

Young Parents' Stress and how Society Responds

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ABSTRACT

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Studies have found that young parents can experience domestic violence, lack of stable housing, and lower financial resources and that social support to improve these issues has been lacking.

My double thesis in Sociology and Psychology is an in-depth case study of Young Parents United in Schenectady, NY, with the purpose of examining the social and psychological stresses that young parents face and the societal response to these problems from this organization. In doing so, this thesis identified the needs of young parents in society, gained more information about what contributes to parenting stress, and investigated how Young Parents United tries to address these problems. The case study used public records, guided conversations with the director of Young Parents United, and a questionnaire with responses from the clients at Young Parents United to gather information. The results from this thesis can help Young Parents United meet the specific needs of their clients more effectively and gather more insight into the stresses and needs of young parents.

# Societal Response to Young Parents' Stress

ABSTRACT	2
<b>Chapter 1: Introduction and Literature Review</b>	
Introduction	5
<i>Literature Review:</i>	
Family History and Parenting Trends	7
Home Factors and Child Development	9
Gender Differences in Parents	10
Factors of Childhood Maltreatment	12
Parental Stress and Satisfaction	14
Macro-Level Factors of Parental Stress	21
Perceptions of Young Parents	22
Stigma Towards Young Parents	25
Health and Healthcare Resources for Young Parents	28
Young Parents' Stress Levels	35
Societal Response to Adolescent Parents	43
<b>Chapter 2: Methodology and Results</b>	
Research Question:	51
Hypotheses for the Pilot Questionnaire:	52
Guided Conversation with the Organization's Director:	53
Participants:	54
Measures:	54
Procedure:	56
Results:	57
Mission and Organization of Young Parents United:	57
Pilot Questionnaire Results:	73
<b>Chapter 3: Discussion</b>	
Pilot Questionnaire Discussion:	78

Societal Response to Young Parents' Stress

Debrief with Program Director Discussion:	81
Young Parents United Compared to Other Agencies:	83
<b>Chapter 4: Summary and Concluding Remarks</b>	
Summary:	87
Concluding Remarks:	88
Limitations and Future Research:	89
References:	91
Appendix A: Participant Informed Consent	94
Appendix B: Thesis Questionnaire for Participants:	94
Appendix C: Thesis Questionnaire Debrief:	98

## **Chapter 1: Introduction and Literature Review**

### **Introduction**

Young parents are a vulnerable group in society. They face stigma for having a child at a young age and the everyday norms of society preventing them from finishing their education, finding stable housing, making money, and taking care of their family. Many young parents find themselves between homes looking for a way to care for their child(ren). This task is nearly impossible if young parents do not have the necessary support. Organizations such as Young Parents United are present throughout the United States (and the world) to support young parents and their children. These organizations provide various services, such as housing assistance, food, education assistance, parenting classes, and health services.

This thesis examines the stress and needs of young parents and the societal response to them. This case study is used as a vehicle used to address this thesis's purpose and research topics. Young Parents United was selected as the agency for this project. Public records, guided conversations with the director of Young Parents United, and a questionnaire presented to the clients at Young Parents United were used to gather information for this case study. Young Parents United directly addresses the needs of young parents in Schenectady and surrounding communities. As a small organization, Young Parents United can get to know the specific needs of each individual client and work with them to achieve their goals.

The follow-up conversation with Egan, the director of Young Parents United, helps pursue the purpose of this case study by gaining the director's opinions, learning what the clients of Young Parents United have to say, and what public information is available to address the goals of this thesis. As a semi-recent agency, Young Parents United adapts its procedures and structure to address its clients' challenges directly. Further, Young Parents United works with

## Societal Response to Young Parents' Stress

organizations and health services in the surrounding area to assist their clients with various commitments and responsibilities ranging from medical services to working with child protective services.

Chapter 1 of this thesis includes a literature review to answer the purpose of this case study. The literature review focuses on the following topics: family history and parenting trends, home factors and child development, gender differences in parents, factors of childhood maltreatment, parental stress and satisfaction, macro-level factors of parenting stress, perceptions of young parents, stigma towards young parents, health and healthcare resources for young parents, young parents' stress levels, and the societal response to adolescent parents. The information found from the literature review directly influenced the hypotheses of this thesis.

The methodology and results make up Chapter 2 of this thesis. This chapter identifies the research question and other questions asked to the participants of this case study. It also includes the hypotheses for the pilot questionnaire, information about the guided conversations with the director of Young Parents United, the participants' makeup, the measures used in the pilot questionnaire, and the procedure of this case study. The results section includes the analysis of Young Parents United with the director's input about the organization and the results of the pilot questionnaire.

Chapter 3 includes the discussions of this thesis. I separated the discussion chapter into three different sections: discussion on the results of the pilot questionnaire, discussion on the guided conversation with the director of Young Parents United, and Young Parents United compared to other agencies with similar missions and goals. Information from the guided conversations with the director of Young Parents United is dispersed throughout the discussion chapter, specifically the director's reactions to the results.

## Societal Response to Young Parents' Stress

Lastly, Chapter 4 includes a summary and concluding remarks of this thesis. The entire thesis is summarized in the summary section, which emphasizes the results. The concluding remarks focus on what the thesis allowed me to do, the research process, and the overall themes of the thesis. Further, the concluding remarks section addresses the limitations of this case study and makes recommendations for future research.

### *Literature Review*

#### **Family History and Parenting Trends**

The importance of family relationships goes back generations. There is a cycle of parenting and parenting styles; we learn from our surroundings as past human experiences influence future actions. Understanding the influence of past parent-child relationships on future parent-child relationships is monumental in distinguishing factors that influence parenting. The past and present impact parenting, as one's childhood can set an example of the type of parent they either want to be or don't want to be. Kershaw et al. (2014) conducted a study where they analyzed the relationship of familial factors during pregnancy of young, low-income parents on parenting behaviors six months postpartum. All the participants in the study were in a romantic relationship with a significant other. This study highlighted the importance of family contexts in parenting behaviors, specifically the ecosystem model of parental involvement. This model suggests that there are two main factors that shape parenting: a combination of family context while growing up, such as the parent-child relationship and household norms and problems, and the parents' current relationship with their romantic partners (Kershaw et al., 2014, p. 197).

Family history has an enormous impact on parenting. Still, both family home factors and relationship factors significantly influenced parenting behaviors of the young, low-income parents six months postpartum, according to Kershaw et al. (2014). Their findings are consistent

## Societal Response to Young Parents' Stress

with previous literature as well. Of the family factors, the most important predictor in the family history variable was the participant's (both male and female) mother's involvement during their childhood (Kershaw et al., 2014). When separating the results based on genders, males had a significantly worse parenting outcome than females, and family factors played a more substantial role in associations for males than females (Kershaw et al., 2014). There is no exact reason for this data, but it may be due to societal roles for females, such as their expectation to be caregivers. The female expectation of being a caregiver may mean that family factors have less influence on their parenting behaviors as they are already expected to care for their children (Kershaw et al., 2014). On the other hand, males may be more influenced by their familial and relationship factors as they have fewer prior expectations set out for how they are supposed to parent.

In their study, See and Gorard (2015) set out to establish if parental behaviors and attitudes have a causal role in their children's educational outcomes. Only some aspects of See and Gorard's (2015) study will be discussed for this thesis. The younger years of education will be discussed for the thesis, as that is where the foundation of education begins, and young parents are typically still young during their child's early educational years.

There are claims that parental involvement is positively associated with better school attainment. These claims are highly supported with many longitudinal studies (Bates 2009; Crosnoe et al. 2010; Desforges with Abouchar 2003; Gfellner et al. 2008; Hango 2007; Orthner et al. 2009, as cited in See & Gorard, 2015). Although there is a clear correlation, that does not mean that parental involvement *causes* children to have stronger educational attainments; that could result from a variety of other factors.



## Societal Response to Young Parents' Stress

Through their literature review, See and Gorard (2015) identified two types of early parental behaviors that were undoubtedly positively associated with school readiness and successful school outcomes. The first is parents reading to their children in their early years, and the second is the quality of early parent-child (though specifically mother-child) interactions. Because these both take place during early years, it is necessary to identify how these interactions can impact a child's development, especially when the child has a young parent who has various other stressors going on in their life. The findings of their study are explained to be *suggestive* rather than *definitive*, as there is no way to identify causation between the two. Regardless, there are still many positive associations between parental involvement and their child's educational outcomes.

Other studies that See and Gorard (2015) analyzed indicated how parental involvement can also minimize socioeconomic status's role in a child's development. Dearing et al. (2009) followed a sample of 1,398 participants. They found that parents' higher levels of childcare participation were associated with a weaker connection between socioeconomic status and educational achievement (as cited in See & Gorard, 2015). These findings directly connect with Curenton et al. (2009), which emphasized how socioeconomic status is so influential in child development and child-parent relationships. Strong parental behaviors and attitudes could almost neutralize or offset the consequences of low socioeconomic status in child development.

### **Home Factors and Child Development**

Expressive deception can be convincing in the act of deception, and the theory of mind regards understanding that minds are susceptible to deception. Cole and Mitchell (2001) conducted a study to determine if social factors are linked with developmental aspects of

## Societal Response to Young Parents' Stress

deception in children ages four to five. In the study, children between the ages of four and five were assessed for their ability to show expressive deception and theory of mind. Children generally pass classic tests for theory of mind between four and five years old (Mitchell, 1996, as cited in Cole & Mitchell, 2001). This study revealed significant associations between family background and deceptive ability. The data from this study identified single parents as inferior parents compared to two-parent families and suggested that socioeconomic status was a predictor of theory of mind. Single parent stress levels were also a strong predictor of expressive deception in children. This serves as evidence of how parental stress and family life influence child development. Psychological stress can be caused through contextual factors, such as poverty, as is indicated in multiple studies (Dubow & Ippolito, 1994; McDermott, 1995; McLoyd, 1990; Wilson, Loh, Curry-Ei & Hinton, 1992, as cited in Cole & Mitchell 2001). Stated in other terms, families (and parents) living in a socially disadvantaged climate may parent with different authoritative measures which can impact the development of theory of mind in their children (Thomson, Hanson, & McLanahan, 1994, as cited in Cole & Mitchell, 2001). Maternal warmth was an independent predictor of children's future health in the Belsky et al. study (2006), regardless of socioeconomic status. This finding indicates that there may be ways to avoid the typical negative impacts of poverty.

### **Gender Differences in Parents**

Mollborn's study (2007) hypothesized that a lack of resources for teen parents might explain the lack of educational achievement and the adverse effects of teen parenthood. The results of this study are entirely supported for teenage fathers but only partially supported for

## Societal Response to Young Parents' Stress

teenage mothers. Housing and financial resources are thought to be more important for men, as childcare is seen as a complete necessity for teenage women.

Pollmann-Schult's (2006) research yielded the results that parents have a higher satisfaction of life in countries with more substantial and more generous financial benefits to families, higher levels of childcare, and more working-class flexibility than countries with low levels of support. The countries with more increased satisfaction of life for parents were associated with lower levels of financial stress and work-life conflict (Pollmann-Schult, 2018).

Fatherhood was more positively associated with life satisfaction than motherhood, which may be due to gender norms. Gender roles may play a role in this, as even though there is an increase in female employment in Europe, the traditional gender roles are still prevalent (Fortin 2005, as cited in Pollmann-Schult, 2018). In Europe, mothers spend more time on housework and childcare than men, regardless of if they are employed Knudsen and Wærness 2008, as cited in Pollmann-Schult, 2018). Fathers, in general, bear more financial responsibility than mothers, so financial stress may affect fathers more than mothers. In twelve of the twenty-seven countries, fathers were significantly more satisfied than men without children. Mothers benefit more from childcare than fathers do, and both mothers and fathers reported equal association with flexible work hours and life satisfaction. In countries with extensive childcare services, it is suggested that mothers experience lower levels of work-to-family conflict than countries with limited access to childcare (Pollmann-Schult, 2018).

Mothers and fathers both reported higher levels of financial stress than individuals without children, as indicated by Pollmann-Schult's (2018) results). Although the sample from this study was parents ages over eighteen to sixty years old, the results of this study can help

## Societal Response to Young Parents' Stress

investigate the impact that the macro-level institutional order of countries has on their citizens. The data can then be generalized to countries and state and city norms and accessibility in other countries. Young parents deal with the same financial and familial struggles as other parents, along with social isolation and other risks. Identifying how macro structures impact life satisfaction in parents suggests policy changes for different countries. These policies can then be extended to extra support and resources to young parents, as they are already at a disadvantage.

In the Groat et al. (1997) study, men reported more indifferent attitudes about childbirth and childbearing than women did. Women had more of a range of attitudes about childbirth and childbearing associated with other factors such as their materialism score, race identity, how many children they had, and if they were in a relationship. How parents feel about their child may directly affect how they treat their child, positively and negatively. Understanding the different factors that influence parental views of their children and connecting those with childhood maltreatment can give insight into factors of childhood maltreatment.

### **Factors of Childhood Maltreatment**

Research has been supported, over the past two decades, that children in low-income families and neighborhoods are more likely to be victims of child maltreatment than children in higher socioeconomic neighborhoods and families (Coulton, Korbin, & Chow, 1995; Garbarino & Kostelny, 1992; Garbarino & Sherman, 1980; Pelton, 1978; Waldfogel, 2000, as cited in Belsky et al., 2006). This research is supported even when controlling for other factors; families in poverty are still more likely to have cases of child maltreatment than families who are not in poverty (Lee & George, 1999, as cited in Belsky et al., 2006). An explanation of this comes from Waldfogel (2000), who explains that the correlation is due to the stress living in poverty, which

## Societal Response to Young Parents' Stress

may lead to harsher parenting styles, resulting in child maltreatment (Belsky et al., 2006).

Through research, it is suggested that mothers who report high levels of parenting stress (as opposed to the typical stress most parents report feeling) are more likely to neglect or abuse their children (Mash & Johnston, 1990; Rodriguez & Green, 1997). There are typical characteristics of parents who abuse their children, including high levels of stress-related to parenting (Haskett, Smith, Scott, Grant, Ward, & Robinson, 2003, as cited in Belsky et al., 2006). These results help to indicate that different types of parental stress distinguish parents who are physically abusive, neglectful, or not abusive at all.

Regardless of the type of stress, there are strong correlations between high levels of parental stress and negative outcomes in children (Creasy & Jarvis, 1994; Crnic & Low, 2002, as cited in Belsky et al., 2002). As previously stated, this may be because stressed-out parents are more likely to engage in more extreme parenting practices than other parents (Webster-Stratton, 1990, as cited in Belsky et al., 2006). This directly relates to young parents as young parents are typically under more stress than other parents, resulting in negative outcomes for their children. That is why it is so vital to minimize the stress in young parents' lives as much as possible.

Curenton et al. (2009) analyzed the relationship between socioeconomic status and parental stress with childhood maltreatment. Childhood maltreatment refers to any type of abuse or neglect of children. The goal of the Curenton et al. study was to determine what types of stress levels were involved with different or any types of childhood maltreatment. The study participants included families with reports of child maltreatment, Head-start families, and families without reports of maltreatment. The significant socioeconomic distinguishers included poverty, parental education, and employment status. The significant parental stress distinguishers

## Societal Response to Young Parents' Stress

included parental self-reports of dysfunctional child-parent relationships and difficult child temperament. The results of this study indicated that poverty status was the most influential in childhood maltreatment, followed by parental education, parent-child dysfunctional interactions, difficult child temperament, parental employment, and parental distress.

### **Parental Stress and Satisfaction**

It is no secret that how a parent interacts with their child, starting from the newborn stage, will impact their child's development. Even before the child is born, parents, including young parents, jump into the role of parenting; they face many lifestyle changes. These changes include an abrupt increase in financial responsibilities, increased responsibility, relationship changes, social changes, and social isolation (Belsky, 1986). Self-efficacy for parents is described as parents' confidence in their parenting abilities (Albanese et al., 2018). This describes parents who have faith in their role as a parent for their children. Parental self-efficacy (PSE) goes a step further than self-efficacy.

PSE is described as a belief of a parent that they have the ability to positively influence their child and promote a successful and healthy life for their child (Albanese et al., 2018). PSE can be measured in relation to other important factors for parents, their children, and the relationship between the two. Albanese et al. (2018) reviewed 115 articles that examined the correlation between PSE and three different themes in their literature review. The three themes were: effect of PSE on outcomes relating to the relationship between a parent and their child, the effect of PSE on parental mental and physical health, and the effect of PSE on child development.

