Resilience in teenage mothers:

A follow-up study

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Executive summary

This study of resilience in teenage mothers forms part of a research programme focussed on sole-parent families. It was undertaken in the context of New Zealand having one of the highest rates of sole-parent families in the OECD, and the second highest rate of teenage births among developed countries. While not all teenage mothers are sole parents, most experience periods of sole parenthood.

The literature on teenage motherhood is extensive, and much of it focuses on risks for mothers and children. These include health risks, lower levels of education, reduced employment opportunities, longer-term welfare dependency and an intergenerational transfer of disadvantage.

But not all teenage mothers experience these poor outcomes. Some are protected from risks, or can overcome disadvantages. In contrast to the risk-based focus of much of the literature on teenage motherhood, the focus of this study is on resilience. Research undertaken from a resilience perspective implies a focus on competencies and positive outcomes, rather than on negative ones.

The study follows up on a study undertaken in 2001 in which 18 teenage mothers were interviewed on their views and experiences of teenage motherhood. In 2008, 13 of the original participants were located and agreed to individual, in-depth interviews. Their ages ranged from 24 to 29 years of age, with 10 identifying as Pākehā and three as Māori. Nine were former students of a teen parent unit attached to a secondary school.

The specific objectives of the study were to:

- describe experiences since the original interview, including: partnerships; subsequent births; education; employment; income; health; housing; experiences of victimisation; child outcomes
- identify sources of support, including: family; partners; peers; other adults including teachers and employers; community agencies
- identify other sources of resilience, including: outlook on life; beliefs; aspirations
- discuss implications of the findings for policies, programmes and practices to support teenage mothers and their children.

This study reports on how these young mothers' accounts of their lives over the past seven years demonstrate factors known to be associated with resilience. These included individual characteristics such as being motivated and taking responsibility; having goals, aspirations and pride in achievements; using insights into their past as a means of moving forward; having a strong sense of identity; and seeing their lives in a wider context.

Many also acknowledged the importance of family and whānau, partners, and peers in providing social support. Young mothers who had focused on the best interests of their children found this a useful way of resolving conflict with their children's birth fathers.

Those who had attended a teen parent unit experienced a comprehensive and intensive service that provided opportunities to continue their education, gave focus to their lives, provided access to skilled and competent adults, and provided a range of on-site services for themselves and their children. Others who had not attended a

teen parent unit found community-based services provided opportunities to develop new skills and connect with others in similar circumstances.

While all participants had received income support at some time in their lives, and some had undertaken tertiary education while receiving it, most were currently in paid employment and some were economically self-supporting.

All participants described many ways their lives had improved over the past seven years, and their experiences of ongoing challenges. Maternal mental health concerns and family violence affected some, and several children had physical, emotional and behavioural issues. Some mothers lacked support, and problems in their wider families affected their access to emotional and material assistance. Several experienced difficult custody and access issues with birth fathers. Others lacked suitable or stable accommodation, had financial concerns, or could see no pathways to suitable employment. These issues presented ongoing challenges to resilience.

The findings of this study must be considered in the context of it being a small, qualitative study of young mothers who were all in supportive relationships with service providers seven years earlier. It can therefore not be generalised to all teenage mothers. Nevertheless, these findings suggest issues that policy makers and programme providers may usefully address when seeking to support resilience in teenage mothers, and to improve outcomes for them and their children.

Many participants in this study defy stereotypes of teenage mothers. They have skills and competencies that support resilience. Their views and experiences illustrate the importance of family support, and of comprehensive early intervention services that address the multiple and often complex needs of mothers and children. Such services can help build skills and competencies, and support educational, social and economic participation. Addressing challenges to resilience, such as poor mental health, lack of support and financial concerns, is also an important component of ensuring teenage mothers and their children reach their potential.

Context for this study

This follow-up study of teenage mothers forms part of a research programme focussed on sole-parent families part-funded through the government's Cross-departmental Research Fund. The research programme, led by the Ministry of Social Development, seeks to build the knowledge base on sole-parent families for policy and service delivery, focusing particularly on sources of resilience and on approaches and interventions that promote this.

Two important factors provide the context for this follow-up study of teenage mothers. First, New Zealand has one of the highest rates of sole-parent families in the OECD. In the 2006 Census, 28 percent of all New Zealand families with dependent children were headed by a sole parent, usually a mother (Ministry of Social Development, 2007).

In addition, New Zealand has the second highest teenage birth rate in the developed world, and over 4,000 young women under 20 give birth every year (Statistics New Zealand, 2008). While not all teenage mothers are sole parents, most experience periods of sole parenthood.

Sole parenthood is of interest to government because, while many sole parents cope well, on average they are more vulnerable than partnered parents to poor outcomes across a number of domains.

Children growing up in sole-parent families also tend to be more vulnerable to poor outcomes, partly due to associated lower family incomes.

Hence, identifying factors associated with resilience in sole-parent families can help them achieve better social and economic outcomes, and contribute to policies that enhance the social and economic development of New Zealand.

Literature review

What is resilience?

Resilience refers to positive outcomes in the presence of adversity, rather than to positive adaptation in general. It "surfaces in the face of hardship" (Hawley, 2000, p 102) and denotes the ability of individuals who are able to bounce back from adversity. As Hawley (ibid) notes, "without struggle, resilience does not exist".

Resilience is a construct, not a personality trait or an attribute. This perspective avoids a victim-blaming approach which would suggest individuals who do not possess the characteristics to function well are to be blamed for this lack (Luthar & Cicchetti, 2000). These authors also caution against suggesting that resilience makes for long-term invincibility, as continued assaults resulting from changing life circumstances can reduce even the strongest individual.

Further, resilience in one domain is not necessarily indicative of resilience in other domains. Individuals can exhibit resilience in a range of domains such as education, emotion or behaviour (Luthar et al, 2000).

Risks associated with teenage motherhood

Because resilience is predicated on risk, it is important to identify the risks associated with teenage motherhood. A comprehensive review of these risks is beyond the scope of this report[1], but an extensive international literature (eg Moffitt & the E-Risk Study Team, 2002; Woodward et al, 2001; Fergusson & Woodward, 2000; Fergusson & Woodward, 1999; Wellings et al, 1999) identifies a range of negative outcomes for teenage mothers and their children across a large number of domains.

Teenage mothers are more likely than older mothers to live in socio-economic deprivation, to be benefit-dependent, and to have lower education and literacy. They are less likely to receive social support from friends, family or their children's fathers, and more likely to have mental health and substance abuse problems.

Also, children of teenage parents experience a wide range of educational and psychosocial risks compared to children of older mothers, including a greater likelihood of behavioural and emotional problems, major illnesses, criminal offending, substance abuse and mental health problems.

Teenage motherhood is closely associated with low socio-economic status, and thus it is difficult to determine the extent to which teenage motherhood alone presents a risk. Researchers have questioned whether it is age per se that results in risks or whether risks are manifestations of being poor. Five important studies illustrate these complexities.

In their 1987 study, Furstenberg et al noted it would be oversimplifying to suggest teenage parenting inevitably leads to disadvantage, as outcomes for teenage parents are diverse. Nevertheless, their study supported the assumption that teenage parenthood creates lasting social and economic disadvantages. Not surprisingly, they noted that those who had more positive outcomes were doing well at school and had

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[1] For a comprehensive review of research on risks associated with teenage pregnancy and parenting see Collins, B.A. (2005), *Missing voices: Teenage pregnancy and social policy*, Thesis (PhD), Victoria University of Wellington.

high educational aspirations prior to pregnancy. Outcomes were also better for those who had no further teenage births, and had greater economic security.

In a comprehensive analysis, Hobcraft and Kiernan (1999) sought to identify connections between childhood poverty, early motherhood and a number of indicators of adult social exclusion. They found that, even after controlling for childhood poverty, a clear association exists between early motherhood and disadvantage in adulthood, and these disadvantages are long lasting. Compared to those who had had their first birth when aged 23 to 32 and experienced no childhood poverty, those who experience both early poverty and teenage motherhood are eight times more likely to be a lone mother by age 33, seven times more likely to be living in social housing, six times more likely to have no educational qualifications, over three times as likely to receive a non-universal benefit, and more than twice as likely to have poor mental health and see their lives as unsatisfactory. The study concludes that, while it is tempting to suggest that it is childhood poverty that leads to adult poverty, young parenthood has more profound and far-reaching consequences.

More recent studies have also sought to separate risk factors associated with early childbirth from risk factors associated with poverty. Bradbury's 2006 study suggests economic outcomes are primarily a selection effect in that the reason for young women giving birth arises from their pre-existing capabilities, preferences, and perceptions of what options are available to them. He notes, however, that there are direct links between early parenting and partnering outcomes. Young mothers are less likely to be in a relationship with the child's father, and this may also have implications for child outcomes.

A study (Fletcher & Wolfe, 2008) examining the short-term human capital and labour force consequences of teenage childbearing found giving birth as a teenager was associated with a decreased likelihood of graduating from high school, and a reduction in household income and labour force participation when women are in their twenties.

New Zealand research (Boden et al, 2008) has identified that early motherhood remains a risk factor for educational underachievement and poor economic circumstances, even after controlling for confounding factors. However, the associations between early motherhood and later mental health difficulties can largely be accounted for by child, family and other circumstances that existed prior to parenthood.

Not all teenage mothers and their children experience disadvantages, however. Many are protected from disadvantage, or else overcome disadvantage because they are resilient. Factors associated with resilience in teenage mothers provide the focus of the present study.

Resilience research

Research undertaken from a resilience perspective implies a focus on competencies and positive outcomes, rather than problematic, negative ones. It seeks to identify protective factors that might modify the negative effects of adverse life circumstances (Luthar & Cicchetti, 2000). A resilience perspective offers the chance to look at teenage parenting through another lens.

Resnick (2000) sees focusing on resilience as providing a solutions-orientation which emphasises hope and potential rather than risk and pathology. This approach reflects a philosophical commitment to seeing young people as "resources to be developed,

not problems to be solved" (Resnick, 2000, p 161). It also helps practitioners to see how those whose experiences and environments offer little likelihood of leading to well functioning adult lives, can be supported to thrive in spite of adversity.

Aspects of qualitative research that make it well suited to studies of resilience include its ability to generate new perspectives on resilience through focusing on the complexity of people's experiences and the specific contexts and circumstances of their lives (Ungar, 2003).

Further, qualitative research can capture nuances in experiences that help to explain why apparently negative events may have resilient consequences. A qualitative approach helps to "increase the volume of marginalised voices" (Ungar, 2004, p 359) and, by presenting alternative views, it supports the development of more tolerant attitudes by dispelling the idea that there is only one version of events.

Qualitative research also resists the generalisation of findings and thus provides a more holistic picture.

Factors associated with resilience

Protective factors moderate risks by encouraging resilience when faced with adversity (Rutter, 1987), and also provide "turning point experiences" (ibid, p 136) that offer new prospects and opportunities to break away from the past.

Protective factors operate across ethnic, racial and social class groups, thus avoiding the traditional focus on problem behaviours which has characterised research, particularly on minority groups (Resnick, 2000).

The following reviews factors associated with resilience in young people under three categories: individual; social support; and education, employment and income.

Individual factors

Individual qualities such as a positive temperament, and the cognitive ability to process negative experiences by building on the positive while not denying the reality, are fundamental to the development of resilience (Rutter, 1999).

Among those experiencing high levels of family adversity during childhood, resilient adolescents are more likely to have at least average IQ and say they enjoy school (Fergusson & Lynskey, 1996). Other authors note that good academic performance, strong self belief and self-esteem, and a future perspective characterise those who overcome adversity (Resnick et al, 1997).

Wolin (2003) describes a number of individual characteristics associated with resilience. These include insight, or an individual's ability to ask tough questions about themselves and others and the situations they find themselves in. Insight helps dispel denial and confusion. It generates clarity and provides a springboard for solving problems.

Other important attributes include the initiative to find solutions to problems, independence, and the ability to distance oneself from trouble and the pressures of family, friends and circumstances.

Morality also contributes to resilience by providing a sense of being a good person, and because it indicates an ability to think of other people as well as oneself.

Other factors contributing to resilience include having a sense of personal and collective identity or purpose, and cultural adherence to local and/or global cultural practices, values and beliefs (Ungar et al, 2007).

Coping skills are also important, together with a "repertoire of possible ways of dealing with things" (ibid, p 130) and "planful competence" (Clausen, 1991, p 811). Such an approach counteracts the "negative chain reactions" (Rutter, 1999, p 130) and "vicious cycles of negative experiences" (ibid, p 131) that people often exhibit when exposed to chronic adversity, leading them to believe they have little control over their lives or are at the mercy of fate.

