Resilience and Survival: Black teenage mothers 'looked after' by the State tell their stories about their experience of care

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Abstract

'Looked after' young people are among the most disadvantaged members of our society. While their disadvantaged status should not be ignored, poor outcomes are often emphasised at the expense of good ones. This paper reports a study that adopts the concept of resilience to understand the narratives of the participants' experience of care and foster care. A total of 15 young mothers, aged 16-19 and mainly from black African backgrounds, were interviewed. Despite lacking a 'secure base', informants invested in a sense of moral identity and a source of self-directedness, which enabled them to move from victim of circumstances to individuals who overcome their circumstances.

Introduction

Social services policy and practice systems across different countries are being reconfigured to achieve positive holistic outcomes for young people (McMurray and others, 2011). There are many opportunities where child welfare professionals can actively help young people in adversity to provide a secure base to develop resilience. 'Looked after' young people endure a high level of adversity and deprivation. They experience high rates of emotional and behavioural disturbance (see Roy and others, 2000), suffer from mental health problems

(Akister and others, 2010), are vulnerable to engaging in drug use and sex work (Cusick and others, 2003) and have worse health than that of the general population (Audit Commission, 1994). They have greater health needs than those of their peers but are less likely to receive adequate healthcare (Department of Health, 1998).

In addition, 'looked after' young people experience poor life outcomes in terms of low levels of educational attainments and limited access to education (Department for Education, 2010; Jackson 2001), high levels of unemployment, poverty and homelessness (Cheung and Heath, 1994; Biehal and others, 1995; Social Exclusion Unit, 1998), and are over-represented in the criminal justice system (Youth Justice Board, 2005).

The family circumstances leading to being taken into care - material and emotional disadvantage - are contributory factors to the problems 'looked after' young people face (Chase and others, 2006; Knight and others, 2006). These experiences and sources of deprivation form clusters of 'risk factors' associated with vulnerability to early pregnancy and parenthood among young people in and leaving care (Chase and others, 2006).

Representations of teenage motherhood as a social ill in need of a measured policy response is widespread in social policy discussions, which focus efforts on reducing teenage motherhood (e.g. SEU, 1999). Teenage motherhood is often described in relation to poor social functioning and poor outcomes which characterise the disadvantaged (Graham and McDermott, 2005). It is typically framed as a social problem through links with poor psychological functioning (Hudson and others, 2000), parenting incompetence (Davis and others, 2001), child neglect and abuse (Maynard, 1997), low socioeconomic status and unemployment, and low levels of educational attainment (Chevalier and Viitanen, 2003). The current study focused on the experiences of young black mothers as the racial-ethnic perspective has remained largely silent in early parenthood research (Bonell, 2004).

Supporting 'looked after' young mothers

In Britain, 'looked after' young people are more likely to have children in their teenage years than young people who have not been in care (Barn and others, 2005; Biehal and others,

1995; Corlyon and McGuire, 1999). However, little is known of the social outcomes of 'looked after' teenage mothers because research with this population tend to focus on sexual antecedents of teen pregnancy. Key to the provision of support that young mothers require is a trusting relationship between young parents and carers, professionals and/or family (Knight and others, 2006). Research exploring the types of support available to 'looked after' young mothers reports mixed experiences. Chase and others (2006) found that young mothers had highly disrupted patterns of care with multiple placements, while others valued their involvement with specialist mother and baby foster care placements. Similarly, Knight and others (2006) reported that having a trusted confidante was significant for young parents to receive continuity of care, while instability imposed by changes in staffing or frequent moves, was a major barrier to providing any consistent support for them.

Specialist mother and baby foster placements provide effective support to younger parents in care. However, foster carers are still unclear of their role in relation to the young person and the baby once this is born (Knight and others, 2006). These authors found that foster carers were unclear whether their role was to assess the mother's parenting skills, whether they had to look after the baby, and whether the baby born while the mother was in care was also 'looked after'. These problems are compounded by the dearth of family foster care in Britain resulting from the decline in residential care for children and young people. The shortfall of placements has meant that, in many cases, placements are not available and, when a placement can be found, it is not necessarily the placement of choice (Sellick, 2006).