Starting with the effect of PSE on outcomes relating to the relationship between a parent and their child, there are strong correlations between higher levels of PSE and the relationship

## Societal Response to Young Parents' Stress

between parents and their children. Higher levels of PSE are associated with consistent home routines, open communication, positive attitudes towards parenting, maternal and paternal involvement and home, and a strong family role construction, all of which indicate a healthy home environment. There are also relationships between high PSE and effective parenting styles and behaviors along with a linkage with higher PSE and more responsive parenting, PSE and setting developmental goals, and PSE and functional parenting (Albanese et al., 2018). Although the studies reviewed may have different measurements of PSE, there is still an overwhelming amount of research on the correlation between PSE and the child-parent relationship. This suggests that the more secure a parent is with their role as a parent to their child, the stronger the relationship between the two will be. Following these results, the next steps in providing a strong relationship between a parent and their child are building the confidence of the parent, which can promote a strong relationship with the parent and their child.

The relationship between PSE and parental mental and physical health is one worth looking into. This is because a lower PSE score may signify less security in the parents' mental health. The outcome most commonly linked with low PSE scores is postpartum depression (Albanese et al., 2018). Specifically, in both mothers and fathers, a predisposition to postpartum depression and low PSE scores were identified to be related to one another (Albanese et al., 2018). Other outcomes related to low PSE scores are psychological distress, lower satisfaction with the parental role, and a weaker adaptation to parenthood. Along with that, parents with low PSE tend to show more symptoms of depression in later parenthood stages and other mental health outcomes (Albanese et al., 2018, p. 356). A higher PSE is associated with lower and declining levels of anxiety in the postpartum period along with the following: a decreased risk of

## Societal Response to Young Parents' Stress

psychological distress in mothers and fathers, decreased risk of postpartum dysphoria, better adaptation to parenthood, increased role satisfaction, and better role adjustment for stay-at-home fathers (Albanese et al., 2018). As PSE is a measure of parents' faith in themselves, the relationship between PSE levels and aspects of mental health shows the comorbidities between different disorders and views of oneself.

Albanese et al. (2018) further examined the relationship between PSE and child development. This takes place in different areas: behavioral development, academic and school-related development, child's mental health, and child's physical health. A higher PSE is generally correlated with stronger behavioral outcomes. Higher PSEs are also related to stronger physical health. A high PSE is also a strong predictor of better sleep and fewer meals in front of the television for children (Heerman, Taylor, Wallston, & Barkin, 2017, as cited in Albanese et al., 2018). The last section of the literature review signified just how much every aspect of the family dynamic is intertwined.

All new parents feel stress on some level when taking care of their children for the first time. Children provide a whole multitude of stress factors for any family. Young parents, who already have access to fewer resources than older parents, experience the same stressors as older parents to a greater extent. Conn et al. (2018) conducted a study in which the researchers interviewed twenty-four adolescent and young parents between the ages of sixteen and twenty-five. In the study, the researchers identified and examined different types of stress, both perceived and experienced by the young parents. In relation to social stigma and discrimination, there was a variety of negative stigmas on the young parents among multiple contexts, including schools, doctors' offices, home environments, and peer groups (Conn et al., 2018). A notable



## Societal Response to Young Parents' Stress

factor reported by the young parents was lowered expectations others had of them as young parents. These lowered expectations are both educational and financial expectations and limited parenting abilities (Conn et al, 2018). Because young parents are a stigmatized group, society places expectations on the entire group. Some of these views describe young parents as unmotivated, unprofessional, and unable to complete their education (Conn et al, 2018). The parents also reported expectations that because they are parents and in school, there are expectations that they would quit or fail to complete high school (Conn et al., 2018). Other opinions of the parents were described as lazy and unable to be independent or contribute to society (Conn et al., 2018, p. 95). Other descriptions of the parents, specifically the young mothers were, "feelings that others felt they lack the capabilities to be 'good parents' because of their age, that they 'made a mistake or were being 'irresponsible,' 'a dumb mom,' or reckless" (Conn et al., 2018 p. 95).

The more that young parents hear and experience discrimination based on their identity, the more they may internalize what is being told to them. For example, if a young parent is constantly told that they are not going to finish high school and fail their classes, then find themselves struggling in school, they may be more likely to remember those statements about them and believe it is their destiny to drop out. The discrimination and social opinions towards young parents can be detrimental not only to the parents themselves but also to their children and the environment of their family at home.

There are many factors that influence how parents feel about themselves, their child, their stress level, and their ability to parent. One of these important factors is the age of the parent when they have their first child. Along with the age of the parents, there are other factors that

## Societal Response to Young Parents' Stress

may influence the parents' perceptions of themselves and their children. Based on different cultures and societies, there are different definitions as to what a "young" parent is versus an "old" parent. For the present study, the participants include young parents who are clients at Young Parents United, an organization providing support and services to young parents in Schenectady, NY, and surrounding communities. Young Parents United does not have a specific definition of what a young parent is in their mission. As an agency, Young Parents United works with any "young" parents that come to them in need of assistance. The majority of clients at Young Parents United are in their teens and early twenties.

Fallon et al. (2011) examined the profile of young parents who are the subjects of maltreatment-related investigations and set to identify which factors determine intervention from the child welfare system. To make these conclusions, the researchers analyzed the National Child Welfare Digest. One of the main focuses of this examination was how workers in the child welfare system decided which parents needed ongoing services and how they concluded which parents are investigated for child maltreatment.

The study highlighted the multitude of risk-factors young parents are faced with, which include poverty, housing, mental health, violence, and children who are exhibiting functioning concerns (Fallon et al., 2011). The next steps, from a sociological perspective, is figuring out how these risk factors influence the act of parenting and what steps are needed to provide a safe home for both the young parents and their children because children of young parents are at an increased risk of maltreatment (Connelly and Strauss 1992; Lee and George 1999; Stier et al. 1993, as cited in Fallon et al., 2011). This may be because young parents are more likely than old

## Societal Response to Young Parents' Stress

parents to lack caregiving skills, live in poverty, drop out of school, and abuse or misuse substances (Zuravin and DiBlasio 1996; Afifi 2007, as cited in Fallon et al., 2011).

For the Fallon et al. study, the sample of parents was divided into four categories of primary caregivers: biological fathers thirty years and younger, biological mothers under eighteen years old, biological mothers between the ages of nineteen and twenty-one, and biological mothers ages twenty-two to thirty (Fallon et al., 2011). The dependent variable in this study, “transferred to ongoing services,” referred to parents that workers indicated investigating ongoing child welfare services. The predictor variables in this study include primary caregiver functioning, no second caregiver in the home, household hazards, household regularly runs out of money, the number of moves, child functioning, risk related investigations, and type of maltreatments (Fallon et al., 2011). Types of maltreatment include physical abuse, sexual abuse, neglect, emotional maltreatment, and exposure to intimate partner violence (Fallon et al., 2011).

The results of the study identified age as a significant risk factor between groups for all caretakers (Fallon et al., 2011). The study brought forth a variety of issues young parents were struggling with. For young biological fathers, the most noted risk factor was alcohol and drug abuse. For young biological mothers ages nineteen to twenty-one, mental health issues were most noted followed by a low social support network, being a victim of domestic violence, and having a history in foster care. The highest level of maltreatment for mothers ages nineteen to twenty-one involving the biological father was physical abuse, sexual abuse, and neglect (Fallon et al., 2011).

The results of this study also found that adolescent mothers, compared to adult mothers, are more likely to experience intimate partner violence (Fallon et al., 2011). The probability of

## Societal Response to Young Parents' Stress

being referred for ongoing service actions was significantly increased with primary caregiver risk factors, and when controlling for all statistically significant predictors, biological mothers eighteen years and younger were two times more likely to be kept for ongoing welfare services than older parents. Biological mothers and fathers ages nineteen to twenty-one were almost 1.5 times more likely to be kept for ongoing investigation compared to mothers ages twenty-two to thirty (Fallon et al., 2011). Being on welfare, constantly being open to ongoing investigation, and experiencing intimate partner violence are all experiences that can increase the stress that parents experience. Domestic violence, social isolation, and other important factors that young parents are at risk of can directly impact their children. The next step is identifying these risk factors that are threatening child safety in both the parents and their children.

Milgrom et al. (2001) researched the effectiveness of prenatal intervention with pregnant mothers who were at risk of poor prenatal adjustments, such as postpartum depression or anxiety or parenting difficulties. In the study, there were significantly fewer cases that scored above the threshold for moderate to severe postpartum anxiety or depression for those that received the intervention compared to the control group. Furthermore, women with higher levels of baseline depression also reported higher levels of help-seeking in intervention and routine care groups. The results of this study indicated that intervention was significantly related to lower levels of depression postpartum. Although the study did not focus on young parents, these findings directly apply to young parents as they are already at risk for multiple stressors and isolated from society. It may be beneficial for young parents to face these risk factors head-on before birth to hopefully reduce postpartum stress and anxiety.

### **Macro-Level Factors of Parental Stress**

There is a multitude of research on how parental and household characteristics impact the wellbeing of parents and their stress levels. Another factor in stress levels for everyone is macro-level implications. Parents in the United States and continental European countries experience equal or lower levels of life satisfaction than adults without children (Alesina et al. 2004; Umberson and Grove 1989; Keizer et al. 2010; Myrskylä and Margolis 2014; Pollmann-Schult 2014; Rizzi and Mikucka 2015, as cited in Pollmann-Schult, 2018). Pollmann-Schult (2018) used data from the European Social Survey (ESS) to analyze how country-level characteristics account for parents' life satisfaction. The sample size for Pollmann-Schult's research consisted of 21,117 women and 19,547 men between the ages of eighteen to sixty years old from twenty-seven countries. The primary independent variable in the study is the presence of at least one minor child (under eighteen years old) in the household.

Furthermore, the work-to-family conflict was analyzed along with macro-level variables separate to each country, which include, childcare availability in each country, family benefits or allowances, and working time flexibility. To accurately measure work to family conflict, participants rated on a 1-5 ordinal scale answers to the following questions: "How often do you find that your job prevents you from giving the time you want to your partner or family?", "How often do you keep worrying about work problems when you are not working", and "How often do you feel too tired after work to enjoy the little things you would like to do at home?" (Pollmann-Schult, 2018, p. 393). Financial strain was also measured as an independent variable for the study. Participants in the study answered questions about their life satisfaction on a 0-10 scale along with specific questions about their life. Childcare availability was measured by the

## Societal Response to Young Parents' Stress

percentage of children zero to two years old enrolled in childcare, which ranged from 2% in Poland to 67% in Denmark (Pollman-Schult, 2018). Family benefits were measured by the percentage of GDP spent on social protection benefits in each country and working time flexibility was measured by the percentage of workers in each country with control over their working hours.

Belsky et al. (2006) researched the linkage between income, maternal age, lone parenthood, ethnic status, and parental warmth and negativity with poor parenting. All indicators of low socioeconomic status were associated with poor parenting. The child general health measure included the mothers' ratings of their child's overall health. Health at six years old was poorer for children who had younger mothers, had less education, less income, and identified as Black.

### **Perceptions of Young Parents**

Different groups and cultures have different views and attitudes of what is and aren't "normal." When an individual or group of people acts outside of their culture's perceived norms, they face explicit and implicit discrimination because they stand out. Individuals of minority groups face implicit and explicit biases, along with other social struggles that most people may not face. These struggles include being in a different socioeconomic class, unstable housing, fewer resources, stigma against that group, isolation, poorer access to healthcare, and other stressors (Conn et al., 2018). A great deal of the time, the part of the individual that is outside of the norm is part of their identity, and many times, that identity is impossible to hide. For example, when an individual is the only person of color in a predominantly white community, they can't hide their race.

## Societal Response to Young Parents' Stress

When looking at young parents specifically, there is no real way to hide that part of their identity. As a group, young parents face stigma, discrimination, lack of education, and other social factors while navigating their new role as parents in an aging society does not accept. Along with the societal reactions to young parents, there are also other health risks relating to young parenting, both medical during the pregnancy and the risk of poverty and other disadvantages later in life (Conn et al., 2018). Due to both the risks that the young parents' community faces, it is important to study this population and gain a better understanding of the struggles young parents are facing and how to best support the population.

Because parenting at a young age is not socially acceptable in some communities, when young women find out they are pregnant, there are a variety of reactions. In "Supporting Young Parents", a book written by Warwick et al. (2008) an entire chapter is dedicated to young adolescents deciding what to do and responding to the fact that they are pregnant. Although pregnancies may be planned in traditional familial settings, for young people, only a small portion consciously plan their pregnancies. On the other hand, with most young parents, although they did not actively *plan* their pregnancy, they also stated no active attempts to prevent their pregnancy (Warwick et al., 2008). The most common reaction of the young parents in this book when they found out they were pregnant, for both men and women, was feelings of shock, along with denial and anxiety (Warwick et al., 2008). Other emotions that followed were devastation, care, humor, and other positive emotions. For the young men interviewed in the book, most of them discussed how their first reaction to the pregnancy was denial that the baby was theirs, while other men were happy to have a child, but worried about financially supporting both the child and the mother of the child.

## Societal Response to Young Parents' Stress

Many young people's reactions to their pregnancy change a few days after initially finding out, as emotions set in and are processed over time. A large amount of anxiety regarding pregnancy for these parents was their age and the idea that once parenthood begins, they have no choice but to transition to adulthood (Warwick et al., 2008). A large part of this anxiety is because society discriminates against young parents going through that transition. Another contributing factor to the anxiety of young parents is both revealing the pregnancy to their significant other and their relatives. As previously mentioned, young males may doubt the child is theirs, which places a sense of fear in the young mothers when they reveal that information. It is stated that family members' reactions about pregnancy were, in general, more negative than reactions of young mothers' partners. Young women's mothers often considered their daughters too young to have a baby and consequently encouraged them to terminate the pregnancy (Warwick et al., 2008). This may be due to the fear of disappointing one's family along with the fear of losing support from the family if the parents decide to go through with the pregnancy.

For many young parents, the next step after revealing the pregnancy is deciding what to do with the pregnancy: follow through with the pregnancy and raise the child, put the child up for adoption, or terminate the pregnancy. There are many factors that lead up to this major decision; less than half of the young mothers interviewed reported receiving any support or help at all with their options regarding their pregnancy (Warwick et al., 2008). For such a life-changing decision, there needs to be support available for the young parents.

A deciding factor in what to do about the pregnancy is attitudes to abortion. As stated in the book, "the majority of young women and young men interviewed held strong views against abortion and consequently did not think that they would consider any option other than



## Societal Response to Young Parents' Stress

continuing with the pregnancy" (Warwick et al., 2008 p. 95). These views on abortion may be influenced by the young parents' family members or peer groups, along with the fact that such a low number of young parents receive help and education about their options. Attitudes towards adoption for these young parents are like attitudes about abortion, "they associated being in care with rejection and abandonment, and those experiences appeared to be the main reasons why they were against adoption" (Warwick et al., 2008 p. 96). In terms of the present study, the focus will be on young parents who chose to follow through with their pregnancy and raise their child/children either alone, with the help of their family, or with a significant other. The purpose of understanding young parents' attitudes and stressors on pregnancy and how they come to the choice to have a child is vital, as it gives insight into the already present stressors apparent before the child is born.

### **Stigma Towards Young Parents**

The social stigma associated with young parents adds another layer to the lives of young parents. Social stigma can lead to social isolation and a lack of resources and support for young parents, which are heavily needed (Conn et al., 2018). The stigma that young parents experience from social networks that are necessary for their psychological development, evidence shows (Gordon et al., 2016, as cited in Conn et al., 2018). Because young parents are still developing themselves, the stigma and isolation can prevent further emotional development for the parents which can be detrimental for mental health, social support, and living a productive life in society.

Groat et al. (1997) researched the positive and negative attitudes of young parents regarding their own childbearing and parenting experiences. The respondents in this study that found childbearing the most rewarding were proportionately white, married females. On the

## Societal Response to Young Parents' Stress

other hand, the respondents who expressed the most regret of their childbearing experiences, were disproportionately Black, were described as materialistic, had three or more children, and had negative attitudes about their first pregnancy. Parents who scored low on the materialism score in the Groat et al. (1997) study were more likely to have positive opinions of their pregnancy than those who scored higher. Parents who emphasized the importance of money were much more likely to express regret about parenthood than parents who scored low on the materialism score.