Rutter (1999) considers the possibility of "steeling effects" (ibid, p 125) by which people's experience of adversity strengthens their confidence. Such experiences confer "immunity" (ibid) which helps the individual resist or cope with future negative events. Rutter suggests fostering resilience requires increasing the number of "positive chain reactions" (ibid, p 131), so that success in one area enhances self-esteem, self-efficacy, and confidence in rising to new challenges.

Breaking negative cycles is also assisted by experiences which help people break away from the past, or which neutralise or provide opportunities for a fresh start.

Few studies specifically focus on resilience in adolescent mothers, but Carey et al (1998) sought to identify the perceptions of teenage mothers who were deemed to be successful by people who worked with them. This study noted that a "rebellious determination to prove she was not doomed to failure" (ibid, p 347) was among the characteristics of those who had overcome adversity.

Social support factors

Social support is protective: it can help young people develop a healthier appraisal of events or help them cope successfully with risky environments (Wolkow & Ferguson, 2001).

Among the most important factors for conferring resilience in young people are warm cohesive families, high self-esteem and a positive social orientation. But these cannot simply be re-created if they are lacking. Social support can be introduced into a young person's life at any stage, and can help to compensate for a lack of other protective factors (ibid). This support can come from a mentoring relationship; where someone the young person can trust, and who they feel really cares about them, is there to help them and treat them with respect (Beier et al, 2000).

Parental support helps many young people develop knowledge and skills for healthy adulthood but, when parents are not available, other adults including teachers, nurses, youth leaders, other family members and neighbours, can provide this. Resilient young people have "a close relationship with at least one caring, competent and reliable adult who recognizes, values and rewards pro-social behaviour" (Resnick, 2000, p 158).

Families in particular can be protective against depression (Clemmens, 2002). Depression is important as it affects a young mother's abilities to form and maintain social and intimate relationships, perform effectively in education and employment, and effectively care for her children (Turner et al, 2000). Addressing maternal depression is therefore "an investment in improved outcomes for children" (Knitzer et al, 2008, p 8).

Social support that facilitates access to material resources such as food, clothing and shelter, and to financial, educational, medical and employment assistance is also important (Ungar et al, 2007). Teenage mothers from all social classes have aspirations that reflect mainstream values about educational and vocational achievement, but only those who have the knowledge, skills and means to realise their aspirations can provide a positive future for themselves and their children (Farber, 1989).

Social support is generally recognised as an important promoter of psychological and physical health in stressful situations. Green and Rodgers (2001) note social support is variously defined in terms of the qualities of specific interactions between people, their perceptions of support and connectedness, or more simply as having people to turn to for information, material assistance, or emotional support. These authors also suggest there is a reciprocal interaction between mastery and support. Mastery, the expectation that one can overcome difficulties and gather the support needed, acts as an "executive resource" (ibid, p 421) that determines whether and to what extent social support is accessed. Conversely, being able to engage social support, and to feel supported, are critical components of mastery.

Support that is controlling or coercive may undermine feelings of competency (Green & Rodgers, 2001), so not all support is welcome. These authors also identify various types of support: emotional support including reassurance, feelings of belonging and connectedness to other people; informational support such as advice or help with problem solving; and tangible support such as help with rent or childcare. Their findings suggest social support interventions should focus their efforts on promoting feelings of emotional connectedness to others as an important first step in reducing stress, and on helping the formation of attachments that help establish more tangible aspects of support networks.

Social support assists teenage mothers with their mothering role by enhancing self-esteem, and by helping them to feel more positive about their babies (Samuels et al, 1994). Its availability also affects later outcomes (Furstenberg et al, 1987).

SmithBattle (2000) argues for the need to "reweave connections" (p 38) with teenage mothers, noting that they usually cannot overcome their pasts or deal with their social environments on their own. Social support can foster new skills, emotional growth and hope for the future (SmithBattle & Leonard, 1998).

Teenage mothers also parent better when they have strong social and emotional support from their child's father (Cox & Bithoney, 1995; Samuels et al, 1994). The length and stability of the relationship, the father's involvement in planning for the child's arrival (Elsters et al, 1989) and his presence at the birth (Cox & Bithoney, 1995) predict later involvement.

Partner relationships sometimes end before the child is born (in one-third of cases in Cox and Bithoney's 1995 American study), but 86 percent of young mothers in Toledo-Dreves et al (1995) American study reported at least some help from partners with looking after the baby two years after birth. Offers of help may be rejected if the mother feels the father is unreliable (Rains et al, 1998), and poverty is intensified if a partner is unemployed (McRobbie, 1991). Young mothers may also avoid naming an unreliable father or accepting his money to prevent him later asserting rights to the child (ibid).

Support from health professionals, social support agencies and other adults can also help young mothers develop their strengths, resources and assets. Well-designed

programmes from community agencies enhance young mothers' skills. Nurse-delivered, home visiting programmes before birth and in the first two years of the child's life can reduce child abuse and neglect, and address any health-risk behaviours of teenage parents (Olds et al, 1993). Such programmes can also encourage employment and reduce subsequent teenage births (ibid). Adults beyond the family can provide support for welfare applications, educational re-entry, and parenting (Dixon, 1995).

Education, employment and income factors

Retaining pregnant and parenting young women in education can reduce negative consequences associated with teenage birth (Howard, 1999). Schools can provide ongoing educational and social support for teenage mothers. This is important, as succeeding in education, having high aspirations (Furstenberg et al, 1987), completing more education before pregnancy, and still being at school with no further pregnancies 26 months after the first birth (Horwitz et al, 1991) predict future educational success for teenage mothers.

Having caring teachers with high expectations of student performance is also protective (Resnick et al, 1997). DuBois et al (1994) suggest strong support from school may be particularly important for young people facing multiple adversities and for those who lack positive experiences in other aspects of their lives.

Quinton and Rutter (1988) relate positive experiences at school to the increased likelihood of effective social functioning in adulthood. These positive experiences can include success in sport, music, positions of responsibility, social activities, or in the academic area. Positive experiences lead to higher self-esteem and contribute to personal satisfaction and self-confidence, all of which confer resilience by providing resources to use against negative life events (Dumont & Provost, 1999).

Active participation in a support programme, and having only one or two children after the first child, predict high school completion and lack of welfare dependency 20 years later (ibid). "Supported integration" (Kelly, 2000, p 93) also helps young mothers' return to education or employment (Luker, 1996).

In Dawson and Hosie's 2005 study of educational provision for pregnant and parenting young women in England, young mothers reported that while they had often been disengaged from education, pregnancy resulted in a greater willingness to re-engage, especially when non-judgmental support was offered. Teenage mothers attending specialised units valued on-site childcare; practical and emotional support; being respected and treated like adults; being educated at the same time as enjoying being mothers and in many cases being educated alongside their babies; being able to have more flexible timetables, more one-on-one teaching, and the ability to play an active role in decisions about their education.

There is a general recognition that work enhances health and wellbeing (Freud, 2007), with full-time employment decreasing the probability of long-term emotional problems (Cremieux et al, 2004). Some authors note, however, that the benefits of work for lone mothers are more complex as they need to balance children's needs with pressures of work (Millar & Ridge, 2007).

Others see resilience as a crucial component of the welfare to work transition, which requires confidence to leave the financial security of welfare, belief that one has the skills for a job, an ability to present as a reliable worker, and the strength to cope with repeated rejections (Bancroft, 2004). However, Bancroft (2004) also notes that work

can be a source of resilience by supporting the development of new skills, and by providing a sense of competence and strength.

New perspectives on resilience and teenage mothers

Ungar (2004) argues against the notion of resilience as an objective fact, noting that what may be perceived as a risk factor in one circumstance can be seen as a protective factor in another.

Both Ungar (ibid) and Masten (2001) highlight the arbitrary way in which distinctions are sometimes made between risk factors and protective factors, and see such distinctions as often culturally determined. They note that risk in one context can be a protective factor in another, and that risk and protective factors may function in alternative ways for different age groups and for the same person in different parts of their lives. They argue for a more fluid, ecological approach that takes account of ways in which such factors are mediated by their relevance to the person's identity.

The importance of considering the perception of risk is underlined by Luthar et al (2000) who say, "Some individuals may see themselves as being relatively well off, even although scientists may define their life circumstances as being highly stressful" (p 550).

Ungar et al (2007) argue for understanding resilience as an interplay of culture, context and individual strengths. Such a concept is particularly useful for marginalised young people, for whom Ungar and Terem (2000) suggest resilience may come from contradicting social norms and finding ways to define and empower themselves through being very good at things that are not socially accepted. In this way, resistances become framed as resilience (Bottrell, 2007).

This notion is particularly salient when considering the extent to which teenage parenting is a risk. Masten (2001, p 228) notes that sometimes risks are "actuarially based predictors of undesirable outcomes drawn from evidence that this status or condition is statistically associated with higher probability of a bad outcome in the future". This provides an important reminder that not all teenage mothers will experience adversity.

Finally, an increasing number of authors challenge the extent to which young women themselves regard teenage pregnancy as a risk. Recognising that some of the risks associated with teenage parenting derive from socio-economic and family backgrounds, rather than age per se, has resulted in a growing literature advocating new ways of considering teenage mothers.

SmithBattle (2000) refutes the notion that young women's lives would be different without a baby, and that delaying motherhood would improve their future. Others caution against regarding teenage pregnancy as deviant, because for some young women it may be normative (Arai, 2003; Davis, 2002; Spear, 2001; Lamanna, 1999). While many young women report regretting early intercourse (Dickson et al, 1998), those who are mothers do not regret having their baby (Clemmens, 2002).

None of these authors recommends teenage pregnancy, but the disabling effects of public attitudes on the lives of teenage mothers and their children are a strong focus. Hoffman (1998) advocates continuing efforts to prevent teenage pregnancy because these offer opportunities to escape or at least not to add to the effects of poverty. McRobbie (1991) also supports continuing prevention efforts, arguing the problem is more about teenage mothers lacking financial independence. Because many young

women's lives would not be improved by delaying child-bearing, Luker (1996) argues for policies focusing on supporting their present needs.

This new focus for teenage pregnancy prevention and support requires greater recognition of the differences between what Phoenix (1991a) calls "insider" and "outsider" views (p 86). Early "insider" studies, such as those by Phoenix (1991b) and Sharpe (1987) are complemented by more recent ones in which teenage mothers present contrasting perspectives to those of "outsiders".

In these studies, teenage mothers speak optimistically about their lives, regarding motherhood as making their lives more manageable, providing someone to live and care for, and acting as an incentive to do well for the baby's sake (Spear, 2001). For some, mothering can be "salvation" (Lesser et al, 1999, p 140), or "a catalyst that anchors the self, fosters a sense of purpose and meaning, and provides a new sense of future" (SmithBattle, 2000, p 35). Some see their child as "reparation" (Lesser et al, 1999, p 139) providing hopes of a better life for the child, and a way for the mother to move on.

SmithBattle (2000) notes that commentators on teenage motherhood see young women as lacking rationality and thus making bad choices which disadvantage their own and their child's future. Luker (1996) notes, however, "teenagers are not ignorant victims, but neither are they rational actors" (p 11). She encourages research approaches that support teenage parents to present their own points of view.

Methodology

This study sought to identify ways in which teenage mothers in New Zealand demonstrate resilience. It is a small qualitative study that signals issues that might usefully be followed up in larger-scale quantitative work focusing on associations between aspects of resilience and good outcomes for teenage parents and their children.

The study involved re-contacting 18 young mothers who were interviewed in 2001 as part of doctoral research on how young women view and experience teenage motherhood (Collins, 2005). In the original study, individual in-depth interviews were used to collect comprehensive qualitative data on these young mothers' experiences before and during pregnancy, and after the baby's birth. That study, which was framed within a risk and resilience paradigm, focused on foregrounding young mothers' voices, and considered the social policy implications of the findings.

In common with the original study, this study used a semi-structured approach to interviews with participants. Such an approach struck a balance between allowing participants to generate discussion with minimum prompting, and a more rigid approach using a predetermined set of questions. An outline of issues for discussion was prepared beforehand but issues were not raised in the same way, or in the same sequence, with each participant. Rather, issues were introduced as naturally as possible into the flow of conversation. At the end of the discussion, participants were asked if they had further matters they wished to raise.

Objectives of the new study

This study aimed to explore the same young mothers' views and experiences seven years after the initial interviews. The specific objectives were to:

- describe experiences since the original interview, including: partnerships; subsequent births; education; employment; income; health; housing; experiences of victimisation; child outcomes
- identify sources of support, including: family; partners; peers; other adults including teachers and employers; community agencies
- identify other sources of resilience, including: outlook on life; beliefs; aspirations
- discuss implications of the findings for policies, programmes and practices to support teenage mothers and their children.

Ethical approval was sought and gained from the Association of Social Science Researchers (ASSR).

