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Avoiding the “Doomed to Poverty” Narrative

Words of Wisdom from Teenage Single Mothers

This essay gives a voice to nine U.S. mothers in their late teens and early twenties who became pregnant during or right before they entered high school. All chose to bear and rear their children as single mothers, and as teens all chose to participate in a holistic, school-based mentoring and empowerment program called the Family Development Research Program. The essay opens with a brief discussion of the origins and objectives of the FDRP and with proof of this “wraparound” program’s success. In the remainder of the essay, the nine young mothers evaluate the role that the FDRP played in helping them learn how to successfully balance good parenting with the pursuit of ambitious academic goals. They single out four components of the FDRP as especially critical to their success: easy access to affordable, high-quality childcare; mentoring by non-judgmental adults who are knowledgeable about the issues faced by most teen mothers; the opportunity to form support networks with other young moms; and an emphasis on education as an effective route to economic self-sufficiency. Significantly, the views of these nine teen mothers substantiate the conclusions of contemporary scholars seeking to identify the essential features of “best practices” empowerment programming for teen mothers (and other “at risk” youth) living in the United States.

The primary purpose of this essay is to give a voice to nine remarkable young women in their late teens and early twenties who live in a small city (population 30,000) in eastern Pennsylvania. Four self-identify as white, two as African American, two as Latina, and one as biracial; most come from low-income or working-class families. All became pregnant during or right before entering high school, and all chose to bear and raise the child. Although most have received significant emotional and financial support from family members (and in two cases, from the child’s father), all nine young women remain unmarried;

they are single mothers who from the time they were teenagers have assumed primary responsibility for their own and their child’s well-being. Contrary to cultural and media stereotypes that prevail in the contemporary U.S., these young mothers are not foolish, irresponsible, promiscuous, and dysfunctional young women who are doomed (and according to some, deservedly so) to lead lives of poverty and despair; they have not done irreparable harm to themselves and a child by becoming mothers as teenagers.¹ Not only did they graduate from high school at the time they were expected to do so, but all are pursuing the kind of post-secondary education or job training that is likely to make them economically self-sufficient in the near future.

What accounts for the success of these teenaged mothers? During the academic year 2006–2007, as part of an undergraduate honors thesis project directed by sociologist Rebecca Kissane, Rachel Gallagher conducted a series of interviews with these nine young women, three of them seniors at and six of them recent graduates of a large public high school.² Rachel asked the young mothers to articulate the challenges they have faced as pregnant and parenting teens and to identify the factors that helped them set ambitious goals for themselves and maintain high self-esteem and a sense of authority and agency. Without exception, these nine young women claimed that a key factor in their success was their decision to participate in a voluntary “wraparound” mentoring program called the Family Development Research Program (FDRP). In this essay, we will briefly detail the origins, goals, and achievements of the FDRP, then present the words of the young mothers, who single out four components of the program as especially important to their success.

The origins and goals of the Family Development Research Program

The Family Development Research Program (which, as will be explained later, no longer exists in its “best practices” form) was established in 2000 by a local physician whose goal was to reduce the rate at which pregnant and parenting teens were dropping out of the local high school (at the time, the high school had the eleventh highest dropout rate in the state). This physician identified a local childcare agency that was willing to help write grants for as well as operate a daycare center for the children of teen mothers, then got the school board’s permission to place the facility right in the high school. Grant monies also paid for a bus that transported the mothers and their children to and from their homes and the school.

The linchpin of the Family Development Research Program (FDRP) was a nurse employed full-time by the city’s hospital. Half of Maureen’s work hours were spent at a local clinic, the remainder with the teen mothers.³ Maureen had a number of responsibilities. First, she visited each pregnant or parenting teen in the high school student’s home, doing so on a weekly basis in the months before and for a year after the child’s birth, then at less frequent intervals until the child turned five. Although the primary purpose of these visits was to en-

sure that FDRP participants and their children were receiving good healthcare, Maureen often helped the teenagers deal with other issues, from practicing for a job interview or a driver's license test to ending a relationship with an abusive boyfriend or escaping a dangerous family environment. Second, Maureen was responsible for keeping track of the young mothers' academic progress, for ensuring that they had tutors coming to their homes in the weeks after the birth of the child and for helping the students achieve their goal of doing well in coursework once they returned to school. Maureen also implemented the required "Lunch and Learn" sessions held once a month at the high school; some of these meetings featured guest speakers while others gave the pregnant and parenting teenagers the opportunity to share with one another important experiences and concerns. Finally, Maureen held Wednesday afternoon group meetings open to all FDRP participants (and required of the moms using the onsite daycare). In the first four years of the program, these Wednesday sessions featured informal discussions of common issues as well as attention to individualized needs; starting fall 2005, Women's and Gender Studies students enrolled at a nearby college provided onsite tutoring and sponsored interactive educational activities on a wide variety of topics.⁴

The other members of the mentoring team were two social workers. One of these, Tina, was a full-time employee at the high school and saw the mothers and mothers-to-be on a regular basis. The other, John, was paid to spend ten hours a week working with the teen moms on an individualized, as-needed basis; his primary responsibility was to help FDRP participants learn how to identify and access social services. During the initial year of the program (2000-2001), this three-person team worked with six teen mothers; by the fall of 2005, they were mentoring twenty-two high school students and seventeen recent graduates.

