

# ‘Voices Of Experience’

## FURTHER RESEARCH

- More in-depth enquiry of young father’s experiences in general, and Muslim fathers, specifically.
- The perspectives of professionals and non-clinical staff on approaches to working with pregnant teenagers and young parents from ethnic minority communities.
- The experiences and perspectives of significant others (e.g. parents, in-laws, supportive friends) on strategies and needs for supporting teen parents.
- The educational and employment ambitions of young mothers from ethnic minority communities and its place in current and future sense of selves.
- The perspectives of Muslim parents who have recently arrived in the UK and the reflections of older Muslim mothers on their experiences of teenage motherhood.
- In -depth and qualitative enquiry of the everyday experiences of mothering and fathering. What helps and hinders the process of being a teen parent? What are the key competencies and biographical contingencies for coping?
- A repeat of this research in 2-3 years to evaluate the longer term impact of Sure Start Plus Initiatives on those participants from the study who will still be under the age of 18 in 2005/6.

## GETTING FURTHER INFORMATION

The full report and further copies of these findings can be obtained from:

The Business Support Team, Family Support Team,  
Family Support Education, 2-10 Carbrook Hall Road,  
Sheffield S9 2DB. Tel. (0114) 273 5446

## CONCLUSIONS

This research concludes there are gaps and weaknesses in service provision for pregnant teenagers and young parents from ethnic minority communities. And that there is unequal access to services across the network of partner organisations. Existing provision does not offer equality of opportunity and presents obstacles to holistic, client-centred, high quality care.

Staff attitudes, poor recognition of the specific vulnerabilities of teenage parents, individual and culturally specific needs, lack of adequate resources of time and staff, and inflexible procedures are notable.

Factors that prevent (or deter) young people accessing services that are available include lack of promotion of positive images of ethnic minorities, lack of active targeting, lack of positive word of mouth publicity, lack of referral to Sure Start Plus support initiatives, and a peer culture that does not promote the inclusion of fathers. Future policy and strategy needs to consider both the degree of utilisation of services available and the quality of care received.

## ABOUT THE STUDY

This work, which includes the perspectives of fathers as well as mothers, arises out of a research partnership between Sheffield Sure Start Plus, Tinsley Parent and Children Consortium (TPCC), Tinsley Sure Start, Listen to Us The Father Figures Project and Sheffield Hallam University (SHU). It was funded by Sheffield Sure Start Plus and Local Authority Education Family Support.

Research methods included small group discussions (akin to focus groups), in-depth interviews conducted by young people and photographic diaries. Childcare and interpreters were available if required. Peer interviewers received guidance and on-going support during the fieldwork. Participants were invited to take part in all stages of the research, including consultation on developing the topics to be covered in interviews and the type and mode of questioning, and involvement in the resultant dissemination events.

A total of 41 young people participated, which exceeded an initial target of 20 participants (12 mothers and 8 fathers). The final sample comprised 13 African Caribbean and Mixed Heritage Fathers, 12 Muslim mothers and/or pregnant (10 Pakistani, 2 Yemeni), and 16 African Caribbean and Mixed Heritage mothers and/or pregnant. Twelve of these participants were recruited at the event staged to launch the project, the rest resulted from contacts made directly by the teenage peer researchers. Unfortunately neither of these strategies were successful in recruiting Muslim fathers.

The Author, Julia Hirst, acknowledges her collaborators - Barbara Rimmington, Sally Pearse, Ben Yeger, Fiona Noteman, Kelly Gamble and Owen Wright

## Muslim and African Caribbean Teenagers’ Insights on Pregnancy And Parenting

Sheffield Sure Start Plus, a citywide service set up to provide support for pregnant teenagers and teenage parents under the age of 18, commissioned research to find out which services teenage parents from ethnic minority communities currently use, what barriers they experience in accessing services, and how to develop services that are more appropriate to their needs. The research findings were intended to:

- *Determine the impact that the Sure Start Plus programme has had - and is having - on the lives of pregnant teenagers & teenage parents from ethnic minority communities in Sheffield*
- *Find out if those young people are accessing services across the network of partner organisations*
- *Share the learning with other Sure Start Plus pilots.*

These findings indicate:

- ◆ Young people’s perceptions of how others view young parenting does not match their own.
- ◆ African Caribbean & Mixed Heritage parents feel stereotypes of Black teenage parenting influence the quality of care received.
- ◆ Different experiences and culturally specific requirements of Muslim and African Caribbean/Mixed Heritage teenage mothers need recognition and individual negotiation.
- ◆ Services need to give greater recognition to the perceptions and needs of young fathers; and Sure Start Plus policy and strategies are recommended to be more proactive in engaging fathers.
- ◆ Experience at the first point of access to services is significant to the trajectory of future care & young parents’ compliancy to maternity care.
- ◆ Perceptions of hospital based maternity staff as uncaring and rushed requires further inquiry.
- ◆ The role of non-clinicians/domestic staff in supporting teenagers in hospital settings is worthy of exploration.
- ◆ Community midwifery has been more successful in working with pregnant teenagers and young parents than hospital based midwifery.
- ◆ Following the success of the community based Personal Advisor role, a designated hospital-based key worker for pregnant teenagers is recommended.
- ◆ Teenagers request more support and health promoting activities during pregnancy.
- ◆ Access to Sure Start Plus services for pregnant teenagers should be routine and not dependent on the point of access to maternity provision.
- ◆ The affirmation experienced by Muslim teenage parents is not accorded to African Caribbean and Mixed Heritage parents.