Participants

The study's participants were 13 young women who had had their first child when they were teenagers and were interviewed as part of the original research project in 2001.

In 2001, the 18 teenage-mother participants were aged 16 to 25 years, with an average age of 19 years. Their age at first live birth ranged from 15 to 19 years, with an average age of 17½ years. Eleven of the mothers identified as Pākehā, six as Māori, and one as a Pacific mother. All of them came from a large urban area, and were accessed following referrals from adult women service providers. Participants

included 12 young mothers from a teenage parent unit attached to a secondary school, and six other young mothers not associated with the unit.

This new study in 2008 sought to re-contact these same young mothers seven years later. They were located by contacting the service providers who supported their participation in the earlier study.

Young mothers who agreed to participate chose the time and place of the interview, most often their home or workplace. With their consent, all interviews were audio-recorded. Recordings were fully transcribed, and coded using NVivo, a software package for qualitative data analysis. As part of the consent process, participants had the opportunity to receive a copy of their transcript.

Of the 18 young mothers interviewed in 2001, 13 agreed to be interviewed in 2008. Of the five 2001 participants who did not participate in 2008, one had moved overseas, one could not be located, and three did not respond to invitations to participate.

Thus, this new study interviewed 72 percent of the original participants. Of these, 10 identified as Pākehā, and three as Māori. In 2008, participants ranged in age from 24 to 29 years, with an average age of 26½ years. All but two were still living in the broad urban area where they resided in 2001. One had moved to a nearby town, and the other was living in another New Zealand city.

Nine were former students of the same teen parent unit, and four were former referrals from other service providers. The results of the present study are likely to be affected by the high number of participants from the teenage parent unit. Although the length of their association with the unit had varied, these young mothers had experienced an intensive, structured environment of caring adults who provided daily and ongoing physical, emotional, and educational support for them and their children. While other participants had also enjoyed supportive relationships with adults, these relationships may have been less intensive. As five participants from the 2001 study did not participate in the 2008 study little is known about the current circumstances of most of these young women.

Participants in this study therefore should be regarded as a selected group who, seven years ago, were in supportive relationships with adults. Findings must be interpreted in this context.

In 2001, these 13 young mothers had 19 children. By 2008, five more children had been born. All participants had experienced periods of sole parenthood, although only three described themselves as not having a partner in 2008. Four were married, and six were in co-residential or non-residential partnerships that varied in length, and in their level of support for parenting.

Participants are identified by pseudonyms, and references to other people and places have been removed to preserve anonymity. Extensive use is made of the participants' comments. These are shown as indented text.

Findings

> "I never look at my daughter and think, 'Having you was a mistake.' I could never think that. She's the most amazing thing in my life. She is. She's the reason I do everything. She's the reason I get up in the morning. She has to be." (Amy)

This study focused on the ways these young mothers describe how they have enhanced their futures, and become more resilient, using a framework of factors associated with resilience in young people: individual; social support; and education, employment and income. Rather than attributing resilience to some participants and not to others, the analysis considered ways in which each of the young mothers exhibited resilience in reflecting on their lives over the past seven years. Positioning the analysis in this way emphasises positive adaptation in response to teenage motherhood.

It is important to note, however, that several of these young mothers continued to experience significant challenges in their lives, including major mental health issues, complex family circumstances, financial concerns, and lack of support. These presented actual or potential risks to their wellbeing. The findings of this study thus conclude by outlining the challenges some young mothers face in attaining positive outcomes for themselves and their children.

In 2001, many of the participants were new mothers and some had experienced difficult pregnancies and births. Some felt they led irresponsible lives before they were pregnant, thinking only of the present, and with little concern for the consequences of their actions. Some had grown up with family conflict, drug and alcohol abuse, criminal activity, unstable relationships, and mental health concerns.

Most said their pregnancies were unintended, but some became pregnant as an act of rebellion against parents, to maintain relationships with partners they feared losing, or because they saw no other future. Lacking support from birth fathers and sometimes from their own families, some felt very vulnerable.

In 2001, they were all optimistic about their futures but had experienced the stigma of being a teenage mother. They had aspirations for themselves, and dreams for their children, but often lacked the means to achieve these.

Individual factors supporting resilience

Motivation and responsibility

By 2008, all the young mothers felt their lives had improved. The intervening years had been challenging for some, but in their mid-twenties they could see how far they had come. Most felt stronger, no longer the pushover sort of person they were in their adolescence, and less influenced by others' opinions.

One saw teenage motherhood as:

> "… a catalyst event – one that will either make you or break you." (Becky)

and another said:

> "I think I've done pretty well for myself because of (son). I think he's given me direction." (Danielle)

From the perspective of their twenties, many saw their lives as more settled: they accepted they could not change the past and had a stronger sense of purpose.

> "I've strived every day to make sure that the people who've said my life was over and it was all ruined, were never, ever right. I couldn't have stood to say, 'Oh, no, actually you were right. That was a terrible mistake I made.' " (Amy)

They all acknowledged that having a baby as a teenager required them to grow up fast and had changed their lives, but they all saw this as a change for the better.

> "Me having my son young actually saved me, because I was going down a very dark, horrible path. So I still believe now that if I hadn't had (son) I would be either in prison or I would be dead. I certainly wouldn't be the person I am today." (Erica)

Several described how having children had motivated them to do well. Knowing that children had to be provided for, and given the best possible future, provided their own lives with focus and meaning.

> "It gave me a new sense of purpose, I think, and a drive. You had something that you had to be doing it for. Because when I was just doing it for me, that's not much motivation, considering that as a teenager I suffered from really severe depression and really didn't like myself. So doing it for me wasn't enough." (Becky)

> "Having (son) made me realise that my schooling was very important. He's the reason I went to the teen parent group, and then furthered my studies." (Miriama)

> "If I didn't have my children, I don't think I would have gone through academia. I would have kind of wish-washed my way through life, because that's just my natural way of doing things. But they gave me a reason and they gave me substance to go in this other direction and be a bit more focused on where I'm going, with them in mind." (Ripeka)

Those who were doing well financially regarded early motherhood as ensuring they had used their money wisely and focused on the future. Several described other young people as "wasteful", spending their money as Rachel said, "to have fun while they can and while they're young".

In contrast they saw parenting required them to be responsible. Danielle believed her son was the reason that, unlike others working in the sex industry, she brought her money home, rather than spending it on drugs. As Hannah said, "the future is something I think about quite a lot", while Amy who owned a house with her partner noted:

> "When I look at other people my age … the people I work with, and some of the people I'm friends with … as a majority at 26, not many of them can say they own a house."

Several felt more mature than others their age, and regarded having children young as making them better parents, because they were closer in age to their children and thus felt better placed to understand them. Unlike older mothers, they looked forward

to "having their lives back in their early thirties" when their children would be self-sufficient.

Goals and aspirations

The young women who regarded themselves as succeeding had goals and were taking active steps to achieve them. Lisa had completed a university degree and was in work. She had not allowed teenage pregnancy to interrupt her future plans:

> "It was just … like … okay, so it happened a bit earlier than it probably should have, but still had my goals so I decided, well, I can still do it."

For others, being a teenage mother had provided the motivation to plan for the future, often to ensure their children had better lives than their own. Indeed, some saw lifelong benefits in having had their children young.

> "I'm really lucky in the sense that, because I did have my children young, I'm still going to be young enough to achieve all my dreams. Nothing has really been put on hold. It's just that I have had to take more of a longer road to get to where I am going, because my priorities are different." (Erica)

Of those already working in their chosen career, several had aspirations for higher positions, or for increasing pay and hours of work once their children were older. Rachel's career goal was to be a head teacher, and Kiri, who was working with her partner to establish a business in traditional arts, was planning an exhibition as a means of generating future earnings. Noting how much she valued her job, Hannah said, "The better I do here, the better off the rest of my life is going to be."

The young women with aspirations remained focused on their goals though they recognised other priorities such as children and families would mean their goals might take longer to realise.

> "My goal for this year is to actually knuckle down and do a Diploma in Business, simply because at this stage it is sort of more practical to have that than perhaps the psychology degree which is where I still want to end up." (Amy)

Others had put personal goals on hold while focusing time, energy and money on shared goals with partners. They acknowledged the sense of achievement this brought, and the associated improvements in family circumstances, but did not lose sight of their own goals. Erica had worked with her partner to establish a business, but kept her sights firmly on a university qualification which she would begin when the business was established, her children were older, and finances were less stretched.

The young mothers with aspirations recognised the importance of ensuring their own needs did not become totally subsumed by those of their families.

> "My career is definitely important to me. I suppose it keeps me a little bit sane because it is my own little thing. Even though it makes my life harder, it also makes it a little bit easier." (Lisa)

These young women also recognised the importance of goals and aspirations in enhancing their parenting skills and providing sound role models for their children. They saw how success built upon success.

"I make goals for myself and I try to make the goals obtainable to me. I don't make them too difficult and I don't set myself too many at once. I guess for a very long time my goal was to finish my studies, so that was a really big one for quite a while. I have had other goals as well, like I wanted to buy a new car. Get divorced. It was! It was one of my New Year's resolutions, and I did it! I think just knowing that my life had a direction, and that I had these goals that I wanted to achieve for myself, helped me be a stronger person, in a sense, almost in a little bit of a selfish way, I guess. Like … that I have to do this for myself, so that I can be a stronger person so that I can be there for the kids. Because if I'm just some weak push-over person who lets everyone get what they want and pushes me around and doesn't have any aims in my life, then what benefit is that to the kids? That's what they're going to learn … that kind of behaviour." (Rachel)

The importance of having goals was well explained by Erica, who described how she overcame adverse circumstances that other members of her family continued to struggle with:

"The difference is because I have goals and ambitions. My drive is 'I can't give my kids a future if I don't have one.' I stick to that. My kids now do have a future. I've got a future and so do they. I just really am going to keep going, and say that nothing is unachievable, ever. You can make bad decisions. You can make bad judgment calls. But what you take from that experience is where you're going to end up later on."

Planning for the future helped many see beyond their present circumstances, and provided the motivation to do well for themselves and their children.

Strong sense of identity

"They say that a woman finds herself between the ages of 19 and 26. How do you find yourself, if by the time you've reached that age, you've already been told what you are? You're a mother. That's already given to you." (Becky)

Like Becky, several young mothers recognised how early motherhood had affected the development of their identity. In common with their views in 2001, none regretted early motherhood. Nevertheless, most recognised how having children as teenagers had influenced their development, and their sense of self. Describing how she had consciously sought to develop aspects of her identity Miriama said:

"I was doing a lot of reflecting on myself and realised that I'd forgotten who I was. From 17 I was a partner, and then at 18, I was a mum, and then that was all I'd become. I was either a partner or the kids' mum. I wasn't myself." (Miriama)

All noted their roles as mothers required them to prioritise their children. Ripeka emphasised the importance of "keeping in tune with the children and their needs", and Rachel said, "I need to be an advocate for them, in that I need to try and get them what they need to make them happy". Hannah said, "I'm trying to do everything I can to make (son's) life as good as what I had growing up … and probably better."

Some had a strong identity as a mother, saying "my children are my life" and regarding motherhood as requiring them to focus solely on their children. They saw

this as the reason they did not engage in further education or work, but instead focused on "being there for the children", often in ways their own mothers had not.

Others believed it was important to ensure their role as mothers did not overwhelm their own sense of self, and regarded their children's wellbeing as enhanced when they ensured they had roles other than parenting. These mothers saw their personal development as a crucial component of their child's development, enabling their children's lives to be better than their own. Speaking of her university study, one said:

> "I know that I need to be a supportive mother, and I know that this is what I need to do to achieve that, and for her to be successful and not to run in the same footsteps as I did." (Zoe)

Study and work provided a means for some to ensure their own needs were met, but again raised questions about priorities. In common with mothers of any age, most found it challenging to balance their own needs, their children's needs, and in some cases, their partner's needs.

> "I think that as a working mum as well, it's one of those things that I worry about more than anything. Do I work too much? Would (daughter) be better off if I was at home with an apron on, and baking? Would she do better?" (Amy)

Resolving these dilemmas in ways that did not diminish their own sense of identity enabled some to maximise their opportunities through further education or work. Ripeka spoke of the value of:

> "… having your own goals and aspirations … giving time to yourself … nurturing yourself … because you're not very useful to anyone else if you're not useful to yourself."

Being her own person, having a successful career and knowing she could provide for her family helped Erica to be future-focused and independent:

> "(Partner) and I could split up tomorrow. I still need to know that I can independently financially raise our children, and be there for them emotionally and everything else. So I know as much as (partner) and I are a couple, I'm still my own person and I'll never lose my personality or my independence. That's just a part of who I am."

