

Journal of Family Strengths

Volume 15

Issue 1 *Underserved Populations in the United States: Research, Response and Resilience*

Article 11

12-17-2016

The Strengths Perspective: Providing Opportunities for Teen Parents and their Families to Succeed

Nila Ricks

Texas Woman's University, nricks@twu.edu

Follow this and additional works at: <https://digitalcommons.library.tmc.edu/jfs>

Recommended Citation

Ricks, Nila (2016) "The Strengths Perspective: Providing Opportunities for Teen Parents and their Families to Succeed," *Journal of Family Strengths*: Vol. 15 : Iss. 1 , Article 11.

Available at: <https://digitalcommons.library.tmc.edu/jfs/vol15/iss1/11>

The *Journal of Family Strengths* is brought to you for free and open access by CHILDREN AT RISK at DigitalCommons@The Texas Medical Center. It has a "cc by-nc-nd" Creative Commons license" (Attribution Non-Commercial No Derivatives) For more information, please contact digitalcommons@exch.library.tmc.edu



Each year approximately 750,000 teens become pregnant in the U.S. Although teen birth rates have dropped drastically and remain at a historical low, racial disparities persist. In 2012, African American and Hispanic teen birth rates (46.3 and 43.9 per 1,000 births, respectively) were more than two times higher than rates for Caucasian teens (20.5 per 1,000 births; Martin, Hamilton, Osterman, Curtin, & Matthews, 2013). In 2012 the national teen pregnancy birth rate was 29.4. Teen pregnancy is not likely to end; therefore, professionals who work with this unique population must implement positive practice methods. Social work clinicians and school social workers frequently encounter teen parents in their practices, and despite the negative stigmas and stereotypes, teen parents can and do succeed. Currently, teen pregnancy literature and practice emphasize the problems associated with teen pregnancy; the purpose of this article is to provide recommendations to social work clinicians and school social workers about strength-based interventions to implement with teen parents and their families. In addition, a comprehensive overview of the strengths perspective is provided.

The Focus of Teen Pregnancy and Parenting

Teen pregnancy and parenting are often viewed as social, economic, and health problems, and the majority of teen pregnancy and parenting literature is focused on the negative consequences suffered by teen parents, their children, and society. Teen parents are more likely to drop out of high school, rely on public assistance, and experience subsequent pregnancies (Beers & Hollo, 2009). When teenage mothers drop out of high school they jeopardize future success, because without a high school diploma it is extremely difficult to find employment that can adequately support a family. Becoming a teen parent also decreases the odds of escaping poverty. In addition, teen fathers have a 25% to 30% lower probability of graduating from high school than peers who are not fathers (Covington, Peters, Sabia, & Price, 2011; Fletcher & Wolfe, 2012).

Children born to teen parents are more likely to have developmental and academic delays, and often have literacy difficulties and significantly lower standardized test scores. They are 50% more likely to repeat a grade and are less likely to complete high school than children born to non-teen parents (Jutte et al., 2010; National Campaign to Prevent Teen and Unplanned Pregnancy, 2010). Children born to teen mothers are more likely to be born prematurely and/or with low birth weights, and are at higher risk of dying in the perinatal period (Beers & Hollo, 2009; Centers for Disease Control, 2011; Hoffman & Maynard, 2008; Jutte et al.,

2010). In addition, teen childbearing cost taxpayers billions of dollars each year (Hoffman & Maynard, 2008).

The Building Blocks of the Strengths Perspective

Although it is imperative to highlight the consequences of teen parenting, it is equally important to focus on teen parents' strengths and realize that strengths are often birthed in the midst of adversity (DeFrain & Asay, 2007). Although teen parents are highly stigmatized, for many, becoming a mother helps mold a new identity, one of strength in being a good mother (Baker, 2009; McDermott & Graham, 2005). Social workers play a vital role in the lives of teen parents. However, implementing a strengths perspective in practice enables social workers to be more responsive to the unique needs of teen parents. Teen parents possess strengths; they are motivated to be good parents, they are ambitious, and they possess high expectations to live successful lives, and employing a strengths perspective in practice will help identify and structure practice around those strengths.

In sharp contrast to the medical model, the strengths perspective assumes that all individuals, families, and communities have internal and external resources, regardless of their situations. These resources serve as strengths.

According to Saleebey (1992), the strengths perspective is built on nine assumptions.

1. All people, no matter how problematic their situations, possess strengths that can be marshalled to improve the quality of their lives.
2. All environments, even the most bleak, contain resources that can be utilized for problem solving and life enhancement.
3. The upper limits of a person's capacity to grow and change are unknown.
4. Although potentially devastating, trauma, abuse, illness, and other adversities can be sources of challenge and opportunities for growth.
5. Client motivation is fostered by a consistent emphasis on strengths as defined by the client.
6. Empowerment can be conferred by supporting self-efficacy and personal power, choice, control, and commitment.
7. Professionals are not experts on clients' needs, but collaborators in empowerment.
8. Discovering clients' strengths requires a process of cooperative exploration by clients and professionals. Topics for exploration

include what clients want for their futures and abilities they have shown in the past and present.

9. Focusing on strengths helps practitioners discover clients' abilities and how they have managed to cope and survive, even in the most challenging circumstances. This is empowering for clients and also turns practitioners' attention away from the temptation to blame the victim or otherwise pathologize the situation.

