THE NEXT CHAPTER:
YOUNG PEOPLE AND PARENTHOOD
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Executive summary

There are nearly 450,000 parents in England aged 25 and under.¹ Having a baby tends to be a time of joy and excitement and it can and should be for young parents too. However, some experience difficulties directly related to their age and circumstances. With the growing expectation that parenthood comes later in life, young parents can come up against both negative attitudes and Government policy that does not take their needs into account.

The focus over the past twenty years has been on reducing teenage pregnancy and improving support specifically for teenage mothers, young fathers and their children. Our new research shows that the poor outcomes and challenges faced by some teenage parents are also experienced by young people who become parents between the ages of 20 and 25.

This research comes from new analysis of the Next Steps data set, a longitudinal study following the lives of people born in 1989–90. We commissioned the Institute for Policy Research at the University of Bath to carry out this analysis and a literature review to gain a better understanding of young parents’ lives. We also held a number of focus groups with young parents across England.

Our findings demonstrate that young people who have their first child aged 25 or under can experience various difficulties:

- Only one in ten young parents (11 per cent) has attended university, compared to 45 per cent of young people who aren’t parents.
- Only a third of young parents (33 per cent) are in ‘skilled work’, compared to half (51 per cent) of young people who aren’t parents.
- Four in ten young parents (39 per cent) are only just getting by financially – or worse – compared to 26 per cent of young people who aren’t parents.
- One in five young parents (19 per cent) rarely or never see friends, compared to 11 per cent of young people who aren’t parents.
- Both young mothers and fathers are significantly more likely than young people who aren’t parents to report experiencing poor mental health.
- Children born to teenage parents can experience negative outcomes, from poor language development to an increased risk of unemployment.² The risk of poor outcomes extends to children whose mothers are in their early twenties.³
- Negative social perceptions make it hard for young parents to engage with support services.

Whilst we need to sustain recent progress in reducing teenage pregnancy, and continue to offer support to teenage parents, we must also extend the lessons learnt to young people between the ages of 20 and 25. They too should have good access to services to prevent unplanned pregnancy, and, for those who do become parents, support that meets their needs.

Supporting these young people also means changing the narrative. It means looking at young parents – their experiences, their achievements and their struggles – in a more positive light. It means looking at how to help them realise their potential, and the potential of their children, rather than only focusing on what might go wrong.
Introduction

The teenage pregnancy rate has reduced significantly in the last 20 years, the result of sustained Government focus in this area through the Teenage Pregnancy Strategy. This is rightly viewed as a success. But it is not the end of the story.

The UK still has the highest teenage birth rate in Western Europe. Teenage mums and young dads tend to come from disadvantaged backgrounds. They might already be struggling with work, money and housing, even before adjusting to the new responsibilities, strains and joys parenthood can bring. Although the greatest reductions in teenage pregnancy have been in the most deprived areas, where rates were originally highest, there is still more to do.

Teenage mums and young dads are more likely to have poor experiences of education, and to suffer from poor mental health. Due to the disadvantages they face, the outcomes of their children can also be worse. For instance, children born to teenage mums are more likely to be admitted to hospital as a result of accidents, and they can struggle with cognitive and language development. In the long term, they are at increased risk of unemployment.

In the past therefore, much attention was given to teenage parents, and in particular teenage mothers. However, the fall in the pregnancy rate has led to the decommissioning of some dedicated services for these parents. The importance of maintaining support for these young people was signalled by both Public Health England and the Local Government Association last year by the publication of A framework for supporting teenage mothers and fathers. Our report findings underline the continued need for support for this group, as well as shedding light on the challenges young parents aged 20 to 25 face, a group that has been largely overlooked.

There is currently very little research on the lives of 20 to 25-year-old parents. Action for Children therefore carried out a number of focus groups with young parents across England for this report. We also worked with the Institute for Policy Research at the University of Bath to review both the available literature on young parents in England and the Next Steps dataset (formerly the Longitudinal Study of Young People in England). Through comparing the backgrounds and outcomes of 25-year-olds with children, and those without, our research reveals the need for greater support for parents in this age group, who are struggling compared to their peers.

Although the number of teenage parents has reduced in recent years, there are still 443,500 young parents aged 25 and under in England. This is a significant group of young parents and children whose needs must not be overlooked.

Of course, not all young parents will need additional support; far from it. Even those that do can make brilliant, loving parents, and, like any mum and dad, want the absolute best for their children. But they can face a number of challenges other young people and older parents may not.

Our report explores these challenges, and makes a series of recommendations to address them. Specifically, The Next Chapter looks at the difficulties young parents have to overcome in education and employment; the isolation and poor mental health that some can endure; and the services and extra support that could help both them and their children to fulfil their full potential.
What do we mean by young parents?

Young men and women aged 25 and under who have children. Within this we define teenage parents as young men and women aged 19 and under with children. A child’s parents may not neatly fit into one category or the other. The majority of fathers of babies born to teenage mothers are young men; approximately a third are teenagers, and half aged between 20 and 24.1

Who are young parents?

Young parents tend to come from disadvantaged backgrounds. Our research shows that young people who have grown up in low income households are more likely to become young parents.

Young people who have been in care are also more likely to become young parents. A number of UK studies demonstrate the heightened likelihood of early pregnancy for those with experience of care compared to their peers who have never been in care.

Women are more likely to become young parents than men (32 per cent of women become parents by age 25, compared to 21 per cent of men).1

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1 Much of the available research focuses on the experiences of teenage mothers. Where possible, we have included specific information on young fathers in the report, although we are aware this is a gap. Next Steps findings do however refer to both young mothers and young fathers. There tends to be an assumption within existing research that young parents are cisgender and straight. We recognise that this is not always the case, especially as these are young people who may still be in the process of questioning their identities.
Education and training

‘Because we had the Care to Learn.* I had that, and that put him into preschool two days a week ... I wouldn’t have gone to college if it wasn’t for that.’

The needs of young parents are complex and interlinked, ranging from employment difficulties and money problems to social isolation and poor mental health. Education, however, has tended to be the starting point for most policies designed to address teenage pregnancy and early motherhood.

Education is important yet young people who become parents can struggle with it. Staying on and succeeding in education is associated with better health.10 Doing well at school can add an average of £140,000 to a student’s earnings over their lifetime.11 Young parents should be supported to negotiate the barriers to education so that they can engage with and enjoy school and college.