On the other hand, Ripeka, who was the first in her family to attend university, recognised the interconnectedness of her identity:

> "If I'm successful, then I'm a success for my whānau. We all benefit out of it." (Ripeka)

A wider sense of purpose

Some young women saw themselves in a wider context than their children or families: they recognised that they had knowledge and skills they could offer to others, and had a sense that others could benefit. Some attributed this sense of purpose to their own families of origin.

> "My family has very high expectations. They give me a lot, but they expect a lot in return." (Hannah)

"I think it is probably partly my family … their drive and what they think is right. So I've tried to do what they think is right. But that's obviously in me as well, and I want to do what's right in all areas of life." (Lisa)

Some saw their experiences as giving them insights which could help others. Qualities they saw arising from their experiences as teenage mothers included having empathy for others in similar situations, being non-judgmental, and having a greater sensitivity to the needs of others.

Some acted in volunteer roles. Hannah was on the board of trustees at her son's school, and the manager of his soccer team. Tanya and Zoe had used their skills to support women attending community-based programmes, and Miriama was a volunteer in an animal home. Lisa, in explaining her reasons for helping at a childbirth education class, said:

"It's probably my way of doing something for others. I suppose I can relate to mothers a lot, and especially it's nice to see all different ages at these classes."

Ripeka, who used her skills in a Māori tertiary students' association to give Māori students a voice and advance tino rangatiratanga, said:

"Being part of that organisation has been really important to me. It's been good in terms of my own personal development as well as networking and building relationships with other Māori students from other universities."

Opportunities such as these enabled young mothers to share their skills with others as well as providing opportunities for their own development.

Pride in achievements

"I'm proud of who I am, where I've been, where I am now, and how I got there." (Hannah)

In the 2001 study, all the participants saw themselves as good mothers, but they were aware that society tended to regard them less favourably. In 2008, many of the young women reflected on the issues that had confronted them in the intervening years, and expressed pride in what they had achieved – often expressed in the context of overcoming stereotypes associated with teenage motherhood.

"Buying a house, was, I think, about proving people wrong … saying to all those people who said, 'Oh, your life is over' and 'What are you going to make of it?' … I think it was a way of saying, 'I've got this, and I've got this far.' " (Amy)

"I think maybe I've tried to prove people wrong. It's probably not conscious. It's just what I have done. In some ways I think I've put too much on myself in that way. I've put too much responsibility on myself to be this amazing person and do all these things, when I shouldn't really have to do that. It's enough to be a good mother and just do that, but I have taken on extra with study and work, and done it all while I've had babies." (Lisa)

Others saw themselves as contradicting stereotypes of teenage mothers being unable to give children the enriching environment that older parents can. Like

mothers of any age, children's achievements at school, in sport, or in relationships with others helped to provide confirmation of the effectiveness of their parenting.

> "She hadn't been at school very long and she got a Principal's Award for her writing. I think I can feel proud of that because I know how much effort I've put into reading with her every night and encouraging her love of books. That becomes a personal thing for me as well, because when she's achieving I know that I've helped to create that." (Amy)

> "We went to her Goal Setting at school last week, and she turned into this whole different person. This professional student came over her, and she was sitting there saying, 'This is my goal', and 'Do you have any questions, Mum?' I was like, 'Oh my golly! This is a girl I just take for granted, and think that I just do everything for … like … I run her bath and stuff. But really she's actually capable. She's actually really professional. I was really happy.' " (Zoe)

Finding their children's achievements affirmed by family, teachers and others also boosted their confidence in their child rearing practices.

> "My parents and grandparents are very proud of me, and think I've done really well. They are the first people to say, '(Son) is a wonderful kid, and you've done really well.' And they have done really well too." (Hannah)

> "A lot of people comment on how lovely she is, and her manners, and the way she is with people. Like they always say, 'You're a great mother, because look at how she's turned out.' At the time, I'm like 'Oh, don't say that.' But then I reflect and go, 'Yeah, I have actually done some good stuff if she's turning out okay'." (Zoe)

Insight

Many of the young mothers had insights to their earlier lives, and these provided them with ways of moving forward. Better understandings of how family instability had affected their childhood and adolescence, or of how others had driven them in negative directions, made them conscious of not repeating this with their own children.

Becky had a greater understanding of her mother's mental illness, an insight that helped her focus on reducing the effects of her own mental illness on her children. Others knew why they had been unsuccessful at school and were working to ensure their children did not have these experiences.

Comparing her life now to her chaotic teenage years, Erica said:

> "I just like to know that I'm independent, that I'm strong and that I can do things. If I set my mind to it, nothing's unachievable and that's what I've got to remind myself of every day."

Insight to why they became teenage mothers made some determined to help their children delay childbearing until they were older. Zoe felt she had become a teenage mother because "I didn't see anything else for me to do. I hated school. I wasn't successful in anything academic at all. I wasn't successful at any sports." She hoped that by completing a degree and having a job, she would have the means to support her daughter to see alternatives to early parenthood.

Others understood that having strategies to help themselves, and being willing to ask for help, were also useful ways of moving forward.

> "I've found that if I'm really angry with a person or situation, I write a letter, and then I read it a couple of times and then I rip it up and throw it away. It just relieves a little bit of the pressure." (Katy)

> "I'm a talker. I've just got to talk about things that are going on. If I don't, it eats me up and makes me worse." (Miriama)

Some mothers said they would not be concerned if their child was also a teenage parent as they did not regard themselves as having been disadvantaged by a teenage birth. While recognising they had faced challenges along the way, several believed that, if they could manage, their children would also. Most, however, did not want their children to become teenage parents.

Reflecting on her circumstances when she became a mother, Becky said:

> "It's really hard to give your children everything you want to when you don't have anything to give them. You can't, at 17, make a life … to suddenly be able to support a child. If I'd been in a better position financially, if I'd been in a better position with my relationships, a lot of things would have gone a lot differently … not that I would change anything, but I would rather that she didn't have to go through all of that stuff. I don't want her to end up having kids by herself … you know … having her education disrupted. It's a life that I'd rather not have for her. Not that I don't like my life, but I'd like to see her be able to achieve some dreams."

Like Becky, others reflected on their own experiences and anticipated a different life for their children. Katy wanted her children to "experience life as them, before there's someone else you've got to worry about" and Danielle wanted her son "to have a life, and to make a better life". She did not want her son to have the responsibilities of parenthood or to have his income diminished by needing to pay child support. Tanya's concerns were more practical: "I don't want to be a nana. I've got to live a little too."

Others did not want their children experiencing the difficulties they had faced as teenage mothers.

> "I think I would be … I wouldn't say disappointed …. I think I would be upset for her, simply because I know how hard it is. I know how hard a path it is, and I don't think any parent can sit there and say they would be happy or they would be okay with that. I suppose I would kind of feel like I had failed in some way, I guess. I wouldn't be happy about it." (Amy)

> "I've told them I would be disappointed. I said I would be really disappointed only because I know that it's hard. It's hard when you are young, because not only do you have to be a mum or be a parent and be responsible for another, but you've also got something to prove to society. Because you're young, you've got to prove to them that you can do it. You are going to have people that are positive and are like, 'Oh good on you, ra, ra, ra', but you're also going to have people who are negative of babies having babies. 'Gosh your kids are going to end up on the dole just like you.' And they may not even know you, but I had a lady a long time ago saying 'Oh, I suppose

they're to different fathers'. I want my kids to be able to live, I want them to go on their OE. I want them to do all the things that looking back now I wished I could have done. So I just expect bigger and better things from them." (Erica)

Some envisaged ways they would work to prevent their children becoming teenage parents. Maintaining open relationships with their children, ensuring they knew the facts of life, and fostering their children's relationship skills were regarded as important. Several regarded their own parenting skills as better than those they had experienced as children. Others had talked to their children about how teenage parenting had affected their lives, and they hoped to extend these conversations as the children grew up.

Having been teenage mothers themselves, several felt better placed to respond if their children became teenage parents. Erica said, "They know that I would be there to support them, because I know support, and good support, honest support, is hard to come by", and Amy regarded her own mother as an important model of how she would respond:

> "I think I would absolutely try and be as supportive as I could be, as my mum was. She was very much about allowing me the time to go through that process and make those decisions for myself. So I think I would be as supportive as I could be, but I think I would be pretty upset as well." (Amy)

Zoe felt her daughter would also have good role models as she regarded herself and her own mother as successful teenage mothers:

> "I am hoping that (daughter) sees the fact that … yeah, we did have children young, but mum has gone off in this direction and she's very successful and I have as well. So even if she does, it's not the end of the world. And there will be the support avenues if that happens." (Zoe)

In summary, most of the young mothers displayed a number of individual characteristics associated with resilience. Early parenthood appeared to have developed a sense of responsibility and strong motivation to do well for themselves, and their children and families. Being insightful about their past helped them to clarify what was important for their future and helped them to see how they might move forward in productive ways. Having clear goals and aspirations were important, together with a sense of contributing to the wider good by helping others benefit from their experiences.

It is important to note, however, that most did not want their children to be teenage parents.

Social support

Personal attributes gave many young women a strong base on which to build resilience, but they also acknowledged they would not be where they were without the support of others. Connecting with people who care and who provide friendship, understanding, material and emotional support, is an effective way of helping young people to develop the knowledge and skills required for healthy adulthood. These relationships provide a buffer in stressful situations and support resilient parenting.

Both before and during pregnancy, some young mothers lacked connections to supportive adults due to early school leaving, lack of antenatal care, and in some

cases, family conflict. Others had rebelled against adult influences, preferring peers whose support they valued. For many, the birth of their child had helped re-establish family connections, and when interviewed in 2001, all of them had connections to at least one supportive adult either in their families, or in community agencies or schools, although the nature, length and intensity of support varied.

Family and whānau

In 2008, those with family or whānau support had an accessible source of emotional, material and sometimes financial help. Hannah, who described her son as "a family kid" noted:

> "It's not just me that's brought him up. I mean, I've got my parents there, my grandparents, my aunties, my uncles. They're all there to support me, and I couldn't have done the things I did, and all the things I do now, without them."

The young mothers' parents, grandparents and siblings gave advice on child-rearing and were available for childcare. Describing how her mother helped her, one said:

> "It's just little things. Like …. on a Tuesday she'll come up and we all have dinner together. (Daughter) does violin a couple of hills over, so one of us will stay with (son) and one of us will go with her. She used to come up once a week as well, and I would go off and do my groceries. (Daughter) does ballet on a Saturday morning, so mum will either come here and pick her up, or go to her dad's and pick her up." (Katy)

Maternal grandparents sometimes played a significant role, often being available at times when maternal parents were not. Zoe's grandparents looked after her daughter before school so that Zoe could get to university on time. Ripeka, also at university, described her grandfather as "my arms and legs when it came to looking after the children. He had a huge role in picking them up when I was busy."

Some parents provided financial support, others provided respite when relationships or accommodation broke down, or a place to live when money was tight.

Hannah and her son moved back home with her parents so she could save for a house. Families of birth fathers sometimes supported mothers and children, even when the birth father was no longer active in the child's life. Preserving these links helped Zoe ensure her daughter was connected to her cultural background, and ensured that Ripeka received financial support.

Those with positive family support recognised the benefits of family and whānau being "always there", providing "unconditional love", and having their best interests at heart. As one said:

> "If something happens, I can easily just pick up the phone and talk to mum or my sisters. With good stuff, too, I can just ring up. There's always someone there." (Kiri)

They valued this dependable source of practical, emotional and moral support, particularly when it did not attempt to take over their parenting role.

> "I guess you don't really stop and think about it. It just seems to be life. When things are good, they're there to enjoy the good times. And if things

are bad, they're there to pick up after you. Like … they just never fail. They don't need to be asked to do something. They just seem to know what to do." (Hannah)

"They're just there and if I need anything I can go there. Like … I don't have to feel that it's a burden to them or anything like that. They just love being able to help me, and to help and be there for (daughter)." (Zoe)

The immediacy of family support, providing "a pick-up when needed", was also valued.

"You know … that phone call that you can ring up and say 'Awful day' for whatever reason, and that someone who can say 'It will get better, and what can I do, and how can I help?' It's nice to know there's someone to say those things, rather than having no-one." (Amy)

Families, particularly mothers, were recognised as being important in times of relationship breakdowns or crises. Having someone to confide in, and who could provide reassurance, made life easier.