A concept from the Groat et al. (1997) study was freedom of choice and how it is applied to parenthood, as parenthood is a choice where one must weigh variables such as costs and benefits, advantages, rewards, and punishments (Becker, 1991; Butz, McCarthy, Morrison, & Vaiana, 1982; Easterlin, 1969, as cited in Groat et al., 1997). Young parents may not have expected to get pregnant or considered all these factors while weighing the costs and benefits of their pregnancy. They may have decided to go through with their pregnancy for other reasons (such as familial pressure or lack of resources) before considering these factors.

There is a large amount of literature on teen parents, but less on comparing teen parents to young parents between the ages of twenty to twenty-four. Mulherin & Johnstone (2014) researched and compared how women in their early twenties transition and adjust to motherhood in their first-year postpartum versus teen parents. Both groups are considered young parents. All young parents in this study (teens through twenty-four years old) emphasize the importance of social support and how stigma and negative experiences negatively impacted their adjustment as mothers.

## Societal Response to Young Parents' Stress

The Theory of Emerging Adulthood is described as a time in one's lifespan that comes with changing expectations and norms. This period is typically unstable as emerging adults find themselves facing multiple roles and identities before moving onto a stable life (Arnett, 2000, as cited in Mulherin & Johnstone, 2014). Teenage mothers may go through this period while in adolescence depending on the age, they get pregnant and may not have the resources to fully go through this period of finding themselves while caring for their child. On the other hand, motherhood in the early twenties is becoming more and more uncommon in western societies (Mulherin & Johnstone, 2014). This may be due to the increase in the feminist movement where women are now going through higher levels of education and attaining jobs before settling down and having children. The main changes in motherhood reported by all participants were lack of sleep, feeling unprepared, and putting the child's needs before their own. Where the data differed was with social support; the twenty- to twenty-four-year-old women with partners expressed love and care from their significant others that eased the transition to motherhood, while single mothers described the transition as harder. The teens felt more direct stigma, whereas the parents in their twenties expressed awareness that they are seen as young but felt the stigma towards them was more subtle than the stigma towards the teen parents.

Greyson (2017) researched the health information practices of young parents in Greater Vancouver, Canada. In his study, the young mothers and fathers were all between the ages of sixteen and twenty-three who were either expecting a child or had at least one child. It is important to note that there are many young parent programs (YPP) in Canada. These organizations have the goal to help young parents complete their education, help educate them on public health, and gain social support. Because of the high prevalence of these organizations,

## Societal Response to Young Parents' Stress

the sample size may be influenced by the large presence of these resources. The parents in the study actively sought out health information for people, institutions, the internet, and print materials. These parents sought out information both proactively and reactively, depending on the situation. The main topics sought out were common pregnancy questions, such as what is safe to eat while pregnant, and immediate child health crises, such as figuring out if their child is sick at that moment. Another topic that was commonly sought out was ongoing health concerns, such as if their child had a disorder that they displayed symptoms of.

The most formal sought-out medical advice in Greyson's (2017) study was from doctors or hospitals when it came down to their child's needs. Less urgent needs had a variety of sources such as human sources from family or friends, and self-sufficient sources such as using the internet. Greyson's (2017) study also revealed different types of avoidance from young parents. The avoidance types were related to events seen as frightening to the parents, such as childbirth, avoiding information to prevent trouble or unnecessary worry, and avoiding topics because the parents were either too young to take it seriously or not prepared to plan for their future, so they avoided the topic. The young parents also had trouble assessing health information online, as they did not have the ability to accurately assess the information online and know what was factual or not. The young parents in these communities shared resources and facts with one another while meeting at YPP locations. Social stigma played a role in young parents' health information sharing practices, as they tended to just share information with one another as opposed to older parents.

## **Health and Healthcare Resources for Young Parents**

## Societal Response to Young Parents' Stress

Robb et al. (2013) researched how young mothers sought out and accessed health services, specifically with maternity care. Teenage mothers are three times more likely to smoke throughout their pregnancy than non-teenage mothers, and fifty percent less likely to breastfeed (Highes, 2006, as cited in Robb et al., 2013). The infant mortality rate for children of teen mothers is 60% higher than those of non-teen mothers (Highes, 2006, as cited in Robb et al., 2013). The finding of the Robb et al. (2013) study yielded the following main themes: young parents report high feelings of abandonment and judgment, information for young parents is vital, and young mothers specifically need more support. In terms of young mothers, there was a notable emphasis on the need for support and a high level of fear of stigma from society along with young parents stigmatizing themselves. Of the young mothers in the study who had a midwife, they did not make their needs known to the staff, and the midwives themselves did not recognize the needs of young parents.

Reutter et al. (2001) studied how young parents (ages 18-30) understood determinants of health and planned actions for the wellbeing of themselves, their families, and their community. The most cited contributors to family wellbeing are health practices. In the study, the most mentioned barriers to the wellbeing and health of families were income and coping skills in the families. About two-thirds of the participants rated the following as very important for the wellbeing of their families: health services, nutrition, relationships with coworkers, physical workplace environment, stress control, environmental conditions in the neighborhood, smoke-free environment, and amount of sleep (Reutter et al., 2001). The older parents in the sample were more likely to mention social support networks and child development as large contributors to their health and wellbeing. Of the participants, the females were more likely to identify

## Societal Response to Young Parents' Stress

physical and personal health practices as contributors to their health and wellbeing and have plans made out to engage in behaviors with social support to promote the wellbeing of themselves and their families. The male participants were more likely to define income and employment as contributors to their health and wellbeing.

Certain levels of stress associated with parenting are normal and even necessary (Abidin, 1992, as cited in Belsky et al., 2006). A range of stress is experienced by all parents regardless of their socioeconomic status, relationship status, housing status, or risk of maltreatment. Jones et al. (2021) completed a study analyzing the relationships between parental stress, family conflict, and children internalizing and externalizing their stress. Their study revealed significant, positive relationships between parental stress, family conflict, and both internalizing and externalizing stress symptoms in children (Jones et al., 2021). In the Jones et al. study, the child internalizing and externalizing symptom score was assessed by the Child Behavioral Checklist (BCCL; Achenbach, 1991, as cited in Jones et al., 2021). This checklist was completed by the children's mothers when the children were 6 and 14. Their findings suggested that reducing parental stress may improve family functioning and conflict management, which will, in turn, improve child outcomes and hopefully prevent child maltreatment.

Additionally, higher stress levels for parents is linked with a greater risk of maltreatment for children (Curenton et al., 2009, as cited in Jones et al., 2021), higher family conflict, (DeCarlo Santiago & Wadsworth, 2009; Hser et al., 2015, as cited in Jones et al., 2021) and poorer child outcomes (Crnic et al., 2005; Neece et al., 2012; Yoon et al., 2015, as cited in Jones et al., 2021). This is crucial specifically for families with young parents, as young parents are under an immense amount of stress.

## Societal Response to Young Parents' Stress

The findings in the Jones et al. study align with psychological theories of how stress impacts relationships. The ABC-X family stress model includes how protective factors affect the family's ability to manage stress. This results in either a nonadaptive, adaptive, or maladaptive outcome for the family (Weber, 2011, as cited in Jones et al., 2021). Relating to the same topic, physiological theories can help explain how stress impacts the body and how interpersonal interactions can both affect and be affected by someone else's heightened reaction to stress (Johnson et al., 2016; Porges, 2007, as cited in Jones et al., 2021). The models explained above all come into play when understanding the complicated relationships among stress, family interactions, and family functioning.

The ABC-X model includes how stressors are mitigated by family resources such as their ability to handle conflict in a healthy way, the family's perception of how serious the stressor is, and how these perspectives and coping strategies lead to a potential crisis in the family (McCubbin & Patterson, 1983, as cited in Jones et al., 2021). Putting that all together, these factors can result in stress and hardships when family tensions are not resolved which will reduce family functioning and result in poorer outcomes for the family. The ABC-X family stress model is an example of how important healthy relationships and stress coping mechanisms in families are to prevent negative outcomes in the family.

Physiological theories related to biological processes include how stress impacts the body and influences a person's emotional reactions and ability to regulate their emotions (Jones et al., 2021). This type of stress can trigger a fight or flight response which directly changes someone's emotions. Consistent activation of the fight or flight response can completely dysregulate one's emotions and functioning, which is detrimental in a familial context.

## Societal Response to Young Parents' Stress

In terms of parental stress, parents were found to be more stressed than nonparents (Jones et al., 2021). The main source of this stress was financial, which also impacts the ability to live a healthy lifestyle. Unfortunately, there are negative child outcomes because of parental stress. This is referred to as the “spillover effect”, which is when negative parental stress impacts the way parents respond to their children and discipline them. This in turn can decrease the child’s self-regulation ability and outcomes (Higgins et al., 2011, as cited in Jones et al., 2021). The type of parenting also influences how children internalize and externalize their emotions (Hooper et al., 2015; Lohaus et al., 2017, Chih-Yuan et al., 2011; Lohaus et al., 2017; Steeger et al., 2017, as cited in Jones et al., 2021). A result of this is that children living in high-stress homes may experience higher levels of anxiety and act out in more delinquent ways.

Cole and Mitchell (2001) found that the children of parents who reported higher levels of stress were associated with higher levels of expressive deception and lower levels of theory of mind. Understanding the theory of mind is indicative of understanding that the mind is susceptible to deception. Parents in situations of distress, either from being a single parent or having financial struggles, may be less likely to hide their stress from their children. This may be one of the reasons behind a lower understanding of theory of mind, as the children are exposed to their parents’ stress levels and are unable to deceive their parents. Children of stressed single parents showed high levels of proficiency in expressive deception, the ability to be convincing in the act of deception, which may be beneficial to their survival and home-life.

Jenkins & Handa (2017) researched the relationship between parental education and the cognitive ability of their children. Cognitive abilities and achievements in childhood as early as two years old are associated with a range of potential outcomes, both educational and other, later



## Societal Response to Young Parents' Stress

in life for children (Feinstein, 2003; Case & Paxson, 2005, as cited in Jenkins & Handa, 2017).

Young parents are essentially growing with their children and are at their youngest in parenting while their children are developing and at the ages of reaching crucial developmental milestones. Parental education is a strong predictor of child cognition. The education level of parents can influence how the parent spends time with their child, how they put demands on their child, and the quality and quantity of care spent with their child. It is also thought that more educated parents have more knowledge to pass on to their children.

The Jenkins and Handa study found that levels of input applied at twenty-four months, such as book reading, singing songs, and owning books are all important for the development of their children and were significant determinants of children's cognitions at age four. It was also found that reading books as early as nine months old has a direct association with child cognition at age four. If many young parents are either still in high school or had to drop out, it is vital that they somehow receive this crucial information to further help the development of their child.

Mollborn (2007) hypothesized that a lack of resources may explain the negative effects of teenage parenthood and educational achievement. These resources include but are not limited to housing, childcare, and financial support. On average, teenage parenthood is associated with less educational outcomes (Hoffman, 1998, as cited in Mollborn, 2007). This has a clear reason: the commitment that teen parents have for their children can easily interfere with the traditional high school system and schedule. Mollborn's study (2007) measured two main variables: educational achievement and socioeconomic status. The data were derived from the National Education Longitude study from the years 1988, 1992, 1994, and 2000. Education was measured by the highest degree earned until the age of twenty-six, and teenage parenthood was operationalized as

## Societal Response to Young Parents' Stress

a respondent having had a child by their senior year of high school up to a month before their twentieth birthday. The living arrangements in this study include living with two parents at least half the time, living with one parent at least half the time, or living with no parents. Mollborn's study also assessed if the participants worked at least twenty hours a week. Of the participants that lived with either one or two parents, they reported long-term educational advantages over the participants that lived with no parents. The parents that reported working at least twenty hours a week were described as an "educational liability" (Mollborn, 2007). This implies that working as a young parent can diminish one's educational achievement.

Of all the participants in the Curenton et al. study (2009), only the maltreatment families had clinical levels of parenting stress versus the Head-start families. This signifies that Head-start and other initiatives to improve the lives of disadvantaged children are helpful to both the children and their parents, as they can potentially reduce parental stress.

Parenting classes for first-time expectant mothers and fathers serve the purpose of educating new parents about their responsibilities as a parent and preparing them (as best as possible) for the transition to parenthood. Sntsieh and Hallström (2016) conducted a literature review examining the specific needs of first-hand parents in early parenthood. From the literature review, the researchers discovered five main themes: partner involvement, early and realistic information about parenting skills, need for extended health care or midwives, the amount of stress new parenthood has on the parents' relationship, and learning strategies with other new parents to improve the transition to parenthood (Sntsieh & Hallström, 2016).

Sntsieh and Hallström (2016) found that men, in general, based on how they were treated in prenatal parenting classes, expressed feelings of exclusion. Although men do not engage in

## Societal Response to Young Parents' Stress

breastfeeding or other actions that are necessary from just the biological mother, men still reported a need to learn about specific aspects of parenthood tailored towards fathers and general care of their new children. The majority of parents, in general, felt unprepared for the new tasks of parenthood and sought out more information on what to expect and what actions to take as new parents (both mothers and fathers). The reviewed studies expressed an overwhelming concern about the lack of longevity in midwife visits and health care visits after the child was born. The need for extended care can help to improve breastfeeding and other parenting skills for both new mothers and fathers.

Another thing that parenting classes may help improve, based on the Sntsieh and Hallström (2016) study, was acknowledging and preparing for the stress that parenting will put on the relationship between the parents. Learning strategies of open communication between the parents before the child is born and preparing for the stressors of a child may help keep relationships together and healthy. The learning strategies from the peers in these classes allow for the young parents to interact with and learn from one another. Having new parents interact with one another before their children are born facilitates a social network of support and resources between the parents. This gives expectant parents extra resources and people to count on, improving the stability of their social network.

### **Young Parents' Stress Levels**

Regardless of their age, gender, or other identifying factors, all parents experience parenting stress; it is universal (Deater-Deckard, 1998). Deater-Deckard provides the following definition of parenting stress: "the aversive psychological reaction to the demands of being a parent" (Deater-Deckard, 1998, p. 315). Parents' stress can impact their role as parents and their

## Societal Response to Young Parents' Stress

overall functioning. Furthermore, parenting stress is linked to adult functioning, the quality of the parent-child relationship, and child-functioning (Deater-Deckard, 1998). Although parenting stress is universal, different factors influence parental stress (Deater-Deckard, 1998). Because parenting stress impacts every parent, the next steps in research are understanding what exactly is contributing to an increase of parenting stress and what is aiding parenting stress. For the current study, I investigated the levels of parental stress in young parents, as this population has a variety of vulnerabilities that may be linked with their parental stress levels.

Because many factors may influence stress, it is necessary to understand how pregnant and parenting adolescents adapt to the transitions to their roles as parents. Passino et al. (1993) examined the personal adjustment of pregnant adolescents compared to non-pregnant adolescents and stress trends of adolescent mothers compared to adult mothers. Their study included three groups of participants: pregnant teenagers, non-pregnant teenagers, and pregnant adults. The trends of pregnant participants were studied during the final trimester of the pregnancy and when their infants were between five and seven months old. In the study, Passino et al. (1993) used a variety of measures to evaluate social adjustments of participants, problem-solving abilities, parenting behavior, maternal behavior, and parenting styles, including oral responses, written responses, and self-reports by all of the participants, not just the adolescent mothers.

Pregnant adolescents, compared to non-pregnant adolescents, reported lower levels of social competency and lower proficiencies in their problem-solving. Furthermore, Passino et al. (1993) found that pregnant adolescents, compared to pregnant adults, displayed more behavioral problems. This study further found that adolescent mothers experience higher rates of parenting stress than adult mothers. Adolescent mothers exhibited higher levels of stress, behavioral

## Societal Response to Young Parents' Stress

difficulties, and problems, along with lower levels of being responsible and sensitive to their infants than adult mothers (Passino et al. 1993).

Knowing that all parents experience parental stress does not necessarily mean that each parent experiences the same type of stress. Parental stress can be experienced in a variety of ways and may impact each parent and their child differently. Chang & Fine (2007) investigated the stress trajectory of low-income mothers over 22 months. The participants in Chang and Fine's study included 580 low-income young mothers of children aged 14 to 36 months and what factors were associated with the changes and stability of their parenting stress. Chang & Fine used the Early Head Start Research and Evaluation Project for the sample of families included in their study. In order to be considered for the study, the families reported an income of at or below the federal poverty line (Chang & Fine, 2007). Of 580 participants, they were no older than 19 years old when their evaluated child was born. This study used Abidin's 1990s Parenting Stress Index, and the Parent-Child Dysfunctional Interaction subscale that examined the mothers' expectations for their child. The data were collected when the children were 14, 24, and 36 months old.