These core assumptions set the strengths perspective apart from other theoretical perspectives. Resilience is the ability to succeed despite adversity and a distinct feature of the strengths perspective is that individual resilience is recognized (Grant & Cadell, 2009; Scerra, 2011). Viewed from a strengths perspective, the important role of the environment, as it relates to individuals' abilities to overcome their circumstances, is recognized (Saint-Jacques, Turcotte, & Pouliot, 2009). Another advantage of the strengths perspective is versatility; it can be incorporated easily with a variety of practice interventions across multiple disciplines. In addition, the strengths perspective can be implemented to address diverse problems, including substance abuse, poverty, mental illness, disability challenges, and neighborhood and community concerns. Although the strengths perspective is not a new perspective, it has been applied to teen parents and their families only in limited research studies. Implementing the strengths perspective with teen parents affords them an opportunity to leverage their strengths and encourages practitioners to marshal the resources necessary to help teen parents achieve their goals.

Finding Strength and Academic Success Despite Stigmatization

Focusing on strengths includes acknowledging that teen parents value their educations. In fact, research revealed that after becoming parents students expressed a renewed commitment to their education and recognized how importance it was to their futures; they were motivated to succeed (Brosh, Weigel, & Evans, 2007; Duncan, 2007; Sadler et. al., 2007; Smithbattle, 2007, 2009; Zachry, 2005). Moreover, some teen parents who dropped out of high school prior to becoming pregnant returned to school after giving birth as a result of renewed commitment to their education. Teen parents are resilient. Not only do some teen parents graduate from high school, they also attain economic stability (Arai, 2009; Furstenburg, 2007; Gregson, 2009; Moloney, Hunt, Joe-Caidler, & Mackenzie, 2011; Rofle, 2008; Smithbattle, 2007; Werner & Smith, 2001). Many teen mothers rise to the challenges of motherhood and are able to

navigate motherhood successfully with a sense of pride and accomplishment (Moloney et al., 2011).

For some, the experience of a teen pregnancy is viewed as an opportunity for transformation, self-development, and personal growth. The mere act of becoming a parent compels and motivates some teen parents to stop participating in risky, unhealthy, and delinquent behavior and recommit to their education (Hope, Wilder, & Watt, 2003; Hotz, McEvivory, & Sanders, 2005; Hunt, Joe-Laidler, & Mackenzie, 2005; Kendall, 2005; Pillow, 2004). This is depicted by a quote from a teen mom in Smithbattle's (2007) study,

Before I got pregnant, I did not care if I was foolin' around. When I was in ninth grade, I didn't get F's or anything, but I got like Bs and Cs. And then I got pregnant and then I started getting straight As. And this year I got straight A's too. (p. 363)

This mother explained the importance of changing so she could attend college and take care of her son. Another mother stated, "I know that I have bigger priorities now than I did before I was pregnant. And it makes me think more than I used to and take things more seriously now" (p. 355). Another teen mom from the same study took a leave of absence after having her baby changed her perspective on education. She explains,

I have to go back to school. That's the only way I am gonna be able to make any money. I look at it this way: If I was to drop out of school, I'd be workin' full-time jobs the rest of my life. Whereas, if I finish high school, I am goin' to college. I'll make better income so I'm not struggling all the time. So I have to go back to school. (Smithbattle, 2007, p. 355)

Contrary to stereotypes, these statements reveal that teen parents have a desire to be good parents and provide positive and stable futures for themselves and their children. These statements also illuminate the fact that teen parents can make a distinct connection between education and future economic stability. Teen parents muster the strength to succeed despite the odds stacked against them. They are fully aware that completing high school is a prerequisite to college, which is the vehicle to establishing a career and economic stability (Sadler et al., 2007).

All People Have Strengths, Including Teen Parents

Teen parents have desires and are motivated to succeed. School social workers possess generalist practice skills to engage teen parents in structured conversations to elicit their strengths: What are you good at? What are your interests? For example, one teen parent may be a great writer who uses writing as a coping mechanism. With that knowledge, the school social worker can ensure that teen mother enrolls in creative writing courses. Once the teen parent has identified strengths and interests, they are clearly identified as strengths. Teen parents are determined, courageous, strong, and possess great resilience; however, they have to face the daunting task of negotiating the competing demands of work, family struggles, childcare, academics, and transportation, as well as a host of other barriers. Securing adequate childcare is a major barrier to staying in school after the birth of a child. These unique barriers often delay, thwart, or disrupt teen parents' academic aspirations.

All Environments Contain Resources, Including Schools

In response to the host of barriers that teen parents encounter, several states have risen to the challenge by providing alternative teen parenting support programs. These alternative programs are generally offered at a location separate from the teen's home high school. Many of these programs provide comprehensive services such as child development and parenting education, transportation, and childcare, in addition to other supportive services. These services provide teen parents with a positive and supportive learning environment and access to ongoing support. These services also serve as dropout prevention because they successfully ameliorate some of the barriers that teen parents encounter; high school graduation rates among teen parents have increased accordingly (Amin, Browne, Ahmed, & Sato, 2002; Hellenga, Aber, & Rhodes, 2002; Sadler et al., 2007; Smithbattle, 2007, 2009). In essence, these programs serve as protective factors for teen parents.

The school environment contains several resources that can be used for problem solving and life enhancement. For many teen parents, school is an escape from troubling situations and serves as a supportive environment. A supportive school environment is one in which positive relationships between teachers and students, students and peers, and home and school are promoted. These relationships can be sources of support and strength.