From its inception, the FDRP was designed as a multi-faceted, wraparound program that would help the young mothers develop the knowledge, skills, and confidence to successfully address a multitude of issues and needs. The FDRP philosophy is that teen mothers thrive when they have easy access to guidance counselors, social workers, childcare facilities, and healthcare professionals and when, through attention to their individualized needs, they are shown how to identify and make use of a wide array of government-sponsored and community resources. Working in close collaboration with one another, the FDRP staff strives to promote the psychological and physical wellness of young mothers and their children, seeks to foster good parenting skills, and emphasizes the importance of education, making the completion of high school (and ideally, the pursuit of post-secondary education) the ultimate goal for every participant. More specifically, the FDRP aims to

- Ensure healthy pregnancies and deliveries
- Decrease the frequency of premature birth and low infant birth weight

- Teach parenting skills and provide other kinds of support that will reduce the incidence of child abuse
- Provide ongoing healthcare screening and information
- Minimize the number of girls having a second closely spaced pregnancy
- Ensure that the teenagers’ children are kindergarten-ready at the appropriate age
- Provide short- and long-term support of the students’ educational goals by networking the mothers with guidance counselors, social workers, tutors, and the admissions and financial aid staff of regional institutions of higher learning

An examination of FDRP annual reports and grant proposals from 2000-2007 reveals that in its full-service, wraparound state, the FDRP was a highly effective mentoring program. There were no reported incidents of child abuse for the approximately sixty young mothers who thus far had participated in the program, and the rate of low infant birth weight was 6.5 per cent for FDRP moms, significantly lower than the county average of 9.6 per cent.⁵ Nationally, almost one-third of females who become mothers before the age of seventeen have a second child within the next two years (Lipper 323-24); only two FDRP participants had given birth to a second child. And this includes the young mothers who were mentored for the entire five-year period, all of whose children were kindergarten ready at age five.

Whereas local school district officials estimate that 80 per cent of the teen mothers who chose *not* to affiliate with the FDRP dropped out, the percentage of FDRP participants who quit school averaged about 15 per cent—which is the dropout rate for this high school student body *as a whole*.⁶ In fact, from 2004 to 2007, 100 per cent of the FDRP seniors graduated on time, some with honors. Just as importantly, four of the nine dropouts continued to seek the FDRP staff’s advice, completed their GED, and are now enrolled in college. Finally, of the forty-one FDRP participants who had graduated by the spring of 2007, 85 per cent say they have plans to continue their formal education, and an impressive 65 per cent have actually done so. These young women are attending or have graduated from college or the kind of degree programs (such as those for Certified Nursing Assistants) that will allow them to achieve—if they have not already done so—economic self-sufficiency.⁷

Methodology of the study

Statistical data was gathered from FDRP records (such as grant proposals and monthly and annual reports) and through consultation with school district officials. The qualitative data was collected through interviews Rachel conducted with Maureen and with nine young mothers who ranged in age from 18 to 25. The interviewees were initially approached by the FDRP staff in order to facilitate a non-threatening invitation to participate. If the mothers

agreed to participate in the study, interviews took place at a location of the mother's choosing. All subjects granted informed consent before interviews were scheduled and knew that in any talks or publications based on the interviews, confidentiality would be preserved through alteration of their names. Interviews were tape recorded and transcribed; afterwards, the tapes were destroyed to further protect confidentiality.

Interviews were semi-structured to ensure streamlined research and to give participants the freedom to steer the latter half of the interview in whatever direction they wanted. Each interview began with questions eliciting demographic information, then shifted to a discussion of each subject's personal experiences with pregnancy and mothering within the context of their voluntary participation in the FDRP. A major goal of the study was to learn what specific aspects of the FDRP the participants considered key to their success in balancing good parenting with the attainment of ambitious educational goals.

Although not a representative sample, subjects were selected to represent differing kinds of experience with the FDRP. For example, although all interviewees began participating in the FDRP when pregnant, the group's level of educational attainment at the time of childbirth ranged from the eighth through the twelfth grade. Like the FDRP participants as a whole, the nine mothers interviewed are primarily from working class or low-income families and are racially diverse (white, African-American, Hispanic, and biracial). All subjects took advantage of many of the services available to them, but they did so in differing ways (for example, some used the onsite daycare and others did not). Interviewees also were chosen to represent the three groups who have participated in the FDRP: current high school students, high school graduates still being mentored by the FDRP staff, and former FDRP participants who have aged out of the program (those whose children have turned five).