Resilience

This study examines the experiences of participants through the lens of resilience. While this originated in developmental psychology (e.g. Garmezy, 1973), associated constructs such as self-efficacy (Bandura, 1977) and hardiness (Kobasa, 1979) were developed within social and cognitive psychology. Resilience came to stand for an individual resource, for 'something' that enables someone not only to resist but to overcome adversity: a pattern of behaviour and functioning indicative of positive adaptation in the context of risk or adversity (Masten and Coatsworth, 1998).

In this study we adopt a concept of resilience embedded in sociology, conceptualised in terms of human agency and resistance and survival (Shaikh and Kauppi, 2010). It is the existential capacity of individuals, facing multiple forms of psychological/physiological trauma, to demonstrate resilience in their ability to construct meaning in their lives and exercise their 'free will' by making deliberate choices.

Research Methods

This study was set within the interpretative tradition where the participants' interpretation and knowledge about their social world are examined (Denzin and Lincoln, 2003). The research addressed two questions: what are the experiences of teenage mothers of state care and how do young mothers experience state parenting?

Informants were recruited in three London Local Authorities (LAs) selected for their geographical diversity, reported rates of teenage pregnancy and their high concentration of black minority groups. The experiences reported here do not aim to be characteristic of Britain as a whole, therefore, are not generalizeable. Purposive sampling was used to select participants for this study. The stated eligibility criteria were: having been in care for a minimum of one year; currently in care or left care; aged 16 to 19; from black minority - Black African, Black British, Black Caribbean, Mixed-Heritage; and be a mother or currently pregnant.

In-depth unstructured interviews were undertaken with fifteen young women by [first author] between 2005 and 2007. A non-hierarchical relationship when interviewing respondents (Oakley, 1981) was taken and the informants' participation was considered as a 'consultative process' (Thompson, 1996). Ethical approval was granted by the University of London Committee and MREC governing body for ethics[1]. Recruitment was made through key workers who knew the teenagers and their levels of literacy, in order to fully explain the project and implications of participation in ways the young women could understand. Key workers were ready to support informants if any distress had resulted from revelations. At the outset, participants were made aware that they could withdraw from the project at any time. They were informed that they would receive £10 as an acknowledgment of their help

in the study. Contact details were not passed on to the researcher until consent to do so had been given by the informants.

Informants were interviewed in their own homes and interviews were tape-recorded and transcribed verbatim. To preserve anonymity the participants have been given names typical of each country of origin. Data were analysed using a modified grounded theory approach (Strauss and Corbin, 1998). Transcripts were read a number of times to allow the identification of themes and categories to emerge. The provisional themes were subsequently examined against findings from other transcripts for further verification or rejection. Emerging themes were reviewed, the interviews scripts were indexed in detail, enabling refinement of the analytic focus.

The Participants

A total of 25 potential participants returned the participation form, 15 of whom were interviewed. There were difficulties in establishing first and/or further contacts with the remaining 10 women. Of the 15 women who took part nine were recruited through Social Services, one through peer education groups, four through family support groups, and one through snowballing.

At the time of interview three young mothers were aged 19; five were aged 18; five were aged 17; and two were aged 16. Of the 15 participants, two were British nationals and 13 were from the African continent (three from South West Africa, five from West Africa, and five from East Africa). Of the 13, two had migrated at a young age with their families, and 11 were unaccompanied minors when they arrived in Britain. Of these 11, two were educational migrants and nine were asylum seekers.

Informants in this study were under the local authority's (LA) legal responsibility for their care. The legal and moral duty to their respective care populations is encapsulated in the term corporate parent (Dobson, 1998). Corporate parenting is the collective responsibility of the Council towards looked after children and care leavers. This encompasses the cooperation of local services such as health, education, housing and social care in looking

after a child (Department for Education and Skills, 2003; Department of Health, 1989) to promote the welfare of 'looked after' children and young people and to ensure that their needs are adequately addressed.