Supportive school environments have had a significant positive impact on teen parents. Salder et al. (2007) found that high-risk teen mothers who attended alternative school-based programs had lower rates

of subsequent births, increased social support, and higher high school continuation and graduation rates. The children of these teen parents displayed improved positive child development and parent-child interaction. In addition, mothers who were the recipients of the alternative supportive program demonstrated improved parental competence, that is, they learned new skills to respond more appropriately to the needs of their children. Research has shown that comprehensive teen parenting support services are effective and beneficial to teen parents. Implementation of these services is an opportunity to help teen parents improve their circumstances (Sadler et. al., 2007; Smithbattle, 2009).

Maintain a Consistent Emphasis of Strengths

As teen parents journey towards their quest for success, social workers are instrumental in reminding them that they can succeed and praising them for their efforts, for example, attending school, taking care of their children, and completing homework. This type of support fosters positive attitudes, even when teen parents may not categorize their behavior as successful. When teen parents become overwhelmed and feel that they are not reaching their goals, practitioners and school personnel can help them reassess their goals and strategies. This will also empower them to view challenges as opportunities for growth.

Empowerment Comes from Self-Efficacy and Personal Control

School social workers foster self-efficacy and personal control by promoting academic self-determination and competence (Harvey, 2007; National Association of School Psychologists, 2007). School social workers capitalize on teen parents' drive and motivation by assisting them with goal development, implementation of interventions that will facilitate goal obtainment, and obtaining the resources to achieve goals and realize aspirations. For example, a teen parent with a goal of completing high school and attending college, the social worker helps the teen set realistic objectives, manage time appropriately so that homework can be completed and school regularly attended, prepare to take the SAT, complete college applications, and so forth. The resources may include access to a tutor, childcare, transportation, or a life skills class to accomplish these goals.

Teen parents are aware of the statistics and the stigmas that have been imposed on them. Working from a strengths perspective highlights their capabilities and enhances their self-efficacy to achieve their goals. Although the journey to self-improvement might have originated in a challenging experience, the fact that teen parents are motivated and

committed to improve and change should be acknowledged and supported.

Family Work with Teen Parents

The initial response to a teen pregnancy among family members is often disbelief, sadness, and a host of mixed reactions. The challenges associated with teen parenting are faced not only by teen parents; the entire family system is affected and transformed by a teen pregnancy. The additional pressures and responsibilities associated with teen parenting can be devastating, especially when compounded by existing obstacles and hardships. These extremely stressful challenges can cause a breakdown in the family system. In order for teen parents and their families to be successful, practitioners must move from deficit-based practices to strengths-based practices. The family is a strong entity possessing knowledge, capabilities, and resources that serve as strengths to help teen parents cope with and overcome their challenging situations. However, for many families, these challenges might persist and they may need assistance learning effective coping techniques. However, regardless of their circumstances, all families have strengths (DeFrain & Asay, 2007).

One of the first critical steps in working with teen parents and their families is to conduct a thorough assessment. Herman (2010) recommended the following topics be addressed when assessing teen parents and their families:

- how each family member feels about the pregnancy;
- individual, family, and community resources;
- how the family has dealt with stress in the past;
- the current concerns of each family member with respect to the teen pregnancy; and
- additional strengths and sources of support.

To engage family members, the practitioner should use empathic skills similar to those championed by Carl Rogers (1951): genuineness, unconditional positive regard, and respect for the client. Applying these skills will provide a safe environment in which family members can share. Social workers can also encourage participation by eliciting stories and personal narratives of the situation from each member (Early & GlenMaye, 2000; Saleeby, 2006). For example, the social worker asks each family member to discuss how the teen pregnancy has affected his or her life.

Family assessment sessions provide a great opportunity to identify individual and family strengths. However, identifying their own strengths can be a daunting task for families, because they often become so

overwhelmed by, and entrenched in, their problems that they fail to recognize and mobilize their strengths. Social workers play a vital role in facilitating the identification of individual and family strengths. This process entails an intentional conversation must be held that involves taking inventory of strengths: relationships, attributes, processes, and resources that help families cope and succeed in the face of adversity (Asay & DeFrain, 2012). Social workers also help bring strengths to the surface and help teen parents and their families understand how to use these strengths (DeFrain & Asay, 2007). One possible exercise would be to have each family member write down three strengths and share them with the family. The social worker could also assign homework for parents in which they write a letter identifying their son or daughter's strengths. Illuminating these strengths helps the family gain awareness of them.

De Shazer (1991) identified techniques practitioners can use to help families identify their strengths. First, the clinician asks each member to identify steps and approaches that the family has taken to rectify or improve the situation. Family members of a teen parent might identify tasks such as helping prepare bottles, teaching the teen parent how to parent effectively, caring for the baby while the teen parent attends school, obtaining a job, providing positive words of affirmation, bonding with the family, or telling jokes. These efforts reflect the enormity of the family's perseverance and commitment to cope with and improve their situation. Acknowledging and affirming their efforts to cope with their situations empowers families (Bell-Tolliver, Burgess, & Brock, 2009). These tasks are then translated into strengths that serve as resources to help cope with and improve the situation, because the family may not view these tasks as strengths. The family often serves as a source of emotional and financial support for teen parents. It is in the midst of this struggle that teen parents recognize their family support as source of strength and an important aspect of their lives (Collins, 2010).