A qualitative analysis of the FDRP: what the teen moms themselves have to say

All nine of the young mothers who were interviewed stated emphatically that their participation in the FDRP had played an important role in helping them achieve or sustain feelings of self-respect, self-confidence, motivation, and ambition. They singled out four features of the program as especially central to their success:

- Accessible, affordable, high-quality childcare
- Ongoing, frequent mentoring from one or more adults who can (a) provide accurate information about such matters as health, parenting, social service entitlements, and birth control and (b) listen and advise in a supportive, encouraging, non-judgmental way
- The opportunity to socialize and form a support network with other current or former teenaged mothers

- A strong emphasis on the importance and benefits of finishing high school, then pursuing some form of post-secondary education . . . and programming that makes accomplishing such goals truly possible.

Subjects who took advantage of the onsite daycare emphasized its convenience and affordability as a key component of their educational success. Here’s what Anja, who gave birth to a daughter her senior year, has to say about the importance of having easy access to a good childcare facility:

The daycare was my big thing, because without it, I don’t know if I would have finished high school. Because I wouldn’t have had a babysitter. My parents both work days, my older sister works days, and my other sisters were too young to babysit. . . . When you can’t afford a car or car insurance and your parents work, it was perfect.

Miranda, who gave birth to her daughter in tenth grade, echoes Anja’s sentiments about the importance of having a childcare center at the high school—and having free transportation to and from the facility. Without the FDRP, Miranda claims, “I don’t think I would have graduated. . . . You know, how am I going to get her there? My mom goes to work at 6:00; my dad has to leave at 7:30. I have to get to school. I have to get *her* to school. . . . And it was a good daycare.”

Maria, who was an eighth grader when she gave birth to her daughter, was even more emphatic. Explaining that her father had died a couple of years before she became pregnant and that her mother worked two jobs to make ends meet, Maria said that what made it possible for her to graduate was having free transportation to an onsite daycare for three of her four high school years. Maria explains that

The only problem with the daycare at the high school was that it only took kids up to three years old, so when I was in twelfth grade my daughter couldn’t be in there any more. Maureen helped me find another daycare, but it was harder then because I couldn’t take the free bus anymore. I had to take the regular city bus to the new daycare, then take a different city bus to school, then make the opposite trip at the end of the school day. But luckily I was in my senior year by then.

Danielle, who became a mother the summer before eleventh grade, also speaks of the importance of having easy access to high-quality childcare. “The daycare was great,” Danielle exclaims.

It was convenient, and the bus was super so I didn’t have to waste gas and drive anywhere. . . . Since you are still in high school the most important thing was convenience, like being able to get to school and daycare in one

trip. The women at the daycare were really nice, and the center was always open when school was open. Study halls were easy to just be able to sit and do the work, knowing that he was fine and so close by.

The second component of the FDRP that the teen mothers identified as crucial to their success was receiving ongoing, steady mentoring from adults who could (a) provide them with useful, accurate information on healthcare, parenting, and social services and (b) listen and advise them in a supportive, encouraging, non-judgmental way. We'll turn first to the FDRP participants' comments on the importance of having mentors who are knowledgeable about issues faced by young mothers. Monika, who was in 10th grade when she gave birth to her son, notes that during her pregnancy

Maureen would come over and tell me about things that would start happening. That way I knew what to expect. It made me feel better. After my son was born, Maureen would come over and weigh him and let me know when I could introduce him to new foods. And she was really helpful as far as when the baby was sick and I thought my pediatrician wasn't right.

Gina, who was in eleventh grade when she gave birth to her daughter, says much the same thing about the nurse's visits to her home: "We would talk about parenting, teen parenting. Ways to do it, ways to encourage yourself, help your baby grow up well. She'd say like, ya know, even though you're a teen, you can still give the baby what the baby needs."

The young moms also appreciated receiving information about social services to which they were entitled. Amy, who was in eleventh grade when she gave birth to her son, confesses that "A lot of stuff I didn't even know existed until Maureen told me about it. Like Title XX [childcare subsidies], I had never heard of that until she told me about it." Other young moms say they benefited from accurate knowledge about birth control and from being able to get free Depo-Provera shots. Anja claims that "if it wasn't for the program, and Maureen coming to my house to give me the shot, I probably never would have gotten on birth control. I couldn't afford it."

Monika says the same; she also emphasizes that the FDRP staff helped her get Medicaid coverage for her daughter:

Maureen actually sat down at my kitchen table and helped me fill out the medical assistance forms. And John, he helped, too. He knew what questions they'd ask and how to answer them and how to use the system to get what you need. For me, the information they could provide was the most valuable component [of the program]. Because there's no one else out there to tell you those things. They could tell me stuff that my mom didn't even know.