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- ◆ The implications for mothers and fathers without family support and African Caribbean and Mixed Heritage fathers who experience exclusion from the mother of the child and her family require consideration.
- ◆ It is recommended that Sure Start Plus review and innovate policy to address the disengagement of young parents from pre-16 education and the lack of support from school at the onset of pregnancy, and subsequent absence from training, skills development and employment.
- ◆ The Connexions service is not widely used by this cohort nor meeting its remit to reach marginalised groups.
- ◆ Support for soon-to-be or new parents with custodial sentences is recommended for assessment and review.
- ◆ It is recommended that housing and benefit agencies work in closer collaboration to diminish the complexity of policy and procedures that create additional problems and stress for teenage parents under 16 years.
- ◆ The housing needs of young parents require better understanding, particularly those resulting from sharing homes with in-laws and other extended family members.
- ◆ A Sheffield Sure Start Plus Website for pregnant teenagers and young parents is recommended.
- ◆ The possibilities for locating services for pregnant teenagers and young mothers and fathers in more familiar and trusted settings is recommended.
- ◆ The findings signal clear messages for social inclusion policy and Sure Start Plus initiatives with a specific brief to support marginalised young people.

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## THE FINDINGS EMPHASISE TWO KEY THEMES:

- The importance of appreciating pregnant teenagers and teenage parents' lives in a broad context, and
- Ethnic minority young people's insights on services across the network of partner organisations.

Within these broad themes, a range of sub-themes exist:

### PARENTHOOD AS A POSITIVE IDENTITY

*"I just felt happy. And my husband was happy, too, because it was part of us, the new baby. A bit of joy and happiness"*

The meaningfulness of parenthood was emphasized by all teenage parents. The majority felt parenthood had enhanced their sense of identity and motivated positive aspirations for the future. All rejected the notion of teenage parenthood as a deficit (or spoiled) identity.

*"It weren't a mistake ... I were happy ... we were both happy, cos we were planning to, we wanted to have a baby"*

### A GOOD START FOR SURE START

For those with experience of the service, Sure Start Plus initiatives to support pregnant teenagers evaluated very well, though only females had knowledge of Sure Start Plus.

*"I suddenly found out I was in touch with Sure Start, and they helped me with loads of things, loads and loads. And I still work with them now"*

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## **MIDWIVES IN THE COMMUNITY**

*"My midwife was very helpful and very supportive. If I had any problems she helped me out."*

Community midwifery is generally highly regarded. Midwives are commended for their clear information-giving, time, understanding, support, and continuity of care. Care provided by community midwives and Personal Advisors was credible and particularly valued.

*"The midwife's really good, she tells you a lot of things"*

## **DOCTORS AND NURSES - GPs AND HEALTH VISITORS**

GP and Health Visitor provision are construed more as a necessary element of maternity and parenting surveillance, than a support structure. Encounters with GPs are perceived as ‘rushed’ and some young people felt GPs did not take them seriously. The desire to be ‘listened to’ and have vulnerabilities ‘understood’ by professionals were common requests.

## **HOW DO FATHERS FIGURE?**

*"They've got to believe in us, give us options. Don't leave us out"*

All young fathers take their role seriously. They adhered to conventional aspirations of fatherhood, accepted dual responsibility for the pregnancy and stressed their long term commitment to their child, irrespective of whether they remain in a relationship with the mother. Perceptions of the degree to which service providers encourage fathers' involvement vary, with Muslim fathers said to be more included than African Caribbean and Mixed Heritage fathers. The latter feel disempowered and marginalised by service providers.

*"From when she found out she were pregnant, I weren't included by doctors. At the scan and everything, they just stood in front of me, I couldn't see owt ... felt no control in carrying out the pregnancy .... I didn't understand and when I asked questions I was made to feel stupid"*

## **NEED FOR WIDENING SUPPORT**

All mothers and fathers perceive services and support as focused on the post birth period. They request more recognition of the need for support during pregnancy and more activities and groups for pregnant young women and/or fathers. Services for pregnant teenagers and teenage parents are perceived as female focused. All fathers interviewed are keen to be involved in services relating to their child.

## **HOSPITAL MIDWIVES**

*"When you ask 'em things, they're right nasty and make you feel right uncomfortable"*

Regimes in hospital and advice on caring for the baby are ethnocentric and do not recognise cultural diversity or individual preferences. This is particularly important to the birth process and immediate post-natal period wherein a universal approach is not appropriate. Hospital based services are criticised by all mothers for lack of information, inflexible procedures & visiting times, busy staff, levels of noise, lack of privacy, unpalatable food, and lack of recognition of culturally specific needs. Yet hospital domestic staff are cited as important sources of support and affirmation.

## **BEYOND PREGNANCY - SCHOOLING AND EMPLOYMENT**

None of the teenage mothers or fathers was involved in traditional forms of further or higher education. Females who became pregnant before 16 years disengaged from school and none recall any contact or support from the schools after their exit. Only one young mother was utilizing the Connexions service where the guidance and skills training offered were regarded as valuable. Additionally, complex and time consuming state benefit bureaucracy creates stress and unnecessary problems for teenage parents under 16 years.

*"If I could do my GCSEs, that's what I'd do."*