THE DIFFERENT PATHS TO HIGH SCHOOL GRADUATION FOR YOUNG MOTHERS

by

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Abstract

This descriptive study examined the various components that comprise the educational path that young mothers take to graduation in School District #73 in British Columbia. The study examined aspects of administration, support and programming with respect to how these issues facilitated or impeded progress toward high school graduation. Additionally, the study described the roles of the service-providers for young mothers. Thirty-nine young mothers with a mean age of 20.54 years participated in the study. The sample was developed through recommendations of involved professionals and included young women from both urban and rural centres.

A mixed design was used which included interviews with the service-providers and the young mothers and a researcher-developed questionnaire for the young mothers. The questionnaire included both structured and unstructured sections. The structured responses were tallied and presented using descriptive statistics. The unstructured responses were sorted for common themes, and then tallied and presented.

The teen mothers studied succeeded against exceptional odds and offered a refreshing counterpoint to the popularized myth of unmotivated and unsuccessful welfare dependents. The findings indicate that there is a vast array of high quality service options and educational programming options for young mothers in School District #73 and there is a great deal of flexible school programming happening in the district. The issue of support (by staff and family) was highlighted as very important. Specific areas that pose difficulties are childcare subsidy, transportation, and absenteeism-related concerns.

The support services are working and many teen mothers are experiencing high levels of personal success. To further encourage young mothers and enhance their options, recommendations include further development of flexible programming (using Independent-Directed Studies, Course Challenge and Equivalency) to accommodate mothers with differing needs and to combat the difficulties described. An increased use of Career Preparation programs is recommended for this population. Further it is recommended that the variety of service and educational options be coordinated through a case manager and/or a comprehensive catalogue of resources.

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Introduction

Few would argue that the level of education individuals achieve influences their social and economic status. High school graduation is often seen as the minimum requirement for later social and economic well being (Furstenberg, Brooks-Gunn & Morgan, 1987). Level of education has been repeatedly linked to employability and other lifestyle issues (Burden & Klerman, 1984; Card & Wise, 1981; Furstenberg & Crawford, 1981; Hayes, 1987; McCaul, Donaldson, Coladarci & Davis, 1992; Polit & Kahn, 1987; Rumberger, 1987; Simkins, 1984; Sitlington & Frank, 1993; Trussell, 1981; Upchurch, 1993). High school is traditionally viewed as a period in life where identities are formed, friendships are forged, and life is relatively carefree. For many young people, the academic program takes a back seat to the social-emotional agenda. Human development theorists target adolescence as a period where definite tasks are undertaken (Kegan, 1882). Though in other cultures, adolescent parenthood might be considered normal, in Western culture early childbearing is perceived as an aberration even though "ideas about teen sexuality and 'alternative' family structures may have become less rigid" (Kelly, 1996c, p. 422). Adolescent pregnancy and parenthood is a topic that has inspired fierce debate among researchers, politicians, and members of the public.

Adolescent Parenting as a Problem

The role and status of women has undergone tremendous change this century. Women have moved from being the center of a family's home-life to a place where their role is not so

easily defined. Marriage and motherhood have been, for centuries, the conventional societal aspiration of women all over the world. In earlier eras, teenage marriage followed by motherhood was a common, approved path to adulthood and fulfillment for a girl in many sectors of society. Education for girls was not always considered a useful expenditure of resources. From this world-view, the Western world evolved to encompass attitudes that supported an expanded role for women. During wartime, women's roles changed as they filled a void in the work force. Education for girls became increasingly valued as the years passed. Though the roles of women as wives and mothers were still valued, a later age for this transition was encouraged. During the 1960's, as the mean age for marriage increased, premarital pregnancy became a visible phenomenon, and during the 1970's it became a markedly public issue (Furtstenberg et al., 1987). Girls who became pregnant without the benefit of marriage had few options. Secret abortions, shot-gun (hastily-arranged) marriages or escapes to secluded maternity homes to deliver and give up the infants for adoption were the alternatives most often chosen (Petrie, 1998). A single pregnant teenager going full term while attending a regular high school was unthinkable. Now schools exist that are designed specifically for pregnant teenagers (Seitz, Apfel & Rosenbaum, 1991). Currently an unmarried adolescent mother can continue her secondary education while parenting her child. At the close of the 20th century, there are many viable options for a school-aged girl who discovers that she is pregnant.