Most of the young mothers mention how much they benefited from the

monthly “Lunch and Learn” sessions, many of which featured guest speakers. For Miranda,

The Lunch and Learns, those were my favorite thing. There were a few each year that were geared towards education. And there was a lady that came in and talked about being abused by your boyfriend. It wasn't helpful to me personally, but it had a strong impact on me. Like a wow response. Then they did one on STDs and I was like ohmygod. The pictures made me sick.

Monika especially appreciated a Lunch and Learn session “when a lady came in and talked about conflict resolution. It was useful because I have to deal with my set of parents and my boyfriend and his set of parents.” And Monika notes with pride that after attending a session on applying for college admission and financial aid, “I’ve actually been able to help a couple of my friends who aren’t moms.”

As noted earlier, the young mothers appreciate not only the knowledge and encouragement they received from Maureen and the other two members of the FDRP staff, but also these adults’ willingness to listen and respond to the teens’ concerns in a non-judgmental way. According to Anja, the staff is “very easy to talk to. You can ask them things you don’t want to ask your parents. They aren’t going to put you down.” Similarly, Miranda says of Maureen: “I really know her on a personal level.... You could talk to her about personal stuff you didn’t wanna tell your mom about.” Monika also characterizes Maureen as “real supportive. She’ll be there for you, and she’ll support you in whatever you do regardless of whether she thinks it’s right or wrong. She’s not the type of person who will judge you for anything.” Courtney, who became a mother her senior year, echoes this sentiment, indicating that “It was so nice to have someone who would just listen, especially since my family used to look at me like being a teen mom was a death sentence.” According to Danielle,

Maureen is always there for you no matter what your issue, no matter what time, day or night. She's just there to be really supportive and help you through everything. Kinda like having a friend, she was even there to listen to your guy problems . She'd be like, "Okay, relax; you'll be ok. It's only a guy."... No matter what we were going through there was always somebody to talk to, somebody to help us through whatever it was that wasn't judgmental.

A third feature of the FDRP that participants singled out as being essential to their emotional well-being was the opportunity to socialize and form a support network with other young mothers. Maria notes that at group meetings “we would talk about stuff that was going on with us. Everybody had similar

stories. We used to give each other advice.” As Carla puts it, “You’re all in the same boat. You realize you are not the only one.” Similarly, Monika observes: “Walking through the halls, you don’t feel like you’re so alone. It’s really neat that other people are experiencing the same things you are.” Courtney fondly recalls a Lunch and Learn session at which a “graduate” of the FDRP was the guest speaker. She relates:

One time we met a girl who went to college, graduated and everything, and she used to be in the program. It was so good because there was hope. You’re nine months pregnant, sitting in a room with girls who are in the same situation as you, and it doesn’t look good for anyone. But there’s hope. It was so nice to hear a story about a teenage girl from our school who had a baby and still made something of herself.

Gina, who initially was quite skeptical about the value of spending time with other young moms, soon changed her mind. She confesses that when

they told us that we’re gonna have to go to this thing every Wednesday, at first I thought it was gonna be really dumb. But it was actually fun. It was nice to know you’re not alone. You know, you walk down the halls and you’re thinking you’re the only teen with a baby; you see other teens, not knowing that they have babies, too; they just don’t wanna say nothing about it. Once you go to the Lunch and Learns you know who has one. Then when you walk down the hall you see these girls and you know they have a baby or are gonna have one. It’s pretty cool. We can all get together and talk about our feelings. Some teen moms just keep stress inside and let it build up, and they just go nuts.

The final component of the FDRP that the young moms felt was crucial to maintaining high self-esteem and setting ambitious goals for themselves was the program’s emphasis on the importance of finishing high school, then pursuing the kind of post-secondary education that would lead to economic self-sufficiency. Four of the nine mothers felt confident they would have finished high school even if the FDRP hadn’t existed; however, they believed that without the support of the FDRP staff, their grades probably wouldn’t have been as high and they might not have entered college or pre-professional programs immediately after high school. Danielle, who graduated in the top ten per cent of her class and is attending community college on a full scholarship, notes that her “biggest concern was getting grades high enough to go on and do what I wanted to do,” which was “to not pay for college” or “pay for as little as possible, try to get scholarships and whatever else I can.” She appreciates the tutoring in calculus she received from some Women’s and Gender Studies college students, and claims that it is comforting to know that “the girls are still there if I ever need help. To keep my

college scholarship I have to have a 3.5, so my grades have to be really good. Maureen says if I ever need help just to give her a call, and they can send two college students to my house so I’ll have a babysitter and then someone else to help me study.”