The young mothers had been in care for an average of two years (range 1 to 4 years): 11 had experienced one placement and four had experienced multiple placements (foster care, children's home, and mother and baby unit). Two of the mothers entered care aged 14, five aged 15, six aged 16 and two aged 17. On discovering their pregnancies all young women were in the care of the state, while at the time of the interview three were living independently and supported by the 'leaving care' team. The range of state parenting arrangements included: foster parent (n=10), residential children's home (n=2), residential temporary accommodation (n=2), and one was temporarily placed with her boyfriend's family. Participants reported receiving help or advice from the following agencies in the twelve months before the interview: social workers (n=12), voluntary organisation (e.g. YMCA) (n=3), Citizens Advice Bureau (n=1). One participant did not receive any help from agencies.

Results

The following sections investigate the dependability and consistency - or otherwise - of the State as a parent. We examined the informants' accounts of their experience of care, exploring their relationships with their social workers and foster carers and their response to adverse circumstances whilst in foster care. When examining the state as a parent the image of an 'absent parent' emerged from the data, someone who does not have time to care. The complex backgrounds of the 11 unaccompanied minors are noted.

Being an unaccompanied minor in Britain

The 11 unaccompanied minors mentioned political, economic, persecution and violence as key reasons for leaving their countries. Although informants were not asked to discuss such emotive issues, some chose to share their stories about being brought to safety to Britain and then abandoned. In search of settlement, they navigated through the immigration maze

of solicitors, Home Office officials, Refugee Council agents, asylum seeking support teams, and health and social care professionals. As a result of past and present stressors - a lost sense of being in charge of their lives and memories of disintegration following war – four informants received therapeutic sessions (psychiatrists or psychologists).

Inadequate supportive relationships: the absent parent

Official policy documents argue that a necessary aspect of effective corporate parenting is the building and maintenance of positive relationships by social workers with the individual children in their care (Department for Education and Skills, 2007). Overall, informants reported mixed experiences of corporate parenting: four recounted supportive care-giving practices (last section), three mixed experiences, and eight disclosed being parented at a distance and via the 'revolving doors' of multiple social workers with whom they had intermittent contacts with long gaps between each contact (see also Driscoll, 2011; Knight and others, 2006). They had different social workers coming in and out of their lives during their care experience, viewing the succession of strangers entering their lives as invasive. The unremitting scrutiny the young women felt under is clearly articulated by Cherie's account:

> When I was in care I had a lot of social workers...and it was all new to
> me. And I just felt that having so many social workers coming and
> going all these people that know about you, which is really strange.
> (Cherie)

Frequent changes undermined the quality of care and services informants received, and impacted on the consistency of care as informants could not access support when they needed it. This impacted on the stability of the relationships with their care-givers, as informants lacked the security they needed to thrive. Twain's excerpt highlights problematic case management when she transitioned from one social worker to another.

> The first social worker I had she really did support me very much.
> Then I got another one and that one she was horrible, she was totally

different from the one we I had before. Then after that I got another
one, and then I got another one. She was…you could tell her your
problems, but you don't seem to get anywhere, but the first I had
when I just had my baby I got good support from her eventually.
(Twain)

Intermittent and fragmented contacts with social workers were a common experience
among the young women interviewed. Although the informants found it hard to establish
contact with their corporate parent, this did not deter them from trying. This 'absent
parent' figure generated a feeling of being unsupported and signalled a lack of interest in
their welfare. This is encapsulated in Limber's description of how she felt as a result of her
social worker's approach to care-giving:

I felt they were pushing me back. If, I don't call, she doesn't know
how I am, she doesn't know how I feel, she doesn't know how my son
is. She doesn't seem to care about us. It's like she has completely
forgotten us. (Limber)

