

1. Introduction

Teenage motherhood is framed as a detrimental life path warranting teenage pregnancy prevention initiatives and interventions in much of the Western world. In the UK, Public Health England (2018) state that:

Teenagers have the highest rate of unplanned pregnancy with disproportionately poor outcomes... Teenage mothers are more likely than other young people to not be in education, employment or training; and by the age of 30, are 22% more likely to be living in poverty than mothers giving birth aged 24 or over (Public Health England 2018:1)

SmithBattle (2018) argues a similar ‘alarmist paradigm’ is evident in the US amongst advocacy organisations, politicians and professionals. Such a position is given legitimacy through reference to studies which appear to support this uncompromisingly negative trajectory. Yet, and as argued by Graham and McDermott (2006), Duncan (2007) and SmithBattle (2018), the kinds of research favoured by policy makers are often limited. Firstly in terms of the underlying methodological debates which belie the certainty of claims made about teenage mothers and secondly in respect of the over-reliance on quantitative work which obscures the voices of young mothers¹ themselves. This paper sets out these issues in detail before adding one further limitation which has yet to be given the attention it deserves; it is argued here that the potential for change over the lifespan is rarely acknowledged and yet has important implications for how we understand teenage motherhood. Without acknowledging that the outcomes of teenage motherhood are not stable and may change over time, teenage motherhood will remain framed in deterministic terms.

In recognition of these shortcomings, a narrative review of qualitative longitudinal research in this area was conducted. The aim of the review was to explore what such research can add to current claims about teenage motherhood particularly in terms of how outcomes may change over time. Further, the review sought to investigate what qualitative work can tell us about what facilitates, drives or impedes those changes. The review revealed that changes in outcomes are indeed evident but are neither linear nor guaranteed. The trajectories of young mothers’ lives are highly dependent on contextual factors such as pre-pregnancy background,

¹ This term is often preferred by young mothers themselves and so used wherever possible although what is being referred to is teenage mothers. The term cannot be avoided altogether however for the purposes of clarity.

post-pregnancy circumstances, personal resources and, importantly, informal and formal support.

The aim of this paper is therefore twofold. Firstly to present key issues with the current research base used to underpin policy, to start to fill some of the gaps in our understanding of young mothers' trajectories over time through the production of a narrative review of qualitative longitudinal research. It is argued here that a greater use of qualitative methods within longitudinal research would make an important contribution to long standing academic challenges to potentially misleading problematic perceptions of teenage motherhood as well as to public campaigns regarding the stigma attached to youthful parenting. In terms of policy, we also have much to gain by expanding the age range and methodologies commonly preferred by policy makers. Understanding how young mothers' lives have evolved and what kinds of support they benefitted from would aid the provision of future services for teenage mothers. This paper therefore makes an important start in this process through the production of a narrative review which highlights contextual factors warranting attention in both research and policy spheres.

2. The Problems with Measuring

Graham and McDermott (2006) argue the dominance of quantitative evidence within policy affirms the idea that teenage motherhood is inextricably linked to social exclusion. In part, and as argued by Duncan (2007), this is because studies often do not compare 'like with like' in that teenage mothers are compared to all mothers. Given that teenage mothers are more likely to come from deprived backgrounds (Duncan 2007), what is being measured may then reflect background characteristics and prior disadvantage rather than teenage parenthood itself. As Ermisch (2003: 2-3) argues, this approach is 'likely to be biased toward overstating adverse impacts of early childbearing, and this should be taken into account in interpreting the estimates'.

To overcome this, studies have accounted for background experiences by controlling for observable variables. Olausson et al (2001) and Assini-Meytin and Green (2015) found this reduced but did not eliminate the strength of association between teenage parenting and poor outcomes in adulthood. Consequently, some studies argue that teenage motherhood is a problem regardless of pre-existing poverty (Hobcraft and Kiernan 1999; Henretta et al., 2008) with economic disadvantages 'persisting for at least a decade' (Gibb et al., 2014: 9).

