

Cultivating Capacity: Education, Employment, and Personal Development for Families Impacted by Adolescent Pregnancy

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Introduction:

Teen Parent Family Services is a youth development program that cultivates capacity building for families impacted by adolescent pregnancy. Literature on adolescent pregnancy suggests that adolescent childbearing is associated with a host of adverse consequences for young parents and their children, most notably lower levels of educational attainment, increased reliance on public assistance, low earning potential caused by limited basic skills and job experience. These challenges, which are often conditions of the young person's life before adolescent pregnancy occurs, are only further compounded by the birth of a child. What results, are a young person and family locked into a cycle of poverty, removed from the institutions and systems (school and employment) that enhance future prospects. TPFS is a program with dual program tracks aimed at moving the familial unit towards self-sufficiency. TPFS engages youth in their mid-teens to their mid-twenties. Program participants include young fathers or siblings of adolescent mothers or fathers. Siblings are targeted for service because having a sibling who bears a child in their teen year's places siblings at a higher risk of becoming adolescent parents as well. Each family unit is connected to an adolescent mother who receives state benefits called Temporary Assistance for Needy Families (TANF). As participants, young fathers and siblings are engaged in a suite of prevention, intervention and support programming. This programming is divided into two interrelated service tracks: The Internal Development track addresses participants' personal consciousness, individual development and healing. The External Development track focuses on skill building related to self-sufficiency through educational and employment advancement. Through both tracks program participants are involved in:

- i. A 16 session job readiness course
- ii. GED preparation course, academic tutoring or high school re-enrollment
- iii. Case management utilizing youth development models of care: suspended judgement, self-reflection, personal agency and responsibility, goal setting/future mapping, mentoring, self-esteem work, and communication
- iv. Gender specific weekly support groups: development of problem solving skills, youth led and initiated choices and activities, commitment to personal, family and community health (physical, sexual, mental & emotional), positive (non-violent) peer relationships, healing infused art projects and community involvement, parenting/childcare education
- v. Fieldtrips to artistically, culturally or historically significant events
- vi. Voluntary family counseling

The question evaluated is to determine the impact of TPFS on family capacity building among families who participate in this program and those who are impacted by adolescent pregnancy but do not have programming. The outcome variables analyzed focus on the three predictors of increased future prospects and sustainability, education, employment and personal development by looking at: rate of engagement in education program and intent to continue to attend and/or pursue education; knowledge of job readiness skills and rate of employment; reports of family cohesion; knowledge of healthy coping skills and risky behaviors or patterns; attitudes towards healthy relationships & intent to remain non-violent; and, knowledge of effective communication strategies.

Methods:

The evaluation is being conducted by a team from the University of Illinois. It uses a quasi-experimental design with TPFS serving as the intervention site and a IDHS TPS program, without the additional family services, serving as the comparison site. The TPFS evaluation consists of family members completing the baseline survey as they begin participation in the program and at 4-6 month follow-up time periods. This survey mirrors the AFL core instrument completed by teen mothers. Through the teen mothers mandatory participation in TPS, her family members become eligible for voluntary participation in TPFS. The teen mother upon learning about opportunities for her boyfriend or her siblings or her boyfriend's siblings is referred to TPFS staff for an informational meeting. The teen mother is surveyed at baseline and 4-6 month follow-up dates. At the outset of engagement, family members participate in a needs assessment and suite of programming as described in the introduction. The comparison group, who do not receive services, is

accessed through DHS' other TPS office serving TANF teen mothers. The evaluation team uses the same data collection protocol instituted by program staff at the experimental site. IRB approval was received by the Western Institutional Review Board (WIRB).

Results:

The results sections described the demographic characteristics of the teen mothers, fathers and siblings, and a comparison between teen mothers at a baseline and time 1 follow-up. Teen mothers connected to the intervention (TPFS) and the comparison sites (TPS) were comparable on several demographic variables such as age, living arrangements, race/ethnicity, and grad completion. Non-equivalence was found for number of hours working per week (5 hours vs. < 1 hour). A comparison between intervention and control group found statistically significant difference using Repeated Measures Analysis of Variance, where mothers report higher levels of father-child interaction (playing peek a boo, reading stories, and visiting relatives) $F(1,45) = 4.55, p = .03$. By contrast, a similar Repeated Measures Analysis of Variance for mother reports of their own parent-child interaction actually showed a decrease from between the intervention and comparison group over time $F(1, 45) = 3.574 (p < .06)$.

The fathers/partners who have participated in TPFS are African American (95%) and unemployed (86%). For those who have not completed high school, 100% want to get their GED or more education and view education as important (95%). Almost all fathers/partners report providing some financial support (95%) to the mother and child, and 84% report providing emotional support. Seventy-nine percent of fathers/partners believe that their involvement with their child's mother will result in a better job of raising their child. Seventy-nine percent of fathers/partners believe that their involvement with their child's mother will result in a better job of raising their child. The siblings participating in the TPFS project are youth of color with 67% being female. They are largely unemployed (89%) due to age, inexperience or skill level. Seventy-six percent of siblings are enrolled in school. And 100% of the siblings have high aspirations for their education (100% view education as important).

Discussion:

Working with fathers showed significant increase in the degree to which they interact with their child. The decrease in the mother's report of parent-child interactions is a surprising pattern, but may reflect changes in the way other family members are becoming involved with the child (e.g., fathers) or increase demands on the mother time in school or work. Fathers and siblings of teen mothers are also living in a disadvantaged environment with limited options and opportunities. Nonetheless, siblings and fathers appear to have high levels of aspirations and expectations, but will require continuous involvement and nurturing with internal and external resources and supports.

Implications:

The TPFS program is designed to assist teen mothers, extended family members, and ultimately their children to improve the quality of life and opportunities through education, employment, and personal development programs and services. This preliminary study showed that fathers will increase the frequency in which they interact and become involved with their child. The mothers decrease in parent-child interaction requires further investigation. The majority of siblings participating in the TPFS program appears to recognize the importance of education and employment skills, but is struggling and need supports to reach these aspirations. The practice-based evidence indicates that, for youth impacted by adolescent pregnancy, it is incumbent to first engage participants in services focused on their personal internal development. Cultivating self-sufficiency skills (education and employment advancement) is dependant on and secondary to the development of social/emotional health and skills. The duration needed to enhance future prospects and positively affect family climate and cohesion is lengthy. Programs must withstand the challenge of episodic participation and immediate focused orientations in order to positively impact families. Because youth have high aspirations and demonstrate (through skill building) their capacity for resiliency, families impacted by adolescent pregnancy can circumnavigate the adverse situations they find themselves in.

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