The nature of these relationships was inconsistent, unstable and unreliable. What
informants longed for was a personal relationship with their social worker, someone who
invested care and time in them. Indeed informants saw financial help as important, but
knowing someone cared for their well-being was imperative. Raziya said:

You may be giving money, but when you talk to me I'll be fine.
(Raziya)

Parents' belief in the child's potential, warmth/praise, support, and encouraging the child to
engage in his/her environment are vital factors to promote self-directedness/self-efficacy
(Sandler and others, 1989). Namuly explained:

Social workers should always listen to a social child, because when
you don't encourage a young person ... you leave her just to get

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pissed-off. From my own experience I wasn't having any encouragement from my social worker … All the time she is not there for me, I feel like: 'I'm nothing, there is no-one there for me'. It is frustrating because sometime you feel rejected there is no one. And without social services' help you just mess yourself up, again and again and again. (Namuly)

These accounts underscore missed opportunities where child welfare professionals could have helped these young women in adversity to develop a sense of self-efficacy and identity.

Contributory factors hindering the development of social worker relationships with children in care can be related to structural, organizational and resources issues (McLeod, 2010), personal attitudes and values regarding children and childhood, and the attributes and skills required, but it can also be related to differing ideas of what listening entails.

Experiencing adversity whilst in foster care

Being in foster care is often a defining experience in the children's/young adults' lives, and foster care has a major role in community care services for children. Of the 10 fostered young women, six experienced some form of adversity whilst in foster care and four did not. The former experienced financial exploitation, material deprivation and opportunistic attempts to claim more money out of a newly discovered pregnancy, unattended emotional needs and abusive practices.

Cherie and Shidah talked about the financial exploitation they experienced while in foster care. The former 'didn't get the money (she) was entitled to, like a personal allowance or coat allowance', while the latter's 'carer used to give (her) less money (she) was entitled to'. These practices 'could destroy a relationship' Shidah commented.

Raziya spoke at length of the material deprivation she suffered which made her feel isolated and helpless:

> She wasn't good to me…she didn't do anything, really. I couldn't
> cope. She didn't give me money for bus fares, she didn't give me my
> pocket money. But the social services do pay her! For my bus fares I
> had to go to 'X' House to get the money, the amount of travel I did!
> She did disconnect everything…the gas and she gave me an electric
> heater. Then she disconnected the phone…disconnected everything!
> There was nothing in the house! And I was alone. (Raziya)

Pemba spoke of the foster family's attempt to claim more money from the social services once her pregnancy was discovered, and their denial to meet her needs as a result:

> I was doing everything; I'm cooking for myself, washing for myself.
> And they say: 'Oh, we can't give this, we can't give this'. Because my
> pregnancy became something so big! They wanted more money
> they're saying I have a baby, but this baby is not born...nobody is
> looking after him. (Pemba)

Twain and Isoke spoke of their sense of isolation and loneliness while in foster care. Isoke, for instance, felt excluded as a result of inadequate and inappropriate interpersonal and environmental interaction with the foster family, who displayed contempt because she was a 'looked after' black African expectant mother:

> Emotionally she was terrible. Sometimes I will be in my room and she
> hasn't seen me for two days, and she won't even come to my room
> and ask if I've eaten. And she knows I'm pregnant… And her children
> they don't say 'hi' to people, they look down on you. (Isoke)

Another mother spoke of the overt racial abuse when her foster mothers accused her of living off State hand-outs:

> Sometimes she would make these ridiculous comments: 'Oh god this
> government is funny giving you people money, you should be

working'. Making comments like that! 'Using the taxpayers money and you…' She made me feel horrible, like making you feel guilty. You're not working, you're eating people's money free money. She really made me feel bad. (Shidah)

The above extracts highlight the multiple disadvantages that the women in this study faced. The discrimination, hardships and poor living conditions they described underline the racial inequalities they experienced as uprooted individuals. The fact that many of them were seeking asylum made them particularly vulnerable to experiencing life as fragile, insecure, and exposed to stereotypical remarks.