"(Mum) is just wise. If I tell her something, whatever it is, what she says to me comes across as wise. She just knows what she's on about, and she can come across in a stable kind of way … not emotional. Because I've been depressed before. Like … I remember a couple of years ago I got depressed and I started crying, and I didn't know what I was crying about. But day after day … and it was all day for two weeks … I cried, and cried, and cried. It was horrible. I couldn't stop crying, and I didn't know why I was crying, and I didn't know how to stop it. But I knew for me to stop crying, I've got to tell my mum. Mum is the only one that can actually help. I think she just knows what it is that needs to be done. She knows what it is that needs to be said. A lot of the time, what she says to me is stuff that I already know anyway. It's stuff that I'm telling myself anyway, but I kind of just need her … yeah." (Danielle)

The young mothers with family support recognised its value, and felt that it placed them in a stronger position than those without it.

Partners

By 2008, four young mothers were married, in two cases to the partners they were with in 2001, of whom one was the father of their children. Another, married in 2001, had divorced and was in a new relationship. Five were in relationships of varying lengths, and three were currently not in relationships.

Relationship break-ups were commonly recognised as sources of stress, associated as they sometimes were with accommodation shifts, financial concerns, custody disputes, and disruptions to familiar routines for children.

Birth fathers

In 2008, only two young women were still living with their children's birth father. While some were in new partnerships and had children to these new partners, most had complex custody and access arrangements. Some accepted that relationships with birth fathers were, as Amy said, "never going to be some sort of happy friendship", and focused on ways they could minimise negative impacts on their children.

Although ongoing challenges remained, focusing on the welfare of children provided a powerful means of accepting if not resolving differences. Rachel noted, "it's not about what I want to do or what he wants to do. It's about the kids being happy", and Katy recognised, "whatever goes on with me and him shouldn't affect the children's relationship with their father".

Some resigned themselves to ensuring that differences in child-rearing practices did not affect the children's access to their birth fathers:

> (Son) loves seeing his father. That's why we keep it up for him. I would never cut it off for that reason. He loves it. He does what he wants there. He plays Playstation and he watches maybe things he shouldn't be watching. He does things that I definitely don't agree with. And that's really hard, because I've got to just let it go. We talk about it, and I tell him that I disapprove of the movies that he's seen. I can't say that I accept it, because I don't. I've talked to his dad about it, but nothing changes, so I just have to let it go. (Lisa)

Others understood the importance of not using the children as a means of getting back at former partners, even though this sometimes left them feeling compromised.

> "If there've been any disagreements or anything, I don't tell the children. But he does, and that's been really, really hard for me. I've struggled with that. It's so hard to not say to them, 'Well, actually, your dad said and did this.' It's really hard. That's been a really hard thing to do, but, I think, a worthwhile thing to do. I mean … they're only little children." (Rachel)

Birth fathers sometimes had other children from previous or new relationships. Complex family networks required negotiation and compromise. One young mother described how she had been able to establish workable relationships with her own partner, her children's birth father, and the birth father's new partner in ways that resulted in clarity about rights and responsibilities for decision making about the children:

> "(Birth father) and I will still have our little arguments and stuff, but both my partner and (birth father's partner) know just to stand back, because there are going to be some aspects that are between me and (birth father). They can have their say afterwards, but on some things there will always be something that (birth father) and I have to agree on or decide on. Because at the end of the day, he's their biological father. And I think that's what's made us actually grow up and realise that … you know … we can hate each other for the rest of our lives, but we're still going to be there, because we've got the two kids together. Or we can just bite the bullet, get along, and do it for our kids, which is what we have decided to do. The kids are much happier and much more settled for it." (Erica)

Access arrangements were another difficult area, but focusing on the interests of the child, and recognising children's needs to retain contact with their fathers, helped mothers play a proactive role in ensuring children were not disadvantaged.

> "He wasn't particularly keen to kind of formalise that into a set day. He was quite keen to go 'Well, today works for me' or 'Maybe next week'. Or he was quite good at ringing up and saying 'Oh, actually, something's come up today and I can't make it'. I sort of said to him, 'She's a little girl and she needs consistency. She needs to know that today is the day you'll have her,

and that it's going to happen every week or every fortnight or whenever. But she needs to know that it's something she can rely on.' He's got better at being consistent." (Amy)

The mothers who were able to focus on their child's future, put aside differences to support the child's contact with birth families. One drove her child considerable distances to meet his father, another ensured a child remained in touch with her cultural roots through contact with the family of her absent birth father, and another grew to accept that her sons had another 'mother' in their birth father's new partner. As Erica noted, dealing with the past and moving on required all of them to "grow up and realise we all make mistakes".

Rather than being overwhelmed by difficulties, these young mothers found solutions.

Other partners

Longer-term, stable relationships provided opportunities for many young women to move on with their lives.

> "This has been the best relationship I've had. There are actually feelings there, and it's decent, and it's normal. It's a stable relationship, which is cool, because that's what I've been looking for." (Danielle)

Some noted how, in contrast to birth fathers, stable new relationships also brought consistency to their children's lives.

> "I think she has actually benefited from having (partner) around because that's a constant male role in her life, rather than someone that kind of flits in and out when he can be bothered to see her." (Amy)

Others appreciated the ongoing support they got from partners, particularly when he was not the father of their children.

> "The other night the kids wrote out a list of rules, and (partner) said, 'You know I'll back up your mother on those, boys. If you don't do it, I'll help.' He didn't say 'I'll get up and make you'. He said, 'I will help her.' " (Tanya)

Those who previously had been on their own welcomed the practical and emotional support provided by new partners: having another adult to help with children relieved the stress of managing alone.

After years of conflict involving protection orders and a child custody dispute, Amy found it paradoxical that she had an episode of depression when she entered a new partnership with a supportive partner:

> "People would say, 'But things are quite good for you at the moment, or they're certainly not as bad as times have been'. I actually talked to someone who'd been through a similar situation and she said she fell apart when she had someone who she knew could step up and do all of those things when she fell apart. So it sounds kind of funny, but by having someone who I knew could look after (daughter) and who could do those kind of things for me, it was kind of like it was okay to crumble and fall apart … in a really strange way."

Another who had been in a violent relationship with the children's birth father found help from her new partner.

> "He's been really good with my ex as well. Like when (former partner) is being quite angry and trying to start arguments, he's really calm and steps in and says 'No, you need to keep the situation calm for the children' and 'It is not very nice. We don't want to live our lives like this. We want to have peace in our lives. We don't need this anymore.' " (Rachel)

Prioritising children also helped when new partnerships were being established. Prospective partners without children did not always understand that, in Becky's view, "my kids come before everybody".

Several emphasised the need to ensure children were not adversely affected during these times.

> "I try not to have them around the children when I first start seeing them. I don't want to be one of these young mothers that have a different guy in and out of their kids' lives all the time." (Katy)

Others worked hard to ensure their children were involved when new partnerships were established.

> "She would tell anyone that would listen, 'We', 'We', she would say, 'We are getting married.' And she did. She was as much part of that day as (partner) or I were. 'We are getting married', 'We got married'. It was all about the three of us. You hear about blended families and resentment from children and feeling left out and stuff. (Daughter) never felt that way. She was always one hundred percent involved and a part of it." (Amy)

Friends

In the 2001 study, most young mothers reported losing friends when pregnancy and childbirth reduced opportunities to participate in peer activities. Some recognised that prioritising relationships with partners had resulted in friends being neglected.

Friends, who also had children and thus understood that accommodations had to be made around social events, were an important source of support in 2001, and similarly in 2008.

> "Sometimes there's nothing better than to get all your girlfriends over and have a boozy girly catch-up, or go out for a few drinks. Small things … but you do have to be happy, and you do have to have that time out away from work, and away from children, and away from family." (Hannah)

Practical support, such as transporting children to school or other events, and caring for children during school holidays were important roles played by friends. Some had friends they regarded as role models. Ripeka said a school friend had inspired her to enrol at university, and others saw friends as models of good child-rearing practices.

Importantly, some reported re-connecting with friends they had lost when they became teenage mothers. Former friends having babies in their twenties provided opportunities to re-establish contact.

Friends provided important support during times of stress. Miriama spoke of a friend who "knows if I'm not alright – she can tell", and Katy said she appreciated friends who "let me ring them and moan about stuff". Rachel particularly valued a friend who had supported her during a difficult separation:

> "She's been a really good support to me through the whole thing. She just completely understands. She's been there for everything that's happened … the whole time that we've been separated. She was there right at the word go and kind of actually took me under her wing. She was … like, 'Come and do this with me' and stuff like that. So I had that person there that wanted to help me get through it."

Community-based services

All young mothers had accessed community-based services. These services provided additional support for those who needed it, or offered the only support for those whose families, partners or friends could not provide it.

Early childhood education and antenatal classes provided opportunities to connect with other parents, and some mothers had been supported by counselling and community mental health services, or by hospital-based social workers.

> "I've been through counselling when me and (partner) separated and went through the family court. When I was pregnant, I went through a single parent group. They run a course on how to make it easier for kids with a separated family, and how to let access happen. So I've done lots of that sort of thing. (Son) went through a domestic violence course for little kids. I went through one. I did lots at the Women's Refuge." (Tanya)

Others had accessed sole-parent programmes, courses for couples who were separating, or the Parents as First Teachers programme. Kiri had received support from a Māori housing trust when she and her family moved to a new area.

Support came in many forms. For some, community-based organisations helped them gain new perspectives on their experiences.

> "I went to Women's Refuge and they said a lot of people go in there and say, 'It's nothing like "Once Were Warriors" ' … and get more upset about that and seem embarrassed … which is what I'd done … exactly the same thing. They said it doesn't have to be like that." (Tanya)

For others, tertiary institutions provided access to people who supported high academic achievement.

> "We wanted to be seen as being successful in things Māori, but also to achieve good marks in other areas as well. So there was pressure from lecturers for me to make sure that I achieved that. They were really supportive in just coaching me and making sure I was on task." (Ripeka)

Opportunities to make connections with those in similar circumstances, share life experiences, and access information were highly valued. These helped to reduce social isolation, and provided alternatives to day-to-day routines.

> "If you can do other stuff, what you've got to deal with is not so bad. Like … if you can go in and have fun somewhere, and you've got to go home to a

little bit of milk and not much sugar, it is not that bad. Because you've just had a bit of fun, and you've got somewhere to go the next day." (Zoe)

Schools were important sources of support for children and provided extra support for issues mothers were less well placed to deal with. School-based services such as Social Workers in Schools, and Resource Teachers of Learning and Behaviour (RTLBs)[2] helped those who were more vulnerable.

"I've been to my kids' school and asked for help with their behaviour, and they're giving it to me." (Tanya)

"We've got an RTLB. The school he goes to now, they're awesome." (Kiri)

Mothers also received support when their children received specialised hospital-based care to address vision, dental or behavioural issues, and when they had undergone psychological assessments as part of custody and access proceedings.

Teen Parent Unit

In 2001, nine participants had been students at a teen parent unit. In 2008, all spoke highly of the support this had provided.

"I didn't know anybody else at the time who was pregnant. My group of friends that I had then, they are only just starting to have babies now. So as far as having a support group and a support network, they were fantastic. They were instrumental in all of that. I think without them I would have been very much alone, because friends from school, they were excited at the time … 'Oh cool a baby, that is exciting' … and they had a small baby shower and I think each of them visited once or twice. But obviously the novelty of a baby wears off pretty quickly. When you can't socialise in the same way and you can't do the same things, that wears off pretty quickly as well. So I think I would have been very alone in that respect had it not been for (the teen parent unit). I think it would have been a pretty lonely time and a very different experience without them." (Amy)

Other mothers who had attended a teen parent unit also reflected on ways it had helped them and their children. Several noted how it had eased the transition back to education, particularly because their children were cared for on-site. Miriama felt, "It helped me grow up", while Erica said:

"It gave me routine … it gave me something to get up for every morning rather than lazing in bed or sitting around watching crappy old soaps or talk shows. I had a purpose. I had to get up every morning."

Becky noted, "A lot of growth can be done with all of the resources you have here" and Tanya particularly appreciated the unit's support worker who arranged activities and provided transport to ensure students would participate in them.

Others recognised the opportunities the teen parent unit provided to support their learning.

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[2] Resource Teacher: Learning and Behaviour – employed by clusters of schools to advise teachers on how to help students with moderate learning and behaviour difficulties.

"It was important for me because as much as I knew I wanted to be a mum, I knew I was still 16 and I knew that I needed an education. I didn't want to be like a whole lot of my other friends that had babies at the same age and just sat around and did nothing. I still wanted to use my brain. I still wanted to get an education. It was important, because that was the only way that I could do it." (Danielle)

Rachel, now with a university degree, reflected on how attending a teen parent unit had boosted her confidence and raised her aspirations for further learning:

"It helped me decide what I wanted to do and it also got me studying and doing work. If I was just sitting at home looking after the children, I don't think I would have gone and applied to go to university. But because I was doing study already … not in the same league as university work … but I was like, 'Well, I can do this, so why can't I do that. I'm not silly. I'm intelligent. I got all my school cert things and I never had any issues at school. I lost interest because of boys, but I'm not silly.' When I did leave school, I left after sixth form because I didn't want to do seventh form because I didn't want to go to university. How ironic that I ended up going! I think if I hadn't have gone there, I wouldn't have gone to university. It wouldn't have happened. I would not have done it. I would not have gone. I probably would've ended up staying at The Warehouse or going back to office work." (Rachel)

The young mothers also valued ways in which the teen parent unit provided ongoing access to caring adults who had their best interests at heart and who supported their learning and parenting. Those whose circumstances and attitudes sometimes made them difficult students particularly appreciated staff who stuck with them and were non-judgmental.