The second step to elicit strengths is to ask family members to articulate their visions for the future. For instance, family members of a teen parent might report that they hope the teen parent graduates from high school and attends college, the baby has appropriate child development skills, the teen parent maintains gainful employment and is self-sufficient, the family has improved communication skills, they become a stronger family unit, and so forth. These visions then become the foundation on which goals are developed. The clinician implements specific interventions and works diligently with the family to ensure that these goals are met, all the while focusing on family strengths.

Finally, the practitioner assists the teen parent and the family in developing a plan of action. The plan should consist of a detailed list of strengths, goals, and the resources necessary for goal attainment. In addition, the specific tasks of each member are outlined: who watches the baby while the teen parent works, who takes the baby to the sitter when the teen parent gets on the school bus, and so forth. Each family member has a vital role to fill throughout the process to ensure the success of individual members and the entire family system. It is also imperative to include extended family and other network support for the teen parent. The practitioner's responsibility is to marshal the resources necessary for the family to achieve their goals and to coordinate services among multiple service providers.

These techniques help family members learn from and reframe their situation and gain insight. Knowing that a comprehensive plan is in place encourages the family to persevere in the midst of their challenges. When families are resilient, they become hopeful, empowered, and motivated to work diligently to overcome their challenges.

Applying the Strength Perspective with Teen Parents

Teen parenting is complex; therefore, practices addressing this unique population must be multifaceted, holistic, and creative (Deslauriers, Davault, Groulx, & Sevigny, 2012; Kiscelica, 2008). In addition, practice with teen parents must be flexible; traditional services must be adapted to meet the distinctive needs of teen parents (Dallas, 2009). For example, services may need to be scheduled during times that are more convenient for teen parents, such as evenings and weekends. Agencies might also need to adopt technology approaches when working with teen parents. The use of the Internet, social media, and text messaging are viable alternatives to conventional practices that have increased program participation among teen parents (Scott-Johnson, Gross, & Browne, 2010; Seed et al., 2009; South-Paul, Ncube, Lin, Nowalk, & Kagwima, 2014). The following section includes a discussion about specific practice interventions to implement with teen parents that reinforce the strengths perspective. All of these interventions promote hope, and enable teen parents to gain new insight, access to resources, motivation, and resilience in the face of adversity, thereby providing opportunities for teen parents to succeed.

Support Groups

The strengths perspective can be applied easily in group therapy with teen parents. For some, teen pregnancy results in isolation due to attendance

at alternative schools, prior peers moving on, and changes in their focus on life. Teen parents face a plethora of unique challenges, and a group format is a setting in which they might learn to better cope with their situations. Group may provide teen parents with motivation and social support that can lead to empowerment (Deslauriers et al., 2012; Furman, Bender, & Rowman, 2014; Rebmann, 2006). A group format offers teen parents ongoing support with other teens who understand their situations. Incorporating a narrative therapy into group work helps elucidate strengths (Deslauriers et al., 2012). Teen parents can share stories about their experiences as teen parents, thereby providing mutual support. The group becomes a viable resource and a safety zone in which strengths may be recognized and cultivated. For example, teen parents can take turns discussing their experiences as teen parents, their hopes and dreams, their challenges, and their successes. After each story, the social worker asks each group member to identify strengths they recognize in their group member's story. Once these strengths are illuminated, teen parents feel empowered, even in the midst of their challenges.

In addition, groups provide teen parents with knowledge and information about resources. A psychoeducation group that focuses on life skills, problem solving, effective parenting, child development, high school completion, and career exploration provides vital information and resources with which teen parents can accomplish their goals. This component of group work provides specific information to address the unique needs that teen parents may not have access to otherwise. Group work is also a great platform for former teen parents to share their experiences and testimonials of triumphs over adversity. This instills hope, confidence, and motivation for teen parents who might feel hopeless or unmotivated.

While group sessions are beneficial to teen parents, they are also a viable intervention for other family members, especially parents of teen parents. Special sessions for families can provide a platform to discuss the teen pregnancy with other families who are experiencing similar stressors.

Providing special accommodations to address the myriad of challenges that impact teen parents' participation, such as, childcare and transportation prior service delivery will promote a convenient, stress-free experience. Providing these resources will help eliminate the barriers that generally prevent families from attending group sessions.

Sports Activities

Including sports activities as interventions is an adaptation of traditional interventions. It is an effective method to engage teen fathers, who are often overlooked when addressing the teen pregnancy phenomenon. After a friendly game of football, basketball, or baseball, practitioners can facilitate a discussion between teen fathers, former teen fathers, and adult fathers in the community about: their perspectives on fatherhood, their experiences as fathers, how to become better fathers, future goal attainment, overcoming obstacles, promotion of healthy behaviors, and other topics that are pertinent to fatherhood. It is also important that practitioners and the other fathers praise the teen fathers for their efforts by letting them know that they are doing a good job and inquiring about any resources the teen fathers may need.

Sports provide a great forum in which teen fathers can discuss their experiences as parents and still feel masculine (Deslauriers et al., 2012; Kiselica, 2008). Playing sports also eliminates or reduces the stigma that accompanies seeking help; teens are not made to feel like they have a problem. Instead, there is mutual support among fathers and a focus on fathers' strengths. This provides the support and resources necessary to be good fathers despite the challenges. In addition, teen fathers gain a strong commitment to fatherhood (Deslauriers et al., 2012; Kiselica, 2008).