Responding to and Overcoming Adversity

Thus far the data have illustrated the few opportunities that informants had to develop supportive relationships with their care-givers under state care. Nevertheless, some experienced relationships with supportive social workers and foster carers, encouraging their capacity to exercise agency, which in turn had a vital role in the promotion of resilient trajectories (Gilligan, 2000).

Supportive care-giving practices fostering resilience

Four informants identified key social workers who had provided support and encouragement in their education or more widely. In some cases this relationship was perceived to reach beyond the boundaries of professional duty.

Those who spoke positively of their corporate parents felt they had provided practical assistance when needed. Social workers were seen as helpful when they sorted things out and made a difference, being enablers, advocates and negotiators:

She cooked for me, we would go out for the baby shopping. She helped me with my college, 'cos I couldn't go to college for some weeks… because of the pregnancy. She helped me to phone the college to let them know about it. We went there together before I

was about to start back in college …. to get my course .. We went

together to see, …we spoke to the course management and they said

I should come back. She took the form for the child care, so I will

have the child care for the baby, you know, there will be child care

for the baby in that college. (Raziya)

Informants responded better to corporate parents who came across to them as friends. Three informants referred to their social worker as 'my friend whom I contact even up to now' for advice or to talk, or as someone to go out 'shopping for food and clothes, and go to the restaurant together'. Having a trusted confidant in their social worker was important as this combined elements of sociability, emotional support and a secure base. The idea that details of what corporate parents do with young people count, emerged from the data: the daily routines, the talents they nurture, the interests they stimulate, make a difference. Having 'somebody there who cares' made Nakato 'feel good'. These little things may foster in a young person the vital sense of belonging, of mattering, of counting. Developing positive and stable relationships with their social workers is vital to promote good outcomes for young people in the care system (McLeod, 2010; McMurray, 2011).

Practices nurturing positive change

The narratives linked with life in a foster family showed that the foster mother's attentive practices promoted the respondents' positive identity. The type of relationship with the foster mother determined the bond between them and whether the informants felt they could seek support and advice even after moving on to independent living.

I was like part of the family, up until now she's like to a mum to me.

Whatever she had she gave it to me. She cares about my

relationships and ask: 'Where are your friends? You can bring your

friends here'. I'm happy because she introduced me to a very good

life. Like, sometimes in the morning she comes to my room and ask:

'You're not coming down to have breakfast, what's wrong with you?

Are you having something bad about your home?' She always wants

to know. And then, she really teach me how to take care of the

house, do some cooking, using washing machine…she showed me

how to manage my money. (Namuly)

Being placed in a specialist mother and baby foster placement provided effective support to Namuly. Biehal and others (1995) have noted that this form of support can improve outcomes for young people in care such as maintaining their homes and developing life skills.

Investing in their moral identity

Unsupportive relationships with their care-givers presented an occasion to exert their resilient identity - they had the qualities that affected their sense of personal agency, but also to invoked religious beliefs to support them when facing difficult times when for instance deciding about motherhood over abortion and/or adoption.

... anyway in a way she (foster carer) made me like...you have to go

out there and study and get your qualifications and get your money.

In a way...in a harsh way I've learned. (Shidah)

The only friend I had was God...I was giving my life to God... to tell

God to help me with the situation I was (pregnant). Because I was

crying every day. (Abeo)

It was vital for most informants to be seen as independent with some control over their lives as this added to their sense of self-worth. In the face of the many uncertainties that in varying degrees many of the informants experienced, they had all exerted their agency within the context of being women returning to education. They overcame the odds demonstrated by their choice to return to education after childbirth; except for two respondents, all had obtained or were in the process of gaining GCSEs or GNVQs, and many had plans for university education. Informants adjusted successfully to the negative life events underscored by their focus on educational achievement:

I had the 'Young Learner Award' in college, I was the best student in college. (Shidah)

I was the best student in my class and got very high grades. (Limber)