"She's never given up. She's never given up on me. And I know that she's had people say to her, 'Why haven't you given up on her yet? She's no hope'. Because I was stuck in that rut for quite a bit of time until I started the lithium, and actually was able to have clarity of mind and start living properly. Prior to that, I know that she's had people say that. But it's still been unwavering support." (Becky)

"The biggest thing was the encouragement. No matter what, they never let you give up. If you didn't show up for two days, (teacher in charge) would be on that phone … 'Where are you? What are you doing? Why aren't you here?' Just the encouragement and the opportunities that they presented. They weren't forced. They were never given so that you had to take them. Everything was put out as options, and I was able to choose which options I wanted to take. If those options didn't suit, the other ones were never taken away. So the opportunities were also presented and they were genuine. I think that's what really, really helped. They were genuine options, and genuine hands of help. So without judgment. There is enough judgment out there without having more." (Erica)

"I think (the teen parent unit) is very much about 'This is the reality of the situation and these are the things that we can do and you can do to make the most of the situation.' I think that is what people need. They don't need to be told, 'Great job' or 'Terrible wrong decision'. I think they just need to know the reality of the situation and be taken forward from there." (Amy)

Adults in teen parent units also provided role models for young mothers. A guest speaker inspired Erica's job choice:

> "She had her first baby at 16. I knew that I could succeed, but listening and talking to somebody like her who actually did (job), sitting there telling us exactly what she did, I thought, 'No, I want to be you.' And then when I left and went to (workplace), she actually worked there. So when I saw her I said, 'Oh, my gosh. You were like my drive. I saw that you did it'. Because it's okay to hear that people can do it, but when you actually see it, then it makes it a little bit more achievable because … you know it's not going to take forever. So you do … you sit down, you knuckle down."

Rachel attributed her qualifications and current employment as an early childhood educator to the childcare supervisor in the teen parent unit:

> "She kind of inspired me, I think. She is just such a lovely lady and just so calm. I was like, 'I want to be like that. I want to make a difference to someone's life.' When people are struggling with their children and looking after them … to have someone be so calm when children are going 'Aaah' … it was just like 'Wow'. It was a really powerful thing to me. It just inspired me to want to know more about children as well."

The teen parent unit provided a consistent and secure base for many young women at a vulnerable time in their lives. For some it was a turning point. Looking back, they recognised its value.

> "It was really important and without it I don't think I would be quite where I am today either. I would still be driven, but not with the same outcome, I don't think. It was devastating when I left, because it was safe. I knew what to expect there." (Erica)

Some who had attended the teen parent unit maintained contact with other students, supportive staff and associated community-based support agencies. Many years after leaving the unit, and when she again needed help, Erica went in search of a community worker who had given her support. Becky was still in contact with a teen parent unit worker whose support she highly valued:

> "I think (worker's name) and her family have been the biggest support that I have had. I wouldn't have made it without it. Some days I don't know what I would have done without her. I would go 'Oh, you are an angel'. (Daughter) will go for the weekend and she will come back with a couple of bags of groceries which is just enough to get us through to payday, and some weeks we really need that. She has just been an angel." (Becky)

In summary, social support enabled young women to get on with their lives. It connected them to caring people and a range of resources, and provided them with opportunities to extend their horizons. Significant adults were those who provided ongoing and dependable support without being judgmental, and who worked with them and their children to build resilience.

Education, Income and Employment

Individual and social support factors made important contributions to developing resilience in young mothers, but education and training also helped them to gain useful knowledge and skills that supported their engagement with employment, allowing them to become economically self-supporting in the future.

Education

Ten of the young women had undertaken post-secondary school education or training since 2001. Of the three who had completed Bachelor's degrees, one was undertaking post-graduate study. Another was in the final year of study towards a Bachelor's degree, two had completed tertiary diplomas, and one a tertiary certificate. Two had passed a few papers towards Bachelor's degrees, and another had begun a degree but had left to train in a traditional craft. Two young women intended to begin tertiary studies for Bachelor's degrees when their children were older.

The young women who had attended the teen parent unit were helped into tertiary education through the unit's transition programme. Some of them had begun tertiary education through STAR[3] courses and others had been supported to enrol through visits to tertiary institutions.

Educational support from friends or families had played an important role in educational re-engagement. Zoe, who had left secondary school in the fifth form (Year 11) and said "I didn't have much faith in myself", described her pathway into tertiary education:

> "I did want to be a masseuse, but then somehow I went to polytechnic and did hospitality … like a food and beverage certificate … just to get something so I could go and work. I got that, and it just opened my eyes to a whole different world. I got all these new awesome friends and my self esteem started building. I was working in town. It was just great. But then as (daughter) got older I realised that I couldn't be doing night shifts when she was at school. So when she started school I finished working in town and I started working in (suburb) … working in a café during the day. Then I got over that, and I thought I needed to do something else. […] My aunty said, 'Why don't you go and train to be a teacher?' I was like 'Okay, I think I want to.' So we investigated that, and here I am. I am in the third year and I love it."

Tertiary qualifications were highly valued. Many had obtained them while receiving the Domestic Purposes Benefit (DPB) with support from the Training Incentive Allowance. Without this financial support, most said they would have been unable to afford to study.

Family support had also played an important role. Ripeka, the first in her family to attend university, said:

> "When I graduated, it wasn't just my achievement. It was the achievement of my whole whānau in that they had been supporting me throughout this

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[3] STAR (Secondary Tertiary Alignment Resource) is a Ministry of Education initiative that supports schools to facilitate the smooth transition of students from school to further education or employment.

whole journey and finally we had reached a milestone, and we had done it as a whānau. And they could all celebrate that with me … or for me … or for themselves. We were all celebrating that someone in our whānau who had come from nothing could achieve something, could overcome all those obstacles and be successful."

Early childhood education was also valued. All the children of young mothers in this study had participated in early childhood care or education. Those whose children had been in childcare associated with the teen parent unit valued the on-site service, the support to enhance their parenting, and the requirement to take responsibility for meeting their children's needs in the lunch-break.

Those who did not attend a teen parent unit, or left the unit while their children were still pre-schoolers, had accessed a variety of formal early childhood provision, including home-based care, kōhanga reo, kindergarten, and crèche.

For some, access to the Childcare Subsidy, and more recently the 20 Hours Free policy for 3 and 4 year olds had made it financially viable to work.

> "(Daughter) gets 20 hours free childcare, which is fantastic. When (son) was born, there wasn't as much help with that sort of thing. I think we get about half subsidised, which is great. Otherwise I wouldn't work, to be honest. It would just not be worth it." (Lisa)

In 2008, most participants' children were at primary school. Like Hannah, mothers wanted their children to "do well at school and try hard". Three children were in programmes for gifted students, and several described feedback from teachers showing their children were performing well above their chronological age in reading or maths.

Subsidised after-school care provided an important means of bridging the time between the end of the school day, and the mothers' return from study or employment.

Many noted the need to be resourceful and well-organised when making arrangements for childcare, irrespective of the child's age, seeing the need to ensure they had watertight childcare arrangements if stressful situations were to be avoided.

Others appreciated family-friendly workplaces that enabled them to take time off work to attend important events in their children's lives such as prize-givings, concerts and sports events. Some moved children from one form of childcare to another in work breaks during the day.

Some mothers found childcare more complex when their children started school, particularly organising care in school holidays. Mothers made complex and expensive arrangements for childcare during these times; using a mix of annual leave, holiday programme providers, friends and family to ensure their children were cared for.

> "Before she was five, childcare as far as holidays goes, isn't a big issue. They're open 50 weeks of the year. They're only closed for a small period over Christmas. Then suddenly she was at school, and the holidays roll around faster than I can blink. I think the coming term is eight weeks long which just comes around so fast. So every couple of months there are these two weeks worth of holidays and of course only four weeks leave … well

luckily now four weeks leave. She has been in a programme called (name). They provide before and after school care and also holiday care, which is great, but it's expensive. But they only provide one week of care through each holiday, which with four sets of holidays plus Christmas makes things difficult for that other week. I'm lucky that between grandparents and friends I can usually make do. Probably every other holidays I take a block of time off. But four weeks of leave only goes so far, unfortunately. Obviously I would love to have all the holidays off work, but that's just not practical." (Amy)

Those mothers who had succeeded in education themselves held high aspirations for their children's education. Some had tertiary education aspirations for their children. When her son was born, and she was a single mother at university receiving the DPB, Lisa had opened a tertiary education account for her son. She continued to contribute to this in 2008, and had opened similar accounts for her two subsequent children.

Income and paid work

In 2008, six young mothers were no longer receiving income support, but all young mothers had received income support at some time in their lives, most often the DPB. Three mothers who were not receiving income support in 2001 or in 2008 had experienced short periods of benefit receipt in intervening years due to partnership break-ups. Three had stopped receiving the DPB and moved into employment since 2001.

Of the seven participants receiving income support in 2008, four were in a few hours of paid work and receiving a benefit top-up. Another was in the final year of a Bachelor's degree and expected to be working full-time as a teacher in 2009. One was studying part-time towards an Honours degree, and another received income support to top up the low wages she and her partner received. Only one was not in work, education, or training.

For most, the pathway off income support was a new partnership, or the completion of tertiary study and movement into paid work. Sometimes these circumstances occurred simultaneously. Those who had moved off income support saw the DPB as a short-term intervention that got them through a difficult period of their lives.

Rachel, who was currently in full-time work as a teacher and had received the DPB for a short time when her marriage ended, regarded it as an "incentive for studying for a degree", while Hannah, who had received the DPB in 2001 and had since gained a tertiary diploma and was in full-time legal work, said:

> "The DPB, to me, isn't meant to be there long term. It is meant to be a short term thing to get you through and to get you back on track. Because if the DPB wasn't there and the study things weren't there … to maybe not give you an incentive to study, but definitely to support your study … you couldn't do it financially. I mean, I did get a student loan when I studied, which I've paid off now. But, I mean, you wouldn't want to get yourself into too much debt to do it when you had dependants." (Hannah)

For some, receiving income support made the difference between being a longer-term benefit recipient, and gaining qualifications that enhanced their ability to enter paid work.

Zoe, who received the DPB for nine years and was in the last year of study towards a Bachelor's degree, appreciated the financial support provided by Work and Income through the Training Incentive Allowance, without which she would have been unable to afford to study:

> "I just went to them and said, 'I want to do this. What can I get? Can I get some help?' Because I knew that I'd have to get a student loan as well, but I wasn't aware that they were willing to pay me a Training Incentive Allowance weekly. So it was really great that they said, 'Yeah, this is what you can do, and we want you to get out there, so we'll do anything that we can to support that'."

Rachel too had studied while on the DPB. In 2001, she was a married student in a teen parent unit. The end of her marriage in the intervening period resulted in her needing to receive the DPB, and it also helped raise her aspirations for herself and her children. By 2008 she had completed a Bachelor's degree and was in full-time paid work as a teacher:

> "It was a really kind of difficult time for me, because around the time I started studying, I think for me it was starting to take steps forward in thinking about my life and my future, and where I wanted it to go, and what I wanted for my children. The relationship that I was in was emotionally abusive and it started to become physically abusive towards the children. When that happened … it was around the time I was accepted to university … I started to change my thinking. I wanted to do what's best for me and the children, and I wasn't going to live my life like that and have them have to live with that. So I kind of went from being married and living with their father, to being a solo mother who was studying and working part-time." (Rachel)

Lisa had also completed a degree while receiving the DPB, and had undertaken teacher training after she was married and pregnant with her second child. She was currently employed part-time as a teacher:

> "I like to nurture children … to look after them. And also there's flexibility with holidays, and when you've got your own family it just makes so much more sense."