Miranda also is certain she would have graduated from high school on time, but doubts that she would have attended college right afterwards had it not been for her participation in the FDRP. Like many of the young mothers, Miranda argues that having a child as a teenager strengthened rather than lessened her desire to fulfill her academic potential. “I was never a bad student,” Miranda relates. “I got like Bs and Cs. But my senior year, after having my daughter, I was like I’m making the honor roll this year.” Miranda indicates that she would get frustrated with the high school moms who turned down the opportunity to participate in the FDRP and who didn’t seem to care about doing well in school: “I used to yell at them, like ‘why don’t you want to go to college? Think of your kid!’” She credits the FDRP staff for helping her get a scholarship to a large state university, recalling that “at one of the Lunch and Learns they had someone come in from colleges explaining what could be given to you” in terms of financial aid.

Like Miranda, Amy asserts that getting pregnant and participating in the FDRP had a positive effect on her life. “I always knew that I’d finish high school,” Amy states,

but having a baby got me back on my feet. I was hanging around with the wrong people, partying all the time. I didn’t really have a reason to wanna have good grades. I really didn’t care. But now I have a reason to do what I have to do.

She claims that because of the encouragement she received from the FDRP staff,

I’m way more motivated to go to college. Before, I was like, I’m just gonna wait a bit, wait so I can have a year off or whatever. But when I had my son, it was like I had to start thinking about him and his financial situation, cause as Maureen kept telling me, if I can’t take care of myself then I can’t take care of him.

Gina is adamant about never even considering “dropping out of school, no matter what. When I saw my stomach getting bigger and bigger, I would think, what would people say when I was at school, but then I was like it doesn’t matter. I want my diploma.” However, after becoming pregnant Gina was pressured by teachers and a guidance counselor to enter the high school’s vocational track rather than remain in the college-bound track in which she had been enrolled.⁸ She credits both her mom and Maureen for convincing her to pursue her dream of becoming a nurse rather than settle for what Gina

considered “a backup plan,” a career as a hairdresser. Gina admits that she

didn't go to college right away, after school like I planned to. But for me it probably worked out for the better, because Maureen helped me get a job at a nursing home and once I'm there for six months, they're gonna pay for me to go to college part-time [to study nursing]. So I think it worked out better, instead of me paying out of my pocket.

She concludes by stating emphatically: “I'd recommend the FDRP to any teen, in school or out, that's pregnant or has a child”

The other five mothers Rachel interviewed are even more appreciative of the FDRP's emphasis on academic success, suggesting that they probably would be high school dropouts had they not been effectively mentored in the months before and for several years after the birth of their child. In fact, Carla had dropped out of school at the end of 10th grade, even though she had been an A student her first two years of high school. “I wanted to make money,” she relates. “I was living my ‘adult life,’ quote unquote, and doing lots of partying. My best friend from those days died a couple years ago from a drug overdose. I could have been her.” What motivated Carla to return to school was learning she was pregnant. “At age eighteen I walked right across the street and re-enrolled,” she announces. But balancing school work, parenting, and a part-time job wasn't as easy as Carla had anticipated. As she explains with a great deal of animation, she benefited tremendously from the mentoring she received as an FDRP participant:

Maureen just basically stayed on you about school. She would say, “You know, Carla, you are just barely getting by now, and you don't want to live your whole life like this. That's why you have to stay in school.” She just led you the right way. You think you can't do it, but you have someone saying you can and that there's other teen moms who have done it. She walked me through step by step. And it was great to have someone help you apply to a technical school or a college, and I had those benefits.

After high school, Carla completed a two-year medical assistant degree; recently, she was admitted to a four-year nursing program. She is so thankful that a program like the FDRP was available at her high school, a program that she describes as “guiding you through whatever you needed so that you could eventually help yourself. When you're in the FDRP, you're never alone. I think people need to know that.”

Courtney also believes that participating in the FDRP was essential to her completing high school on time, then pursuing post-secondary education. Courtney claims that even though she only had to complete her senior year, she found the challenges of being a teenaged mother so great that she seriously considered dropping out of school:

I didn't think I was going to make it. Then I got hooked up with the [FDRP] program and I knew I was gonna graduate. It helped a lot. Everyone involved in that program was always positive. “You're gonna go to college. You're gonna do this. I'm gonna help you fill out that paperwork so you can get this.” Everything was positive. It was helpful because a lot of families aren't supportive.

Courtney contrasts her experiences of motherhood with those of a close friend who lives in the town where Courtney had resided until a few months before her pregnancy. Courtney notes that her former school “doesn't have any type of program for teen moms. My friend had a baby right around the same time I did and she couldn't graduate high school. She had to repeat the year because they didn't have a homebound program” (individualized, at-home tutoring for six weeks after the child's birth). Not only did Courtney graduate on time, but she proudly announces that “with Maureen's assistance, I'm going to college in the fall and it's totally paid for because of the FAFSA [federal financial aid for low-income students]. Even right now they [the FDRP staff] are helping me fill out more applications; they're still an information resource.”