Nonetheless, as many studies utilise data from secondary sources, observable measures

(preceding or intervening) are necessarily limited to the factors considered by the original study, which is not always specifically related to teenage motherhood. Therefore studies may ‘...have very limited information on ‘control variables’ that may affect both outcomes and the age at first birth...’ (Ermisch 2003: 2). This makes consequences hard to determine as what is being measured might be the long-term effects of unobserved attributes which led to teenage motherhood in the first place (Berthoud et al., 2004 in Wiggins et al., 2005).

In an attempt to overcome some of the issues with selection factors, some studies have utilised comparisons with sisters (Geronimus and Korenman 1992), between teenage mothers with twins and those who had singleton births (Groggar and Bronars 1993) or between teenage mothers and those whose characteristics indicate a propensity to become teenage mothers, but did not (Levine and Painter 2003). Hotz et al., (1999: 4) exploit what they term a ‘natural experiment’ by taking women who had a miscarriage as teenager as a control group. On this basis, they argued that previous studies ‘...failure to account for selection bias vastly overstates the negative consequences of adolescent childbearing...’ (Hotz et al 2008: 73). A reduction or even elimination of poor outcomes have been found in a range of areas when others have taken steps to determine whether outcomes were due to age at first birth or pre-existing circumstances (see Goodman et al 2004; Ermisch and Pevalin 2003; Webbink et al 2011; Patel and Sen 2012).

These methods are not without their shortcomings however. For example, issues have been raised with the use of miscarriages as a control group in that they are not random (Ashcraft et al 2013) and have been substantially underreported (Hoffman 2015). Indeed, a reanalysis and extension of Hotz’s paper some years later revealed far more negative results than had originally been reported (Hoffman 2008). Furthermore, as SmithBattle (2018) notes, although such methods may account for background factors relating to family or local circumstances, individual differences and experiences are overlooked. This leads us to question whether there is indeed a perfect method from which to measure the effects of teenage motherhood. Indeed when Kane et al (2013) attempted to account for the variations in outcomes noted here by using a range of research methods on a single data, they found differences in outcomes are related to the choice of statistical method.

The methodological issues and debates discussed here remain pertinent and yet unacknowledged in policy papers. Instead, policy makers are unequivocal in their claims about poor outcomes. Debates over methodology are not the only issue here however. Cohort

effects are such that previous research may not even be a useful tool from which to predict future outcomes or to base policy provision on.

3. Cohort Effects

Many studies draw on cohorts of teenage mothers parenting in periods not necessarily comparable to the present day. As teenage pregnancy has decreased in both the US (CDC 2018) and the UK (ONS 2019), it is likely that teenage mothers face greater stigma and isolation (Mollborn 2017) as a result of their 'atypical' behaviour. Those who do become teenage parents may also be a very different selection of individuals. For instance, Henretta et al (2008: 606) note that when early childbearing was more common, teenage mothers were less likely to 'reflect the high level of selective disadvantage that characterises contemporary early motherhood'. Indeed, SmithBattle (2018) reports that several studies indicate that poorer outcomes are more evident in recent cohorts of teenage mothers.

Expectations of teenage mothers have also shifted. For example, former teenage mothers in Wiggins et al's (2005) study reported that when they became mothers there was a 'general assumption' that they would become stay-at-home mothers. By contrast, a more recent teenage mother reported changed expectations and increased opportunities for education and employment. Such shifts have implications for those who not only confound norms by having a teen birth but may then also flout contemporary expectations of women by choosing to stay at home.

The social policy context further impacts on changed experiences of teenage motherhood. In both the UK and the US, a shrinking of the public safety net is evident. In the UK, the withdrawal of social policies such as the Teenage Pregnancy Strategy as well as the context of austerity and its impact on wider public services is significant (Author 2015). Young people becoming parents before this period had profoundly different services at their disposal with which to navigate youthful parenting. Similarly, in the US, welfare reform and falling incomes in low income families has meant less financial support for many teenage mothers (Mollborn 2017). At the time of writing Brexit uncertainty in the UK and an effective abortion ban in some areas of the US loom large in the headlines. It is yet unclear what effects these shifts may have on future cohorts of teenage mothers. For example, potential economic hardship as a result of Brexit may lead to further reductions in the public safety net and restricted access to abortion in the US may increase numbers of teenage mothers. Such examples support the argument that '...we can only know what the effects of a teen birth

have been, not what they likely *will* be for current teen mothers' (Hoffman 2015: 648). This begs the question is whether is it more useful to consider the voices of young mothers through qualitative research in order illuminate experiences rather than outcomes.