The pathway off benefit receipt for Amy was prompted by how others perceived her as a teenage mother receiving income support. This provided strong motivation for her to find paid work, and to forego present income to better position herself for the future:

> "I think for me it was just about that stigma. There was already this whole teen parent thing going on, and the thought of being on the DPB for any length of time was just something I couldn't personally cope with. When I started here at (workplace), through several different reasons I was actually better off financially on the DPB than I would have been if I was working … probably by about $100 a week. So, a huge drop. That was for several reasons. It was because I didn't have registered childcare … because there isn't registered childcare in the evenings or weekends. So then, of course, there was no childcare subsidy available to me, because no registered childcare. Then, of course … you know … things like Training Incentives and all of those things, they don't exist when you are working. At the time I was on a fairly low wage as well, and only working I think maybe 30, or just over 30 hours. So through really sheer stubbornness I worked. And from being

still living at home as well, I was able to work, because otherwise I simply wouldn't have been able to afford to work … which is a pretty crazy thing to say, but I can't afford to work. It just seems crazy. I think, now, from talking to various different people, that it's probably easier. The Government has made it easier. But at the time people would say to me, 'Why are you working?' It simply was that I couldn't bear the thought of being (a) a teen parent and (b) being on the DPB as well. It just didn't sit right with me." (Amy)

Zoe, also receiving the DPB, was in her last year of a Bachelor's degree and would soon be in full-time paid employment as a teacher. She too recognised the importance of qualifications and a job, for her own and her daughter's futures:

> "(Daughter) needs to have a future. That's just the way it is. She can't have a future if I'm on the benefit with nothing to do … well … not a great future, and not a future that I want for her. So hopefully if she sees me going and doing university, and going and working, I'll be able to provide that for her as well … you know … the money and the support so she can do that too." (Zoe)

Other participants not on income support included Kiri who had received a cultural grant to set up a business in a traditional craft with her husband, and Erica who worked part-time, but also worked with her husband to establish a business.

The young mothers not receiving income support were more secure financially. Erica, Amy and Lisa were all in work and owned houses with their partners, and Rachel and her partner were about to move into their own house. Hannah expected to have accumulated a house deposit in the next six months. House ownership at a young age was regarded by these young women as a significant milestone.

Young women such as these felt their more secure financial positions gave them choices others didn't have.

> "We don't want anything big, fancy and flash. We just want to make sure that we've got financial security, and that we've got our independence." (Erica)

> "We live quite comfortably, to be honest. (Son) doesn't want for much. People may say that money doesn't matter, but it does. Like … to have a really tight budget, compared to being able to spend money on taking your kids out somewhere or going on holiday … they're big things." (Hannah)

In summary, young mothers who had engaged with further education and/or were in paid work saw themselves, their children and their families as being better positioned for the future. Those in the teen parent unit had received supported transitions to tertiary education, while others had benefited from family support. Although all of them had been on income support at some time in their lives, most saw it as a short-term intervention. For some it had provided a means of combining parenting with tertiary study.

In 2008, almost all the young mothers had at least a few hours of paid work or, if studying, were approaching a time when they would be independent.

Challenges to resilience

Previous sections have analysed the findings of this study from a resilience perspective. They identified how young women overcame challenges and were working to ensure positive futures for themselves and their children.

But resilience is predicated on the existence of risks to wellbeing, and identifying and addressing these is an important component of helping young people to lead resilient lives. All of these young women had faced challenges, some of which were recent and, in some cases, ongoing. This section summarises those challenges.

Health concerns

The young mothers were generally physically healthy, but Miriama had a chronic illness and had periods when this was difficult to manage. Others had mental health concerns.

> "One of the biggest things that has happened in our lives is that I was diagnosed with bipolar in 2002. A lot of the last seven years has been learning to live with that." (Becky)

Two others had more recent diagnoses of depression, both describing how it had reduced their ability to cope with caring for children and other aspects of daily life.

> "Two years ago I suffered a bout of depression … I had six weeks off work, and most of that was spent in bed." (Amy)

> "I've been quite depressed lately and have been to the doctor's. I've never thought I was depressed, as life has never been perfect for us. But with (new partner) now my life is perfect. So what's wrong with me? I think my life is perfect now, and because there's nothing to point at, I can see there's still something wrong." (Tanya)

Others described emotional stress arising from a partner's infidelity, and wider family problems.

> "When (partner) was unfaithful and we split, I had to go on the DPB. That's when I fell pregnant. What happened was that because we had a baby together, even although we were separated, we had the benefit fraud investigators on our back. And because I didn't know where I stood with (partner) I sort of had to say to him, 'Well, what are we going to do?' because we weren't together but I was hoping to get back together. So we did – we ended up getting back together again. It felt like we were just pushed together, in a way." (Kiri)

> "My grandfather had a stroke and was paralysed. And my ability to support him was kind of limited. I didn't know how I could look after him, and look after myself and children as well. I left a lot of that to my grandmother to figure out … And my sister's daughter was diagnosed with leukaemia. That kind of spiralled and my sister kind of got in a bit of a mess and was with an abusive partner. To cut a long story short, she lost her children, and they're now in foster care … And my mother is not very healthy. She told me she will be on dialysis in a few years time." (Ripeka)

Child health was a concern for some. One of Tanya's children had a number of congenital problems. Kiri's son had migraines, and he was also being assessed for Asperger's Syndrome.

But emotional or behavioural issues were of the greatest concern with several mothers seeking help for their children.

> "There's definitely some issues and there has been psychologists' reports done. (Son) doesn't have a very strong relationship with his birth father. He's a bit timid and scared of him because his behaviour can be unpredictable. … We've had lots of issues with (son) not wanting to go to his house. He gets really upset and emotional and cries, and just has breakdowns about the smallest things." (Rachel)

> "About a year ago she was diagnosed with ADHD. I had taken her to a specialist because I had concerns, but when she was actually diagnosed I found it quite heart-breaking. It was really tough … She's on medication." (Amy)

> "He's definitely had some behaviour issues … some quite major behavioural issues … to the point where I've rung to try to get help for him. I've actually been to psychologists with him because he's got a real good temper on him. It's slowly getting better." (Lisa)

> "Probably in the last month she's gotten worse. Every day is a temper tantrum, especially if she doesn't get something she wants. She'll tear up the place, whack walls, slam her bedroom door, and say she hates us." (Miriama)

> "(Son) is kind of really lovely and he'll sit there and talk to you for hours. But if you say, 'Come on, (son) enough is enough', he can throw himself into a big rage. He just gets this rage in him and just … GRRRR … and that's it. He'll smash up his room and do things like that." (Tanya)

Mothers saw these issues as arising from their own new relationships, contentious child custody disputes, or experiences of family violence. Becky worried about the effects of her own experiences with bipolar illness on her children, and whether they too would have this illness.

Some felt let down by services which had lengthy waiting lists to address their child's needs.

Victimisation

Victimisation also affected young mothers' ability to lead resilient lives. Becky has been the victim of a stalker, and another said:

> "I've moved house quite a few times. I was living in (suburb) and was having problems because my ex-husband moved in down the road. One day my daughter and me had an argument and she ran of down the road to his house. And I thought to myself, 'This is not good. I think we need to move away.' We were also having lots of problems with him stalking us, and walking up and down past the house, and breaking into the house, and harassing phone calls. It went on for years, but her running off was just the last straw for me." (Rachel)

Another had experienced emotional, verbal and physical violence from a partner over a number of years.

> "He would buy you clothes, but then he would say 'That girl over there looks better.' He was a real womaniser." (Tanya)

Unstable housing and lack of transport

Some young mothers were in unstable accommodation. Danielle had moved house six or seven times over the past eight years, and Katy described needing to move when houses she was renting were sold. Frequent housing moves reduced family stability as it disconnected children from friends and school, and required families to readjust.

Several had moved in with parents to cope with housing transitions, and although this was a pragmatic solution it was often stressful as mothers and children adjusted to new routines and a loss of independence.

Some were in houses that were cold and damp, and this put pressure on family incomes, particularly when winter illness affected children.

> "The past couple of years they haven't been very healthy at all, and I'm wondering if it could be something to do with the dampness of this house. They've both had pneumonia. I had at least one child home for six weeks at one stage." (Miriama)

Others had accommodation with insufficient space. Tanya had been living in a two-bedroom granny flat with her three children, and Becky said, "I haven't lived in any horrible places, but there's never enough space".

Miriama's house was some distance from town, and because she was unable to drive, she was reliant on infrequent public transport to get herself to work and her children to school.

Lack of support

Some were lonely, describing themselves as having nobody to talk to, or being let down by friends whom they thought they could trust. One felt she was the person in her family whom everyone relied on, but that nobody was willing to provide her with support when she needed it.

> "When I've been down with different things that have gone wrong, I really don't know who to go to because when I approach someone, even my mum, it would be like 'You'll be right. It's fine.' And it's sort of left as that. I started feeling like people ran away if I needed help." (Miriama)

Some lacked family support because their families struggled with their own problems. Family support that was perceived as suffocating, rather than helpful, resulted in Tanya moving out of a flat at her mother's house and into a rental property which she was struggling to finance.

Some found themselves isolated when they had subsequent children, often because they had to give up activities that had previously involved contact with others. One contrasted the high level of support she'd received when a teenage mother with the lack of needed support when she had a child in her mid-twenties.

"I'll tell you what – young mums get everything! When you're a mum at 24, you get nothing. There aren't groups or anything. There's no help. When you're a teen mum you get lots of help. You can go to your groups and (name) will pick you up and drop you off. There are heaps of these sorts of groups … And when you first get pregnant, the doctors seem to push all these pamphlets in your face. When you're an older mum, you're supposed to be married and you're supposed to have a simple life and need nothing." (Tanya)

Some mothers and children received no emotional or practical support from birth fathers, a situation complicated when children with the same mother had different birth fathers. Others lived with uneasy or uncertain arrangements with birth fathers over access to children.

The father of Danielle's son's had moved overseas, and while he saw him from time to time, she said:

"I sent his father a message to say he's finally got the chicken pox, but I didn't get a message back. (Son) said to me, 'Oh, you should send my dad a message and tell him I've got the chicken pox.' I said, 'Yes, I did already.' (Son) didn't say anything. I think he's wondering, 'Why hasn't my dad texted back about my chicken pox?' " (Danielle)

Lengthy Family Court battles also reduced opportunities for support. These were sometimes seen not so much as attempts by fathers to gain custody or access to children, but as a means of getting back at mothers.

"I had a lawyer and a Protection Order and numerous visits to court for one reason or another. He breached the Protection Order. We had custody issues. I knew that a lot of that was just him being vindictive. It wasn't even so much about him wanting contact with (daughter). It was just about paying me back. I think he proved that when he was given different visitation options and he just didn't turn up for them. It was like, 'Well, why are you fighting for? Why are you putting us both through this when you're not even interested anyway?' " (Amy)

"At the moment they are with him 50% of the time, which is a new thing. It only started at the beginning of this year. We have been in and out of court for just over six years. It has not been pleasant at all. It has not been nice for me. It has not been nice for him. It has not been nice for the kids. He just keeps wanting more and more time with the children. As I have said, he can be emotionally abusive and I am aware that he does do that to the children. He does have alcohol problems and other criminal charges. So I keep fighting it. I didn't want him to have more time with them. It just came to the point where the court was going to give him the time anyway, so I in the end just gave in and said, 'Fine, have them half the time. That's what you want.' I just didn't want any more fighting. I'd just had enough. I don't want to live the rest of my life fighting with him about the kids. If they're not going to be happy about it, he will see for himself sooner or later." (Rachel)

"I don't hear from him. He changes his number and doesn't tell me. He had a court order, but as soon as I even think about revoking it so he can't come in and mess it all up, then he will suddenly care and act like I can't do that because then he can't see his kids. So I just leave it. I never hear from him.

The kids don't know who he is. I've spent a lot of time trying to convince my daughter that he's not dead. That's what she thinks. That's what she says. I've told her, 'No', and I've called him and said 'You know your daughter says you're dead. Can she speak to you?' " (Becky)

Financial concerns

Low income was a problem for some. Three young mothers described themselves as living from week to week. Budgeting was difficult, particularly when there were no contingencies to address unexpected expenses such as child illness, vehicle repairs, or attendance at family events. Tanya described herself as "borrowing from this person to give to that person" and others described struggling to limit how much they spent on food.

> "Sometimes if I get $80 to $100 of groceries, I'm almost in tears. Sometimes it doesn't even cover the bottom of my trolley." (Miriama)

> "I'd like to spend more than the $60 to $80 I do a week but I just have to stick to what I can manage. The two kids don't go hungry, and we have got food but it would be nice to stack the pantry when I go grocery shopping." (Katy)

Accessing a range of special benefits through Work and Income helped these mothers cope. Support had also been sought from foodbanks.

> "(Partner) was absolutely embarrassed. He did not like it. He hid down the street. We were on disconnection notice for our power and phone. It was really bad. I had no choice. I had to go there because there was nowhere else I could go. I understand why they have to go through the process of filling out the form, seeing your Community Services Card, and asking why you can't pay for this and that, and why you need food. But going through all that is a bit daunting and quite embarrassing." (Miriama)

Employment issues

Among those who were working part-time and receiving a benefit top-up, two young mothers who were being treated for depression felt they had been pressured by Work and Income to take unsuitable jobs.