This would also have a positive impact on their children. In the UK, people with a low level of educational attainment are almost five times more likely to be living in poverty as those with a high level of education.12 Worryingly, the hardships associated with living in more deprived circumstances can affect both children’s and parents’ physical and mental health. Growing up in a low-income family can also impact on children’s diets as well as the quality and amount of clothing, toys and other resources they need to be warm, happy and healthy.13

School and further education

The majority of young mothers come from disadvantaged backgrounds, which can make it harder to engage with education.14 Persistent absence from school and lower educational attainment have been linked to early pregnancy.15 When combined with the difficulties young parents can face once they have children – moving house, learning to live independently, taking care of their children – it can sometimes seem impossible for them to focus on their education.16

Research shows that teenage mums can find it difficult to go back into education after having children.17 Their school might not accommodate their needs as expectant and new mothers, and this could be the reality for new fathers as well.18 Whilst some schools allow for the needs of teenage parents, for example by working antenatal support into students’ timetables, this is not always the case.

The young women we spoke to in the focus groups we held for this report highlighted the difficulties they experienced in education, including the need for extra support to return.

‘Thing is though, I liked school, I stayed all through school. But I feel like I’d have to have, not like special care, but someone who understands that sometimes I’m a bit like, “Huh?”’

Young mum, 23

For some, early motherhood provides them with the motivation they need to return to education.19 Research shows that becoming a father can also inspire young men to make changes to their lives more generally.20 However, parenting responsibilities can be difficult to balance with the demands of education.

* Childcare funding
The Next Chapter: Young People and Parenthood

Attended university

11 per cent of young parents aged 25 and under have attended university, compared to 45 per cent of young people who aren’t parents.

Skilled work

One third of young parents (33 per cent) are in ‘skilled’ work, compared to half (51 per cent) of young people who aren’t parents.

Higher education

Our analysis of the Next Steps data\(^2\) shows that both young mothers and young fathers are much less likely to move into higher education. Our findings suggest that parenthood negatively impacts on the likelihood of young people attending university, regardless of family background.

This is concerning as it can feed into other forms of disadvantage. Our analysis found that university attendance was a significant factor in whether a young person was working in a highly skilled role or not. Those in highly skilled roles earn more over their lifetimes. Annual earnings for graduates reach a higher peak at a later age than the annual earnings for non-graduates.\(^{21}\)

There have been studies exploring the issues university students with children face more generally. Many of these findings apply to young parents. One study found that national and university policies do not address the needs of students with children.\(^{22}\) Another concluded that students with supportive partners and families were more able to enter and remain in higher education. It was their access to childcare that made studying possible.\(^{23}\)

This mirrors findings from research looking at what can help young parents to return to education. Young mothers who had support at home were able to return to further education significantly faster than those who did not.\(^{24}\)

Childcare is essential if young parents are to return to education, training or employment, but there are some key gaps in childcare support which can prevent young parents aged 20 and over from engaging.

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\(^2\) Next Steps, formerly the Longitudinal Study of Young People in England, follows the lives of around 15,000 people born in 1989–90, and collects information on cohort members’ education and employment, economic circumstances, physical health, family life and social participation.
Childcare support currently available to young parents

Free early education entitlement: All three to four-year-olds in England can receive free early education or childcare. This is usually taken as 15 hours a week for 38 weeks of the year, although parents can choose to take fewer hours over more weeks. Some parents can also get 30 hours of free childcare if they are in work and earning the equivalent of at least the National Minimum Wage or Living Wage for 16 hours a week. Certain parents with two-year-old children can get free early education if they receive benefits including Income Support (IS), income-related Employment and Support Allowance (ESA) and Universal Credit.

Care to Learn is a Government scheme that helps teenage parents with childcare and travel costs while they study. It is available to young parents in England aged 19 and under who are on publicly-funded courses, including at school, in Sixth Form or in college. Evaluations have shown the scheme is crucial in supporting young people to continue with their education. Care to Learn is particularly important as recipients often progress to higher level learning. However, young parents are not always aware of the support offered through Care to Learn and steps should be taken to address this.

Discretionary Learner Support scheme (DLS): DLS can be used by parents aged 20 and over to cover Further Education course costs in addition to childcare, if they are facing financial hardship. A recent evaluation demonstrated that parents who received support through DLS found it extremely valuable. However, not all parents in their early twenties are eligible and there can be delays in receiving confirmation.

1. Entitlement for those on apprenticeships

Unlike other young parents in further education, parents taking up apprenticeships are ineligible for Care to Learn. This could be discouraging young parents from taking up apprenticeships, particularly if they are not paid enough to live independently.

Although apprentices are eligible for the free early education entitlements once their child turns three, or two in certain circumstances, they would not have any support at all until this point.

Care to Learn is also unavailable to young people who might want to take up volunteering. This is a gap which needs to be addressed. Volunteering can build confidence and provides opportunities for learning new skills, acting as a stepping stone toward returning to education or moving into the workplace. This is particularly true of those who may have previously had negative experiences of education.

2. Support for parents aged 20 and above returning to education

Care to Learn is unavailable to parents in their early twenties on the same terms. This means young people aged between 20 and 25 who could benefit from this help are excluded.

Young parents in their twenties facing financial hardship in further education can apply for support through the Discretionary Learner Support scheme (DLS). However, those receiving DLS will only receive confirmation that their costs will be covered just before their course is due to begin. This is a concern as fears of delays or irregular educational support payments discourage young mothers from returning to education or training.

Limiting non-discretionary support to young people under 20 may be a barrier to educational progression for young parents. Due to their responsibilities as parents, they are sometimes unable to return to education until after they turn 20. Research into previous Government initiatives in this area found that many teenage mothers were unable to combine their commitments as students with bringing up an infant or toddler.
Extending the entitlement for Care to Learn would offer more young parents the opportunity to continue with their education. As part of this, funding levels for Care to Learn must also be reviewed and monitored to ensure they adequately cover the rising costs of childcare.

The young women we spoke to made the scheme’s positive impact clear.

‘I wouldn’t have gone to college if it wasn’t for that because I couldn’t afford... £120 a week it would have cost me for two days, £60 a day.’

Young mum, 25 (had her first child at 18)

**Action for Children recommends that:**

1. **Care to Learn** is extended to all young parents aged 19 and under who are on apprenticeships, or who wish to take up volunteering.