4. A Need for Voice

SmithBattle (2000:85) argues that, '...the deficit-finding focus of empirical-rational studies have exaggerated the negative consequences of an early pregnancy'. She further contends that parameters are imposed from a middle class perspective which define what is and isn't 'normative'. As Wiggins et al (2005: 19) found, 'normative definitions of positive and negative outcomes did not necessarily reflect the women's own definitions of such outcomes'. This imposition of measures and outcomes can add a moral dimension which reinforces the idea that the life paths of young mothers are deviant. This is explicit in some of the language employed. For example, Gibb et al (2014:9) question whether negative long-term outcomes of teenage motherhood may stem from the fact that having a child young 'interferes with important life tasks...such as completing education and entering the job market'. Such phraseology not only infers that motherhood is less important but also reinforces a middle class life course trajectory as normal and desirable.

Whilst these kinds of judgments are certainly possible within qualitative research studies, the silencing of the voices of young mothers in quantitative work prevents alternative readings. For instance, Ermisch (2003) found that teenage mothers were less likely than women who have children later in life to live with a partner in their 30's and 40's. Where partners were present, they were more likely to be unemployed or low earners. Ermisch described such findings as indicating that having a child as a teenager 'constrains a woman's opportunities in the 'marriage market' in the sense that she finds it more difficult to find and retain a partner' (pg20). Again, the phraseology is problematic in that it negates the agency of young mothers who may not wish to find a partner, or want to stay with them which, as Clarke (2015) found, may lead to a more positive and fulfilling relationship in the future.

In the years since Graham and McDermott (2006) and Duncan (2007) raised arguments regarding the narrowly quantitative research base for policy on teenage motherhood, little has changed. A wealth of qualitative research examining teenage motherhood has emerged, much of it challenging a negative reading of teenage motherhood (see for example Duncan et al 2010; Kemp and McSharry 2017). Furthermore, service providers regularly take a user-led focus (see The Mental Health Foundation 2018) with reports often including the voices of

young parents (see Elliot and Walsham 2018). Nonetheless, and as Graham and McDermott (2006) recognise, qualitative studies are ‘routinely excluded from evidence review’ (pg21) and ‘individual-level interventions, however facilitative and supportive, are framed by the wider policy discourse in which they are embedded’. For instance, the 2016 ‘Framework for Supporting Teenage Mothers and Young Fathers’ (Public Health England 2016:3) note that ‘every young parent has their own individual story’ and acknowledge pre-pregnancy vulnerabilities as important. Nevertheless, outcomes of teenage motherhood are then presented as though none of the debates and questions above have been raised. Moreover, the voices of young parents are conspicuously absent in the document and in the vast majority of the studies used to support it.

This paper has thus far demonstrated some of the limitations of the research base used to support claims about and policies for teenage mothers and has demonstrated the role that qualitative research can play in providing a deeper understanding. This paper also argues however, that unless we reflect on longer term impacts and change across the life-course, we will continue to have a partial understanding.

5. Accounting for Change

It is argued here that policy makers (and others) present outcomes as a forgone and stable conclusion despite evidence that outcomes can and do shift over time. For example, Kane et al (2013) point out that having a child at any age has immediate consequences for labour market involvement. They posit that a later measure may reveal consequences of a teenage pregnancy are smaller than is currently claimed. Indeed, Schulkind and Sandler (2019) found that differences in educational attainment between mothers who gave birth whilst in high school and older mothers narrow over time. They suggest this is due to later take up of alternative educational pathways. Such a claim is supported by some quantitative longitudinal studies (Furstenberg et al 1987; Rich and Kim 1999; Bradshaw et al 2014).

