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Teenage Parents' Experiences of Parenthood and Views of Family Support Services in Kent

Service Users Report, POSTNATAL

EXECUTIVE SUMMARY

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Kent Teenage Pregnancy Partnership

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Centre for Health Services Studies (CHSS)

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EXECUTIVE SUMMARY

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1 Introduction

This document reports on the second part of a study exploring the views and experiences of teenage parents across Kent. The young people had been interviewed during the third trimester of the pregnancy and were interviewed again approximately one year after the birth of their child. The research was conducted as part of a larger study into teenagers' views and experiences of sex and relationships education, sexual health services and family support services in the county. The research was commissioned and funded by the Kent Teenage Pregnancy Partnership.

The contribution made by this study is to offer insights into the lived experience of Kent teenagers, both female and male, as they deal with becoming parents. By asking them to reflect upon their early experiences of parenthood it is possible to capture both the diversity in circumstances and experiences and to identify areas of commonality that may be of use in the improvement of service provision. Services and professionals can also benefit from the specific insights gained into the way they are experienced by users.

2 Aims

The aims of the study of young parents were:

- To discover whether young parents feel they are adequately prepared for parenthood, and if family support services respond to the changing needs of young families.
- To provide recommendations for service development.

3 Methods and Sample

The research used a qualitative approach, considered more fitting to eliciting information from people that are more difficult to access by quantitative approaches (Popes and Mays, 2000; Denzin and Lincoln, 2003). Semi-structured interviews were used to provide a more personal, confidential and individual approach, employing open-ended questions that defined the area to be explored. 37 participants were recruited to the antenatal study, primarily through midwives, but also through other professionals dealing with pregnant teenagers, such as Connexions staff. Male and female interviewees were sought, resulting in interviews with 30 females and 7 males. All of the respondents were 'white-British' and most had lived in Kent since birth. The age range

of the female section of the sample was 14 to 19 years; the male section of the sample ranged from 16 to 25 years. Four of the females were aged under 16, most were aged 16-17. Most of the interviews were conducted in the teenagers' own homes. Some couples were interviewed together while others were interviewed separately. Consent was sought to record and transcribe the interviews.

Just under half (17) of the young parents were interviewed a second time, approximately one year after the child's birth. Problems maintaining contact during the time between first and second interview explain this fall. Of those successfully contacted, none refused to be interviewed a second time. However, a significant number proved to be uncontactable and were presumed to have moved address or to be reluctant to be re-interviewed.

The postnatal interviews took place between December 2005 and December 2006 at multiple sites within eight of Kent's Primary Care Trusts, including Ashford PCT; Canterbury and Coastal PCT; Dartford, Gravesham and Swanley PCT; East Kent Coastal PCT; Maidstone and Weald PCT; Shepway PCT and Swale PCT. The study received ethical approval from East Kent Local Research Ethics Committee.

4 Key Findings

Professional and Family Support

- For the majority of respondents in our sample, family members were described as providing the most comprehensive and supportive assistance. The needs that could not be met by families tended to be for specific, expert advice and guidance, for example, in accessing benefits and housing, or maternity care.

- The importance of familial support reported by our sample suggests that those young people in more isolated circumstances may find it considerably more difficult to cope.

- Committed professionals were highly valued, especially those with recognisable expertise and with a supportive and open-minded approach to young parents. Professionals who were reliable, attentive and consistent were also highly praised.

- Although the findings demonstrate considerable variation in young parents' definitions of what constitutes good support, our interviewees responded best to those

professionals able to treat them as individuals and to credit them with the aspiration and competence to become caring parents. Conversely, they were most suspicious of and least receptive to intervention by professionals they perceived as holding preconceptions of what teenage parents might be like.

- Overall, the young parents' ability to cope at that point in their lives was striking. In anticipating and experiencing parenthood many of the young people were relatively confident that it would 'come naturally' and that their families would surround them with both practical and emotional support. The nature and potential longevity of this support was not fully ascertained.

Maternity Care

- Experiences of maternity care were variable. Exemplary midwifery care was described in a number of cases, offering the young parents very supportive, practical advice that connected with their own instincts and needs. In such cases, midwives seemed to play a significant role in affirming the young people's identities as good mothers and fathers and in encouraging them to be realistic and to trust their instincts.

- It was evident that the girls were not attended during labour by the midwife with whom they had developed a rapport in the antenatal period. Given the aspiration of policy to provide specially trained midwives to teenage mothers during the antenatal period, it seems a significant problem that this care does not continue into the labour ward.

- It seemed that some young mothers may risk being classed as 'difficult customers' while in maternity care, perhaps because they are fearful and panicking. However, some seemed to have received unsympathetic treatment from hospital staff due to their age and/or, their social background.

- In the immediate post-partum period, there was a strong desire to be close to the source of most support; mothers, other family member and partners. Midwives were spoken of as a source of feeding and other infant-care advice, but in reality, they did not always have the time to provide such guidance.

Young fathers

- From the antenatal study, it was evident that young fathers had little involvement during formal antenatal sessions, nevertheless, just over half of the fathers were present at the

birth. Some girls wanted more help from midwives or more inclusive antenatal classes to involve their partners in the pregnancy and said they would be more likely to attend antenatal classes if accompanied by their partner.