2. **Care to Learn** is extended to all young parents who are their child or children’s primary caregiver up to the age of 25.
Employment and financial pressures

‘Sometimes I think it’s quite hard because bills come out unexpectedly so you can come up short.’

The difficulties young parents can experience in education affect their experiences of work – and consequently their finances. Young parents are less likely to be employed than their peers, and more likely to be in ‘unskilled’ work (work that doesn’t require any special qualifications or training) if they are. As noted above, this can have a negative impact on their children. Further, unless one member of the household works full-time, most families cannot break away from poverty.34

Unemployment

The unemployment rate for all 16 to 24-year-olds at 12.5 per cent is consistently higher than that for older age groups, with the overall unemployment rate currently at 4.5 per cent.35 However, young people who are parents face additional barriers to their peers when trying to move into employment.

Research shows that for young parents, the pressures associated with living on a very low income, combined with looking after their children, can make it difficult for them to work, especially in areas with limited job opportunities.36 Costs associated with attending job interviews – for example, the need to purchase new formal or business clothing, and the price of travelling to and from the interview – also create barriers to employment.37

Our analysis of the Next Steps data demonstrates that young parents are more likely to be living in workless households than their peers. Single young parents are of course particularly likely to be living in workless households given their childcare responsibilities.

Young parents are therefore also more likely to be in receipt of benefits. Their struggles with education no doubt affect this likelihood. This means that recent changes to the benefits system will have a disproportionate impact on young parents and their children. Many working-age benefits are subject to a cash-terms freeze, and so are not rising in line with inflation.38 As a consequence, benefits do not adequately cover the cost of living, which has repercussions for young parents’ children in particular.
‘I think there is pressure from some people, who say that once your kid is a certain age that you should go back to work. But you try and find a job, realistically, with school hours, it’s really hard, and they are few and far between. Those that can get a job, that’s great, I’d love to get one once they’re all at school, but they’re not easy to find.’

Young mum, 25
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INFOGRAPHIC: 47 PER CENT OF SINGLE YOUNG PARENTS ARE IN WORKLESS HOUSEHOLDS, COMPARED TO 15 PER CENT OF NON-PARENTS

Nearly 60 per cent of young parents aged 25 and under are on benefits, compared to 10 per cent of young people who aren’t parents (not including Child Benefit, Statutory Maternity Pay or Maternity Allowance).

However, research also highlights the fact that many young parents do not know what benefits are available and are often not claiming as much as they are entitled to.39

This demonstrates the need not only for tailored and continuous employment support but welfare advice as well. A number of the young women we spoke to described their confusion regarding entitlements.

Young mothers’ experiences show that understanding and navigating the welfare system is complicated and confusing.40 It can take them time to establish the level of support they might be entitled to and how any change in their circumstances might affect eligibility.

As part of A framework for supporting teenage mothers and young fathers, Public Health England and the Local Government Association recommended appointing a Job Centre Plus lead advisor on benefits for young parents in each local area.41 Our findings underline the need for the role and for its remit to be extended to include young parents aged 20 to 25.

The young mothers we spoke to wanted to work but highlighted the difficulty of returning to employment.

This illustrates the importance of ensuring work coaches based in job centres are trained to work with the specific needs of young parents. The aim of work coaches is to support claimants into work by providing tailored advice through work-focused interviews. Training and support materials for work coaches should specifically address how to support young parents.

It is also important that the focus on employment does not mean young parents miss out on the chance to be mothers and fathers. Employment is important, but so too is the opportunity to bond with your children and grow into your new role as a parent. Young mothers in particular can face a double stigma: being judged either as ‘bad mothers’, because they go out to work and do not stay at home to look after their children, or as ‘bad citizens’, because they do not participate in society through paid work.42

‘I’ve actually only just discovered I’m entitled to certain grants. These things aren’t advertised because I suppose the funding’s short and if they told everyone about it there’d never be enough funding. But at the same time, what’s the point of putting on all these things if you’re not going to tell people about it.’

Young mum, 25 (had her first child at 19)
Poverty

Over half (54 per cent) of young parents live in poverty.\textsuperscript{43} We found that, over the course of a year, they earn £1,300 less than young people without children.\textsuperscript{3} The difference is even greater for single parents. This is significant, especially as they also need to cover the additional costs of clothes, food and essentials for their children.

Annual income

\begin{itemize}
  \item £16,000 Average yearly income for young people who aren’t parents aged 25 and under
  \item £14,700 Average yearly income for young parents
  \item £8,400 Average yearly cost of raising your first child\textsuperscript{44}
\end{itemize}

\textsuperscript{3} Income figures are estimates based on analysis of the Next Steps longitudinal study. The figures are self-reported, and have been imputed where data are missing. See the Next Steps User Guide for more information (Sweep 8 - Age 25 survey).
Nearly 40% of young parents report they are ‘just getting by’ financially or worse, compared to 26% of young people who aren’t parents.

Financial struggles

Young people with children are also at a disadvantage compared with older parents. Under-25s do not benefit as much from the recent increases in the minimum wage as older members of the workforce. This appears to demonstrate an expectation that young people will not have the responsibilities of older workers – an expectation that ignores young parents’ realities.

The National Minimum Wage for apprentices is only £3.30, and women most commonly take up apprenticeships in low-paid sectors such as health and social care with little opportunity for progression.45

Childcare costs mean that for many young parents taking up an apprenticeship is not financially possible. This is why it is so important that Care to Learn is made available to them.

A number of the young women we spoke to described the financial pressures they were under. This is concerning, as children growing up in poverty generally reach lower levels of development than their more affluent peers. Good development in the early stages of a child’s life is strongly associated with positive outcomes, including, again, higher educational attainment and improved employment prospects.46

We must address the financial struggles of young parents if we are to disrupt this cycle of intergenerational disadvantage.

Action for Children recommends that:

3. Work coaches in job centres are trained to address the specific needs of young parents.

4. There is a lead Job Centre Plus advisor on benefits for young parents in each local area.

5. The Government review its working-age benefits freeze, in light of the impact on children and families.
Relationships and wellbeing

‘My mum chucked me out … and my dad didn’t speak to me.’