Whereas Carla and Courtney had been honor roll students before becoming pregnant, Monika indicates she “was a C student before having my baby. But being a mom gave me a different outlook as far as school goes. Now I'm on the honor roll.” Like the other young mothers, Monika believes the FDRP's emphasis on the importance of education helped her maintain her commitment to academic success. She relates:

If I was out of school for a couple of days, I would get a phone call from Maureen just asking if I was okay. They definitely wanna be there to make sure that you can accomplish what you need to and finish school and stay in school. Who else cares? No one else cares or is gonna call just to say, “Hey, do you need anything?” They [the FDRP staff] are the ones who call to make sure that you're okay and are going back to school. It's one of my top things to graduate this year. Just because so many people think just because you're a young mom, that you're not going to finish school and you have such a hard life. And it's not always that way. Sure, there are some cases that girls really have it bad that have kids, but people should not look down on you. I'm definitely finishing high school to prove to everyone else that I'm not just a dumb kid who doesn't know what she's doing.

At the time of the interview, Monika was about to receive her cosmetology license through the high school's vocational technology program. But like Gina, Monika has been encouraged by the FDRP staff to seek economic self-sufficiency through additional schooling. “I want to go further than just high school because there aren't many good job opportunities with just a high

school degree,” Monika notes. She acknowledges that compared to non-parenting youth her age, “getting a college degree will probably take me a little bit longer, because I’m probably going to need to go to college part time.” But Monika insists she is going to get the college degree she wants: “It’s just going to take me longer” than people who don’t have to care for and financially support a child, she avers.

Of the nine young mothers who were interviewed, Maria probably benefited the most from the FDRP’s strong advocacy of education as a route to economic self-sufficiency. As has been mentioned earlier, Maria got pregnant in 8th grade. Although it was always her goal to graduate from high school, she indicates that she probably wouldn’t have done so had it not been for the FDRP. Maria explains: “Because I had my daughter in eighth grade, people thought I wasn’t going to finish. At first that just gave me even more incentive to finish high school and prove everybody wrong, but by the time I got to tenth grade, I definitely wanted to drop out. It was taking forever to get through school.” Thankfully, she notes, Maureen helped her find tutors and “motivated me to stay in school. Probably if I wouldn’t have had her [support], I would have ended up quitting.” Currently Maria is waiting to hear if she has been accepted into a two-year nursing program at a local community college. “Eventually I want to get my RN,” she confesses, adding that “My boyfriend tells me that I should go do what Maureen does ... help teens be good moms and stay in school.” Indeed, it is striking how many of these FDRP participants and graduates are planning to pursue a career in nursing. Maureen, the staff member who had the most frequent and direct contact with the teen mothers, clearly has made a deep and lasting impact on these young women’s lives.

Moving forward

Why is it important to acknowledge the wisdom and heed the recommendations of these young single mothers? First of all, we should do so because they have firsthand knowledge of the challenges confronting pregnant and parenting teens—and have managed, with the help of the FDRP staff, to overcome many of the obstacles they’ve faced. Secondly, we should listen to these women because their insights substantiate the findings of researchers who have undertaken scholarly studies of school-based, “wraparound” mentoring programs for teenaged moms. For example, a 1993 study of teenaged mothers in New Haven, Connecticut reveals that if teen mothers participate in programs like the FDRP *for as little as seven weeks* after giving birth, they are considerably less likely to go on welfare or have a second child in the next two years, and considerably more likely to finish high school than other teen moms (Seitz and Apfel, 1993, as cited in Ludtke, 1997: 174). Other studies indicate that teen mothers especially benefit from participating in “school-based intervention programs” that include “child care facilities within the school setting” (Sadler and Williams, 2001: 8).

Effective mentoring of teenaged mothers also has a positive multigenerational impact, since “studies suggest that a mother’s level of education is the most significant variable in predicting her child’s academic success” (Ludtke, 1997: 31-2). Given that the U.S. spends more than seven billion dollars a year on childcare subsidies, food stamps, healthcare, and other forms of financial assistance to teen mothers and their children (Koshar, 2001: 3), supporting and empowering these young mothers is as cost effective as it is humane. As noted by Sarah Horowitz and her co-authors (1991), who analyze the results of a twenty-year follow-up study of teenaged girls who participated in a “Young Mothers” program in the late 1960s, “short-term targeted spending can produce long-term societal benefits” (6). A 1992 nationwide study by the Alliance for Young Families (the first of its kind), produced the same results. As Melissa Ludtke notes,

The Alliance report compared teenage mothers who had child care and other supportive services with those who did not. Young mothers who did not have access to these comprehensive services had much lower rates of completing high school: 80 percent failed to graduate, 69 percent were on welfare by the time their first child was four years old, and 40 percent of them were likely to be on welfare for a decade or longer. Teenage mothers who had dependable child care, along with counseling, parent education, and transportation, seemed to have more promising futures: 80 percent of them earned a high school diploma; a quarter of those graduates went on to college, and 65 percent would go on to earn incomes above the poverty line. (Ludtke, 1997: 171)