Positive Youth Development

The premise of positive youth development (PYD) is that youth should gain confidence, trust, knowledge, and a host of skills in preparation for becoming happy, healthy, and self-sufficient adults. Another premise of PYD is that consistent interaction with at least one adult who genuinely cares has a positive impact on youth (U.S. Department of Health and Human Services, n.d.). PYD also focuses on health promotion and encourages youth to make healthy choices (Lerner, Lerner, & Almerigi, 2005; Vo & Park, 2009; Youngblade et al., 2007). PYD takes on a variety of forms that involve youth, parents, teachers, schools, businesses, community leaders, and policymakers, all of whom work collaboratively to improve the lives of youth and their families.

PYD with teen parents requires a comprehensive approach in order to provide a strong foundation to address the unique needs of teen parents. PYD provides teen parents with opportunities to succeed by harnessing their strengths, providing a positive environment in which they can thrive, and meeting their needs through job training, education opportunities, mentoring, and other pertinent services. PYD also provides chances for teen parents to exercise natural strengths that, due to a lack

of resources in their environments, they may not have opportunities to apply. In addition, the goal of PYD with teen parents is to reduce subsequent pregnancies and HIV/AIDS (Desiderio et al., 2010). Effective PYD with teen parents embraces five core components: self-sufficiency, housing stability, financial stability, successful and engaging parenting and attachment, and healthy relationships (Family and Youth Services Bureau, n.d.). Implementation of these components increases teen parents' success

Effective positive youth development with teen parents also includes mentoring. Mentoring is a cost-effective tool used to improve economic, psychosocial, and social outcomes for teen parents and their children (Koller et al., 2013, South-Paul et al., 2014). Mentors serve as resources to help teen parents overcome barriers, adjust to parenting, and develop educational and career goals (Koller et al., 2013). Adult mentors provide hope, encouragement, nurturance, and guidance. These close, positive, and healthy relationships with adults build resilience that allows teen parents to overcome their adversities. Involvement in a mentoring program is a crucial component that has been found to increase participation in prevention programs and decrease subsequent births among teen parents (Chablani & Spinney, 2011; Katz et al., 2011; Koller et al., 2013; South-Paul et al., 2014; Stravrakos & Summerville, 2009). This systematic approach allows the community to come together and help young parents for the betterment of the community.

Cultural Sensitive Practice

Although teen pregnancy rates remain at an historic low, racial disparities persist. Black and Hispanic teen birth rates are disproportionately higher than White adolescents. As a result, practitioners may be faced with a myriad of cultural challenges when working with minority teen parents. The purpose of implementing culturally sensitive practice is to effectively engage minority teen parents and increase program participation. Program participation increases program exposure, thereby increasing the likelihood of goal achievement (Mistry, Jacobs, & Jacobs, 2009). The following are recommendations for practitioners to consider when implementing culturally sensitive services with minority teen parents.

Recommendation 1: provide cultural sensitivity training for staff in order to increase awareness of client cultural values and beliefs (Harrison & Franklin, 2009; Etowa, 2012; Lewin, et al., 2015; Mistry, et al., 2009; National Association of County & City Officials, 2009; Stampfli, 2008). Implementing these values and beliefs in practice impacts program participation. For example, Harris and Franklin (2009) incorporated a Mexican-American value of preparing and eating meals together. Teen

parents in their group ate lunch together, which resembled time spent with their families. Culturally sensitive service delivery increased program participation, which directly impacted school performance. Teen moms demonstrated an 8% increase in school attendance and a 2-point increase in GPA. These results are encouraging and exemplify the profound impact of culturally sensitive practice on client outcomes.

Recommendation 2: ensure that staff members speak the language of their clients. Bilingual staff members increase overall program participation because the communication barrier is eliminated (Mistry, et al., 2009; National Association of County & City Officials, 2009; Harrison & Franklin, 2009). Speaking the client's language also encompasses program content and material. Lewin, et al., (2015) found that teen parents were actively engaged after staff implemented explicit cultural adaptations. The minority teen parents in their study resided in violent, low-income, urban, communities and the program videos were not culturally sensitive to the lived experiences of these teen parents. Therefore, staff decreased the video usage and employed role-plays that were reflective of their real life situations. As a result, communication between teen parents and group facilitators increased. In addition, this cultural adaptation enabled the teen parents to practice and apply program material to their real life situations.

Recommendation 3: consider the natural environment as a viable service delivery option (Lewin, et al., 2015; National Association of County & City Officials, 2009; Stampfli, 2008). Home visits allow the social worker to interact one on one with teen parents in the privacy of their own environment. In addition, home visits eliminate transportation barriers.

Recommendation 4: involve the parents and family members of teen parents in practice (Etowa, 2012; Lewin, et al., 2015). Many minority teen parents rely heavily on their family for support. Involving families in practice provides an additional source of strength and promotes resilience.

Implications for Policy and Research

Self-efficacy, power, and control are some of the building blocks on which the strengths perspective is based. Unfortunately, current welfare policies make it extremely difficult for teen parents to gain power and control through sufficient economic mobility. Temporary Assistance to Needy Families (TANF) provides financial assistance for disadvantaged families and one of its main goals is to wean families from assistance by promoting employment. In order for teen parents to receive TANF benefits, they must be enrolled and regularly attending educational program, which encourages high school completion. However, after a mother completes high school, to remain eligible for benefits she is required to participate in

20 to 30 hours of work per week. After completing high school, recipients can participate in 12 months of vocational educational training. The vocational educational regulation limits access to post-secondary education for TANF recipients, particularly among young mothers. Under these guidelines, teen mothers are forced to choose vocational training over a college education. Mothers who take this route are inadvertently led into mediocre, unskilled employment positions and left to pursue a college education on their own.