> "I got offered a job. Nine till one. My daughter is in day care from nine till one. How could I complain? So I took it, and it's horrible. I've been there a year though. She's a lady that you go to her house 20 hours a week. You clean up after her and her husband. But there's no mess! There is nothing to clean cos her house is already clean! And she's a depressed person too. See! I'm always with these people who are so depressed! She's got so much money! She's constantly going through Ezibuys and buying all these clothes. Every day clothes turn up for her! And she goes to the chemist to get herself new products for her face. Do you know how hard this is to see when your wallet is so broken? Every day I have to see this … every day … and it's getting me down." (Tanya)

> "My case manager told me to get a job. She told me to go into home care – cleaning and stuff. I had only just stopped receiving home care myself, so I thought that was a little bit rude." (Becky)

Some saw no way out of their current employment situations, as they needed to work in order to make ends meet. They felt they could not afford the time or money to retrain. Tanya, who was caring for her three children, said:

> "I can't do a course part-time if I have to work 20 hours a week. I have to work to get money." (Tanya)

Others found work transitions difficult.

> "The thought of full time work scares me. But I would like to gradually get into full time work. I would never in a million years go straight into it after being at home for so long, because I would just fall on my back. I wouldn't be able to handle it." (Miriama)

Danielle had worked in the sex industry for three years, and although she now had other employment, she reflected: "It's hard to get out of because you make so much money." She had tried a number of lesser paid jobs but said "I can't afford to get out of bed in the morning for a job that pays $10.50 an hour". When she eventually found a full-time job with a reasonable income, she found "there wasn't enough time to work full-time and be a mum when you're by yourself".

Stigma

While increasing age had usually reduced the stigma of teenage birth, some continued to experience negative or at least curious comments – often from strangers – about how old they were when their children were born. Some who still looked young, in spite of being in their mid-twenties, continued to feel self-conscious.

> "I was training a new lady at work just last week, and one of the things I was training her on had my age on it. She said to me, 'You're 26! I thought you were about 18!' So that you can imagine that if people perceive me to be that age, and I'm talking about my eight year old daughter, the mathematics get pretty interesting. I think I notice it more now, and I'm quite conscious of it as well." (Amy)

Others felt inaccurate judgements were made of their parenting abilities.

> "When he went to school, I must have been one of the youngest mums in his class. His first year there he had an older teacher, and she would not take me seriously. She did not want to sit down and discuss things seriously." (Erica)

> "When he started school, I felt like I was back at school by the way his teacher talked to me." (Danielle)

The stigma of having been a teenage mother remained with many of the young women. Pregnant with her second child in her mid-twenties, one said:

> "I felt ashamed like I was a teenager again. I thought, 'Am I going to get a growling from mum and dad?' Even though I am older, I sort of had that type of feeling." (Kiri)

In summary, some mothers still faced significant challenges that reduced their opportunities to work towards resilient futures. Health, housing and financial issues

presented ongoing concerns, and some of the young mothers continued to experience difficult relationships with families and birth fathers.

Some of these challenges, in particular mental health and child behavioural concerns, require intensive early intervention from highly skilled practitioners.

Other challenges, however, can potentially be addressed through better connecting young mothers and their children to education and other support services.

Implications of findings

This study has presented the results of interviews with 13 young mothers who were able to be located and agreed to be re-interviewed in 2008, seven years after they participated in an earlier study. Five participants from the earlier study did not take part in the 2008 study, and little is known about the current circumstances of these mothers.

Participants in this study comprised a small self-selected group who, seven years ago, were in supportive relationships with adults. Findings need to be interpreted in this context, and cannot be generalised to other young mothers.

Because studies focusing on the risks associated with teenage motherhood tend to predominate in the literature, the experiences of those who do not face disadvantages or who overcome them tend to be lost sight of.

The positioning of the present study, with its focus on resilience, and provision for their views and experiences to be heard, identifies alternative perspectives on teenage mothers. It suggests issues for policy makers and service providers to consider as they focus on ways to support resilience and improve outcomes for teenage mothers and their children. Focusing on factors known to be associated with resilience, and addressing factors posing challenges to resilience can provide a framework for engaging with them.

An important finding of the research in both 2001 and 2008 was that, in contrast to public perceptions of teenage motherhood and in spite of the challenges some faced, most participants did not regard their circumstances as risky. Some saw teenage birth as protective in that it resulted in changes that they and others regarded as positive. Childbirth was thus perceived as a "turning point experience" (Rutter, 1987, p 136) that offered new prospects and opportunities to break away from the past.

This reflects Ungar's (2003) observations that what might be regarded as a risk in one situation becomes a protective factor in another, depending on how risk and protective factors are perceived by those experiencing them.

Young mothers' perspectives on their situations thus provide important starting points for policy makers and practitioners.

Individual factors promoting resilience

Participants described how the birth of their child had required them to grow up quickly, abandon destructive lifestyles, and focus on providing their children with a healthy environment.

Awareness of the stigma associated with teenage motherhood, and wanting to disprove negative stereotypes of teenage mothers, was a strong motivation for most young mothers to demonstrate responsibility and competence. These factors possibly contributed to young mothers being more receptive to advice and support, and thus facilitated an important entry point for early intervention by service providers.

Many young mothers spoke of the importance of having goals and aspirations. They saw a bright future for themselves and their children and were working towards achieving this.

Hence, working with young mothers to overcome fatalistic attitudes, and supporting them to set and achieve goals, allows service providers to build their confidence and self-esteem, provided the support is given in a sensitive and timely manner.

When birth parents are no longer together, balancing the needs of the child and the parents often involves managing complex relationships. Young mothers who had resolved these difficulties recognised the need for pragmatism. With less dependence on the views of others, greater insight into past events, and a growing confidence in their own strengths, some were able to place their previous relationships in perspective and work to ensure that past complexities did not overwhelm the present.

Opportunities to foster the development of the skills needed for healthy relationships, including the ability to negotiate and to persist when faced with difficulties, are important components of supportive programmes.

Several found stability in new relationships, further education and training, or in employment where they had a predictable source of income. This reduced some of the uncertainties in their lives, and provided them with a stable sense of identity, and a firmer support base for themselves and their children.

Summary for policy and practice – developing individual factors associated with resilience

- use young mothers' motivation to do well for their babies and to prove to others that they can cope, as a starting point for engagement and support
- help young mothers develop knowledge, skills and attitudes to:
  - develop insights to their pasts, and to move into the future purposefully
  - cope now and in the future with stressful situations and complex relationships, particularly those involving birth fathers
  - address fatalistic attitudes and actively plan for their own and their children's futures
- support the development of their identity as mothers, as well as supporting the development of other identities
- provide opportunities for young mothers to display competence through education, employment and helping others

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Social support factors promoting resilience

While some young mothers saw their determination and drive arising from within themselves, they also acknowledged the importance of social support. They provided many examples of interactions with family and whānau, other adults, and peers who could be depended on to provide a consistent and non-judgmental base for as long as support was needed.

For many of these young mothers, having a skilled adult to help them reflect on their life, ask important questions, discuss resolutions to difficulties, and overcome fatalistic attitudes, enabled them to get on more effectively with their lives.

School-based and community-based services provided other opportunities for social support. Several spoke of the value of such services in providing social contact, access to other young women in similar circumstances, and an important means of realising their future aspirations.

Those who had attended a teen parent unit experienced an intensive support service that comprehensively addressed the educational, social and emotional needs of themselves and their children. They appreciated opportunities for a 'second chance' education in an environment that enabled them to balance their adolescent and parenting roles, positioned them for further education, training and employment, and managed transitions between these.

Factors associated with teenage birth, including early school leaving, lack of antenatal care and family conflict can result in young mothers having little experience of mainstream institutions. Adults who have the skills to engage young people with troubled pasts can help them to overcome distrust, and can assist them to redirect rebellion into a positive force for change.

Opportunities to engage with adults who recognise young people's needs and have the knowledge and skills to address them, are important components of effective service provision. The young women appreciated people who stuck with them over the long haul, and ensured they participated and were retained within services.

Summary for policy and practice – providing social support to develop resilience

- acknowledge past engagements with adults may have been negative, and that change may be slow
- recognise and address the damaging effects of stigma and isolation
- provide non-judgmental support
- ensure young mothers have "a close relationship with at least one caring, competent and reliable adult who recognizes, values and rewards pro-social behaviour" (Resnick, 2000, p 158)
- engage them in activities that promote positive emotional support, connectedness and a sense of belonging
- provide opportunities to give support to and receive support from their peers, including other young mothers
- address needs in relation to information and practical support, such as engagements with Work and Income, parenting programmes, housing and childcare
- recognise some mothers and children have complex and multiple needs, and may require support on a number of fronts, including help from specialist services
- support engagement with birth fathers, when this can have positive results for mother and child
- harness rebellion so that the energy it produces has positive results

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Education, employment and income factors promoting resilience

In the years between the initial and follow-up studies, most of these young mothers had undertaken post-secondary school education or training.

While all of them had received income support at some time of their lives, by 2008 most had at least part-time paid work, and some were economically self-sufficient. Family members, partners, staff in the teen parent unit, and Work and Income case managers were instrumental in helping them understand and access their income support entitlements. Those who saw income support as only a short-term measure,

and who accessed the Training Incentive Allowance to help with the costs of further education and training, positioned themselves well for future employment.

Nevertheless, importantly, many described the importance of their own determination, their desire to succeed, and the need to give themselves and their children a better future. For some, avoiding the stigma of being a sole parent on the DPB was a powerful motivator.

Helping young mothers continue or re-engage with education requires addressing factors that prevent them doing so. Second chance education, such as that provided by teen parent units, encourages educational participation for mothers and children, by supporting re-entry and simultaneously addressing the needs of mother and child.

These are important components of service provision, as young mothers face many barriers to educational participation, including previous disengagement. The availability of childcare on-site or nearby also addresses the needs of their children, and provides quality engagement for those who may not have a family history of participation in early childhood education.

Participants who had attended the teen parent unit appreciated the sense of routine it provided, the educational and life skills they had gained, and the quality of the support. Teaching and early childhood education staff had the professional and personal skills to respond to sometimes challenging behaviour and offered early intervention, stability and continuity at a time when young mothers were vulnerable.

Other staff and visitors to the unit brought a range of professional and life skills, and strong links were made to community services addressing issues such as child and youth health, counselling, income support, housing and budgeting.

The teen parent unit also provided bridging courses to tertiary education and supported young mothers' transition to training and employment.

The comprehensive nature of this service, the intensity of interactions with mothers and children, the availability of trained and qualified staff, and supported referrals to other services, provides an excellent model for other community-based services.

Ensuring young mothers know about their benefit entitlements and are encouraged to use income support payments and allowances to support education, training and child care, makes an important contribution to their sustainable future employment.

Financial support alone, however, did not engage the most vulnerable young mothers who required tailored packages of social support that addressed other barriers to further education and employment.

In common with mothers of any age, these young mothers appreciated flexible employment arrangements that enabled them to benefit from employment without compromising their parenting roles or disadvantaging their children. Family-friendly workplaces helped young mothers enter and remain in employment.

Summary for policy and practice – using education, employment and income to support resilience

- provide supportive school environments that enable pregnant and parenting young women to remain in education, and gain qualifications
- provide opportunities for educational re-engagement by young women who have left school prior to or as a result of pregnancy
- recognise the role of schools in providing a source of caring adults and other forms of on-site support
- recognise the role of work in enhancing health and wellbeing
- support young mothers to balance work and the care of their children
- provide support to access income support entitlements
- use opportunities through young mothers' engagement with government and non-government agencies to promote educational participation, work, and access to health and social services for mothers and children

In conclusion, where policies and programmes help teenage mothers to develop their skills and competencies, provide social support, and encourage further education and suitable employment, resilience can be enhanced. Such an approach helps them to feel strengthened, rather than diminished, by teenage motherhood.

Many participants in this study defy stereotypes of teenage mothers, and show what can be achieved when young mothers are supported to develop their potential.

While most of these young women would not recommend teenage motherhood, their stories show how giving birth as a teenager can be a strengthening experience that can help unlock potential and, with the appropriate resources and support, can result in good outcomes for themselves and their children.

> "Yes, I am a statistic, in the sense that I had my children young. But don't judge me. You don't know me. I'm not sitting on a benefit going nowhere with my life. I work. I care for my children. They're educated. They're healthy. They're happy." (Erica)

> "I just hope that my brothers and sisters see me as a role model and that they can accomplish these things as well, despite the fact that all the odds were against me as a young Māori mother of two children at age 20. The odds were already against me." (Ripeka)

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