Qualitative retrospective studies with former teenage mothers also indicates change occurs over the life span and adds an understanding of what might drive that. For example, Clarke (2015)² set out to explore what factors contribute to positive outcomes with a particular focus on participants’ personal resources. Clarke argues that; ‘pregnancies provided the impetus for growth and development as the respondents developed and utilised a combination of life

² Sample was aged between 24 and 54 with an average age of 34.

skills which fuelled the development of other adaptation strategies and protective factors' (pg482). Palacios and Kennedy (2010)³ study illustrates similar personal motivations amongst a sample of American Indian former teenage mothers and found evidence of improved situations over time. Mothering was an important impetus for change in that it instigated the development of parenting practices in order to break the cycle of their own experiences and improve the lives of their children. Importantly, however, both studies also noted (although did not focus on) the need for support in order to build on this capacity.

Despite these insights, the studies referred to in this section are not able to give a complete picture. For instance, quantitative longitudinal studies may demonstrate that educational attainment can improve over time but, as Rich and Kim (1999) point out, they raise unanswered questions regarding what enables or hinders a return to education. Furthermore, the tendency to compare outcomes to older mothers (see for example Furstenberg 1987) means they are mired by the methodological debates raised above and so continue to present teenage mothers as having 'failed'. A qualitative retrospective approach (such as that adopted by Clarke (2015) and Palacios and Kennedy (2010)) may provide an alternative perspective and some understanding of what drives and facilitates change. However, such studies are also hampered by the accuracy of participants' recall and do not track change over time. Furthermore, as SmithBattle (2018:86) observes, the vast majority of qualitative studies only collect data within the first two years postpartum. This paper therefore argues that only qualitative longitudinal approaches are able to account for change over time, to explore what influences this and provide an understanding of how teenage motherhood is experienced in the long-term. To support this argument and to bring together key findings from such studies, a narrative of qualitative longitudinal studies has been produced. The following sections will now go on to describe that process and present the results.

5.1 Method

The search was conducted across May and June of 2019. Three databases were searched for relevant publications (Scopus, Web of Science and IBSS) using the key words, 'teenage motherhood', 'teenage mother', 'adolescent mother' and 'adolescent motherhood' alongside 'outcomes' or 'longitudinal' and initially focused on papers published after 1990. At this stage the search identified a total of 1831 papers. Papers relating to teenage fathers and the children of teenage mothers were then excluded from the search. Although these are

³ Sample was aged between 20 and 65 with an average age of 37.

undoubtedly important areas of investigation, they warrant a paper of their own to account for their specific experiences. Once these and duplicates were removed, reference lists were then screened for additional studies that might have been missed in the original database search. Reference lists were then screened and an author search for additional papers associated with relevant studies was conducted. Despite the date range of the initial search, this ensured that earlier papers for relevant studies were included. A further search for pre-1990 papers was also conducted although yielded no relevant results. The remaining papers were then grouped together in reference to the studies they referred to and organised into four groups: (1) quantitative long-term⁴ outcomes (23 studies), (2) longitudinal quantitative (14 studies), (3) qualitative long-term outcomes (4 studies)⁵ and (4) qualitative longitudinal (6 studies). Although the researcher was primarily interested in qualitative longitudinal studies, this process allowed a sense of what type of research was dominant, how the numbers of longitudinal studies compared to other types of research in this area and what different methodological approaches can tell us.

To be eligible for inclusion in the fourth group and for analysis for this paper, studies were required to have been longitudinal and utilised qualitative methods. Longitudinal research was defined as being any study where data had been collected at more than one point with at least two points occurring after childbirth. Initially the search was restricted to qualitative longitudinal studies. However, given the small number of these studies and the interest in changes over time, the decision was made to include studies which took a mixed method approach.

The studies and their resulting papers are summarised in the table and details are provided below.