The maternal resources were described as: maternal age, age when mother gave birth to child evaluated in the study, knowledge of child development, self-efficacy, and depression levels, with lower depression levels indicating a higher maternal resource (Chang & Fine, 2007). Depression levels were analyzed on a scale of zero to 36 for the participants, with lower scores indicating lower depression levels. Child characteristics included the child's temperament. Contextual influences included sociodemographic characteristics, program groups such as Head-Start, adequacy of family resources (economic and social support), stressful life events, and family conflict. Their study indicated three possible trajectories for parenting stress: chronically

## Societal Response to Young Parents' Stress

high, increasing, and decreasing. The main distinguisher in the Chang & Fine (2007) study between increasing and decreasing stress between the mothers were maternal personal resources, while the differences between chronically high and decreasing stress were attributed to maternal personal resources, child characteristics, and contextual influences.

Chang and Fine (2007) found that parenting stress slightly decreased over the child's second and third years after using the fourteen-month assessment as a baseline segment. This finding indicates that young mothers are not necessarily destined for long-term negative outcomes. Eighty-three percent of the mothers in the study had decreasing levels of parenting stress over time, meaning that whatever their baseline stress level was decreased by the final data collection. The Chang & Fine (2007) study provides reasoning for considering maternal, child, and contextual factors when examining parental stress. Chang and Fine found that specific maternal resources, such as mothers with lower scores of depression and higher self-efficacy scores are less likely to be in the chronically high and increasing stress groups. These findings give insight into possible influences of parental stress.

As identified by Chang & Fine (2007), there are many possible influences on parental stress for new parents. Menon et al. (2020) examined the trajectory of 544 young mothers' parenting stress from their children's infancy through school-age. In this study, the researchers aimed to identify two separate phenomena. The first aim was to determine how different psychological and protective vulnerabilities experienced by young mothers contribute to different stress trajectories for young mothers. The researchers also aimed to identify the variations of maternal stress levels for mothers when their children reached school age. Menon et al. (2020) took into account how protective factors, such as social support, and psychological

## Societal Response to Young Parents' Stress

vulnerabilities, such as depression experienced during the transition to parenthood for young mothers, were associated with the maternal stress trajectories.

The study participants were in a randomized controlled trial from a voluntary statewide home visiting program that served first-time young parents under 21 years old. This study assigned mothers to either a home visiting program or a control group where they received information on parenting and child development and referrals to other services that may be necessary for young parents. The researchers collected data when the participants were pregnant when the children were 12 months old, 24 months old, five years old, and six years old. Menon et al. (2020) used a variety of measures to assess parenting stress, parenting stress trajectories, relationship quality, and depression scores.

The results of the Menon et al. study identified three maternal stress trajectories: low stable, high increasing, and high decreasing. Low stable maternal stress trajectory means that the stress levels are relevantly low and stable for the mothers over time. High increasing stress trajectory includes high baseline stress that increases over time, and high decreasing trajectory describes high initial stress that decreases over time. Protective factors included home visiting programs, informal family support, and romantic relationships. The researchers found that protective factors were associated with low and decreasing stress patterns across the course of early childhood. Depression for mothers transitioning to parenthood was associated with trajectories of higher parenting stress and greater average levels of parenting stress across all the trajectories. Psychological vulnerabilities were related to higher parenting stress patterns. The results of Menon et al. (2020) indicated diversity in parenting stress across time, which counters the belief that parenting stress is uniform across all parents. This further supports the findings of

## Societal Response to Young Parents' Stress

Chang & Fine (2017) with how multiple contextual factors need to be considered when predicting and examining the stress of young parents.

The protective factors in the Menon et al. (2020) study provide insight into how even if a young parent may be predisposed to different stressors, protective factors such as social support can counteract that stress. Specifically, the results from the Chang & Fine (2017) and the Menon et al. (2020) studies on how maternal resources are associated with lower stress trajectories influenced the current study hypothesis that older ages and higher education levels would be associated with lower stress levels for young parents. Although education was not one of the specific measures used in the Menon et al. and Chang and Fine studies, in the current study, I considered education levels to be a maternal resource, as education may include an increase in knowledge of child development, one of the maternal resources previously mentioned. Further, self-efficacy may be increased with higher education levels as a high school degree or further education allows young parents to work more jobs than not without a high school degree or GED.

Society places different expectations for mothers versus fathers, which places different challenges for each role. Albritton et al., (2014) studied and compared the parenting challenges between low-income, young mothers and fathers in relationships. In this study, the researchers examined multiple stressors of young parents and separated their findings by the gender of the parents. The researchers conducted focus groups for a total of 35 young parents over three months. Some of the participants in the study were no longer in a relationship with their child's biological parent. The participants in Albritton et al.'s study were recruited from a former observational study group of young pregnant couples, so regardless of their current relationship status, the single participants were able to give an insight into the challenges in their



## Societal Response to Young Parents' Stress

relationships and why their relationships ended. The focus groups in this study consisted of: couples groups in which the males and females were both the biological parents of the child and in a relationship with one another, a mixed-gender group where members of the other gender did not know each other, a female-only group, and a male-only group. Albritton et al. (2014) interviewed the participants over three months. The interviews aimed to address the following issues: relationship challenges and values, parenting challenges and values, and areas of need for the relationship and parenting.

The standard parent relationship challenges reported by both genders in the Albritton et al. (2014) study was the need to improve communication and an understanding of the impact of negative relationships on their current or past romantic relationship. For parenting challenges, women reported their main challenges as uneven parenting responsibilities with the child's other parent, stress about child safety, and feeling unprepared to parent. The young mothers in this study attributed their feelings to becoming mothers at a young age. Young fathers reported financially supporting the family for their basic needs as their main parenting challenge. Other challenges reported by young mothers included a lack of personal time due to unequal parenting. Albritton et al. (2014) identified the following areas of need for young mothers: learning new child discipline strategies and increasing knowledge of child safety support for their children at different ages as they continue to grow, such as correctly positioning an infant in a crib and potty-training their toddlers. For young fathers, the main area of parenting needs included learning to prepare for their child, learning discipline techniques, and being informed on child development.

This previous research gives us insight into what may cause and contribute to stress for young parents and what young parents identify as challenges in their everyday lives in

## Societal Response to Young Parents' Stress

relationships with their significant others and with their roles as parents. Passino et al. (1993) provided knowledge of how pregnant adolescents displayed higher rates of behavioral problems than their peers. Passino et al. (1993) further discovered how adolescent mothers experienced more behavioral difficulties and problems, higher levels of stress, and lower levels of being sensitive and responsive to their infants than adult mothers. The results of this study pose the following question: why is this the case and what can be done to change these results?

Furthermore, Chang & Fine's (2007) results gave some promising information: parenting stress decreases over the years. Just because young parents may experience higher stress levels than adult parents, it may last throughout their children's entire adolescence.

This research served as a basis for the hypotheses in the current case study, which aimed to identify what factors are associated with the stress and wellbeing of young parents. The studies above suggest that younger mothers would report greater stress than older mothers (Passino et al., 1993). The results of Albritton et al. (2014) indicated that young parents feel overwhelming stress about child safety and unpreparedness to be a parent, which may be due to a lack of education or social support. It was also suggested that mothers with greater resources experience less stress than mothers with fewer resources (Menon et al., 2020).

The past research influenced the current study's variables of age, education level, and relationship status and how they relate to the stress and wellbeing of young parents. Furthermore, mothers and fathers had different identified challenges due to the role society places on them as parents, which could also be influenced by the stigma young parents face. All of these results, taken together, inform us of different aspects of stress for young parents. Furthermore, it opens the door for more questions and gives insight into the needs of young parents. The past results suggest the need for more support for child development and safety for young parents, healthy

## Societal Response to Young Parents' Stress

relationship training, and more social support. The results of these past studies serve as a basis for the current study's hypothesis that higher education levels and age would be related to less perceived stress and higher wellbeing scores in young parents. Further, I also hypothesized that the participants in a relationship would report lower stress scores than the participants that are single, as being in a relationship may be a form of social support or maternal resource.

## Societal Response to Adolescent Parents

In the United States in 2019, there were 171,674 live births to mothers aged 15-19, which is 16.7 live births per 1,000 teenage mothers (Martin et al., 2021). This information does not account for mothers under 15, or over 19, and may not account for all of the homeless teenage births. Below are examples of some of these organizations across the country and world. Society has tried to respond to the rates of adolescent pregnancy and parenting in a variety of ways. Across the United States, and Worldwide, nonprofit organizations exist to assist teen parents, specifically mothers, with their journey. These organizations exist in every state; some of them are large and have multiple centers on a national level while some have one center on a local level to assist the needs of that specific community. Society has attempted to respond to the issues of pregnant and parenting adolescents in a variety of ways. Below are examples of some of the ways society has responded to and attempted to aid pregnant and parenting adolescents.

### Planned Parenthood

Planned Parenthood offers a variety of women's health services. There are currently more than 600 Planned Parenthood centers across the United States. Planned Parenthood has the mission to:

- Help people live full, healthy lives — no matter your income, insurance, gender identity, sexual orientation, race, or immigration status;
- Provide the high-quality inclusive and comprehensive sexual and reproductive health care services all people need and deserve — with respect and compassion;

## Societal Response to Young Parents' Stress

- Advocate for public policies that protect and expand reproductive rights and access to a full range of sexual and reproductive health care services, including abortion;
- Provide medically accurate education that advances the understanding of human sexuality, healthy relationships, and body autonomy;
- Promote research and technology that enhances reproductive health care and access. (Planned Parenthood, 2022).

This organization offers pregnancy tests and other related services, information on options adolescent parents have when they find out they are pregnant, resources to help teens carry out their pregnancy, OBGYN services, and general health care. Their website provides information on pregnancy and what it means to transition to parenthood with the following topics: What to consider when pregnant, children's needs, and when to have a child. Planned Parenthood highlights individual characteristics to consider when having a child such as: the responsibility of being a parent, raising a child in a healthy environment, the cost of parenting, the work involved in parenting, the support needed for parenting, what having a child means for the future, how it is the mother's choice to have a child or not, and prenatal care information. If an individual is pregnant and plans to have their child, Planned Parenthood offers the following services: pregnancy testing, adoption services, adoption referrals, fertility awareness, pregnancy planning services, prenatal services, childbirth classes, postpartum exams, trained staff to discuss options of pregnancy, trained staff to talk through miscarriage, and other services.

Planned Parenthood also offers information about: considering pregnancy, pre-pregnancy health, and planning, how pregnancy happens, pregnancy tests, month by month, prenatal care, infertility signs symptoms and causes, fertility treatments, ectopic pregnancy, what is a miscarriage, pregnancy options, considering parenthood, considering adoption, postpartum depression, and feeding newborns.

Birthright International

## Societal Response to Young Parents' Stress

Birthright International was founded in 1968 in Toronto, Ontario, Canada with the following mission:

With Birthright, she is never alone. We help women discover hope for the future through friendship, love and support. We know the importance of simply being with her, being a compassionate listener and respecting that it is her life and her plan. Birthright is available to support her for as long as she needs us, from the time of her first call or visit, throughout her pregnancy and after. (Birthright International, 2018).

Starting with the goal of helping women with unplanned pregnancies, Birthright International has grown to hundreds of pregnancy support service centers throughout Canada, The United States, and Africa. Birthright International provides "confidential, non-judgemental support to any woman who is pregnant or thinks she might be pregnant no matter her age, race, circumstances, religion, marital status or financial situation" (Birthright International, 2018). Some of the services at Birthright International include pregnancy testing, medical services, housing and counseling referrals, maternity and baby services, and a free confidential helpline.

### Generation Her

Generation Her, founded in 2009, is focused on empowering teen moms with the following mission:

Generation Her is non-profit organization operating in Southern California, that seeks to empower teenage mothers, ages 13-25, and their children by connecting them to a supportive community of other teen mothers and adult mentors, equipping them with desired life skills, and ultimately, impacting their future in a positive way (Generation Her, 2022).

This organization has six locations throughout Los Angeles and Orange County, CA. Generation Her holds weekly life skills programs for teen moms and pregnant teens. Setting educational and career goals for teen moms is a strong focus of Generation Her, as the organization "walks beside her to accomplish her goals as well as to provide a safe place of encouragement, hope and support through mentors and their fellow community of teenage mothers" (Generation her,

## Societal Response to Young Parents' Stress

2022). Generation Her promotes independence throughout pregnancy and parenthood by teaching the following life skills: budgeting, money management, job interviewing skills, parenting, resume building, cooking, self-defense, nutrition, stress and anger management, and relationship workshops.

The organization prides itself on the fact that 97% of Generation Her moms either have already or are graduating high school or attaining their GED compared to the 51% of teen moms nationally who never graduate high school (Generation Her, 2022). Some of the services at Generation Her include: child safety training, promoting and rewarding completion of goals, one on one mentor relationships, rewarding positive parenting practices with baby clothes and other baby needs, celebrations of holidays and milestones, access to parent and child resources, promotion of healthy parenting, creative projects, life skills training, and workshops on relationships, goals, finances, anger, sex education, and money management.

### Covenant House

Covenant House has been around for over 50 years and is focused on assisting homeless youth. Covenant House acknowledges that there are not many youth homeless shelters that offer care and assistance to pregnant and parenting youth with their children and makes it their mission to provide services to pregnant and parenting youth in thirty-three cities across six countries. Their mission is described as: Covenant House provides holistic care for young people experiencing homelessness, including parenting youth and, particularly, young moms and their babies" (Covenant House, 2022). Some of the services that Covenant House provides are: food, clothing, shelter, safety, emotional/social support, life skills, child immunizations, health assessments, family reunification, health insurance, substance use treatment, case management, parenting skills, early intervention referrals, medical/mental health care, education, job readiness,

## Societal Response to Young Parents' Stress

vocational training, childcare, financial literacy, and legal documents. More than half of the young parents and their children that Covenant House serves emerge out of the crisis care program and live stably and independently.

### Healthy Teen Network

Healthy Teen Network, located in Baltimore, Maryland, believes that each young person has the right to live authentically regardless of their sexuality by making their own decisions about their body and relationships. Their mission is described as, "We promote better outcomes for adolescents and young adults by advancing social change, cultivating innovation, and strengthening youth-supporting professionals and organizations" (Healthy Teen Network, 2022). Healthy Teen Network was founded in 1979 with the original name "National Organization of Adolescent Pregnancy and Parenting" (NOAPP). They then added another "P" to their name which stood for "prevention", all while keeping sight of supporting and providing services for young people who are pregnant or parenting. Healthy Teen Network believes in being inclusive and affirming for all young people.

The guiding principles at Healthy Teen Network include rights, inclusivity, youth 360, a framework to improve the health of young people, evidence, innovation, youth-centered mindset, and access for youth. The services at Healthy Teen Network include learning, improving, creating, and advocating. The learning includes training, presentations, e-learnings, coaching and technical assistance, and motivational interviewing. The improving services include: Program and service assessment and planning, logic models and goals and objectives, fit, capacity, fidelity, and adaptation for evidence-based interventions, program and services recruitment and retention, pilot testing and evaluation, continuous quality improvement and sustainability, and fund development (Healthy Teen Network, 2022). Healthy Teen Network's focus on creation

## Societal Response to Young Parents' Stress

includes using technology to help young people get answers they need, formative research and digital focus group implementation, technology design, including apps, websites, bots, and voice-activated technology, recruitment for studies, programs, and services, social media and dating app-based behavior-change campaigns, and evaluation (Healthy Teen Network, 2022).

While advocating for their clients, Healthy Teen Network advocates and informs with campaigns, strategies, and materials to support public policy changes at the state or local levels, build champions and increase stakeholder engagement for programs and services, create collaborative action plans or strategic plans to achieve goals, and builds coalitions to bring together diverse and new kinds of partners from the community.