Continuing with education after pregnancy was important to mothers, who were 'determined to continue with education' - believing they could 'cope with both education and the baby'. Respondents viewed education as a durable investment that would be their entry to a secure, economically safe and independent future. Informants aspired to being recognised as moral self-reliant individuals:

I want to do something with my life…and I thought I could be capable of doing it (midwifery) and help people. I just want to go to school to get a good sound education so he could be proud of me'. (Isoke)

I decided to go to school and learn because that is the way to cope. When I came here I said: 'The best I can offer myself and my son is to go to school and learn something, so I can be good to myself. (Namuly)

These extracts show how important the question of self-worth was for these mothers, not only for themselves but for their children too. Self-worth was derived from both reaching a high level of education and having a professional occupation.

Discussion

The state has had a poor record with regards to children in the care system (Department for Education and Skills, 2006), particularly when children enter care when they are older (Bullock and others, 2006), which brings a renewed emphasis to the state's 'corporate parenting' role (Dominelli and others, 2005). These findings are corroborated by the accounts of the informants interviewed for this study.

This paper underscores the responsiveness of the care receiver to care in conditions of vulnerability and inequality (Tronto, 1993). The data show that the nature of the relationship between care providers and care receivers is central to the capacity to provide good care and that care is an interactive process. However, past and present experiences of hardships may have impacted on their relationships with their care providers.

In talking about their experience of care and foster care, informants sought to shift the positioning of disadvantaged or marginalized young mothers as 'victims', to women with an 'active voice', and in so doing they somewhat became advocates for their own rights. Although some experienced exploitative practices at the hand of their foster carers, they soon came to perceive these practices as unjust. The data indicates that, at the time of the interview, informants had already gained a perception of their rights and entitlements, and that justice had not been done to them, which they denounced.

The image of an 'absent parent' figured prominently in informants' accounts of their care experience. Care-givers who were unreliable and inconsistent (Joseph Rowntree Foundation, 2000) engendered a feeling of rejection and unworthiness. Championing young people's causes through sustained support is vital as this makes them feel cared for as individuals, and they do better as a result (Gilligan, 2000). The absence of a care-giver as a source of support undermines young people's confidence in the guidance they receive and their ability to make important decisions (Driscoll, 2011). In contrast, those informants who experienced a sustained and supportive relationship felt happy and fostered a sense of self-worth and of having a valued place in the world.

Informants in this study had experienced a significant degree of risk and adversity in their lives before becoming mothers, but also after that. This study brings to light how informants fashioned resilience, despite, and out of, the experiences which threatened to undermine it. Most of them successfully negotiated the individual and structural demands in the location in which they lived. Motherhood gave informants meanings in their lives: a resource they drew upon to carry on with their education, which they saw as a vehicle to fulfil their role as economically independent parents. Unlike other young care leavers who obtain few educational qualifications (DfE, 2010), participants carved a meaningful role for themselves

and became proficient at academic activities at school, underscored by a want to be caring parents to their children. The personal accounts revealed that having at least one person who wholeheartedly cared about them with whom they had a positive relationship was a resiliency factor enabling informants to have positive outcomes (Dearden, 2004). This capacity to remain resilient despite the challenges of their traumatic backgrounds and present circumstances may be related to the migrant status of most of the sample, either as unaccompanied minors or in the company of their parents. Julca (2003) has noted the capacity for resilience among migrants, despite their obvious vulnerabilities. Kohli and Mather (2003) have examined the resilience displayed by unaccompanied asylum seeking young people, noting also the challenges that their complex backgrounds may pose for social workers. Nevertheless, for some young women it was drawing on personal beliefs in a broader value system that helped them to persist in problem solving and/or in surviving a set of life circumstances.

To conclude, understanding resilience and strength among African youth in Britain requires first acknowledging their experience in Britain and recognizing the continuing legacy of oppression and discrimination that affects many of them in their daily lives. Future practice should also note the positive aspects of caring highlighted in this paper, those more intensive, personalised approaches that enable the forming of supportive relationships and increasing their resilience.

Note

1. MREC N. 05/Q0801/168

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