**insert table here*

5.2. The Studies

The longest of the studies included in the review has been conducted by Lee SmithBattle. Starting in 1988 and based in the USA, SmithBattle has been revisiting a diverse sample of teenage mothers and their families every 4-6 years. The original study consisted of 16

⁴ 'Long-term' is defined here as outcomes measured when the women were aged over 30

⁵ For groups 1-3, this is the total number of studies found at the initial search stage. More may have emerged had these avenues of the search been continued but at this point the study focused on qualitative longitudinal studies.

teenage mothers (defined as women who had given birth to their first child aged under 19), their parents (9) and partners (4). It aimed to examine transitions to motherhood and consider how they were shaped by personal meanings and family caregiving practices. The sample size fluctuated for the following six waves between 9 and 13 mothers and their families and in later waves expanded to include the children of the teenage mothers. Detailed narratives were elicited through observations (at wave 1) and a range of in-depth interviews focusing on coping, family routines, recent family events and life history with Wave 7 specifically focusing on housing trajectories.

Wiggins et al's study was conducted in the UK and focused on teenage parenthood in the context of social exclusion. It sought to establish what factors differentiated teenage mothers with positive outcomes and those without. The study drew on datasets from two previous studies; The Social Support and Pregnancy Outcome Study (conducted 1986-87) and The Social Support and Family Health Study (conducted in 1999)⁶. The authors drew a new sample of 246 women from the original studies who had had their first child as a teenager (defined as being 'under 20'). Women were on average 17.5 years old (13-20 years) at the point of child birth and 25 (range 20-44 years) at the point of interview. A new analysis was conducted with this sample to explore how the circumstances of the teenage mothers differed from older mothers and to consider the short-term consequences of teenage motherhood. New data⁷ was then collected to examine longer-term consequences via postal questionnaires to those who could be traced from the original studies. These were designed to probe further into the circumstances around the birth of their eldest child. The new sample consisted of 62 women of an average age of 31 (range 22-50) having given birth at an average age of 18 (range 13-19). 54 interviews were then conducted to explore the experiences of being a young mother, current situations and their views on policy.

Leadbeater & Way's study began in 1987 and came from a recognition that current methods did not capture the variations in outcomes and experiences of being a teenage mother (Leadbeater and Way 2001). They sought to address this diversity by linking outcomes to past experiences and the different challenges the women faced in their trajectories. The initial wave of data collection included 126 teenage mothers aged 14-19 (average age 17.1 years) who were recruited from an adolescent health centre when their babies were 3-4 weeks old.

⁶ referred to collectively in the table as 'time 1')

⁷ New data was also collected from new sample groups of teenage mothers and former teenage mothers as well as from fathers and children of women from the original studies. These new samples were not included in this review.

Data was collected at six time points with the final wave of data collection occurring in 1994. Measures were taken including those relating to educational attainment and future plans, mental health, social support, relationships and children's behavioural outcomes. These measures were then re-taken at waves 2, 3, 5 and 6, with child language assessments and videos of mother/child relationship taken at time 4 and qualitative data collected at waves 5 and 6.

Werner and Smith's data on teenage mothers' trajectories is drawn from a larger longitudinal study of a group of individuals born and living on the island of Kauai in Hawaii. Focusing on a cohort born in 1955, Werner and Smith (2001) investigated the impact of biological, psychosocial risk factors, stressful life events and protective factors on the groups' development. Data was collected at six time points until the cohort turned 40. At wave 4 (when the cohort was aged 17/18) 28 teenage mothers were identified. Data at this point was collected via a biographical questionnaire, clinical interviews with a psychologist, a semi-structured interview and from school/college test scores. Data was collected via a semi-structure interview, a Life Events Checklist, questionnaires assessing current status and coping ability, public records and a range of surveys measuring psychological well-being and sense of self.

Dalla et al's study draws on two data collection points with Native American teenage mothers living on the Navajo Indian Reservation in Arizona. The first wave of data collection was in 1992 and consisted of 29 young mothers aged between 16 and 19 (average age 17.7yrs). The second wave of data collection occurred in 2007 with 22 of the original sample who were, at this stage aged 28-34 (average age 31.5yrs). At both points of data collection, the participants filled out a social support questionnaire but the focus of the interview shifted slightly. At wave one, participants were asked to discuss social support, identity and the challenges of being a young parent on the reservation. At wave two, participants were asked to describe issues surrounding being a teenage mother.