### Alliance of Moms

Alliance of Moms considers itself a member-based organization that focuses on pregnant teens and young teen mothers in Los Angeles foster care. This group labels itself as a "community of philanthropists who support pregnant and parenting teens in LA's foster care system so that they can build a positive future for themselves and their children" (Alliance of Moms, 2022). As stated on their website, almost 60% of young women in foster care are pregnant by the age of 19, and the children of foster care teens have a stronger chance of also being in foster care (Alliance of Moms, 2022). To confront this issue head-on, Alliance of Moms offers a variety of programs and services for pregnant and parenting teens in Los Angeles foster care. Alliance of moms is a "community of **moms for moms** who work together" (Alliance of Moms, 2022). They are a member-based organization and provide services by receiving monthly donations and volunteers. Alliance of Moms focuses on "Awareness Generators", which they define as, "members raise awareness and advocate for young mothers in foster care system through social media, cause marketing campaigns, and media opportunities" (Alliance of Moms,



## Societal Response to Young Parents' Stress

2022). Alliance of Moms uses both the resources they have and takes advantage of technology to spread their mission. This organization supports young parents in foster care between the ages of 14-21. Their services include: parenting and education workshops, wellness programming, and Alliance for Children's Rights' Healthy Teen Families Program, which assists their clients through "advocacy, legal services, systemic solutions, and access to housing, benefits, healthcare, education, and employment" (Alliance of Moms, 2022).

### A Young Mother's D.R.E.A.M

A Young Mother's D.R.E.A.M, located in New York City, provides one-on-one mentoring for teenage mothers with a mentor who has a teen mother herself and went on to reach her goals, both educational and professional. There are four main aspects to A Young Mother's D.R.E.A.M's mission:

- Assist young/teen moms, 16-23yrs old in completing their education through a one-on-one mentorship program.
- Motivate them to become more accomplished individuals.
- Instill determination, resilience and excellence as core characteristics for these mothers.
- Work together to decrease teen pregnancies by promoting healthy choices, goal setting and education (A Young Mother's D.R.E.A.M, 2022).

The mentorship provided by A Young Mother's D.R.E.A.M gives teenage parents hope that they can achieve their goals and gives them the support to do so. This organization also has volunteer opportunities and hosts events for young mothers in New York City.

### Teen Parent Connection

Teen Parent Connection provides services to teen and adolescent parents and their children in DuPage County, Illinois. The services provided at Teen Parent Connection range from pregnancy and health services which include doula, healthy families, young parent groups, parents' pantry, and pregnancy prevention to programs for focus on the parents' overarching goals by providing support, educating and empowering their clients, and preventing further teen

## Societal Response to Young Parents' Stress

pregnancies (Teen Parent Connection, 2022). Teen Parent Connection also offers school-based pregnancy prevention programs in middle schools and high schools to educate and reduce the risk of teen pregnancy.

Teen Parent connection is, "dedicated to empowering young families and creating the best possible start for young mothers, fathers, and their babies" (Teen Parent Connection, 2022). Teen Parent Connection has the following mission: "To serve the community through education on the realities and responsibilities of teenage pregnancy, and through long-term assistance to adolescent parents for their development of self-esteem, parenting skills, and empowerment toward self-sufficiency" (Teen Parent Connection, 2022). The "Parents' Pantry", which is a part of their services, is a place for teen parents to shop for personal and baby items. Instead of using real money, these young parents use "Baby Bucks", which they earn by "attending Teen Parent Connection meetings, keep up with [their] child's immunizations, attending school, etc" (Teen Parent Connection, 2022). This program provides a great opportunity to not only educate young parents but also reward their parenting and participation in the program which will further promote stronger parenting and a healthy lifestyle for their children.

## **Chapter 2: Methodology and Results**

The current study has the purpose of examining the stress and needs of young parents and the societal response to their needs. This is done by a case study of Young Parents United, an organization in Schenectady, NY that provides services to Young Parents in Schenectady and the surrounding areas, a questionnaire that was distributed to the clients of Young Parents United, guided conversations with the director of Young Parents United, along with examining available public information and documents.

Facebook and email were used in this case study to reach out to the participants for the pilot questionnaire. Furthermore, the questionnaire for the current study was accessed through Google Forms. The participants did not need a Google email address to fill out the questionnaire; any email address was sufficient to fill out the questionnaire. SPSS was used to analyze the data. The Pilot Questionnaire is included in the appendix under "Appendix B: Thesis Questionnaire for Participants."

### **Research Question:**

The questionnaire and guided conversation with Ginni Egan, the director of Young Parents United, included several questions to answer the study's overall research question: What are the stresses and needs of young parents, and how does society respond to those needs? When analyzing Young Parents United as an agency, I aimed to answer questions about Young Parents United as an organization and what contributed to the stress and wellbeing of the clients at Young Parents United. I asked about the organization of Young Parents United, what services Young Parents United provides, and how the clients feel about the agency. I further compared Young Parents United to other similar organizations in an attempt to discover the following questions: What services at Young Parents United are consistent with services from agencies

## Societal Response to Young Parents' Stress

across the country? Is there anything specific and unique about Young Parents United addressed in other organizations across the country? If there are services that Young Parents United does not have for their clients, why is that, and does Young Parents United do anything to help their clients find services they do not provide?

The pilot questionnaire that was made available for the clients at Young Parents United as a part of this overall case study asks specific questions about the stress and wellbeing of young parents. The pilot questionnaire set out to identify what factors contribute to stress for young parents. Further, the pilot questionnaire attempted to answer the following questions: Does the relationship status of a young parent (mother or father) impact their stress level? How do situational factors impact young parents' views on parenting? For the young parents that have parented before and through COVID-19, how has the pandemic impacted their stress levels and views on parenting?

### **Hypotheses for the Pilot Questionnaire:**

The results of the Chang & Fine (2007) study suggested that maternal resources, such as age, knowledge of child development, self-efficacy, and depression scores, can influence parental stress. In the Menon et al. (2020) study, their results indicated a relationship between maternal resources, such as social support and psychological vulnerabilities, and maternal stress trajectories. Both of these studies laid the foundation for the following hypothesis:

*Hypothesis 1:* I hypothesized that higher education levels would be associated with lower stress levels and higher psychological wellbeing scores.

The results of the Passino et al. (1993) study suggested that adolescent mothers experience higher rates of parenting stress, lower levels of responsibility, and higher levels of behavioral difficulties than adult parents. These findings influenced the following hypothesis:

## Societal Response to Young Parents' Stress

*Hypothesis 2:* I hypothesized that age would be positively associated with psychological wellbeing and negatively associated with perceived stress.

Lastly, the Menon et al. (2020) study further suggested that protective factors, including romantic relationships, are associated with low and decreasing stress patterns for parents across the course of their child's early years. These results influenced the following hypothesis:

*Hypothesis 3:* I hypothesized that participants currently in a relationship would have lower stress scores than participants who are not in a relationship.

### **Guided Conversation with the Organization's Director:**

The third part of this case study included guided conversations with the director of Young Parents United. These both took place informally over the phone before the questionnaire was sent to the clients, and a further discussion took place after both the data from the pilot questionnaire was received and an in-depth analysis of the organization was conducted. Young Parents United was intentionally chosen as the agency for this case study for many reasons. Not only does Young Parents United directly work with and know the specific needs of each of their clients, but the organization has significantly grown since its location opened in Schenectady, NY. The recent opening of Young Parents United allows for an honest conversation with the director about the challenges Young Parents United faces, how it is to work with other agencies, and the progress the organization has made thus far.

The discussion with the director touched on the following topics through conversation and questions: Young Parents United as an agency, Young Parents United compared to other agencies, the director's perspective on the results from the case study, any policy or structural changes that may help young parents, and the main challenges facing young parents and what

## Societal Response to Young Parents' Stress

society can do to help. The information from this discussion is dispersed throughout the results and conclusions of this study.

### **Participants:**

The director of Young Parents United, Ginni Egan, participated in the current study. Prior to the questionnaire being sent out to the clients, the director of Young Parents United reviewed the questionnaire and gave her consent to put out the survey. Also, the director at Young Parents United participated in a guided conversation to discuss the results of the pilot questionnaire.

The participants in the research study included 12 clients at Young Parents United in Schenectady, NY. The clients received a link to a google questionnaire either via the Young Parents United Facebook Group or via email to fill out. Prior to filling out the questionnaire, the clients provided their informed consent and were ensured of their anonymity. Of the 108 clients on the Young Parents United email list and the 160 clients in the Young Parents United Facebook group, 12 participants responded. One of the twelve participants stopped completing the questionnaire midway through, resulting in a total of at least eleven participants for each question.

All 12 of the participants in the pilot questionnaire identified themselves as female. The average age of the participants was 20.83, with the ages ranging from 17 to 28. Eight of the participants had one child, two had two children, and two had four children. The participants also reported the age at which they had their first child. Two of the participants were 15 years old when they had their first child, one was 16, three were 17, one was 18, two were 19, two were 20, one was 24 years old.

### **Measures:**

*Perceived Stress Scale*

## Societal Response to Young Parents' Stress

This study used Sheldon Cohen's (1983) Perceived Stress Scale (PSS) to measure the participants' perceived stress over the past month. The PSS measures the degree to which situations in one's life are perceived as stressful. It requires a reading level of junior high school. This 10-item scale has the participants respond to questions on a scale of zero to four, with zero being "never" and four being "very often." An example of a question from the PSS scale is: "In the last month, how often have you been upset because of something that happened unexpectedly?" (Cohen, 1994). The scale is then scored by reversing the scores of six responses, keeping the scores of four positively stated items, and then adding the total sums of numbers 0 to 4 across the scales. In Cohen et al.'s 1988 study, higher PSS scores were associated with failure to quit smoking, more colds, greater vulnerability to stressful life-event-elicited depressive symptoms, and failure among people with diabetes to control their blood sugar levels, signifying the validity of this scale (Cohen, 1994). Baik et al. (2019) examined the Perceived Stress Scale's reliability and validity. Their results suggested that the PSS has consistent reliability for both English and Spanish speakers, along with convergent validity.

### *Psychological Wellbeing*

The Psychological Wellbeing scale is a shortened, 18-item version of Ryff & Keyes's (1995) 42-item PWB Scale. Ryff et al. (2007) concluded that the 18-item version is just as statistically sound as the 42-item scale; it just takes less time to administer. An example of a question from the Psychological Wellbeing Scale is "When I look at the story of my life, I am pleased with how things have turned out so far" (Ryff et al., 2007). The 18-item scale requires a reading level of sixth to eighth grade. This scale measures six separate subscales: autonomy, environmental mastery, personal growth, positive relations with others, purpose in life, and self-acceptance. Of the 18 questions, 10 of them were reverse-scored when scoring the overall results of the scale.

## Societal Response to Young Parents' Stress

The scores of each question are then summed to see the total Psychological Wellbeing scores, with a higher score indicating a higher level of wellbeing.

### *Demographic Information*

The questionnaire the participants completed asked about the following demographic information: age, relationship status, mother of father of child(ren), number of children, age at birth of the first child, current living situation, education level, annual combined household income, past parenting class experience, services used at Young Parents United, and potential future services that the participants may use at Young Parents United.

### **Procedure:**

Prior to the start of the current study, it was approved by the Human Subjects Review Committee at Union College and the director of Young Parents United. The participants were recruited to take the google questionnaire through Young Parents United's Facebook group and via email. They were prompted with a brief description of the study and asked if they had the time to answer any questions. Before starting the questionnaire, the participants were assured of anonymity and assured that their personal information and answers were not tied to them in any way.

Before starting the questionnaire, the participants read a brief description of the study and gave their informed consent. Once they gave their informed consent, they were able to begin the study. This study did not use any deception. The participants were told this study was for a Senior Thesis at Union College and it was measuring the stress and wellbeing of young parents in the Schenectady community. Participants generally completed the questionnaire in about 10-15 minutes. The participants were given a written debrief after they completed the questionnaire.



## Societal Response to Young Parents' Stress

The debrief also included the researcher and their supervisor's name and information for the participants to reach out if they had any questions.

After gathering the results, a debrief conversation was held with the director of Young Parents United discussing the results of the pilot questionnaire, comparing the analysis of Young Parents United with other societal organizations aimed at providing resources to young parents along with other general questions about her experiences running the organizations and the challenges she has faced.

### **Results:**

There were three parts to this case study: the in-depth analysis of Young Parents United, the client survey results, and the debrief with the director of Young Parents United. All three of these aspects of the case study set out to address the purpose of the study to assess better the stressors and needs of young parents and how society responds to them.

### ***Mission and Organization of Young Parents United:***

The mission and organization of Young Parents United were analyzed through public information and guided conversations with the director of Young Parents United. Young Parents United was established in 2014 in New York City. The organization officially opened in Schenectady, New York, in 2018. Since its opening, the organization has grown leaps and bounds. It started out with no employees and was built on volunteer support. Through that, the organization has created a structure, system, and framework to best help their clients' function. Egan described that the program and system evolved as a direct response to the immediate needs that were coming through their clients.

The mission at Young Parents United (YPU) is described on their website as the following:

## Societal Response to Young Parents' Stress

The mission of Young Parents United is to invest in the future of families and promote positive change among adolescent parents through inspiration, empowerment, education, support, and practical tools in order to break destructive cycles, increase parenting skills, education, and job skills, thus enhancing self-sufficiency and greater success for teen parents and their children for generations to come (Young Parents United, Jan 28, 2022).

The organization's mission highlights just how committed the organization is to its clients. The services do not stop after the child is born. In fact, that is only the beginning. Not only does Young Parents United offer a variety of physical services that will be explained below, but the organization also puts emphasis on empowering families to have a healthy and bright future. This is done both with the entire family and through personal growth with the parents, such as providing education, parenting skills, and real-world life skills that will extend far beyond the first few years of the clients' children. This is all done with a positive perspective that values creating healthy communication with parents and focuses on the physical and emotional development of the children. All the work that Young Parents United puts into families can help break destructive family cycles and provide healthy atmospheres for both young parents and their children to live in.

Part of its mission includes promoting "positive change among adolescent parents through inspiration, empowerment, education, support, and practical tools" with the hope of breaking destructive cycles, actively improving parenting, education, and job skills with the ultimate goal of "enhancing self-sufficiency and greater success for teen parents and their children for generations to come" (Young Parents United, Jan 28, 2022). This mission is completed every day through a variety of services and mentoring for young parents.

### *Philosophy*

Young Parents United's philosophy is to complete its mission by teaching values of perception at the age of the parents. Young Parents United focuses on viewing the child as a

## Societal Response to Young Parents' Stress

"gift" that provides young parents the opportunity to "shift in consciousness that is reflected in the way both parents and children perceive themselves, each other, and their role in society" (Young Parents United, Accessed 2022). It is vital that parents don't view their child as a problem because that will subconsciously influence the way parents behave towards their child.

As previously mentioned, the parents at Young Parents United have already decided on having their children, so it is vital for them to have a positive mindset regarding their children. That is why the organization views children as a gift and can both empower and inspire the parent to be the best version of themselves. Young Parents United believes that the four necessary elements to create positive change are: inspiration, empowerment, resources or tools, and the decision to act. If the clients are able to master these four elements, they will then be able to create positive change for themselves and society.

Through intake assessment, Young Parents United has found their client's areas of greatest need. These include food, stabilization, emergency shelter, education, employment, parenting skills, and communication skills. Egan explained how each need brings forth a new structure in the organization. Young Parents United has the goal of making their organization a welcoming place, as many families experienced trauma and need a trustworthy, safe community for support.

### *Inter-Agency Referrals*

Young Parents United works in collaboration with three direct partnership agencies and a variety of other agencies around the Schenectady area. The YWCA of Schenectady provides on-site counseling at the YPU office location and offers classes for the client at YPU. Rise, CHUNNY Health Home for ages five through 21 assists and supports the needs of YPU clients and children on-site at the YPU office. Further, Building Blocks is a CHUNNY Health Home for

## Societal Response to Young Parents' Stress

infancy through 21. Building Blocks assists with early intervention and other support for YPU clients and their children on-site at the YPU offices. As stated under services, YPU refers its clients to multiple agencies and health care providers throughout Schenectady and the Capital Region. Some of which include: St Peter's Hospital, Ellis Hospital, Care Net, New Choices Recovery, Schenectady Co Probation, Safe Inc, and the Boys and Girls Club of Schenectady.

### *Services Provided*

Young Parents United provides a variety of services for their clients, both family-focused and parent-focused. The services provided at YPU are aimed to help with childcare assistance and planning, health and safety planning, food stability, housing advocacy, and support, mentoring, basic needs assistance, transportation assistance, laundry assistance, and infant safety and sleep programs. Below is a list of some of the services provided.

### *Case Management*

The case management program at Young Parents United is considered one of their core programs. Young Parents United has a case manager on staff who works with the client, provides oversight and ongoing individualized assistance for the clients. The case management differs from client to client, and the clients may be referred to other agencies to help further assist them.

### *Food Stability*

There is an emergency food pantry available for clients to use when they need food.