Family and friendships

As we have seen, young parents could benefit from increased support with their education and employment. We know that their relationships, particularly with family, can be vital when it comes to returning to school or college.\(^47\) Young parents’ social networks are generally key to their wellbeing and their confidence as parents.\(^48\) Yet they actually tend to have less social support compared to older parents.\(^49\)

This can partly be explained by young people’s changing relationships with their own parents. Some of the young women we spoke to warmly described the support they received from their family. They felt able to ask relatives for advice about their children’s health, and for help with childcare. But not all the young women had these family support options open to them.

Some families simply don’t have the time, dealing as they are with their own difficulties.\(^50\) Others reacted negatively to news of the pregnancy.

‘I had one family member, very over the top, be like, ‘Why are you even keeping it?’ Purely because … “I enjoyed my teens and my twenties and you’re not going to get to do that.”’

Young mum, 25

They can experience particularly high levels of loneliness because they are less likely to know parents their own age. Friends from their ‘past life’, as one young person put it, can’t readily identify with their new responsibilities.\(^52\)

Having a good support network around you gives you the chance to discuss any problems you might be experiencing. Our analysis of the Next Steps study found that young parents were less likely to have someone they could talk to about their problems than their peers who are not parents.

INFOGRAPHIC: 1 IN 5 YOUNG PARENTS RARELY OR NEVER SEE FRIENDS

Young parents rarely or never see friends

Becoming a parent at a young age can also affect friendships. Research identifies that very few young mothers had found new friends or formed new social networks after becoming a parent.\(^51\)
‘I think friends react differently like because ... at this stage, they’re going out clubbing, still living their life that they’re used to as a young teenager and then like, you sort of can’t, can’t do the things they’re doing so you do lose them friends.’

Expectant mum, 19
Care experienced young people

Young people who have spent time in care are particularly likely to face social isolation. Care leavers tend to leave home at an earlier age and without as much support as their peers. They can be at risk of experiencing loneliness as they may not have regular contact – or any contact at all – with their birth family or former carers. It can be difficult for young people to maintain relationships with friends and family members if they frequently move between care placements, or are placed somewhere far from home.

A number of UK studies demonstrate the heightened likelihood of early pregnancy for those with experience of care compared to their peers who have never been in care. Research has found that care experienced young people can be more likely to experience poor pregnancy-related outcomes, for example, maternal depression and low infant birth weight. Despite these risks, there is very little recognition of the different and additional needs of these young parents.

Care experienced young mothers and fathers might also find it hard to bond with their babies if they experienced trauma in their own childhoods. Young parents who have experienced abuse are very likely to have additional challenges when they become parents themselves, with emotional issues related to past trauma sometimes coming to the fore as a result of having a child. Six in ten (61 per cent) children and young people in care become looked after due to abuse and neglect. Such trauma, along with the disruption of the attachment bond with their primary caregivers when they are taken into care, can cause children to subsequently develop insecure attachments. Poor attachment can lead to developmental difficulties and behavioural issues.

It is important to note that care experienced young people express positive feelings about parenthood. Research shows that many young mothers with care backgrounds proactively choose to have a child or continue a pregnancy to address the lack of love they received from their own parents. A study focusing on care experienced young fathers found that they often aspired to be better parents than their own parents had been to them, but due to their childhood experiences they did not always know what was expected of them.

The Government has recently focused on the need to improve wider leaving care support, through initiatives such as Staying Put. However, the support on offer to young people leaving care can vary hugely between areas.

Personal advisers (PAs) are responsible for ensuring care leavers receive the support they are entitled to, although there are no formal requirements for the job. Following recent changes brought in by the Children and Social Work Act 2017, the Government is now reviewing this role.

This review provides a chance for stronger guidance and training for PAs on attachment, so they can better support all care leavers, but specifically those who are parents. This would give PAs an in-depth understanding of the difficulties with attachment that care leavers can experience and their possible need for support, particularly in the context of their own parenthood.

It is crucial that this support is offered. For young care leavers, there is an increased risk of their own children being taken into care. Without the right support, many could become parents again and experience further trauma if their next child is also removed from their care.

It is not just care experienced young people. A disproportionate number of young parents have successive children removed from their care. Between 2007 and 2013, 7,153 birth mothers appeared in 15,645 recurrent care application concerning 22,790 babies and children. Half of these mothers were 24 or younger.

Parent and child foster placements are important as they offer a chance for parent and child to stay together, where that would be in the best interests of the child. Parent and child arrangements are a specialist type of fostering. Such arrangements can vary. Some support parents – primarily young mothers – in adjusting to their new responsibilities in a safe environment. Others are ordered by the courts, and typically last for about 12 weeks. These involve an assessment of the parent’s ability to look after their child.

The Fostering Network recently found that there is a shortage of parent and child foster placements, with 57 per cent of fostering services identifying a need in this area. A lack of available parent and child foster placements could mean that more young women need to travel further away from support networks in order to benefit – if they even have the opportunity to benefit at all.
Domestic violence

Pregnancy and motherhood can increase the risk of domestic violence (DV). US-based research has identified that teenage mothers are more likely than older mothers to experience DV during and after pregnancy. Rates are reported to be as high as 38 per cent for pregnant teenagers compared with 24 per cent of older women.

Domestic violence threatens the health and wellbeing of both the expectant mother and unborn baby. Pregnant women experiencing DV are at greater risk of miscarriage and their children more likely to be born at a low birth weight. Mothers may also develop maternal depression, which can in itself heavily impact on their children’s lives. Growing up with domestic violence can also negatively affect children’s development, behaviour and emotional wellbeing.

One UK study found that experiences of disadvantage put young mothers at increased risk of experiencing DV. Their options are also limited when it comes to the possibility of leaving violent partners. Young mothers described how their financial dependence on violent partners prevented them from leaving those relationships.

Studies further report that young mothers’ relationships are not always taken seriously on account of their age. There are very few dedicated interventions available to young people experiencing domestic violence, including young parents. In addressing DV among young parents, studies identify the importance of developing policies aimed at both supporting victims (in the main, mothers and their children) and engaging with perpetrators. For example, St Michael’s Fellowship runs the group intervention programme ‘Caring Dads’ which aims to help young fathers improve their relationships with their children and to end controlling and harmful behaviours. Unfortunately, there are few programmes that do this.

Case study: Shirley’s story

When 19-year-old Shirley found out she was pregnant, she moved out of her dad’s house so that she could live with her partner. Very quickly, he isolated her from her family and friends and she soon felt like she didn’t have anyone to talk to. The relationship deteriorated, and the stress started to affect her performance at work.