Sheeran et al's study aimed to examine patterns and trajectories of teenage mothers as they transition into adulthood. It was linked to a larger study which examined pre-term birth as a significant stressor which might converge with other factors such as teenage motherhood to influence the experience of mothering. The original sample was recruited in 2008 from hospitals during 'age-specific' ante-natal and post-natal classes, through special care nurseries and maternity wards. It consisted of 40 teenage mothers aged 17-19 (average age

17.9 years) six of whom had had pre-term births. Data was collected a further three times; 3-4 months after discharge from hospital, 12 months post-discharge and five years later. At the final point of data collection (to-date), participants were aged 22-25 years old (average age 23.9 years). Semi-structured interviews were conducted at each wave of data collection, asking the mothers' perceptions of how parenting had affected their lives, thoughts and feelings associated with parenting, daily experiences of parenting, individual characteristics, expectations made of them and feelings associated with parenting.

The aim of this paper was to provide a narrative review of these studies focusing on what they can tell us about changes over time. As such, rather than providing a comprehensive outline of all the findings and arguments, the following section draws out data relating to change and its context. Although such a summary cannot do justice to the rich layered data presented in these studies and the insight they enable, bringing together overarching points from key relevant papers in this way starts to illuminate some of the knowledge gaps evident in the current policy base. Furthermore, it enables us to deconstruct the image of teenage motherhood as a static and inherently disastrous life path and make the case for further research of this kind in this area.

5.3 Change, Context and Facilitative Factors

Although most of these studies did not seek to track changing circumstances, it was evident that the outcomes of teenage motherhood can and do change over time. For instance, narratives revealed improvements in education and employment (Leadbeater and Way 2001; Werner and Smith 2001). Wiggins et al (2005: 56) did specifically consider time effects and concluded that, 'the passage of time...often enabled teenage mothers to turn their lives around in a positive way...' and conclude that, 'the time point at which data are collected on teenage motherhood can be crucial, since mothers who describe poor outcomes at one point in time may have very different experiences to report at another'.

Nonetheless, as Leadbeater and Way (2001) acknowledge, presenting pictures of overall losses and gains obscures diverse outcomes between women. For example, Sheeran et al (2018) identify a 'stability - chaos' continuum onto which the mothers in their sample can be placed along. Furthermore, young parents may do well in some areas and badly in others (Leadbeater and Way 2001) and lives do not unfold in a linear way with circumstances steadily improving over time. The ups and downs of participants' lives as well as the context of 'poor' outcomes are captured in qualitative reflections and case studies. For example, in

SmithBattle's work (2000) one participant was described as living on welfare with Section 8 housing⁸. If these findings were to be presented as bald statistics they risk being quantified as 'poor outcomes'. However, SmithBattle's qualitative longitudinal approach shows the participant to feel pride in the provision of a stable home which enables her to create family rituals. Moreover, when this is put in the context of her past (the death of her father and subsequent drug addiction of her mother) rather than seen in isolation, her current position and sentiments about a stable home are better understood and can perhaps be seen as a positive outcome.

In their recognition of diverse outcomes, these studies also help to determine what may cause them and to identify potential protective factors. Pre-pregnancy factors emerged from these studies as particularly important. For instance, Wiggins et al (2005: 8) found that, 'much that was negative about the experience of teenage pregnancy...resulted from factors related to their socially excluded lives rather than the teenage pregnancy per se' and that whilst teenage pregnancy may accompany social exclusion, it does not cause it. Similarly, Leadbeater and Way (2001) demonstrate the interconnection between pre and post pregnancy experiences of poverty, family support and school and the impact they have on 'outcomes'. Sheeran et al (2018) highlighted the way pre-pregnancy experiences such as family dysfunction was integral in explaining where on their continuum of stability – chaos women were placed. Importantly, these studies are able to demonstrate how such experiences impact rather than simply making links between variables. For example, SmithBattle (2007:413) found that (for those who had come from impoverished backgrounds) efforts to return to education were made more difficult by 'economic hardships, family obligations, unreliable childcare, and memories from past school failures'. The role of contextual factors in enhancing (or preventing) attainments such as qualifications also became clear. For instance, Werner (1993: 507) notes that, 'the support of kith and kin, and a stable marriage all contributed to positive changes in their life trajectories' while Dalla et al (2009; 2013) how living on an isolated reservation can create obstacles to educational opportunities through distance and lack of transport. Both these studies also highlight the importance of taking personal resources, such as competence, motivation, resilience and determination into account.