### *Housing Advocacy and Support*

Some of the clients at Young Parents United need assistance with finding and maintaining safe and affordable housing. The housing advocacy and support include apartment searches, financial assistance to secure housing, collaboration and advocacy with DSS, and assistance with public and subsidized housing applications.

## Societal Response to Young Parents' Stress

### *Basic Needs Assistance*

Young Parents United provides a "free store" for their clients to shop in. This "store" has any and everything a young parent may need, which includes. Everything in the stores consists of donated items, which include but are not limited to: baby clothing, maternity clothing, job interview clothing, diapers, household items, plates, utensils, toiletries, furniture, bedding, toys, books, food, and other necessary items for young parents and their families. The young parents can use the materials purchased until they or their child don't need them anymore and can then bring them back for future parents to use.

The free store is beneficial for parents with little to no income who are working on finishing their education, planning for their future, and taking care of their children in a stable and safe environment. Everything in the store is inspected before it is organized, so it is clean, stain-free, and just as close to new as possible. The clothing is organized by child and parent size, gender, and occasion. For example, there are maternity pants in its own section, infant clothes organized from 3 mos, 6 mos, 12 mos, 18 mos, 24 mos, 2t, 3t, 4t, etc. for each gender and type of clothing, such as jackets, pants, onesies, pajamas, etc. Each client "checks out" after purchasing from the free store so YPU can keep a detailed record of what each parent uses along with the total amount of merchandise YPU gives to their clients on a daily, weekly, monthly, and yearly basis. While the parents are browsing in the free store, it is typical for their children to be supervised by an employee in the children's playroom.

### *Infant Safety & Sleep Program*

The Infant Safety & Sleep Program at Young Parents United provides their clients with extra support for the first three months of their child's life. In this program, the parents are provided with a full layette, bassinet, pack and play, stroller, car seat, and essentials, including

## Societal Response to Young Parents' Stress

diapers and clothing for their children. Providing brand new parents with these essentials can help aid the stress and anxiety of having a newborn child as a young parent.

### *Mentoring*

Young Parents United provides their young parents with mentors who themselves have been either teenage or young parents. These mentors offer the young parents a shared sense of experiences and struggles. The primary goal of the mentors is to listen to the young parents. The mentors also give the young parents advice based on their own experiences.

### *Goal and Career Planning*

Young Parents United offers a goal and career planning program designed specifically for teens and young adults. This program was designed by Condy Similien-Johnson, an author, speaker, CEO, and Founder of CSJ Media and Publishing. The specific goal-oriented plan of the program helps young adults plan and pursue their education and career goals while continuing to be the best parent they can be. Furthermore, this program pushes young parents to move outside of their comfort zone and improve the world they live in.

### *High School Education Completion*

Some of the clients at Young Parents United are still in high school while they are pregnant or parenting. Young Parents United offers assistance for their clients to complete their high school education or GED. Tutors through local colleges and on-site at YPU are provided for the clients to finish their education. Young Parents United assists their clients enrolling in high school equivalency programs and re-enrolling in high school after having children. Furthermore, Young Parents United has an on-site computer lab for the parents engaging in remote learning and a tablet loaner program to support the client's educational achievement.

### *Health and Wellness Coaching*

## Societal Response to Young Parents' Stress

Young Parents United provides health and wellness coaching to their clients through monthly courses. The topics of these courses, such as health and exercise, are directed at both parents and their children with a holistic approach that the parents can use for years to come.

### *Life Coaching*

Young Parents United offers a monthly-run group program run by certified life coaches who mentor young parents. This program encourages young parents to set goals and analyze their progress from the past month and implement continuous recommitment, realignment, and any necessary revisions the young parents may need to take. During these monthly meetings, the young parents share their successes and struggles.

### *Child Development Training*

Young Parents United offers monthly courses that are designed for specific child age groups, such as infancy, toddlers, early childhood, middle childhood, and adolescence, that young parents can attend. These courses have the set goal to address and teach parenting skills. Each specific course is planned and scheduled according to the specific needs of the clients along with the ages of their children. Young Parents United also provides a monthly class that addresses the unique needs of parents of special needs children. Furthermore, Young Parents United provides handouts and resources regarding physical and emotional child development milestones for specific ages that the clients can bring home and keep with them. There is also a Young Parents United cookbook with affordable healthy recipes for young parents to prepare for their children based on their ages. The cookbook also includes specific information regarding their children's nutrition, such as when to breastfeed versus bottle feed and when to introduce solid foods to their children.

### *Creative Arts Program*

## Societal Response to Young Parents' Stress

Young Parents United offers a creative arts program that includes art, music, and dance, to facilitate and improve communication and create a stronger relationship between children and their parents. This integrative program also improves the independent personal development of both parents and their children.

### *Family and Parent-Only Weekend Retreats*

Young Parents United offers retreats both for families and parents only that are created to address specific topics that young parents face. For example, some of these programs are family-oriented with child participation, and some are just for parents to work on educating parents and improving their parenting skills.

### *Referral, Advocacy, and Resource Coordination Services*

Young Parents United does everything in its ability to help and aid young parents personally. Even though this is the case, there are some things that Young Parents United cannot do. The organization understands that and provides an up-to-date database of information and resources to its clients through other organizations. These resources may be relevant and helpful in ways that Young Parents United cannot assist. Some of these services include drug or alcohol rehabilitation programs and domestic abuse help centers.

Egan reported that going through the paperwork and red-tape is the most challenging part of the referral process, as there are multiple steps the clients have to go through. Another challenge of working with other services is providing transportation for the clients of Young Parents United and making sure that the clients are completing every step in the process.

### *Events*

Along with the events described above, Young Parents United provides a variety of events for their clients to attend. These events take place both in the Schenectady community for



## Societal Response to Young Parents' Stress

parents to attend along with extra training events for parents. An example of a family event is the Halloween "Trunk or Treat", which took place in the parking lot of the Young Parents United physical office space. During these events, parents were able to go "Trunk to Trunk" in the parking lot to mimic the Halloween trick or treating tradition and take candies and goodies for their children. Each parent in this event also received a free Child Safe Kit which the Schenectady County Sheriff's office provided.

Other events also include an annual holiday party that takes place in Young Parents United where the families can get together, celebrate the holidays, and the children are able to get some holiday gifts. Another example of a Young Parents United event was their family portrait event where a photographer came and took family portraits of the clients and their children. These workshops give both the parents and their children opportunities to live a "normal" life while not taking away from the family's personal resources. Young Parents United also provides interactive workshops for parents to learn about and gain a stronger understanding of healthy behaviors and relationships. The organization also provides court workshops and anger management workshops for the parents to utilize that will directly be applied to their lives outside of the organization.

### *Classes, Workshops, And Training*

For new, young parents, there are a variety of skills and safety measures that can be either improved or introduced. Young Parents United includes workshops for their clients to assist in providing a safe and productive home environment. These workshops include: life skills, parenting development, health and safety, nutrition, financial, infant and child CPR, and New York Court certified online parenting courses.

### *Personal Tailored Services*

## Societal Response to Young Parents' Stress

Young Parents United treats every client with respect and dignity. The organization does everything in its power to assist in the lives of young parents. Through intake sessions and multiple meetings, YPU is able to identify the specific needs of their clients and walk them through meeting them. Young Parents United has a physical space in their office for parents to use computers and complete academic work, job applications, or other necessary training. Any client is able to use the resources provided by Young Parents United while getting personal assistance on their goals. This may include tutoring to pass the GED exam, assistance in finding housing for the parent and their child, or having a staff member at YPU aid parents through working with child services or the legal system. Furthermore, YPU is constantly working to provide events and more resources for their parents.

### *Health Services*

Egan identified that health services are an area of growth for Young Parents United; the organization has a goal of providing on-site well-baby visits. In terms of health care, the staff at Young Parents United ensures that their clients are making their prenatal and postpartum appointments. Further, the staff at Young Parents United do a postpartum home visit. During this visit, they assess their clients using the Edinburgh Postpartum Depression Scale. For the clients whose results indicate that they are depressed, the staff at Young Parents United notifies their client's OBGYN and the pediatrician of their client's child to make sure someone follows up with this. Even though the staff at Young Parents United are not healthcare providers, they are still communicating with healthcare providers to make sure the client receives all necessary medical care.

Furthermore, Young Parents United provides transportation to medical appointments or schedules transportation for their clients. Also, Young Parents United provides prenatal vitamins

## Societal Response to Young Parents' Stress

for clients whose insurance does not cover those and provides breast pumps to their young mother clients. Young Parents United takes the next step to go to the client's home, show them how to use a breast pump, and assist them in breastfeeding.

### *Staff*

Ginni Egan, the founder of Young Parents United, has her own personal story that influenced her to start the organization. Egan was a teen mother herself, starting at the age of fifteen. She overcame many challenges and successfully raised four children. All while being a young parent, Egan put herself through college, established a career, remained responsible and productive, and raised four happy children. While she was in college, Egan was with a controlling husband at the age of twenty-four. She then identified the dangerous situation she was in and ended the relationship for the sake of her children. She was able to graduate from nursing school not only with four kids but also with honors, all while having her fourth child a week before her first semester in college. Egan's personal history along with her professional experience gives her a strong perspective on understanding what is required to support young parents, raise children, and make positive changes in her community.

The staff at Young Parents United is made up of four case managers, one office manager and family support worker, and the director. Further, Young Parents United has volunteers who assist in the services provided.

### *Young Parents United Staff and Volunteers*

Young Parents United has dramatically grown since its founding in 2017. Their staff includes the founder, Ginni Egan, a case manager, and an office manager, along with many volunteers and mentors. The mentors at Young Parents United are parents who have successfully raised children who mentor current young parents. There are also volunteer educators who share

## Societal Response to Young Parents' Stress

their expertise in seminars, classes, and programs for young parents. These educators include parenting specialists, medical professionals, mentors in wellness, along with artists, musicians, and dancers for creative programs. Other volunteers include parent retreat and camp volunteers who help run the retreats, cook, participate, and provide childcare. There are also volunteers for specific events along with financial and corporate sponsors on the bronze, silver, gold, and platinum level sponsorships. Other volunteers at Young Parents United include college students who assist in organizing the free store, help improve the physical space at Young Parents United, or communicate with the parents and their children.

Young Parents United has a diverse board of directors group who all offer different expertise to the organization. One of the board members completed a 37-year career at General Electric, with their last position being the General Electric Senior Vice President/ Director of General Electric Global Research & Chief Technology Officer. This same director is also a chairman of a local hospital and is involved in many Schenectady Youth Programs. Another director for Young Parents United was both a fortune 100 financial executive and worked a twenty-eight-year career with General Electric.

Another director brings a unique perspective with having inmate counseling and reentry experience at Albany County Jail. This same director is described as a community organizer, program developer, and manager who served on multiple community boards.

Young Parents United has a director who lived in Puerto Rico and attended Puerto Rico Law School. This same director passed the NYS Bar and worked for thirty years at the department of social services in New York.

Young Parents United has directors that are well versed in the healthcare industry, such as having a director who worked at many local hospitals. YPU also has a director who has

## Societal Response to Young Parents' Stress

twenty-five years of diversified health care experience. This perspective can help in assisting clients and their children through the healthcare system.

Lastly, Young Parents United has a director who has been an employee at Union College as the Associate Director of Capital Projects for twenty-five years. This director oversaw the construction of many campus buildings and provided a unique construction perspective for Young Parents United, especially with their upcoming housing construction plans.

### *Social Media*

The parents at Young Parents United have access to the YPU blog to read. This blog includes articles such as what to do when your baby cries, information for and about teen fathers, and articles about the future of the clients' children. This blog serves as another platform Young Parents United uses to communicate with their clients in a positive way.

Young Parents United has a Facebook group that the clients are able to join. In this Facebook group, the organization posts about specific events that are going on along with some parenting tips and tricks. This Facebook group is also used for parents to post if they are looking for something specific for their child (a crib, chair, table, etc), and for the organization to post any donations they have that their clients may benefit from, such as furniture for their homes. This Facebook group is also the platform where the questionnaire from this survey will be posted, as it is a practical way to reach the clients at Young Parents United.

### *Upcoming Projects*

Young Parents United is in the process of working on a transitional housing program for its clients. This program will allow the clients to stay in transitional housing for up to two years. During this time, the clients can stabilize while also receiving the same wrap-around services Young Parents United provides for their clients. The individuals in this transitional housing

## Societal Response to Young Parents' Stress

program will be living in a safe, stable environment with twenty-four-hour supervision that is fully staffed in the facility. This program will be approved by the New York State Office of children and family services.

### *Young Parents United and Covid-19*

Young Parents United adapted to the Covid-19 pandemic and put processes in person for the clients to use. Covid-19 limited the in-person programming at Young Parents United for a short period of time, but the services never stopped. All clients at Young Parents United had their necessities met by the services provided during the pandemic. The services that Young Parents United provided switched to more delivery services versus having people come to the site, as the organization had to minimize contact. Once policies and procedures were put in place, Young Parents United was able to provide on-site services safely.

### *Challenges of the Agency*

Ginni Egan, the director of Young Parents United, explained that the hardest thing about running Young Parents United is educating the public on the needs of young parents. She explained that there are two different public audiences. One of these audiences is concerned about the economic strain young parents place on society, and Young Parents United and other organizations work on explaining to the public that help to reduce the economic and financial strains of young parents actually helps society as a result by stabilizing these families. Once these families are stabilized, they can further contribute to society.

Egan further explained that some people are concerned about the social need for assistance, and it is easier to reach those people by explaining the needs of services. It is much harder to reach people who are more concerned about the economy and decisions of young

## Societal Response to Young Parents' Stress

parents having children. Lastly, Egan explained that getting the funding to create systems to meet the needs of her clients is the main challenge she faces.

The main weakness that Egan reported with Young Parents United being a small organization was resources. As a small organization, Young Parents United does not have the means to provide all the financial support they would like to assist their homeless clients.

Although Young Parents United does not have as many resources as larger agencies with multiple locations, the organization still creates a community with trust. Young Parents United uses its resources to provide a sustainable amount of resources to help its clients with no income reach stability. This is done both by providing physical materials and resources along with a hands-on approach to assist the clients in living independently. For example, at Young Parents United, the staff will not only give their clients laundry detergent, but bring them to the laundromat, show them how to do their laundry, and help them in cleaning their living spaces.

This hands-on, one-on-one mentoring provides individualized services *because* the organization knows the clients so well. This allows each service to be tailored to the family and parents' goals. The organization knows its clients and understands that they are human beings, and it is the goal of Young Parents United to help their clients reach stability and plan for the future.

The strong levels of trust at Young Parents United are combined with wrap-around services to help stabilize families, and further support them in moving forward by completing their education and other necessary obstacles. This is done through work incentive programs such as the bridge to employment and housing stabilization services. A strength of Young Parents United being a small, community-based organization allows the clients to have direct supportive communication with the staff of Young Parents United.

## Societal Response to Young Parents' Stress

### *Challenges Facing Young Parents United's Clients*

The biggest barrier to the clients, as described by Egan, was housing instability. Further, she explained that because of the clients' young ages, their options are limited regarding employment childcare to complete high school or college and that her clients lack basic needs and parenting skills.

In terms of policy changes, Egan hopes for improvements in transitional housing services. She explained that there needs to be changes in the social services system to be more supportive to young parents with children. Systematically, there is nowhere for these young parents to go.

When the topic of stigma came up, Egan's response was direct and simple: "this negative judgment doesn't serve anyone." She explained that there is *already* a teenager with a child here on this earth and the only thing to do is support that person coming from a place of life. The stigma serves no purpose, all it does is deter and create negative energy for both the parent and their child. This stigma can influence child abuse and neglect. If the teenager, who is not fully developed in their self-esteem and role as a parent, is told that they are a bad person for having a child so young, that can directly influence how they feel about their child.

Egan emphasized the importance of creating an environment where the parent can feel positive about their child, which is done at Young Parents United. Young Parents United, as an organization uplifts young parents and reinforces to the parents that it is a good thing they are a parent and their child is a good thing. This positive outlook can influence how the parents think about themselves and their children.



***Pilot Questionnaire Results:***

Because of the small sample size in this study, most of the data are statistically insignificant and therefore cannot formally support the study's hypotheses. This thesis is used as a pilot study to begin to understand trends and qualitative information about the needs of young parents. A Pearson correlation coefficient was computed to assess the linear relationship between perceived stress and psychological wellbeing. As hypothesized, there was a significant negative correlation between the two variables,  $r(10) = -.844$ ,  $p = .001$ . Age was not correlated with wellbeing but tended to be negatively correlated with stress,  $r(10) = -.398$ ,  $p = .10$ , 1-tailed.