- The two fathers interviewed were as dedicated to the care of their child as were the mothers and were extremely 'hands-on'. Some of the mothers, whose partners were not interviewed, also described the fathers as competent and devoted parents, although some were less reliable and mature.

- Although few of the young mothers could rely on the baby's father for financial support and only a small number continued in a cohabiting couple relationship, there was a strong recognition that a 'child needs a father' but also that the father had a right to see his child. In many instances, the girls demonstrated considerable patience and maturity in fostering the paternal relationship.

Postnatal care

- It seemed that where professional postnatal support worked best it was in harmony with the round-the-clock support being provided by a partner and/or parents, and affirmative of the young parents' positions as 'good' parents. In such cases, midwives seemed to play a significant role in affirming the young people's identities as good mothers and fathers, in encouraging them to be realistic and to 'trust their instincts'.

- Some young mothers were reluctant to make a sudden transition to being 'total mothers', resisting full domestication noticeably by refusing invitations to cookery or childcare classes. In contrast, others embraced their new identity as mothers and full-time carers, enthusiastically finding out more about feeding, child development and often enjoying advising others.

- Many young mothers welcomed the opportunity to meet in an environment exclusively for young parents and therefore free from the perceived risk of judgment from older parents. Such settings (e.g. YAPs groups) provided the chance to form relationships with other mothers going through similar experiences.

- However, some young parents preferred to socialise with existing friendship groups, especially where these included other young parents, or with their partner and family.

5 Conclusions

Qualitative research such as ours can offer insights into significant distinctions and variations amongst teenage parents which may assist in the further tailoring of services to those most in need. In this study, we have found that against the backdrop of a well-supported family environment, respondents were able to develop a resilience and ability to use professional services that did not undermine their own much-valued autonomy. However, we have also identified significant scope for improvement in the provision of services that could make them much more user-friendly and in tune with the needs of many young parents.

Whereas in our study young parents have been found to be aspirational for their children and want them to do better than themselves, they anticipate or have been faced with judgemental and negative attitudes from health and social care agencies. This may induce a defensiveness that helps to explain why it becomes more difficult for young parents to make use of available resources such as child care and state-provided play facilities because they cannot take the risk of experiencing further scrutiny or judgement of their ability to be good parents. In contrast, being surrounded by a family welcoming of a new infant and affirmative of the teenager's transition to adulthood is infinitely more appealing and supportive.

Our study revealed that there are examples of good practice and appropriate service intervention; professionals working in acute and community services are best able to connect with teenage parents by recognising the role of the family in the provision of care, acknowledging young people's skills and aspirations as parents and working alongside their existing informal support networks.

Strengths, Weaknesses and Limitations

The research elicited a rich source of data that covered many aspects of the experience of young parenthood. There are, of course, areas and issues that were not reached by the study. Most significantly, more extreme cases of deprivation and difficulty were not found amongst the sample, quite possibly because individuals in such circumstances would be less settled and therefore less easy to contact for the follow-up interviews. Comparisons between the antenatal and postnatal samples do indicate that the few in the most difficult circumstances (for example, living in hostels or in very poor, temporary accommodation) were not contactable for a second interview because they had moved address without other means of contact. The findings cannot claim to be representative therefore of the fullest possible range experiences, but qualitative lines of inquiry do not seek to achieve representativeness. However, within the postnatal sample are individuals living in a variety of circumstances, including those living with parents, those living independently in local authority housing or privately rented property, married

couples and single mothers and separated couples both involved in parenting. The material circumstances varied from those in part-time work to those studying, those relying on family for financial support and those struggling to make ends meet on their own from work and/or benefits, however, all were reliant to a greater or lesser extent on state benefits for survival.

6 Recommendations

Clear indicators were revealed from the study findings in relation to professional characteristics that constitute a good model of practice:

- Those practitioners most highly praised adopted a non-judgemental and non-prescriptive attitude, were reliable and able to provide expert advice, whether concerning labour and infant care or benefits and housing.

- We propose that flexibility, empathy and sensitivity are more important in raising and maintaining the confidence of young parents in their new role than conveying strict recommendations (for example, regarding breastfeeding and co-sleeping) which may not promote service use in the future.

- It is important that services and professionals are able to recognise that young parents are often very well-supported by their families and sometimes by their partners. Being reluctant to access further support, does not necessarily indicate that young parents such as these are 'hard-to-reach', but rather, that they already feel adequately supported and gain self-worth as parents and young adults from coping for themselves.

- The importance of good care during labour cannot be over-stated, especially as girls such as these may be more wary of professionals and sensitive to negative attitudes. Finding ways of maintaining the confidence of the young mother and her partner or other family members supporting her during labour is something that needs to be addressed.

- This study reinforces the need for good quality accessible antenatal provision for young parents such as that provided at YAPS Groups. These services were important in fostering good relationships that were durable through to the post-natal period. In addition, fathers should be incorporated into the provision of antenatal care, but alongside their partners, rather than in separate, fathers-only groups.

- There is a need for longitudinal research that seeks to understand how models of parenting evolve among well-supported teenage parents, following them through the early years of parenting to discover how patterns of support change, the role professionals play, and the influence this has on child and family development and parenting behaviour.