In 1985, Time magazine ran a cover story that has since been repeatedly cited by researchers and journalists (Stengel, 1985). The title, "Children having children" has become the catch phrase for the topic of adolescent parenting. These words do not induce images of young mothers struggling valiantly to continue their education against overwhelming odds. Instead, the words connote negative images of early parenthood that are broadcast by the media and studied by researchers. There is no shortage of sources discussing the damaging results of adolescent pregnancy and parenting (Anderson, 1993b; Card & Wise, 1981; Coley & Chase-Lansdale, 1998; Farber, 1989; Furstenberg, 1976, 1991; Furstenberg et al., 1987; Hayes, 1987; Hoffman, Foster & Furstenberg, 1993; Oritz & Bassoff, 1987; Prater, 1992; Simkins, 1984; Streetman, 1987; Trussell, 1981; Upchurch, 1990, 1993; Wallace, 1990). Young mothers have been described as

contributing to the corrosion of the social fabric (Stengel, 1985) and being emotionally disturbed (Woodard, 1998). These young women have also been described as sexually brazen teenagers who have been influenced by the feminist movement (Byfield, 1999) as well as impulsive kids with raging hormones (Shapiro, 1995). Into the fray leap researchers and journalists who tackle the topics of sex-education, contraception, abortion for minors, parental rights and the costs to society in the form of social assistance, special programs, daycare and health problems (Kelly, 1996c; Smithbattle, 1992). Not least among these controversial topics is the concept of providing support for the young mothers so they may continue their education. Some of the public outcry may be due to the media coverage that accompanies the unfortunate instances of adolescent mothers abandoning their infants (McLean, 1998; Slobodian, 1998). Though the reasons for these abandonments are extremely complex, the understandable public response is horror and the negative status of teenage pregnancy is further entrenched.

Adolescent pregnancy and parenthood do pose problems. There are problems for the individuals involved, for affected institutions, and for society in general. Though the effects of adolescent pregnancy and parenting are all too evident, the cause is muddy. Therefore clear solutions escape us, though some writers have advocated a return to shot-gun weddings as a way of solving the problem of parenting adolescents (Byfield, 1999). The arena in which the controversy is played out is often the school system. The debate rages on the results of sex-education in schools. Proponents of chastity-focussed curriculum cite recent rising pregnancy rates in Canada as proof-positive that sex-education is ineffective at least and actually promotes sexual activity and teen pregnancy at worst (Byfield, 1998; Hansard, 1998; Woodard, 1998). When the focus shifts from pregnancy to parenthood, the debate continues. Adolescent mothers are often portrayed as a drain on public funds. "Teen mothers are often depicted as the cause and consequence of poverty and welfare dependency" (Kelly, 1996c, p. 421). Issues such as subsidized daycare for school-attending young mothers cause unease among many people. The associated costs of these support programs are debated and in some cases it is suggested that support of school-associated young mother programs promotes adolescent sexual activity. In some areas, these opinions are upheld at the municipal government level such as when a city

alderman publicly proclaims that teen mothers are "too dumb to educate anyway if they got themselves into this position" ("This Redneck's," 1993, p. 38).

Few writers dispute the supposition that the path of adolescent parenthood leads to a permanently negative social and economic cycle and disastrous consequences for mother and child. Economic and health consequences of early births and unprepared and uneducated mothers with few economic resources are the concepts that galvanize policy makers to search for programs to solve the problem. As well, children of teen mothers have lower graduation rates, higher crime rates and run a high risk of living in poverty (Klein, 1996; Woodard, 1997). This knowledge fuels the search for solutions.

It would be unwise to view these consequences of early parenthood lightly but there is some evidence that all is not lost once a teenager becomes a parent (Furstenberg et al., 1987; "Start of a New," 1997, "Teen Moms," 1997; Upchurch & McCarthy, 1990). In fact, the evidence is far from conclusive that early parenthood is personally and educationally disastrous for *every* adolescent mother.

Frank F. Furstenberg, Jr. has researched and written extensively on the topic of adolescent mothers. A longitudinal study was conducted in Baltimore, Maryland that started in the late 1960's and looked at the outcomes for adolescent mothers and their children over a period of 17 years. The findings of this research indicated that "the popular belief that early childbearing is an almost certain route to dropping out of school, subsequent unwanted births, and economic dependency is greatly oversimplified, if not seriously distorted" (Furstenberg et al., 1987, p. 46).

Throughout the Unites States and Canada, programs have evolved to deal with the "problem" of teen pregnancy and parenthood. These run the gamut from supportive environments focussed on mother-infant bonding to the recently introduced Learning, Earning, and Parenting (LEAP) in Ontario that requires teen mothers to attend school and take parenting classes as soon as possible after the baby is born or lose social assistance (Musick, Bernstein, Percansky & Stott, 1987; "Teen Mothers," 1999). The impetus for these programs may be strictly financial (spend the money now, rather than later), or humanitarian or somewhere in-between.

Whatever the source, the programs are varied in format, delivery, client-base and intended outcome. Often, there is overlap and a young mother might access a number of different programs concurrently or consecutively. Even within one community the array is bewildering. The assumption is that these programs are beneficial but there is little controlled research that supports or refutes their efficacy.