Indeed, the transformative potential of motherhood and the way in which it can inspire such personal resources was evident in all studies. Leadbeater and Way (2001) found that, for

⁸ The Section of US housing Act which authorises payment of housing assistance to private landlords on behalf of low income households.

some women, negative perceptions of what they may achieve as teenage mothers fuelled a determination to prove family members wrong. Research conducted with teenage mothers in the early months and years have also found that teenage motherhood can provide a motivation to succeed or the impetus to move away from problematic behaviour.

Longitudinal studies expand on this finding by allowing us to see how that motivation translates into action over time. For example, Dalla et al demonstrates how commitment to children led to an 'impetus to stop drinking' (2013:171), educational attainment which 'exceeded expectations' (2009:154) and the ending of violent or problematic intimate relationships (2013:171). Nonetheless, care is needed before linking determination and resilience to outcomes. Not only might a teenage pregnancy act as a further obstacle adding to pre-existing disadvantage (Leadbeater and Way 2001) but pre-pregnancy contexts can extend into parenthood and override personal determination (Sheeran et al 2018).

Furthermore, support can be 'critical' in distinguishing between positive and less positive outcomes (Wiggins et al 2005) and may be key in the development of personal resources needed to overcome challenges. For example, Leadbeater and Way (2001) demonstrate how the experience of challenges can act as a motivation to succeed but that challenges only had positive outcomes when it was accompanied by support from family, friends or boyfriends.

Nonetheless, the availability of informal support from families and partners (emotional or practical) cannot be assumed. Furthermore, Leadbeater and Way (2001) points out, different types and sources have different impacts. For instance, long-term emotional, residential and childcare support can negatively impact on financial and personal self-sufficiency. These authors also argue that support from families needed to be conditional to be effective. On other words, help could be given (for example childcare) but expectations needed to be made of the young mothers. Care must therefore also be taken before considering family support as a straightforward solution to the challenges of youthful parenting. These studies also demonstrate that formal support is integral not just to prop up family support (and its potential absence) but to provide resources and the means through which women can do well. SmithBattle (2007:416) found that 'trajectories were powerfully shaped by what had been publicly available to them as children and later as adults'. For instance, Werner and Smith (2001) note that educational gains were enabled through a range of specialist programs and affordable day and night classes at a local college. What is not available is also important. For instance, the lack of stable, safe and affordable housing was found to have a negative and disruptive impact (Leadbeater and Way 2001) with SmithBattle (2019:8) denoting it as a

cause of ‘toxic stress’. Both these studies argue for policy makers to have a greater role in increasing the availability and access of low-cost housing. They also call on those working to support teenage mothers to recognise the potential of capturing and building on the impetus to ‘succeed’ that motherhood seems to engender. This means recognising young mothers as emerging adults with potential rather than children with deficits (Leadbeater and Way 2001) and to help young mothers ‘imagine and carve out a meaningful future’ (SmithBattle 2005:845). As Leadbeater and Way (2001:167) conclude, how young women adapt to the challenge of teenage motherhood not only ‘rests on the stability of the rock these women have stood on’ but also ‘depends on the resources and other risks they encounter’.

6. Concluding Thoughts

This paper has brought together a number of issues with the ways in which research regarding the outcomes of teenage motherhood has been used and presented. Many of the researchers whose work is discussed here are aware of the limitations of the methods and data they are working with. They make significant efforts to ensure the work is as robust as possible and take care to highlight the limits of what can be claimed. However, this complexity does not appear to filter through to public, media or government perceptions of teenage motherhood. Instead, poor outcomes of teenage motherhood are presented as though none of the debates and questions above have been raised. In part then, this paper serves as a reminder of this underlying debate. It argues that in order for a more nuanced and helpful understanding of teenage motherhood to emerge, these limitations need to be acknowledged by those who have the power to frame the context in which teenage mothers are parenting.