Luckily, her manager was understanding and told her that the way she was being treated wasn’t right.

Shirley received help from Women’s Aid, and they, along with her parents, gave her the strength to remove herself from her violent partner.

It hasn’t been easy though. She had to relocate, leaving a job she loved to move back in with her mum. As a result of her experiences she continues to feel anxious, and is concerned about how this will affect her unborn baby.

She has started to attend a young parents group at her local children’s centre, and even though it’s only been a little while, she already feels reassured.
Living arrangements

Housing acts as a particular source of stress for young parents, with living arrangements having the potential to cause relationship strain. Studies have further identified a link between poor quality housing, maternal depression and poor child health outcomes.

‘Even if we don’t get this place though I think we’re that desperate we’d even go for like a one-bed, just so we’re actually in somewhere of our own … we’re so desperate now that we’re just like, ‘Anywhere!’

Expectant mum, 19

Young parents’ housing situations vary. Some live independently in rented or owned accommodation; others might stay in supported accommodation units. Young parents might also have the option of living in the family home during, and after, their pregnancy. This can provide them with more support and security than they would have if they were to live independently.

However, such arrangements can cause difficulties. A large number of young mothers are from disadvantaged backgrounds, and bringing an extra family member into a household already stretched financially and low on space can increase existing family tensions and cause overcrowding. This could result in reduced levels of support, at a time when the young person needs it most.

Moving out throws up its own difficulties. The process of securing independent housing can be very uncertain and unsettling for many young mums. There can be long waiting lists for social housing. Some young women may be living in hostels during pregnancy, facing high levels of stress whilst waiting to hear where they will be living after their baby is born.

Due to their pressured housing situations, young parents might be prepared to accept substandard accommodation located at a distance from family and other support networks. Young mothers can feel lonely and isolated if they are housed away from their family and social networks with no decent access to public transport. Research suggests loneliness can contribute to and exacerbate poor mental health.

A large number of young mothers and their children tend to live in lower quality, insecure and cramped accommodation situated in poorer neighbourhoods. Low quality housing leaves children open to such health risks as cold, damp and overcrowding. Poor housing can also negatively impact educational outcomes for children.

Social housing

One third of young parents (33 per cent) are living in social housing compared to 8 per cent of young people who aren’t parents.

“Supported housing” is very ironic seeing as no one would be up there to support me! ...Removing you from any sort of support you might have had.’

Young mum, 25
‘I’m hoping that I can bring her into the world in three months’ time and actually have like somewhere to live.’

Expectant mum, 19
Case study: Sarah’s story

Sarah became pregnant with her daughter Maisie when she was 15. She found out when she was seven months pregnant, giving her very little time to prepare. Although she had gone to the doctor with stomach pains, she had simply been told she was suffering from IBS.

It was scary, but her mum and dad said they would help and were supportive to begin with. However, once Maisie arrived things became stressful. They were living with Sarah’s parents and her four siblings in a four-bedroom house. Sarah had to share a room with her younger sister. As Maisie would often start crying in the middle of the night, Sarah had to go downstairs and sleep on the sofa with her, so that her sister, who would have school the next day, wouldn’t be disturbed. She wanted to move into a mother and baby unit but it was incredibly difficult to arrange this where she lived.

After a while, it also began to feel like her parents were taking over, continuously commenting on what she was doing wrong. This led to a number of upsetting family arguments. Sarah was also intensely lonely. She had very little contact with other young mums and had become isolated from the friends she had made before becoming pregnant as she felt they were gossiping about her.

She became anxious and depressed and didn’t know what to do. Feeling useless, she took an overdose of antidepressants.

Sarah recovered and afterwards felt able to tell her Health Visitor what had happened. She was allocated a Family Support Worker from Action for Children, and through 1:1 support and feedback from observation sessions Sarah was helped to see what she was doing well. Sarah grew in confidence as a mother, and knew it was important for her and Maisie to leave the family home and set up a home of their own where she could be in control and bond with Maisie.

Her Family Support Worker helped her to apply for council housing and the benefits she was entitled to, and was available whenever Sarah needed support, particularly if she was beginning to feel anxious again.

Sarah and Maisie are now set up in their own home, and they have been able to remain close to Sarah’s support network. Though things became very strained when they were living together in such close quarters, Sarah says her parents are an invaluable support to her now she is living independently. Living with that stress had made her feel anxious and depressed, but now, secure in her own home, she feels much better.

Supported housing provides safe and affordable accommodation alongside practical support services for those who may need help with the transition to independent living. Different supported housing schemes help different groups of people, for example, homeless people with complex and multiple needs, people suffering from mental health difficulties, women at risk of domestic violence, and, of course, young parents who may need support with the transition to independent living.

Supported housing can provide young parents with invaluable help. Research shows that there is a need to support more vulnerable young parents in a variety of different supported housing options, and Government should explore this.96 Young parents are individuals who have different needs. Those with high-level needs or more limited support networks might benefit from supported accommodation with on-site staff; for others an independent tenancy with floating support may be more appropriate.

However, the future funding of supported housing is uncertain.

The Government ran a consultation on funding for supported housing in November 2016, and a response from them is now pending. This should outline the future direction of policy in this area. We call on Government to ensure that there is a continuation of funding for supported accommodation that addresses the needs of young parents, particularly teenage mothers.
Mental health

There is evidence of high rates of depression among teenage and young mothers. This is thought to be caused by their increased risk of isolation, housing difficulties, poverty, debt, and their experiences of care.97 Teenage mothers with lower levels of support are at particular risk of depression.98 It is estimated that around thirteen per cent of all women experience postnatal depression, but this is believed to be much higher for teenage mothers.99

Although much of the research focuses on the experiences of young mothers, young fathers can also be more likely to have pre-existing depression and anxiety.100 Our analysis of the Next Steps data showed that both mothers and fathers are significantly more likely than young people who aren’t parents to report experiencing poor mental health, according to their General Health Questionnaire scores.

Children whose mothers are depressed have increased difficulty reaching developmental milestones and form less healthy attachments.101 This leaves them more vulnerable to depression themselves later in life.102 Mothers with depression can also find it harder to be responsive to their babies’ needs.103 This affects opportunities for the development of positive attachment between mother and baby.104

Young mothers may also hide symptoms of postnatal depression.105 They can be afraid that they will be judged as being unable to cope with their parenting responsibilities, and fear that their child may be taken away.106 Many may also be unaware of the reason they might be feeling the way they do and so they remain undiagnosed.107 Some young mothers who do receive a diagnosis of postnatal depression feel that it causes others, including the professionals engaging with them, to perceive them in a negative light.108

When we spoke to young women with experience of depression during our focus groups, they highlighted how important it is that others, including teachers, doctors, midwives, and family and friends empathised and treated them seriously.