A t-test was conducted to determine if there is a significant difference between the two groups and their perceived stress score: young parents who are in a relationship with their child(ren)'s other parent, and young parents who are not in a relationship with the child(ren)'s other parent. Six of the participants reported being in a relationship with their child(ren)'s other parent, and six of the parents reported either not being in a relationship or being in a relationship with someone other than their child(ren)'s other parent. This analysis did not reveal a significant difference between the two groups,  $t(10) = .287$ ,  $p = .261$ . For the stress scores of parents who are in a relationship with their child(ren)'s other parent,  $M = 20.167$ ,  $SD = 12.922$ . For the stress scores of parents who are not in a relationship with their child(ren)'s other parent,  $M = 22.000$ ,  $SD = 8.810$ .

The following two t-tests that were conducted analyzed the relationship between education level and stress and education level and psychological wellbeing. Five of the participants reported their current education level as some high school education. In contrast, seven of the participants reported their education level is high school graduate/GED or further education. A t-test indicated there was no significant difference between the two groups,  $t(10) =$

## Societal Response to Young Parents' Stress

.136,  $p = .967$ . For the stress scores of young parents with some high school education,  $M = 21.6000$ ,  $SD = 11.866$ . For the stress scores of young parents with a high school degree or further education,  $M = 20.714$ ,  $SD = 10.597$ . This analysis did not reveal a significant difference between the two groups,  $t(10) = .618$ ,  $p = .870$ . For parents' psychological wellbeing scores with some high school education,  $M = 4.256$ ,  $SD = 1.116$ . For parents' psychological wellbeing scores with a high school degree or further education,  $M = 4.651$ ,  $SD = 1.075$ . Egan confirmed that these results make sense to her, as a higher education background suggests the clients are more stable, which can be associated with lower stress scores and higher psychological wellbeing scores.

The exploratory data was further analyzed. All of the participants reported living with their children: 10 of the participants live with their child or children full time while 2 of the participants live with their children sometimes in a split custody arrangement. Of the 12 participants, 5 reported living with their parents or other family members, 4 reported living in their own independent housing with other adults, and 3 reported living with their significant others.

Seventy-five percent (9) of the participants reported a combined annual household income of under \$20,000. Two of the participants reported an annual income of \$20,000-\$30,000, while 1 participant reported a combined annual income of \$40,000-\$50,000. Six of the 12 participants have an education level of a high school graduate or GED, 5 of the participants reported having some high school education. In contrast, 1 participant reported having some college education.

Nine of the 12 participants reported having taken at least one parenting class. Of those 9 participants, 3 reported it as overall very helpful, 3 reported it as not helpful, 2 reported it as a little helpful, and 1 participant reported it as somewhat helpful.

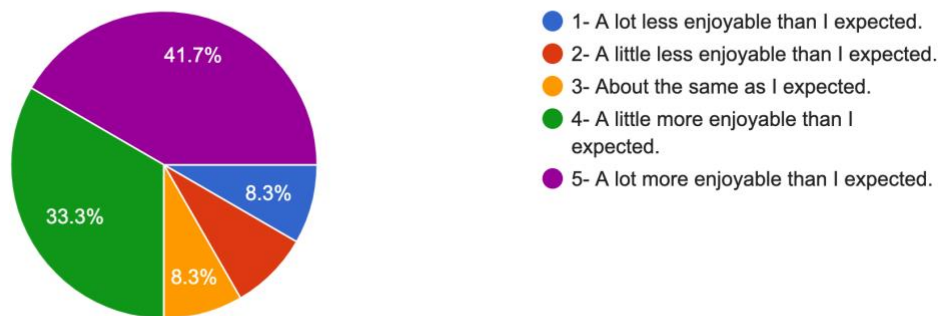
## Societal Response to Young Parents' Stress

When asked about how often the participants use the services at Young Parents United, 1 participant reported never using the services, 2 participants reported rarely using the services, 5 participants reported sometimes using the services, 1 participant reported using the services pretty often, and 3 participants reported using the services at Young Parents United very often. When prompted about what services were used, the most used service was the Free Store, with 9 participants indicating the use of the free store. The least used service from the participants was the Creative Arts Program, which only 1 participant indicated using. When asked about what services the participants have not yet used but might use in the future, the following were the most selected: Life Coaching with 6 votes, Health and Wellness coaching with 5 votes, the Creative Arts Program with 5 votes, and attending Young Parents United hosted events with 5 votes.

The participants were asked about how enjoyable and challenging parenting is compared to what they had expected. Further, the participants were also asked how the Covid-19 pandemic has contributed to their parenting stress. The three figures below indicate the results.

### Figure 1: Parent Enjoyment Ratings

How enjoyable is being a parent compared to what you expected?  
12 responses



## Societal Response to Young Parents' Stress

As shown in Figure 1, 5 of the 12 participants reported parenting to be a lot more enjoyable than expected. Four of the 12 participants rated parenting as a little more enjoyable than expected.

One participant selected each of the following options: a lot less enjoyable than expected, a little less enjoyable than expected, and about the same as expected.

### Figure 2: Parent Challenging Ratings

How challenging is being a parent compared to what you expected?  
12 responses

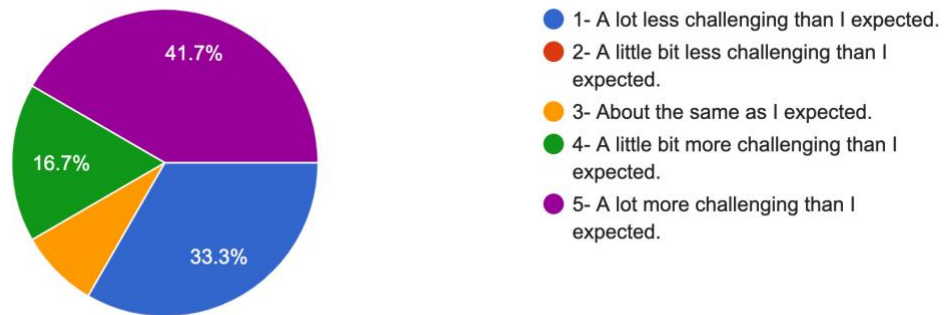


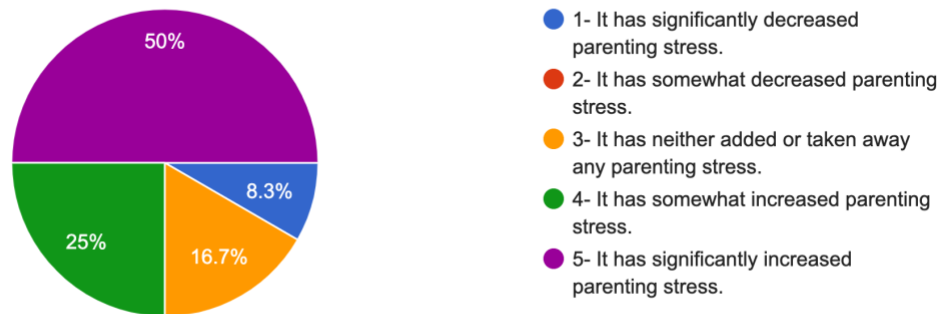
Figure 2 highlights the challenges parents *actually* felt while parenting versus what they had expected. Five of the participants indicated that parenting is a lot more challenging than expected. Four of the parents reported that parenting is a lot less challenging than expected. Two participants reported parenting to be a little more challenging than expected, and one participant rated parenting to be about the same as expected.

### Figure 3: Covid-19 and Parenting Stress

## Societal Response to Young Parents' Stress

How has the Covid-19 pandemic contributed to your parenting stress?

12 responses



As shown in Figure 3, half of the participants reported that the Covid-19 pandemic has significantly increased their parenting stress. Four of the participants indicated that the pandemic has somewhat increased their parenting stress, 3 participants reported that the pandemic has neither added to nor taken away any parenting stress, and 1 participant reported that the pandemic has significantly decreased their parenting stress.

### Chapter 3: Discussion

#### Pilot Questionnaire Discussion:

Although the results from the pilot questionnaire acted as a pilot study, they still give meaningful information about stress, psychological wellbeing, and other trends for young parents. Even though not all of the results are statistically significant, they act as a starting point for further research to build off of. The data give great descriptive information about the clients. Because the correlation between psychological wellbeing and stress was statistically significant, it provides a strong foundation of the measures used in the study. The 1-tailed significant trend between age and stress score validates past literature on how maternal stress differs between older mothers compared to younger mothers. These data are consistent with Passino et al.'s (1993) findings of adolescent parents exhibiting higher stress levels than adult parents, as the younger participants in the questionnaire experienced higher stress levels than the older participants. This may be due to a multitude of factors. As Egan explained, of all her clients at Young Parents United, she notices that her older clients are more comfortable in their role as parents. They have had the time to adapt to their role change and experience more life milestones, such as completing high school or attaining their GED.

It could be that as children get older, they are growing more and more independent, which removes some parenting stress. It may also be the case that over time, parents become more confident and comfortable in their roles as parents, which reduces their parenting stress. Further, it may be that the older the parent is, the more resources they may have attained since the birth of their child (education, monetary resources, and social support), which may lower their stress levels. Further research on *why* perceived stress is higher for younger parents as opposed to older parents is necessary to understand this phenomenon.

## Societal Response to Young Parents' Stress

Egan described that the younger clients, compared to the older clients, have less of a plan or system in place. She explained that they are not as organized. The younger clients are still learning how to be a parent and an adult at the same time; their brains are not fully developed, and they are still in a state of personal evolution while trying to take care of their children. Egan explained that her younger clients have not yet reached some of the milestones that build confidence and capability, such as graduating high school or attaining a GED.

In the conversation with Egan, she discussed that these findings make sense to her, and she believes they may be since the older clients have more experience as a parent than the younger clients. Egan further explained that of her clients, the older ones have probably found stabilized housing, employment, and finished high school. Egan described that even if the older parents had their children as teenagers, they have had time to evolve into a more stable place; they are still working to manage their lives, but they have made great progress along the way.

In the Chang & Fine study (2007), their participants included families who were at or below the national poverty line. Seventy-five percent of the participants reported a combined annual income of under \$20,000, while a total of 91.7% of the participants had a combined annual income of under \$40,000. When understanding the young parent population, it is vital to acknowledge the main contributing factors that are present in this population. These factors include lack of monetary resources, lack of education, and lack of social support. If an adolescent gets pregnant at fifteen years old and her high school is not equipped to support pregnant teens, how is she going to attain her high school degree? What if there is no affordable childcare near her? It is very unlikely for an adolescent parent to be able to go to school, send their child to daycare, all while making money and supporting themselves. Further research should analyze

## Societal Response to Young Parents' Stress

trends of the stress and psychological wellbeing of parents and the relationships between stress and psychological wellbeing with socioeconomic status, education level, and social support.

The young parents indicated how challenging parenting is compared to what they expected. Over half of the participants reported that parenting is either a lot more challenging than what they expected or a little more challenging than what they expected. The data in the Albrittin et al. (2014) study concluded that low-income, young mothers, reported their main challenges as a parent being uneven parenting, stress about child safety, and feeling unprepared to parent. The stress about child safety and feeling unprepared to parents may contribute to parenting being harder than expected if the parents are not informed of how to safely care for their child or have feelings of unpreparedness. This finding, combined with the results that 25% of the participants indicated that parenting classes were not helpful for them, both highlight the importance of parenting classes to prepare future parents for parenting challenges and how parenting classes need to be informative and enjoyable for expecting parents.

The results of the pilot questionnaire indicated a slight difference in the stress levels based on the relationship status of the participants. For the young parents who are in a relationship with their child(ren)'s other parent, they reported *slightly* lower stress levels than the parents who are not in a relationship with their child(ren)'s other parent. According to Egan, these findings vary depending on the client. She thinks these results may be due to the small sample size. Egan has found that her younger clients experience more relationship drama, but the findings may be the case for her older clients. The older clients at Young Parents United who are in a relationship with their child(ren)'s other parent have managed to work on the relationship with their significant other. This is done through relationship skills classes, parenting classes, and co-parenting classes that are all offered at Young Parents United. Egan also indicated that for the



## Societal Response to Young Parents' Stress

parents in a relationship with their child(rens)'s other parent that has learned to work together and co-parent, there are two people caring for the child, which can take some stress off of each parent.

Egan was pleased that half of the participants found parenting classes helpful and benefitted from them. She stated that it is a personal decision for the parents to engage in the education offered at Young Parents United. Egan also expressed that she can use these results to make her programs more engaging for the parents to help those parents who did not feel the parenting courses were helpful.

Of the young parents who took the google questionnaire, 75% of them reported parenting to be either a lot more or a little more challenging than they expected. At the same time, 58% of those same participants reported parenting to be either a lot more or a little more challenging than expected. Egan commended the clients' maturity to recognize how much they enjoy being a parent and accept the difficulties that come with parenting. Egan further explained that her clients are willing to work and learn to overcome challenges with a positive approach to children and raising children. Egan also attributed the stigma associated with young parents to be a possible contributor to the increased challenges young parents face.

### **Debrief with Program Director Discussion:**

The debrief with Ginni Egan allowed me to bring together this entire case study. We discussed the strengths and challenges of Young Parents United as an organization. We then reviewed Young Parents United in the context of other organizations with the same goals of helping young parents. We discussed the similarities and differences of Young Parents United with other organizations and what sets Young Parents United apart. We analyzed the results from

## Societal Response to Young Parents' Stress

the client questionnaire and discussed the main challenges young parents face and what can be done in society and structurally to assist young parents.

The discussion with Egan highlighted that an organization does not need branches in multiple cities to make an impact on its clients. Further, an organization does not need to provide health care on-site to productively assist their clients if it can help guide their clients to other health care options. Young Parents United is the perfect example of a small organization that makes a huge impact in its community. Egan continuously mentioned this "wrap-around approach" that Young Parents United provides for their clients. Whenever a client needs something, Young Parents United is able to assist them. Further, clients assist clients! The Young Parents United Facebook group is very active, and clients will request assistance with furniture, food, or other needs. It is not uncommon for other clients to respond to the Facebook posts and support their fellow peers.

The results from the pilot questionnaire were very helpful for Young Parents United as an organization. It provided information on what services are most used, what services are least used, how effective the clients perceive parenting classes as, and the relationships between the clients' stress, wellbeing, and other maintaining factors. Egan was pleased that 75% of her clients reported parenting to be more enjoyable than expected (either a little more enjoyable or a lot more enjoyable), as it indicated her organization is working for the clients! She was able to take other information, such as the results that the parenting courses were not as helpful for all the clients, and use this information to update the format of her courses.

Just as Egan explained in the discussion, Young Parents United is based on the needs of their clients. As the needs of their clients change, the organization adapts to that. The discussion with Egan allowed me to gather more information about her experiences running the

## Societal Response to Young Parents' Stress

organization and compare her organization to others like it and also allowed Egan to assess further needs of her clients.

### **Young Parents United Compared to Other Agencies:**

Young Parents United is one of the many organizations across the country that is designed to assist young parents. Young Parents United is an example of a local organization; it directly works with the local and surrounding communities. This organization differs from larger organizations, such as Planned Parenthood, on a variety of levels. For starters, the resources are on completely different scales. Planned Parenthood is a national organization with over 600 centers, compared to YPU, which has one location (Planned Parenthood, 2022). Planned Parenthood is able to provide health services to its clients, while YPU refers clients to local health services around them, such as Planned Parenthood. Because Planned Parenthood is such a large organization, they work with a more diverse population: some of their clients are young parents, while others are middle-aged, adolescents, or elderly. Consequently, Planned Parenthood offers services such as abortions, while Young Parents United works with clients once they make the decision to have their child and work with them through the transition from pregnancy to parenthood. Birthright International (located both across the US and Canada) is similar to Planned Parenthood in the sense that it is a large organization with multiple locations across the country (Birthright International, 2022). Although Birthright International and Planned Parenthood are much larger organizations than Young Parents United, they have the same goal: working with people and giving them the help they need.

Generation Her is more of a middle ground between the large organizations such as Planned Parenthood and the local organizations such as Young Parents United. That is because Generation Her has six locations throughout California (Generation Her, 2022). Similar to YPU,

## Societal Response to Young Parents' Stress

and A Young Mother's D.R.E.A.M., Generation Her hosts weekly workshops that focus on a variety of life skills for both the parent and their child(ren) (A Young Mother's D.R.E.A.M., 2022). Both Generation Her and YPU provide child safety training, mentoring, resources, anger management workshops, and a variety of other resources to their clients. Similar to Generation Her, Teen Parent Connection works in DuPage County, Illinois, and provides both pregnancy and health services to its clients (Teen Parent Connection, 2022). Teen Parent Connection further offers pregnancy prevention programs in schools, which may prevent future adolescent pregnancies.