Many of the young mothers receiving TANF benefits cannot afford post-secondary education expenses and remain in poverty due to the low wages unskilled employment positions command. Consequently, this cycle is often perpetuated from one generation to the next. Extending the educational training guidelines to include education towards an associate's or bachelor's degree would provide more career options. If TANF adopted academic- and career-oriented guidelines, more teen mothers and young mothers who aspire to attending college would have an opportunity to do so. It is virtually impossible for teen parents to obtain self-efficacy and power when policies fail to provide adequate opportunities for educational achievement.

Strictly enforcing Title IX of the Education Amendments of 1972 would prevent disenfranchisement of teen parents. Among other things, Title IX guarantees teen parents equal educational opportunities by prohibiting discrimination against students based on their gender or parenting status. This includes access and opportunities for college preparation. However, teen parents continue to experience discrimination due to subtle pressures to attend alternative schools, unexcused absences, and other school practices and policies that undermine their educational aspirations and motivations (Smithbattle, 2007). It is imperative that practitioners advocate for, and ensure that, teen parents in traditional and alternative schools receive an education equivalent to that provided to their non-parenting peers, and have access to the same services, such as SAT/ACT preparation and testing, college visits, assistance with the college application process, student and parental information sessions, scholarship information, and college fairs. Teen parents deserve an opportunity to experience a positive educational environment. Even in the face of discrimination and a myriad of challenges, teen parents can be resilient and continue to strive for success.

With respect to research, more research and evaluation needs to be conducted on evidenced-based programs that effectively help teen parents succeed. Replicating these types of programs will promote opportunities for more teen parents and their families to succeed by

providing resources, support, and skills for teen parents so that they may succeed in the face of adversity and achieve the goal of being great parents.

Conclusion

The majority of teen pregnancy research has focused on the consequences and deficits associated with teen pregnancy, rather than the strengths of teen parents and their families. Such a narrow and negative focus can further exacerbate the difficulties these parents encounter. While teen parenting can be extremely challenging, teen parents can and do overcome these challenges. Strengths are often developed in the midst of adversity, and after becoming parents teens find the strength to refocus their lives, return to school, and meet the high expectations they have of themselves. Clinicians, school social workers, and community members play a pivotal role in cultivating opportunities for teen parents to succeed.

Adopting a strengths perspective is an effective method to help teen parents reach beyond the breaking point and meet challenges while becoming better, stronger, and wiser parents and productive members of society. When given the proper opportunity and resources, teen parents can and do succeed.

References

- Amin, R., Browne, D.C., Ahmed, J., Sato, T. (2006). A study of an alternative school for pregnant and/or parenting teens: Quantitative and qualitative evidence. *Child and Adolescent Social Work Journal*, 23(2), 172-195.
- Arai, L. (2009). What a difference a decade makes: Rethinking teenage pregnancy as a problem. *Social Policy and Society*, 8, 171-183.
- Asay, S., & DeFrain, J. (2012). International family strengths model. Retrieved from <http://congresomundial.es/wcontent/uploads/Sylvia-Asay-The-International-Family-Strengths-Model-ENGLISH.pdf>
- Baker, J. (2009). Young mothers in late modernity: Sacrifice, respectability and the transformative neo-liberal subject. *Journal of Youth Studies*, 12, 275–288.
- Beers, L. A., & Hollo, R. E. (2009). Approaching the adolescent-headed family: A review of teen parenting. *Current Problems in Pediatric and Adolescent Health Care*, 39, 216-233.
- Bell-Tolliver, L., Burgess, R., & Brock, L. J. (2009). African American therapist working with African American families: An exploration of the strengths perspective in treatment. *Journal of Marriage and Family Therapy*, 35 (3), 293-307.
- Brosh, J., Weigel, D., & Evans, W. (2007). Pregnant and parenting adolescents' perception of sources and supports in relation to educational goals. *Journal of Child and Adolescent Social Work*, 24, 565-578.
- Chablani, A., & Spinney, E.R. (2011). Engaging high-risk youth mothers into effective programming: The importance of relationships and relentlessness. *Journal of Family Social Work*, 14(4), 369-383.
- Collins, B. (2010). *Resilience in teenage mothers: A follow-up study*. Retrieved from <https://www.msd.govt.nz/documents/about-msd-and-our-work/publications-resources/research/sole-parenting/resilience-in-teenage-mothers.pdf>
- Covington, R., Peters, H. E., Sabia, J. J., & Price, J. P. (2011). *Teenage fatherhood and educational attainment: Evidence from three cohorts of youth*. Retrieved from <http://resiliencelaw.org/wordpress2011/wp-content/uploads/2012/04/Teen-Fatherhood-and-Educational-Attainment.pdf>
- Dallas, C.M. (2009). Interactions between adolescent fathers and health