The paper adds a further contention with the research field and those who draw on it however. It is argued here that measuring at a given period does not provide a full picture of the lives of teenage mothers. In order to start to fill this lacuna, findings from qualitative longitudinal studies relating to changes in the outcomes experienced by teenage mothers were discussed. Such studies reveal a diversity of experiences and demonstrate how pre and post-pregnancy contexts converge with post-pregnancy experiences. In doing so, the ‘cumulative impact of social disadvantage (or advantage)’ (SmithBattle 2018: 88) becomes evident. These studies therefore support more recent claims made in the quantitative literature as to the importance of pre-pregnancy contexts but, more than that, they add an understanding of *how* this translates into experience and therefore what role social policy can play in circumventing continuing disadvantage.

These studies also illustrate how women's own sense of their lives might not be reflected in measures of outcomes and challenge the presentation of lives as being wholly determined by a teenage pregnancy. Mothering was found to provide an important impetus for change. More than simply a means to achieve 'other things' however, mothering was also found to be a central role and identity for many women. For example, (and bearing in mind caveats about the diversity of experiences), Wiggins et al (2005) show that despite the challenges they faced, the women expressed pride in their achievements, joy in motherhood and a sense that there were some benefits to being a young mother. Similarly, Werner and Smith (2001) share spontaneous comments of pride in their parenting role and their children. Such findings remind us that outcomes are more than a set of achievements to be quantified. No less than older mothers, young mothers value their parenting role, and whilst policy makers may define this as low expectations (SEU 1999), there is a case to be made for motherhood as an alternative life path.

Nonetheless, by challenging commonly held assumptions about teenage motherhood we need to be careful not to undermine the need for social policies which support teenage mothers and their families. By highlighting teenage motherhood as an individual success story, there is a potential that we feed into dominant neo-liberal rationales of resilience and hard work. Instead, we must illuminate (as these studies do) the structural factors complicit in its incidence and challenges as well as factors which contribute to 'successful outcomes'. Only when we take these voices on board can we start to challenge our assumptions of poor outcomes and facilitate a redirection of social policy. As Mollborn (2017) argues, focusing on the precursors of teenage pregnancy is likely to be more effective in both pregnancy reduction and improving outcomes than continuing to direct resources to teenage pregnancy prevention.

This paper ultimately questions the very notion of an 'outcome' however. The word denotes a finality, yet it has been demonstrated here that outcomes are not stable and change over time. Furthermore, it has been shown how important it is to give young mothers' a voice so that outcomes can be put into context. Oxford et al (2005:499) argue that teenage mothers who 'defy stereotypes of adolescent parents' tend to be rendered visible only in qualitative work. It is argued here however that *all* young parents are at risk of being misrepresented when their own voices are not taken into account. A longitudinal qualitative approach is therefore considered as an important way by which we can account for this gap in understanding. Yet it must be acknowledged longitudinal qualitative research it is not a perfect panacea. Such work

is also likely to be limited by the cohort effects plaguing quantitative work. Furthermore, in order to track change over time, qualitative methods alone are not sufficient and so any incorporation of quantitative work will also have to contend with the debates discussed above around measuring. Nonetheless, as has been shown here, longitudinal studies which incorporate qualitative methods are best placed to provide an understanding of change across the lifespan and, importantly, what can drive, facilitate or impede trajectories. Whilst they may not produce the ‘analytic closure’ (Henderson et al., 2012:17) quantitative research aspires to and policy makers would perhaps prefer, other benefits such as an exploration of the development of narratives and identities are evident (Thomson and Holland 2003).

To conclude, when we fail to acknowledge long-term shifts or young mothers’ voices, we are adding to the negative perceptions of teenage parenthood. Challenging and difficult stories do exist and we should not shy away from telling them. However, positive stories and experiences are also evident – the two need not be mutually exclusive – and when we do not acknowledge diverse outcomes and their influences, we do young mothers (and those who seek to support them) a disservice.

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