Successful mentoring programs for “at risk” teenagers of both sexes also reveal the value of a holistic approach to mentoring and empowering such youth. As noted by Mike Carrera, the founder of the Family Life Education and Adolescent Sexuality Program, which has ten sites in New York City and sixteen sites in other states, “It is the total fabric that is important. When kids are empowered with information and stimulated by hope for the future, it has a contraceptive effect” and “produce[s] self-esteem” (qtd. in Ludtke, 1997: 99). Carrera also emphasizes that effective empowerment programming for teenagers at risk of dropping out of school needs to span several years: it “require[s] long-term commitment by caring and responsive adults who connect with youngsters and, in turn, connect them with the necessary tools and strategies” (Ludtke, 1997: 99).

Sadly, three years ago the school board in the FDRP participants’ city decided to decrease its support of the successful Family Development Research Program. In the spring of 2006, the school board voted to eliminate what the teen mothers consider to be one of the key components of the FDRP: the high-quality, easily accessible, onsite daycare.⁹ Although there were rumors that the

daycare might be closed, not a single person involved with the FDRP was told of or invited to the meeting at which the daycare's termination was effected. The official reason given for closing the daycare was that the space was serving the needs of only a few students and could serve many more students if converted to a classroom. But the unspoken subtext was that the high school was rewarding "bad girls" and encouraging teen pregnancy by have a childcare center on the premises.

Around the same time, the city hospital (which had gone from being a non-profit to a for-profit organization) informed Maureen that she had to give up her FDRP responsibilities and work full-time at the clinic if she wanted to continue to be employed by the hospital. Not being able to afford to give up the healthcare and pension plan provided by the hospital, Maureen reluctantly had to stop mentoring the parenting and pregnant teens to whom she had become so close. At that point, the responsibilities Maureen had fulfilled were divided among several individuals. Five nurses began visiting the young moms in their homes to provide information about healthcare and parenting; they are employed by the regional branch of the Nurse Family Partnership, a national organization that mentors first-time, low-income mothers of all ages. A part-time social worker was hired to help the parenting and pregnant teens learn how to access social services and to support them as they worked on achieving ambitious educational goals. Unfortunately, within a few months that social worker had to be fired for failing to do his job adequately. Eventually he was replaced by another (and very dedicated) social worker; sadly, she is entering a doctoral program in the fall and will have to be replaced. So current FDRP participants (now limited to pregnant and parenting teens in or one year out of high school) will have had three different social service/education mentors in a little over a year.

The organization that has assumed primary responsibility for mentoring local teen mothers is a first-rate organization with a demonstrated record of success; everyone involved with the FDRP is very grateful that the Nurse Family Partnership has temporarily stepped in to fill some of the program's unmet needs. But all, including the NFP nurses and administrators, agree that the NFP (whose nurses must operate within strict guidelines due to the organization's research-driven agenda) cannot support and empower high school mothers nearly as well as the FDRP did. First, NFP nurses can mentor their clients for a maximum of two years (including pregnancy), whereas the FDRP supported its participants until each mother's child turned five. This meant that even if a girl (such as Maria) became pregnant in 8th grade, the FDRP staff could support her throughout her high school career, then help her transition from high school to college, a job training program, or the paid labor force. Secondly, NFP clients can be first-time mothers of any age or marital status, so programming designed specifically for teen moms can not be a priority for any branch of the organization. Third, teen mothers who have more than one child cannot participate in the NFP program, nor can a

high school student who contacts the NFP any time after the thirtieth week of pregnancy. Teen mothers whose families live above the poverty line also are ineligible for the NFP program, since it is specifically designed to support low-income mothers. Finally, NFP participants are scattered throughout the local region and due to lack of time, transportation and facilities, rarely meet as a group, whereas the teen moms who had elected to participate in the FDRP program attended the same high school and were required to meet collectively on a regular basis.

Currently, Dr. Byrd and the staff of several non-profits are working to return the Family Development Research Program to what they and its beneficiaries believe was a “best practices” state. It is unlikely that a daycare facility will reappear in the high school, but these researchers and community activists hope that in the near future, they can find a way to provide teen mothers with free transportation to and from a childcare facility that is within walking distance of the high school. Another major goal is to re-integrate the attention given to healthcare, social services, and academic mentoring by transforming Maureen’s part-time position into a full-time position with good retirement and healthcare benefits; a local non-profit agency has agreed to make this issue one of its top priorities.