- care professionals during pregnancy, labor, and early postpartum. *Journal of Obstetrics, Gynecology, and Neonatal Nursing*, 38, 290-299.
- DeFrain, J., & Asay, J. M. (2007). Strong families around the world: An introduction to the family strengths perspective. *Marriage & Family Review*, 41 (1/2), 1-10.
- Desiderio, G. Max, J., Scott, M., Ikramullah, E., Barry M., and Manlove, J. (2010). *Bricks, mortar, and community: The foundations of supportive housing for pregnant and parenting teens: The core components of supportive housing*. Healthy Teen Network and Child Trends. Retrieved from http://www.healthyteennetwork.org/index.asp?Type=B_PR&SEC={2AE1D600-4FC6-4B4D-8822-F1D5F072ED7B}&DE={97475831-0B51-4319-8C3C-D37F9339A975
- Deslauriers, L., Devault, A., Groulx, A., & Sevigny, R. (2012). Rethinking the services for young fathers. *Fathering*, 10(1), 66-90.
- Duncan, S. (2007). What's the problem with teenage parents? And what's the problem with policy? *Critical Social Policy*, 27, (3), 307-334.
- Early, T. J., & GlenMaye, L. F. (2000). Valuing families: Social work practice with families from a strengths perspective. *Social Work*, 45(2), 118-130.
- Etowa, J. B. (2012). Becoming a mother: The meaning of childbirth for African-Canadian women. *Contemporary Nurse*, 41(1), 28-40.
- Family and Youth Services Bureau. (n.d.). *Working with pregnant & parenting teens tip sheet*. Retrieved from <http://www.nasponline.org/resources/principals/schoolresiliency.pdf>
- Fletcher, J. M., & Wolfe, B. L. (2012). The effects of teenage fatherhood on young adult outcomes. *Journal of Population Economics*, 25, 201-218
- Furman, F., Bender, K., & Rowman, D. (2014). *An experiential approach to group work*. Chicago: Lyceum Books.
- Furstenburg, F. F. (2007). *Destinies of the disadvantage: The politics of teen childbearing*. New York: Russell Sage Foundation.
- Grant, J.G., & Cadell, S. (2009). Power, pathological worldviews, and the strengths perspective in social work. *Families in Society*, 90(4), 425-430.
- Gregson, J. (2009). *The culture of teenage mothers*. Albany, NY: State University of New York Press.
- Harrison, M. B., & Franklin, C. (2009). Helping adolescent mothers to achieve in school: An evaluation of the taking charge group intervention. *Children & Schools*, 31(1), 27-34.
- Harvey, V.S. (2007). *Schoolwide methods for fostering resiliency: Support*

- from caring adults is key to students' success in the face of adversity.* Retrieved from <http://www.nasponline.org/resources/principals/schoolresiliency.pdf>
- Hellenga, K. Aber, M.S., & Rhodes, J.E. (2002). African American adolescent mothers' vocational aspiration-expectation gap: Individual social and environmental influences. *Psychology of Women Quarterly*, 26 (1), 200-212.
- Herrman, J.W. (2010). Assessing the teen parent: The role for nurses. *Nursing for Woman's Health*, 14(3), 212-221.
- Hoffman, S. D., & Maynard, R. A. (2008). *Kids having kids: Economic cost and social consequences of teen pregnancy*. Washington, DC: Urban Institute Press.
- Hope, T.L., Wilder, E.I., & Watt, T.T. (2003). The relationships among adolescent pregnancy, pregnancy resolution, and juvenile delinquency. *Sociology Quarterly*, 44, 555-576.
- Hotz, V.J., McElroy, S.W., & Sanders, S.G. (2005). The impact of teenage childbearing on the mothers and the consequences of those impacts for government. In R. A. Maynard (Ed). *Kids having kids* (pp. 55-94). Washington, DC: Urban Institute.
- Hunt, G., Joe-Laidler, K., & Mackenzie, K. (2005). Moving into motherhood: Gang girls and controlled risk. *Youth and Society*, 36 (3), 333-373.
- Jutte, D. P., Roos, N. P., Brownell, M. D., Briggs, G., MacWilliam, L., & Roos, L. (2010). The ripples of adolescent motherhood: Social, educational, and medical outcomes for children of teen and prior teen mothers. *Academic Pediatrics*, 10 (5), 293-301.
- Katz, K. S., Rodan, M., Milligan, R., Tan, S., Courtney, L., Gantz, M., . . . Subramanian, S. (2011). Efficacy of a randomized cell phone-based counseling intervention in postponing subsequent pregnancy among teen mothers. *Maternal Child Health Journal*, 15(1), 42-53. doi: 10.1007/s10995-011-0860-3
- Kendall, C. Afable-Munsuz, A., Speizer, E., Avery, A., Schmidt, N. Santelli, J. (2005). Understanding pregnancy in a population of inner-city women in New Orleans-results of qualitative research. *Social Science and Medicine*, 60, 297-311.
- Kiselica, M.S. (2008). *When boys become parents*. New Jersey: Rutlers University Press.
- Koller, V, Larsen, C, Thornell-Sandifor, Rummell, C., Engles, E., & Elms, T.