Enduring depression when caring for a child or preparing for birth, whilst at the same time facing a number of different pressures, is exhausting and distressing.

‘It was horrible. Like he’d just be on the floor [her son] ... I’d see him there and just ignore him ... ’

Young mum, 25

As teenage mothers are three times more likely to experience postnatal depression, the current efforts to improve perinatal mental health should take their specific needs into account.109 We know that young mothers in their early twenties can experience similar challenges, and, as our analysis of Next Steps demonstrates, this age group are also at increased risk of mental health difficulties. For this reason the needs of younger mothers aged 25 and under should be specifically considered within NHS England’s present work on perinatal mental health as part of their Five Year Forward View for Mental Health.
Action for Children recommends that:

6. More research is carried out into domestic violence amongst young parents in England, and how they can best be supported.

7. The Home Office’s current focus on domestic violence take into account the specific experiences and needs of young parents, and the impact on their children.

8. Government ensures that there is a continuation of funding for supported accommodation specifically addressing the needs of young parents, particularly young mothers.

9. Personal advisers for care leavers complete in-depth training on the needs of care leavers who are young parents, with a focus on attachment.

10. The Department for Education’s fostering stocktake looks into how the number of parent and child foster arrangements can be increased, in light of the rising demand for this type of fostering.

11. NHS England’s focus on perinatal mental health take the specific needs of younger mothers, aged 25 and under, into account, considering their potential vulnerabilities.
Stigma and services

‘You don’t want to be the young mum that, you know, isn’t doing the best she can.’

As this report has shown, some young parents face particular difficulties due to their age and circumstances. Becoming a parent at an earlier age can have negative repercussions, both for the young person and their child. Children born to teenage parents can experience negative short and long-term outcomes, from poorer cognitive development to an increased risk of unemployment. The risk of poor outcomes extends to the children of women who become mothers in their early twenties, something often overlooked.

However, this doesn’t mean that young parents can’t make brilliant mothers and fathers. Young parents can overcome the challenges they face; they just need to be able to access support that is right for them. Unfortunately, they can come up against barriers which stop them from accessing this. A key barrier is stigma, or negative social assumptions about young parenthood.

Young parents are acutely aware of the negative assumptions others can make about their parenting capacity. Some of the young women we spoke to felt that people assumed ‘young parent’ was synonymous with ‘bad parent’.

‘Everyone just thinks young women are going to be bad parents.’

Young mum, 25

Professionals’ attitudes toward young parents

Young parents and expectant young parents report mixed experiences when it comes to the support they received from GPs, hospital-based midwives and hospital doctors. Many can feel like they are looked down on and patronised because of their youth. Young parents describe how it can be a challenge to be taken seriously by their doctors and antenatal services.

A number of the young women we spoke to described instances when they had been concerned about their child’s health yet during appointments with their GPs these concerns were dismissed. Others wondered whether these experiences were down to their age.
‘I think there’s just such a thing of, “Oh OK, well you’re young so you just can’t do it.” There’s no, “OK, you’re young, so we need to put things in place to help you do it.”’

Expectant mum, 19
'Sometimes doctors just think that we’re going every time they cough, but actually it’s more than that. I wouldn’t take her if she had a cough and a cold unless I was concerned that it was worse than that. I wouldn’t waste their time.'

Young mum, 23

When speaking about professionals who they found to be particularly supportive, young mothers and expectant young mothers emphasised their positive views of young parenthood. There is strong evidence to show that where health professionals are non-judgemental and supportive this makes a big difference to young mothers.116 Evaluations of previous initiatives to help young parents emphasise the importance of a dedicated support worker from the antenatal stage.117 Young parents could then turn to them for informal advice and support. As the first point of contact, this person would often be their midwife. It is key that midwives and health visitors, who also regularly come into contact with young parents, continue to be trained effectively to support the specific needs of particularly vulnerable young parents.

It is not just about individuals. All services that provide support to young people must make them feel valued, respected, and, importantly, welcome. Public Health England, the Department of Health and the Royal College of Midwives have produced a comprehensive guide outlining how those working in maternity services can best support pregnant teenagers and young fathers.118 This now needs to be systematically promoted across all maternity units. Additionally the Department of Health’s ‘You’re Welcome’ quality criteria set out the principles health services – based both in hospitals and across local communities – must apply to their settings in order to make young people feel comfortable.119 The criteria covers topics such as accessibility, staff training, skills, attitudes and values.

First launched in 2005, updated versions of the ‘You’re Welcome’ standards and the validation process have recently been piloted, with young people’s participation very much at the fore. However, there are very few references to working with young people who might have parenting responsibilities in the updated standards. Young parents’ needs should be taken into account, considering the negative experiences some can have when engaging with professionals. This would be particularly useful when it comes to staff inductions and training. Young parents should also be suitably represented amongst ‘Young Verifiers’ – the young people who check to see if a service has met the ‘You’re Welcome’ criteria.

When the updated standards are finalised, they should be applied across all health settings engaging with young people.

‘[Another midwife] looks down her nose at you because you’re young … Natalie doesn’t, does she, Natalie loves young mums … She’s like really casual and down-to-earth with you, and she’ll have like a normal conversation with you … not just about you being pregnant and everything.’

Young mum, 18
A lack of dedicated support groups for young parents

Young parents are less likely to attend NHS antenatal classes. The young women we spoke to said they felt intimidated by regular antenatal classes and parent support groups, fearing that they would be judged by professionals and the other parents. Studies show that many young mums feel alienated from regular support groups due to their age. They can feel ‘out of place’ and lonely amongst women even a few years older.120

‘I just didn’t really want to do the antenatal classes. I was put off by the assumption that they’d all be, you know, 30+ mums with a perfect little life, husband, all that.’

