, which then makes a good person. I know helping the mother of your child is very important because they need it as well.”

Q: Emily which particular parent training have you learned the most and why?

A: “The parent training that I enjoyed the most was about the HANDS program along with Safe Sleep, SIDS, and Shaken Baby Syndrome the ladies conducted from Green River District Health Department. I could relate to the training since Jordyn was only a few months old and it informed me of the risks.”

Case Studies Analysis

After analyzing the case studies, the following next steps have been identified for each of the pregnant women participants and families:

My next steps with Amy and Evan are to continue building our relationship by inviting them to the classroom and keeping our line of communication going. I want to encourage them to be actively engaged and to delegate more responsibility of leading parent meetings. I would like to see Amy arrange a parent training, since I know she likes to take initiative. Another step is to encourage Amy to get her driver’s license since that is her new family goal. My next step with Evan is to encourage him to get his GED completion.

My next step with Susan is to continue our prenatal care classes through home visits since she is now on bed rest through the rest of her pregnancy. Susan and Curt’s baby is due the first of May so they are excited and ready for the arrival. Another step is to continue our relationships through summer home visits once the baby is born. I hope to meet Curt once the baby is born so that we can build a relationship and I want to encourage him to come to our

father activities. My next step once Susan returns back to school in the fall is to mentor her as a new mother. I want to encourage her to visit the classroom to see how the teachers worked individually on the children's developmental milestones. As a mentor I want to model good parenting skills so that she can see what she can improve upon as a parent. Lastly, I want to encourage her continued parent participation with parent meetings, family events, and parent trainings so that we can build upon the trusting relationship we have now.

My next step with Molly is to encourage friendships with the other adolescent mothers who share the same experiences of being a single parent. I would like to challenge her with a family event that will help her to become more engaged in Brent's education. I will continue to encourage Molly to get a job since she has struggled all year to find one that is suited for her.

My next step with Jessica is to continue to encourage her to visit the classroom when she is able to see what Lee Ann is learning. Through conversations with Jessica I would like to encourage her the importance of mother/child relationship and help her to learn the importance of parenting and attachment. I would like to find a good community resource that can help her since I feel she struggles with maternal depression. I want to encourage her to lead a family event that will make her feel valued in her role as a parent.

My next step with Tori and Morgan is to continue with the prenatal care classes to learn their fears, hopes, and dreams for their baby and for themselves. Another step is to show videos, offer websites, and pamphlets to help both of them ease into parenthood. I would like for them to observe the classroom setting to see how children are learning at different ages. Lastly we will continue our prenatal care classes in the summer to build upon our relationships for a healthy pregnancy and birth.

My next step with Jordyn is to encourage her to spend more time in the classroom by mentoring her with parenting knowledge for caring for her newborn. As Jordyn spends time in the classroom she will see us model good parenting techniques as well as see what Izzy needs to thrive as an infant. As educators we can help her to work on Izzy's developmental milestones. Through her time spent with us in the classroom I hope it will build a trusting relationship. Also through our summer home visits I hope to get to know both Jordyn and Robert at a different level.

My next steps with Sally are to continue her family engagement here with the Teen Parent Program and work to have her lead a family event. Another step is to encourage her to continue her education after her graduation in May 2018. I want to continue to build upon our relationship with more time spent together through summer home visits and Sue's return to our classroom next year.

My next step with Emily and Cori is to continue our trusting relationship. I want to challenge Emily and Cori with leading and supporting a teen parent peer group. Also I want to challenge Cori in leading father/father figure activities with our new fathers.

Conclusion

Over the past three years of working in the Teen Parent Program I have concluded that there are positive outcomes but room for improvement. This project has helped me to focus on certain areas that can be strengthened. The interviews gave me greater insight into how to meet the unique needs of each individual and collectively enhance the program.

Based on the research there are three areas of interests I would like to implement as changes in the program. Next school year I would like to develop a teen parent peer group, improve upon scheduling parent trainings that will help the teen parents that I serve, and receive

training for staff from central office that will help us with the diverse group of parents we serve. With these suggestions I plan to discuss with my supervisor how we can better assist the families and pregnant participants we have in the Teen Parent Program.

I would like to begin with implementing a teen parent peer group with the help of a few parents to enable the teen parents to spend time finding commonality, strength, and encouragement to help them meet the demands of parenthood. Through my interviews, I recognized how I can use the strengths of current and former participants to lead the peer group.

Secondly, I believe offering trainings based on the interests of the parents and needs of the children will increase participation and knowledge. My interviews validated that the current training has been successful. One way that I can improve upon this is to network with the community to provide available resources for these trainings.

Lastly, to prepare all Early Head Start staff with appropriate trainings to acquire knowledge on how to support teen parents and their children. Since I have been working in this particular type of program I have not been to any formal training that would help me and my staff with the challenges of teen parents. As I conducted research for this project, I learned there are many resources available to support teen parent projects through Head Start and other national organizations. It has been reassuring that many of the ways I have structured the program have followed the recommended best practices. However, I hope to be able to grow professionally through formal training and networking with other teen parent programs.

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Appendix A

Family Interest Survey – Union County Child Care Center

It's our goal at Union County Child Care Center that families have a partnership in their child's education by:

- We value the uniqueness of each family member
- We help families feel welcome, comfortable, and needed
- We communicate clear expectations
- We provide families with information about their child and the program
- We plan creative ways of involving families in the program
- We build strong partnerships with families

Parent Names _____ Child's Name _____

Please mark the following that you may be interested in sharing with all of us.

Special Talents/Hobbies

___ Musical _____

___ Dancing/Singing _____

___ Writing/Reading _____

___ Drawing/Painting _____

___ Cooking _____

___ Photography _____

___ Computer Programming _____

___ Woodworking/Carpentry _____

___ Candle Making _____

___ Gardening/Landscaping _____

___ Storytelling _____

___ Jewelry Making _____

___ Model Building _____

___ Restoration _____

___ Exercising _____

___ Welding _____

___ Sewing/Knitting _____

___ Clay/Pottery _____

___ Other _____

Appendix B

Parent Committees:Event Organizers

If you would like to coordinate Family Events, (we are going to make a goal of three Family Events this year) such as helping plan menus and gathering materials please sign your name.

If you would like to coordinate holiday classroom parties and upcoming events please sign your name. _____

Materials Committee

If you would like to help collect, organize, and sort materials please sign your name.

Playground Committee

If you would like to be involved in planning and gathering materials for our playground please sign your name. _____

Volunteering in the classroom

If you would like to volunteer throughout the year please sign below, remember you are here to volunteer such as playing, exploring, reading, etc... with the children, please sign your name. _____

Possible Plans for this upcoming Year:

- Grandparent's Day – September
- Daddy Play Days – once a month
- Family Christmas Party
- Playdough Play Night
- Mother's Day celebration
- Father's Day celebration
- Playground & Potluck Supper

Materials

Any extra materials you may have available we would greatly appreciate. Examples are - glass jars, buttons, beads, wire, fresh and potted flowers, scrap wood, natural and recycled materials, collage materials, old computer parts, Plexiglas, etc.

Appendix C

Parent Survey – _____

“What would you like to learn more about this year?”

- Positive Parenting Tips _____
- Child Development _____
- Family Nutrition _____
- Adult Education _____
- Family Health _____
- Early Literacy Development _____