- (2013). *Mentoring youth and young parents: A guidebook for programs helping youth and young parents navigate a pathway to self-sufficiency*. Retrieved from http://wdr.doleta.gov/research/FullText_Documents/Mentoring_Youth_and_Young_Parents_Guidebook.pdf
- Lerner R. M, Lerner J.V, Almerigi J., Theokas, C., Phelps, E., Gestdottir, S.,...von Eye, A. (2005). Positive youth development, participation in community youth development programs, and community contributions of fifth grade adolescents: findings from the first wave of the 4-H Study of Positive Youth Development. *Journal of Early Adolescence*, 25(1), 17– 71
- Lewin, A, Hodgkinson, S., Waters, D., Premph, H., Beers, L., & Feinberg. (2015). Strengthening positive coparenting in teen parents: A cultural adaption of an evidenced-based intervention. *Journal of Primary Prevention*, 36, 139-154.
- Mistry, J., Jacobs, F., & Jacobs, L. Cultural relevance as program-to community alignment. *Journal of Community Psychology*, 37(4), 487-504.
- McDermott E, & Graham, H. (2005). Resilient young mothering: Social inequalities, late modernity and the “problem” of “teenage” motherhood. *Journal of Youth Studies*, 8, 59–79.
- Martin, J.A., Hamilton, B.E., Osterman, M.J.K., Curtin, S.C., & Mathews, T.J. (2013). Births: Final data for 2012. *National Vital Statistics Report*, 62(9).
- Moloney, M., Hunt, G.P., Joe-Laidler, K., & MacKenzie, K. (2011). Youn mother (in the) hood: Gang girls’ negotiation of new identities. *Journal of Youth Studies*, 14(1), 1-19.
- National Association of County & City Officials. (2009). Meeting the needs of pregnant and parenting teens: Local health department programs and services. Retrieved from http://www.dhs.state.mn.us/main/groups/agencywide/documents/pub/dhs16_148996.pdf
- National Association of School Psychologists. (2007). Resiliency: strategies for parents and educators. *NASP Communique*, 36(3), 1-5.
- National Campaign to Prevent Teen and Unplanned Pregnancy. (2010). *Preventing teen pregnancy is critical to school completion*. Retrieved from <https://thenationalcampaign.org/resource/briefly—policy-brief-preventing-teen-pregnancy-critical-school-completion>
- Pillow, W. S. (2004). *Unfit subjects: Educational policy and the teen*

- mother*. New York: RoutledgeFalmer.
- Rogers, C. R. (1951). *Client-centered therapy*. Boston: Houghton Mifflin.
- Sadler, L. S., Swartz, M., Ryan-Krause, P., Setz, V., Meadows-Owens, M., Grey, M., & Clemmens, D.A. (2007). Promising outcomes in teen mothers enrolled in a school-based parent support program and child care center. *Journal of Social Health, 77* (3), 121-130
- Saint-Jacques, M., Turcotte, D., & Pouliot, E. (2009). Adopting a strengths perspective in social work practice with families in difficulty: From theory to practice. *Families in Society, 90*(4), 454-461.
- Saleebey, D. (Ed.). (1992). *The strengths perspective in social work practice*. New York: Longman.
- Saleebey, D. (2006). *The strengths perspective in social work practice* (4th ed.). Boston: Pearson Education Inc.
- Scerra, N. (2011). *Strengths-based practice: The evidence*. Social Justice Unit. Research Paper #6. Parramatta, NSW: UnitingCare Children
- Scott-Johnson, P. E., Gross, S. M., & Browne, D. C. (2010). Web-based data collection: An effective strategy for increasing African Americans' participation in health-related research. *Ethnicity & Disease, 20*(1 Suppl 1), S1-201- 206.
- Seed, M., Juarez, M., & Alnatour, R. (2009). Improving recruitment and retention rates in preventive longitudinal research with adolescent mothers. *Journal of Child Adolescent Psychiatric Nursing, 22*(3), 150-153.
- Smithbattle, L. (2007). I wanna have a good future: Teen mothers' rise in educational aspirations competing demands, and limited school support. *Youth & Society, 38*, (3), 248-371.
- Smithbattle, L. (2009). Reframing the risk and losses of teen mothering. *The American Journal of Maternal Child Nursing, 34* (2), 122-128
- South-Paul, J.E., & Ncube, E.N. (2014). Strategies for recruitment and retention of teen mothers in a program to prevent repeat pregnancies. *Journal of Adolescent and Family Health, 6*(2), 1-14
- Stampfli, M. (2008). *Culturally sensitive counseling and interventions for pregnant Mexican-American adolescents*. Retrieved from <http://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.551.9565&rep=rep1&type=pdf>
- Stavrakos, J. C., & Summerville, G. (2009). *Growing what works: Lessons learned from Pennsylvania's Nurse-Family Partnership initiative*. Retrieved from Public-Private Ventures Website: http://www.ppv.org/ppv/publications/assets/299_publication.pdf
- U.S. Department of Health and Human Services. (n.d.). *Positive youth*

- development: An introduction*. Retrieved from http://ncfy.acf.hhs.gov/sites/default/files/pyd_an_intro.pdf
- Vo, D.X., & Park, M.J. (2009). Helping young men thrive: Positive youth development and men's health. *American Journal of Men's Health*, 3(4), 352-359.
- Werner, E. E., & Smith, R. S. (2001). *Journeys from childhood to midlife: Risk, resilience, and recovery*. Ithaca: Cornell University Press.
- Youngblade, L.M., Theokas, C., schulenberg, J., Curry, L., Huang, I., & Novak, M. (2007). Risk and promotive factors in families, schools, and communities: A contextual model of positive youth development in adolescence. *Pediatrics*, 119(1), 547-553.
- Zachry, E.M. (2005). Getting my education: Teen mothers' experiences in school before and after motherhood. *Teachers College Record*, 107(12), 2566-2598.