Young mum, 25 (had her first child at 19)

Accessing antenatal support helps parents to prepare for parenthood. It can lead them to take up healthy behaviours that positively affect their child’s development, both during pregnancy and in early life.121

Group-based support has been shown to be effective in helping women with low-level symptoms of depression and anxiety.122 Young mothers, who can be more likely to smoke throughout pregnancy, and who can also struggle with mental health difficulties to a greater extent than older mothers, would particularly benefit from antenatal classes.123

Young mothers do appreciate the chance to compare their experiences of motherhood with others in similar situations.124 Evaluations of young parent support groups found they supported parents in building positive relationships with peers and improving their sense of self-worth.125 Facilitating opportunities to meet other young parents, to make friends and share advice, is particularly important to young parents’ wellbeing.

‘I think when you’re sat at home and you’re pregnant and you’re young, and you just think, “Oh no, am I the only one in this situation?” Then when you actually come to these groups you’re like, “Oh, I’m not alone, and actually no, I’m not stupid, because we’re all in the same boat.”’

Expectant mum, 19

There are challenges in ensuring young people access the targeted provision available. A key factor is the flexibility of support on offer and the availability of information about local services.

‘You just don’t know. I just assumed they were all church groups or something ... I didn’t realise they were done by the council and it was something I could just phone up and find out.’

Young mum, 25
The young mums we consulted had also benefited from targeted outreach, with Specialist Teenage Pregnancy Midwives recommending they attend local dedicated support groups.

There is a need for support services to recognise the barriers to support – including stigma, isolation and travel – and effectively address them. If the young parents who need extra support can’t access it, the challenges they face will continue to impact not only their lives, but those of their children too.

Support for young fathers is also patchy. Research shows that they receive little professional support in the transition to fatherhood, and can feel excluded from the birth process. Young fathers have a positive role to play, and they should be supported as they grow into it.

‘It’s good for the kids as well, especially if you are like, you know, where you’ve been struggling, and I’ve been struggling, it’s so nice to be able to come together.’

Expectant mum, 19
The role of children’s centres

Young parent groups tend to operate out of children’s centres, offering the chance to engage with professional support workers. These professionals can provide practical advice and signpost to other services.

Groups also give staff the opportunity to build trusting relationships with young people. This may take time, especially if young people have had negative experiences of formal services in the past. Developing that trust can then make it easier for young people to ask for help about other issues in their lives.

Children also benefit from attending support groups at the children’s centre. Sessions hosted by the centre, like Stay and Play, can have a positive effect on the home learning environment, encompassing activities that children can participate in with their parents at home, like reading, drawing and painting. Such activities have a positive impact on child development, from their earliest years right through to the age of 11.

There are a few children’s centres that offer 20 to 25-year-olds the opportunity to attend young parent groups. But it is difficult to get a full picture of the number of services offered.

It is important to note that children’s centre services have undergone significant cuts in recent years. Council spending has decreased by 48 per cent since 2010 and central government funding in this area has fallen by 55 per cent across the same period. This has led to a reduction of programmes, including Stay and Play sessions, which will have an impact on the support young parents can access.
Family nurse partnership

Young mums aged 24 and under are entitled to support from the Family Nurse Partnership (FNP). Originally, this support was available only to teenage mums but was extended in the last year to reflect the fact that young mums in their early twenties can have similar vulnerabilities.

Through this home visiting programme, a specially trained nurse sees the young mum regularly, from the early stages of pregnancy right through to the child’s second birthday. Evaluations of the programme’s effectiveness in the US demonstrate significant improvements in relation to child development, employment opportunities for the young mums, and in the reduction and prevention of domestic violence.\(^1\)\(^3\)\(^2\)

Findings from evaluations of the programme’s effectiveness in England showed less significant improvements in short-term outcomes (for example, smoking in pregnancy) but demonstrated improvements in others. Research suggests that, by age two, children whose mothers are supported by FNP are developing well, and in line with the general population, that the programme improves maternal self-efficiency, and supports the early identification of safeguarding risks.\(^1\)\(^3\)\(^3\)

Importantly, family nurses also focus on empowering young mothers when it comes to planning their futures and achieving their aspirations. This supports current efforts to reduce the numbers of young people not in education, employment or training.

Young women themselves told us how much they appreciated the support their nurse offered them, particularly as they could phone or text them whenever they needed help. When we asked them who they felt most comfortable asking for support, a number answered with their nurse.

However, some local areas are decommissioning the programme for both teenage mothers and those aged between 20 and 25. This risks undoing the progress made so far. Local authorities should carefully consider such decisions, particularly as the programme’s loss will impact upon areas they themselves have identified as priorities. Ensuring the ‘best start in life’ for all children is recognised as a priority by 83 per cent of councils in England.\(^1\)\(^3\)\(^4\)

Action for Children recommends that:

12. The guide produced by Public Health England, the Department of Health and the Royal College of Midwives, Getting maternity services right for pregnant teenagers and young fathers, is systematically promoted across all maternity units.

13. Young parents’ needs are taken into account in the ‘You’re Welcome’ quality criteria, particularly in relation to staff inductions and training. Young parents should also be suitably represented amongst ‘Young Verifiers’ – the young people who check to see if a service has met the ‘You’re Welcome’ criteria.

14. The ‘You’re Welcome’ quality criteria are applied across all health settings engaging with young people.

15. Government recognise the importance of children’s centres, and ensure that the needs of young parents and their children are taken into account in any future inspection framework.

16. Young parent groups at children’s centres are inclusive of all young parents up to the age of 25, including young fathers, where possible. This should be made explicit in information literature.

17. Local authorities protect Family Nurse Partnership funding.
Conclusion

Young parents, like any other parent, want the best for their children. Just like other parents, they can make capable and confident mothers and fathers. But for some, their circumstances, combined with their age, can throw up challenges.

Our research has revealed the urgent difficulties some young parents face – and not just teenage mothers, but parents in their early twenties too.

We know that young parents can struggle with education; 11 per cent of young parents have been to university, compared to 45 per cent of their peers.

Young parents are more likely to be unemployed, and even if they are in work, they are less likely to be in skilled employment. Nearly 40 per cent of young parents report that they are struggling financially, compared to 26 per cent of their peers.

Young parents are also more likely to report experiencing poor mental health than those their age who don’t have children, and they do not always have the necessary support around them from family and friends. Strikingly, one in five rarely or never see their friends at all. Negative social attitudes toward young parenthood influence young people’s relationships with loved ones and, crucially, their engagement with support services.

These challenges have an impact on the children of young parents too. Children born to teenage parents can experience a range of negative short and long-term outcomes, and these risks extend to the children of women who become mothers in their early twenties too.