Central to these efforts will be marshalling the support and publishing the views of those most knowledgeable about the FDRP: current and former teen mothers like the ones who have spoken in this piece. These young women seem eager to take on the challenge; they are outraged by the local school board and hospital’s abandonment of the FDRP and upset by the fragmentation and uncertainty besetting a program that so positively affected their own early experiences of motherhood. And as the following quotations reveal, these young women realize that the problems besetting the FDRP are connected to more systemic societal injustices that need to be addressed. Here’s what Courtney thinks about and has learned from her participation in the Family Development Research Program:

They [the FDRP staff] really helped me and I wish they could help just as much other high school girls who are going to be in my situation. It’s a shame that they’re not going to have the same information I had. I really wish the FDRP could be in every high school. I wish everybody could get the information I know; I want to shout it from the rooftops. My grandparents always complain about paying taxes, but I’m like you don’t understand, you’re helping the person who can’t afford to help themselves. You’re paying for someone like me and my daughter.... I’ll probably never complain about paying taxes, because I know that it’s helped me and one day my taxes can help other people.

What Anja wants everyone to know is how ridiculous it is to think that by having an onsite daycare,

you are just encouraging these girls to have kid. The truth is whether you have a daycare or not, you're gonna have kids having sex. It's gonna happen. No one thinks, "Oh yeah, I think I won't use a condom tonight because there's a daycare at school if I happen to get pregnant." Give me a break. What a daycare is doing is helping teen moms who are trying to take good care of their babies. It's helping them stay in school, get a diploma, and helping them go further. We should help girls get their diploma, not become a statistic. We need more awareness about young mothers and their needs. We need to give them daycares and more than enough resources to make it. But [she astutely adds] I don't think it's just teen moms that people in power are ignoring. I think it's the underclass in general. I think they need to really step it all up, because they're doing a crappy job.

Words of wisdom from teenaged single mothers....

¹As Joel Handler (2002) notes, when they hear the phrase "teen mom," many in the U.S. think "welfare mom," which often is "a code word for the inner-city dwelling, young African American woman, most likely a substance abuser, having children to stay on welfare and breeding a criminal class" (36). Some who condemn young and low-income single mothers, like William Raspberry, argue that "*all* of our other social ills—crime, drugs, violence, failing schools are a direct result of the degradation of parenthood by emotionally immature recipients" (qtd. in Adair, 2003: 37; emphasis added).

²The authors of this essay are deeply indebted to Dr. Rebecca Kissane, who helped Rachel design her qualitative study of the FDRP and who supervised Rachel's honors thesis, which is entitled *A Qualitative Analysis of the Family Development Research Program*.

³The names of all FDRP staff and participants have been changed in order to ensure confidentiality and protect the privacy of these individuals.

⁴Many of the college students who mentored the teen moms—including this essay's co-author Rachel—were students enrolled in a Women's and Gender Studies service-learning seminar entitled "Single Motherhood in the Contemporary U.S.: Myths and Realities." For more information about the interaction between the high school and college students, see Byrd's essays "If You Build It" (2007) and "Learning With, About, and From Single Mothers" (2008). The syllabus for the "Single Motherhood" course can be found in the *ITROW Handbook on Service Learning* (2008); it also has been reprinted in the Association for Research on Motherings's collection entitled *Teaching Motherhood*.

⁵The 6.5 per cent low infant birthrate for FDRP participants is for the academic years 2000-2001 through 2005-2006. During the 2006-2007 academic year, none of the nine infants born to FDRP participants were below average weight at birth.

⁶Nationally, about two-thirds of U.S. teen mothers do not succeed in getting

their high school diplomas (Koshar, 2001: 3).

⁷It is important to note that not all FDRP participants are able to pursue post-secondary education right after high school because they come from very low-income families and must be in the paid labor force for long hours—often juggling two or three minimum-wage, part-time jobs because such is all they can obtain with a high school diploma. And some FDRP participants are mentally challenged; for these students, graduating high school is a major and important accomplishment.

⁸Danielle claims that moving pregnant teens from the college-bound to the vocational track is a frequent phenomenon. Asked about the way in which teachers and guidance counselors at her high school generally respond to young moms, Danielle remarks: “I think their big thing, and a problem, is their perception that most of these girls don’t care about school, wanna drop out of high school, don’t even have ideas of going to college. So it’s all about trying to get them through high school, nothing more.” And Maria notes that she was treated with overt hostility by one of her teachers: “I had an English teacher, basically she didn’t like me because I was young, and a mom, and not married. She would make it almost impossible for me to be in her class.”

⁹As Ludtke (1997) notes, “Young mothers need safe, dependable, subsidized child care if they are to remain in school” (169). Ludtke draws attention to the Illinois Department of Public Aid’s 1991 survey of over 150,000 single parents (primarily single mothers) who were receiving welfare or who had only recently gotten off the rolls; “42 percent of the teenage mothers reported that difficulties in securing child care had forced them to quit school within the past year” (169).

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