Young Parents United works directly with their clients to have them find stable housing. This is done by applying for government aid. Furthermore, YPU is in the process of a housing project to temporarily house some of its homeless clients. Covenant House is directly focused on assisting homeless youth. Because the population at Covenant House is homeless, the main focus of services is food, clothing, shelter. At the same time, Covenant House also focuses on social support, life skills, and other health assessments and resources for parenting homeless youth and their families (Covenant House, 2022). Covenant House focuses directly on young parents in crisis. Young Parents United is able to help their clients in crisis with their emergency food bank, free store, and housing assistance. At the same time, Young Parents United sticks with their clients through the crisis to help plan their next steps through degree attainment and mentoring.

Some organizations, such as Healthy Teen Network, focus on advancing social change and intentionally focusing on inclusivity for all their clients, regardless of their gender identity or sexual orientation. Healthy Teen Network is located in Baltimore, Maryland, and provides very similar services to the services offered at Young Parents United. Healthy Teen Network actively advocates for its clients with campaigns, strategies, and other materials to help support public

## Societal Response to Young Parents' Stress

policy changes (Healthy Teen Network, 2022). This type of active advocating is done with the intent to make policy changes that will further support young parents.

Alliance of Moms is an example of a member-based organization supporting pregnant adolescents in foster care. Something that is unique about Alliance of moms is the fact that they are a community of moms for young mothers in foster care. This member-based organization uses its monthly donations and volunteers to provide services. The services provided by Alliance of Moms are similar to services provided by Young Parents United: parenting education, wellness programming, advocacy, and legal services, and has other services such as healthcare, employment, and access to housing (Alliance of Moms, 2022).

There is a lot of overlap with Young Parents United compared to other organizations aimed at assisting Young Parents. Some of the main differences include the types of clients the services are geared towards, such as homeless youth or youth in foster care. Further, the organizations with more locations and resources also provide health services for their clients. Even though Young Parents United does not provide health services on-site, their referral program assists clients in locating and receiving health services.

The overlap of the types of workshops and educational programs for young parents was universal throughout all the organizations researched. This strong overlap in programs and services highlights the need for these services and education. If adolescents were informed about parenting, pregnancy prevention, and life skills in their schools or counties, then there wouldn't be such a strong need for organizations to present those services. Furthermore, many of these organizations had their own version of Young Parents United's "Free Store." That is because it is so hard for young parents across the country (and Canada) to get the resources they need. These resources range from baby food, diapers, furniture, food, bedding, etc.

## Societal Response to Young Parents' Stress

The majority of the organizations researched for this thesis work directly with young parents to complete their education. An important question to ask: why is it that young parents across the country need help to finish high school? The needs of young parents in high school settings are not met. If these parents do have extra support to take care of their children, they can't just leave them for the day and go to school. In areas with large populations of teen pregnancies, it may be helpful to have a daycare in high schools or have affordable daycare nearby so the parents can further their education. The advocacy and legal assistance that these organizations provide indicate the need for a smoother process for young mothers.

## **Chapter 4: Summary and Concluding Remarks**

### **Summary:**

This thesis aimed to understand better the stressors and needs of young parents and the societal response to their needs. The societal response to young parents was studied both on a structural level with how organizations and policies aid or increase the stress of young parents along with how stigma associated with young parents impacts this vulnerable population. Young Parents United was selected as an agency that specifically focuses on the needs of young parents in Schenectady and surrounding areas. Young Parents United is successful in identifying and meeting both the basic needs and future goals of its clients and is able to adapt to the challenges its clients face. The questionnaire was made available to the clients of Young Parents United and results suggested that the agency was largely effective in identifying and meeting the needs that stressors place on young parents and helping the families of young parents. Both the formal and informal discussions with Egan, the director of Young Parents United, provided insight into the challenges the agency faces, how Young Parents United differs from other similar organizations, and the upcoming goals and projects the agency has in place.

The small number of participants in the pilot questionnaire prevented supporting the hypotheses with significant results. The results from the pilot questionnaire shed light on the differences among young parents. "Older" young parents reported different stress levels than their younger counterparts. Even within the young parent population, there is a range of education levels, age, relationship status, amount of children, household income, etc. That is why it is so important to understand the differences in this population and see what factors may be maintaining and contributing to stress. Further, there were no significant differences in the stress scores of parents who are in a relationship with their child(ren)'s other parent versus parents who were not in a relationship with their child(ren)'s other parent. The average stress scores of parents

## Societal Response to Young Parents' Stress

with a high school degree/GED or further education were slightly lower than parents with less than a high school degree. Additionally, the psychological wellbeing of parents with a high school degree/GED or further was somewhat higher than the psychological wellbeing scores of parents with less than a high school degree.

### **Concluding Remarks:**

This case study allowed me to dive deep into a broad topic: how society views and responds to the stressors of young parents. It also allowed me to do specific research on one organization by conducting a pilot questionnaire on the stress levels and psychological wellbeing of their clients and communicating with the director of Young Parents United about her experiences.

Broadly speaking, society's stigma around young parents prevents them from basic life necessities. The young age of some parents prevents them from finishing their high school education if there are no daycares in the schools, or prevents them from finding a stable job. Without the necessary resources, it is extremely difficult for young parents to find stable housing on their own or even with social services assistance.

Young Parents United is one of many organizations aimed to assist young parents. Once a need of one of their clients is identified, the organization works to meet that need. These needs are met through a variety of services, all aimed at supporting the parents. Because Young Parents United is a small organization, the agency is able to truly get to know each of their clients and personalize their services to each client and their children.

This case study brings forth many implications. Some of the main ones are the need for more support of young parents and education both for young parents and for young parents. The more support that young parents receive, the more likely they are to stabilize and provide a



## Societal Response to Young Parents' Stress

healthy environment for their families while contributing to society. Educating the public on young parents may help reduce some of the stigma associated with young parents in society. Just as Egan explained, they are just people with children. There is no reason for excess stigma; all it does is deter the functioning and wellbeing of young parents. Lastly, putting resources towards the education of young parents will not only help that specific population but society as a whole. This can be done by providing childcare in high schools with high rates of teen pregnancy or providing affordable childcare for young parents across the country. When young parents further their education, they are then more likely to maintain a stable job and provide a warm and loving home for their family.

### **Limitations and Future Research:**

The small sample size for the questionnaire was a limitation to this study. Instead of finding significant results, the small sample size resulted in this study being a pilot questionnaire for future research. If this study were to be replicated, sending out the questionnaires to agencies across the country, such as the agencies described in the literature review, will not only yield a larger sample size with potentially significant results but will also give a more diverse sample and gather data from across the country.

Time constraints and the large amount of detail I wanted for this thesis prevented me from conducting an in-depth analysis of more than one organization. Furthermore, conducting future in-depth analyses on more than one organization and communicating with different directors and staff at these organizations will provide another perspective of the needs and challenges of these organizations. It may also be beneficial in the future to have interviews with young mothers and fathers to gain qualitative data about their perceptions of stress and what impacts their stress levels. The current case study acted as a pilot study. This study provides a

## Societal Response to Young Parents' Stress

foundation for future research on the stress, wellbeing, and needs of young parents and organizations across the country and can help organizations aimed at assisting young parents to be more effective.

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### **Appendix A: Participant Informed Consent**

My name is Jillian, and I am a student at Union College. I am inviting you to participate in my senior research project. Involvement in the research is voluntary, so you may choose to participate or not. A description of the study is written below.

I am interested in learning more about the stress levels facing young parents. In this questionnaire, I will be asking about things like your housing situation, relationship status, and everyday life as a young parent, as well as your feelings of stress and wellbeing. You will be asked to complete this brief google form, which will take approximately 10-15 minutes. Your answers will be completely anonymous. There are no identified risks to you in completing this questionnaire. If there are any questions that you don't wish to answer, feel free to skip them. If you no longer wish to continue, you have the right to stop the study (don't answer any more questions), without penalty, at any time.

All information will be kept anonymous and confidential. Your name will not be associated with your answers on this survey in any way, and therefore, I will have no idea of who has responded. In my senior thesis, I will be grouping everyone's answers together to look for general trends.

If you have any questions about the research, please contact me, Jillian Goldaber (Goldabej@union.edu), or my supervisor Professor Linda Stanhope (Stanhopl@union.edu). If you have any questions concerning your rights as a research participant that have not been answered by the investigator or if you wish to report any concerns about the study, you may contact the Union College Human Subjects Review Committee Chair Joshua Hart (hartj@union.edu) or the Office for Human Research Protections (<https://www.hhs.gov/ohrp/>).

By clicking this button, you indicate that you understand the information above and that you wish to participate in this research study.

### **Appendix B: Thesis Questionnaire for Participants:**

Informed Consent:

My name is Jillian, and I am a student at Union College. I am inviting you to participate in my senior research project. Involvement in the research is voluntary, so you may choose to participate or not. A description of the study is written below.

I am interested in learning more about the stress levels facing young parents. In this questionnaire, I will be asking about things like your housing situation, relationship status, and everyday life as young parent, as well as your feelings of stress and wellbeing. You will be asked to complete this brief google form, which will take approximately 10-15 minutes. Your answers will be completely anonymous. There are no identified risks to you in completing this questionnaire. If there are any questions that you don't wish to answer, feel free to skip them. If you no longer wish to continue, you have the right to stop the study (don't answer any more questions), without penalty, at any time.

## Societal Response to Young Parents' Stress

All information will be kept anonymous and confidential. Your name will not be associated with your answers on this survey in any way, and therefore, I will have no idea of who has responded. In my senior thesis I will be grouping everyone's answers together to look for general trends.

If you have any questions about the research, please contact me, Jillian Goldaber (Goldabej@union.edu), or my supervisor Professor Linda Stanhope (Stanhopl@union.edu). If you have any questions concerning your rights as a research participant that have not been answered by the investigator or if you wish to report any concerns about the study, you may contact the Union College Human Subjects Review Committee Chair Joshua Hart (hartj@union.edu) or the Office for Human Research Protections (<https://www.hhs.gov/ohrp/>).

By clicking this button, you indicate that you understand the information above and that you wish to participate in this research study.

1. What is your age?
  - a. Short answer text.
2. What gender do you identify as?
  - a. Female
  - b. Male
  - c. Other
3. How many children do you have?
  - a. 1
  - b. 2
  - c. 3
  - d. 4
  - e. 5 or more
4. How old were you when your first child was born?
  - a. Short answer text.
5. Are you currently living with your child(ren)?
  - a. Yes, I live with my child(ren) full time.
  - b. Yes, I sometimes live with my children in a split custody arrangement.
  - c. No.
6. Where are you currently living?
  - a. Living with my parents or other family members.
  - b. Living with friends.
  - c. Living with my significant other.
  - d. Living in my own housing without other adults.
  - e. Currently not in permanent housing.
7. What is your current relationship status?
  - a. Single/Not currently in a relationship.
  - b. In a relationship with my child's (or children's) other parent.
  - c. In a relationship with someone else (not my child or children's other parent).
8. What is your combined annual household income?
  - a. Under \$20,000
  - b. \$20,000-\$30,000
  - c. \$30,000-\$40,000
  - d. \$40,000-\$50,000

## Societal Response to Young Parents' Stress

- e. Above \$50,000
9. What is your education level?
- a. Some high school education.
  - b. High school graduate or GED.
  - c. Some college education.
  - d. College graduate or further education.
10. Have you taken a parenting class before? If so, did you find it helpful?
- a. No, I have not taken a parenting class.
  - b. Yes, but it overall was not helpful.
  - c. Yes, and it overall was a little helpful.
  - d. Yes, and it overall was somewhat helpful.
  - e. Yes, and it overall was very helpful.
11. How many parenting classes have you taken before?
- a. 1
  - b. 2
  - c. 3
  - d. 4
  - e. 5
  - f. 6
  - g. 7
  - h. 8
  - i. 9
  - j. 10 or more
12. How often do you use the services provided at Young Parents United?
- a. 1: Never
  - b. 2: Rarely
  - c. 3: Sometimes
  - d. 4: Pretty Often
  - e. 5: Very Often
13. What services at Young Parents United have you used? (Select all that apply).
- a. Goal and Career Planning
  - b. Health and Wellness Coaching
  - c. Mentoring
  - d. Life Coaching
  - e. Child Development Training
  - f. Creative Arts Program
  - g. Referral, Advocacy, and Resource Coordination
  - h. Free Store
  - i. Attended Young Parents United hosted events
14. Are there any services at Young Parents United that you have NOT yet used but MIGHT use in the future? If so, please select all that apply.
- a. Goal and Career Planning
  - b. Health and Wellness Coaching
  - c. Mentoring
  - d. Life Coaching
  - e. Child Development Training



## Societal Response to Young Parents' Stress

- f. Creative Arts Program
  - g. Referral, Advocacy, and Resource Coordination
  - h. Free Store
  - i. Attended Young Parents United hosted events
15. How enjoyable is being a parent compared to what you expected?
- a. 1- A lot less enjoyable than I expected.
  - b. 2- A little less enjoyable than I expected.
  - c. 3- About the same as I expected.
  - d. 4- A little more enjoyable than I expected.
  - e. 5- A lot more enjoyable than I expected.
16. How challenging is being a parent compared to what you expected?
- a. 1- A lot less challenging than I expected.
  - b. 2- A little bit less challenging than I expected.
  - c. 3- About the same as I expected.
  - d. 4- A little bit more challenging than I expected.
  - e. 5- A lot more challenging than I expected.
17. How has the Covid-19 pandemic contributed to your parenting stress?
- a. 1- It has significantly decreased parenting stress.
  - b. 2- It has somewhat decreased parenting stress.
  - c. 3- It has neither added to or taken away from parenting stress.
  - d. 4- It was somewhat increased parenting stress.
  - e. 5- It has significantly increased parenting stress.
18. When you find yourself feeling stressed, which of these coping mechanisms work for you? (Select all that apply)
- a. Exercising.
  - b. Going on a walk.
  - c. Reading.
  - d. Calling family or friends.
  - e. Spending time alone.
  - f. Taking a nap.
  - g. Writing in a journal.
  - h. Watching a TV show or movie.
  - i. Listening to music.
  - j. Meditating/focusing on breathing.
  - k. Pray/Engage in religious practices.
  - l. A different way of coping that is not listed above.

*The following 10 questions consisted of T Sheldon Cohen's (1983) Perceived Stress Scale.*

*The next 18 questions consist of Ryff et al.'s (2007) shortened 18-item version of Ryff and Keyes' (1995) 42-item Psychological Wellbeing scale.*

### Debrief:

Thank you for participating in my study, I really appreciate it! As previously mentioned, the purpose of this study was to investigate how different aspects of your life impact your stress levels and wellbeing. The questionnaires that you completed included the Perceived Stress Scale and the psychological wellbeing Scale. Your responses in this survey will be analyzed to see if

there are connections between specific information, such as the age at which you had your first child, housing situation, relationship status, and education levels, and your perceived stress and wellbeing scores. Although there are no foreseeable risks with this google form, please remember Young Parents United offers a variety of resources for both you and your child that can help you manage your stress. Some of these include mentoring, child development training, along with referrals for other services needed. Thank you again for participating in my senior thesis study. I really appreciate your time and participation! If you have any questions, please email me at goldabej@union.edu. Thank you again!

### **Appendix C: Thesis Questionnaire Debrief:**

Thank you for participating in my study, I really appreciate it! As previously mentioned, the purpose of this study was to investigate how different aspects of your life impact your stress levels and wellbeing. The questionnaires that you completed included the Perceived Stress Scale and the psychological wellbeing Scale. I will be combining all the responses to this survey and will look to see if there are any connections between specific information, such as the age at which parents had their first child, housing situation, relationship status, and education levels, with young parents' perceived stress and wellbeing scores. For instance, are parents who live with other adults experiencing more or less stress?

Although there are no foreseeable risks with this google form, please remember that Young Parents United offers a variety of resources for both you and your child that can help you manage your stress. Some of these include mentoring, child development training, along with referrals for other services needed.

Thank you again for participating in my senior thesis study. I really appreciate your time and participation! If you have any questions, please email me at goldabej@union.edu. Thank you again!