The needs of young parents cannot be overlooked.

We have made a series of recommendations to ensure young parents have access to support. This support should extend to those in their early twenties who face many of the same challenges as teenage parents. Our findings show the need for a holistic approach, supporting parents across the interconnected areas of education, employment, mental health and wellbeing.

To break down the barriers young parents face in accessing education, government must ensure all have access to high quality childcare. Those out of work and struggling to understand their benefits entitlements should have access to work coaches at job centres who understand the difficulties they face and what might help. This will help more young parents return to education and work when they’re ready, with the option of a career they are interested in, moving them and their families away from poverty.

Programmes like Family Nurse Partnership and dedicated support groups for young parents – as well as the children’s centres that often host them – must be protected and grow to support young parents up to the age of 25. And both health and family support services must make parents feel welcome, valued and respected. Young parents can then feel comfortable and safe speaking to health professionals and family support workers about the difficulties they face.

Public Health England and the Local Government Association’s A framework for supporting teenage mothers and young fathers also recommends specific actions for all relevant agencies; it is now important that local authorities prioritise their implementation.

In this way, young parents can embark upon this next chapter of their lives with increased confidence, knowing that the necessary support is there – if they need it.
Action for Children recommends that:

1. **Care to Learn** is extended to all young parents aged 19 and under who are on apprenticeships, or who wish to take up volunteering.

2. **Care to Learn** is extended to all young parents who are their child or children’s primary caregiver up to the age of 25.

3. **Work coaches in job centres** are trained to address the specific needs of young parents.

4. **There is a lead Job Centre Plus advisor** on benefits for young parents in each local area.


6. **More research is carried out into domestic violence amongst young mothers and fathers in England**, and how they can best be supported.

7. **The Home Office’s current focus on domestic violence take into account the specific experiences and needs of young parents**, and the impact on their children.

8. **Government ensures that there is a continuation of funding for supported accommodation specifically addressing the needs of young parents, particularly young mothers.**

9. **Personal advisers for care leavers complete in-depth training** on the needs of care leavers who are young parents, with a focus on attachment.

10. **The Department for Education’s fostering stocktake looks into how the number of parent and child foster arrangements can be increased**, in light of the rising demand for this type of fostering.

11. **NHS England’s focus on perinatal mental health take the specific needs of younger mothers, aged 25 and under, into account**, considering their potential vulnerabilities.

12. **The guide produced by Public Health England, the Department of Health and the Royal College of Midwives, Getting maternity services right for pregnant teenagers and young fathers**, is systematically promoted across all maternity units.

13. **Young parents’ needs are taken into account in the ‘You’re Welcome’ quality criteria, particularly in relation to staff inductions and training.** Young parents should also be suitably represented amongst ‘Young Verifiers’ – the young people who check to see if a service has met the ‘You’re Welcome’ criteria.

14. **The ‘You’re Welcome’ quality criteria are applied across all health settings engaging with young people.**

15. **Government recognise the importance of children’s centres, and ensure that the needs of young parents and their children are taken into account** in any future inspection framework.

16. **Young parent groups at children’s centres are inclusive of all young parents up to the age of 25, including young fathers, where possible.** This should be made explicit in information literature.

17. **Local authorities protect Family Nurse Partnership funding.**
Methodology

Action for Children commissioned Marsha Wood and Honorary Professor Sue Maguire at the Institute for Policy Research, University of Bath to carry out a review of the literature on the lives of young parents in England, aged 25 and under.

Dr Luke Martinelli at the Institute for Policy Research, University of Bath additionally undertook an exploratory analysis of the Next Steps study in order to address the following research questions:

1. What are the characteristics of young parents compared to young people who are not parents?
2. How does parenthood affect outcomes for young people?
3. How does the effect of young parenthood on outcomes vary across sub-groups, based on factors such as sex, relationship status, living arrangements, the presence of support networks, and family and socioeconomic background?

These questions were answered via descriptive analysis of how characteristics and outcomes vary according to parental status and other sub-group variables; some simple inferential statistics were also incorporated to indicate when the differences between the groups were statistically significant.

Next Steps (formerly Longitudinal Study of Young People in England)

Next Steps, managed by the Centre for Longitudinal Studies, follows the lives of around 15,000 people born in 1989-90. The study began in 2004, when cohort members were aged 13-14, and has collected information about their education and employment, economic circumstances, physical health, family life and social participation.

The most recent survey took place in 2016, when cohort members were 25. Due to people dropping out, 7,707 people were interviewed at this stage; 1,500 were parents.

The figures used in this report are weighted, following Next Steps’ methodology on attrition weights.

We also held three focus groups with young parents aged 15 to 25 at Action for Children services in Dorset, Cumbria and Buckinghamshire. Quotes included in this report are taken from focus group participants. We would particularly like to thank the young people who took part for taking the time to share their experiences with us.
Endnotes

1. Office for National Statistics (2016) Estimated number of people who are parents aged 19 and under and aged 20 to 25, United Kingdom, 2016.


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75. Refuge/NSPCC research project (2011) Meeting the needs of children living with domestic violence in London.
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88. Giullari, Comparing kin support for lone mothers in Italy and England; Speak (1995) Young single mothers: barriers to independent living.
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111. Francesconi, Adult outcomes for children of teenage mothers; Morinis, Carson, & Quigley, Effect of teenage motherhood on cognitive outcomes in children.
112. Wenham, A. (2016) “I know I’m a good mum–no one can tell me different.” Young mothers negotiating a stigmatised identity through time. *Families, Relationships and Societies, 5* (1), 127-144.


116. Wenham, “I know I’m a good mum–no one can tell me different.”


120. Joseph Rowntree Foundation. (1995) The difficulties of setting up home for young single mothers. Joseph Rowntree Foundation; Wenham, “I know I’m a good mum–no one can tell me different”.

121. Department of Health (2011) Preparation for Birth and Beyond: A resource pack for leaders of community groups and activities.


123. LGA & PHE, A framework for supporting teenage mothers and young fathers.

124. Joseph Rowntree Foundation, The difficulties of setting up home for young single mothers.


HOW ACTION FOR CHILDREN WORKS

By gathering evidence and identifying solutions
By fighting for change and influencing policy
By giving children and young people a voice
By making sure children and families are at the forefront of decision making

By ensuring that every child and young person who needs help, gets help

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