Study Origin and Statement of the Problem

My interest in this topic comes from three domains. As a school counsellor I have had the opportunity to work with pregnant and parenting teens. I have helped them with course programming, career planning, personal counselling and accessing resources. I also have an interest in alternate education. As well, I am a working mother who also attends school. As a new parent I began to wonder anew at the challenges faced by adolescent mothers as they negotiated high school. I have struggled with the issues of managing sick children, finding competent daycare, coping with exhausting days following exhausting nights, transporting infants in inclement weather, never having enough time and juggling my work, home, and family responsibilities. In my favor, I was a mature woman with an education, a supportive spouse and financial resources. As I reflected on these young women and the obstacles they overcame to attend school, I wondered if there was something special about their ability to persevere. I delved into the research and I learned that there were a great number of variables associated with teenage pregnancy and parenting. It appeared that school perseverance was correlated with a myriad of interacting variables.

The focus on institutional obstacles as variables in school perseverance was a topic addressed in the literature. Weisner (1984) studied variables that affected a woman's post-secondary education status. She referred to an earlier source (Ekstrom, 1972) who also examined barriers to women's participation in post-secondary education. Both of these sources deal with post-secondary education for women in general and not specifically mothers. Ekstrom sorted the barriers to post-secondary education into three categories: institutional, situational, and dispositional. This is also an efficient organizational scheme for school-attending young mothers.

Ekstrom's institutional barriers included admissions practices, financial aid practices, regulations, curriculum, services and faculty/staff attitudes. The situational barriers included those barriers that were part of a woman's personal environment, such as family responsibilities or financial need. Finally, dispositional barriers were those factors that were personal to each individual, for example, fear of failure, passivity or level of aspiration. Weisner renamed these barriers as institutional, situational and personal barriers. In an attempt to narrow my focus and concentrate on an area that offered scope for concrete change, I decided to focus on the institutional factors that would affect the ability of an adolescent mother to reach her goal of high-school graduation. In examining the institutional factors that Ekstrom and Weisner posited and comparing them to the high school situation, I determined a number of issues that could either pose a barrier or could facilitate graduation for this population. A closer examination of the possible components of institutional obstacles revealed that a further sub-grouping was viable. Consequently I chose to examine institutional obstacles in three domains: administration, support and program. Within the administration grouping fell such factors as attendance, day-care issues and transportation. These are issues that fall directly under the decision-making realm of school and district administration. The second area for focus was support. Within this domain are the topics of staff support (teachers, administrators and other staff), and hospital-homebound support. The third domain encompassed program issues. These included part-time versus full-time studies options, career guidance and program planning, Independent-Directed Studies (BC Ministry of Education course title), in-school alternate courses, course challenge, course equivalency, and Career Preparation (BC Ministry of Education program title) (BC Ministry of Education, 1999). Figure 1 graphically represents this sorting of topics.

The general problem investigated in this study revolved around the unique challenges experienced by young mothers as they attempt the dual roles of parent and student. Specifically, this study asked the question, which educational path best facilitates high school graduation for young mothers within School District #73 (SD #73) in Kamloops, British Columbia. SD #73 does not have a specific educational program that is mandatory for all adolescent mothers. Instead, there are a number of paths that a young mother could travel on the way to secondary school

graduation. These paths access a number of services and are comprised of a variety of components. SD #73 directly sponsors some of the services, whereas others are administered through external agencies. One program is administered through a partnership between SD #73 and other agencies.

The concept of "best" educational path is deceptive. There are many different paths through which a young mother might successfully achieve graduation status. The institutional components of the various paths exist in a variety of settings and programs and they cumulatively contribute in either a facilitative or obstructive manner. It is likely that there is an interaction between the various components.

Purpose

The purpose of this descriptive study was to explore the variables that young mothers feel facilitate and/or obstruct their path to high school graduation. The procedure was designed to elicit relevant and practical information, and it focussed on young mothers who have managed to navigate the obstacles to their education. The participants provided valuable information that will hopefully inform decision-makers on educational policy at the district and school level. As Worthen & Sanders (1987) describe,

> the evaluators primary responsibility is to gather and interpret information that can help key individuals and groups improve efforts, make enlightened decisions, and provide credible information for public consumption. (p. 210)

This study focussed on description and explanation as opposed to prediction. Determining the causes of school perseverance in young mothers was overly ambitious for the scope of this study. I felt that it was not "feasible to manipulate the potential causes of behavior, [and the] variables are not easily identified or are too embedded in the phenomenon to be extracted for study" (Merriam, 1988, p. 7). The focus was on the day-to-day details of a young mother's academic life with goals of illuminating gaps in service, determining helpful aspects identified by the young mothers, and highlighting possible areas for change.

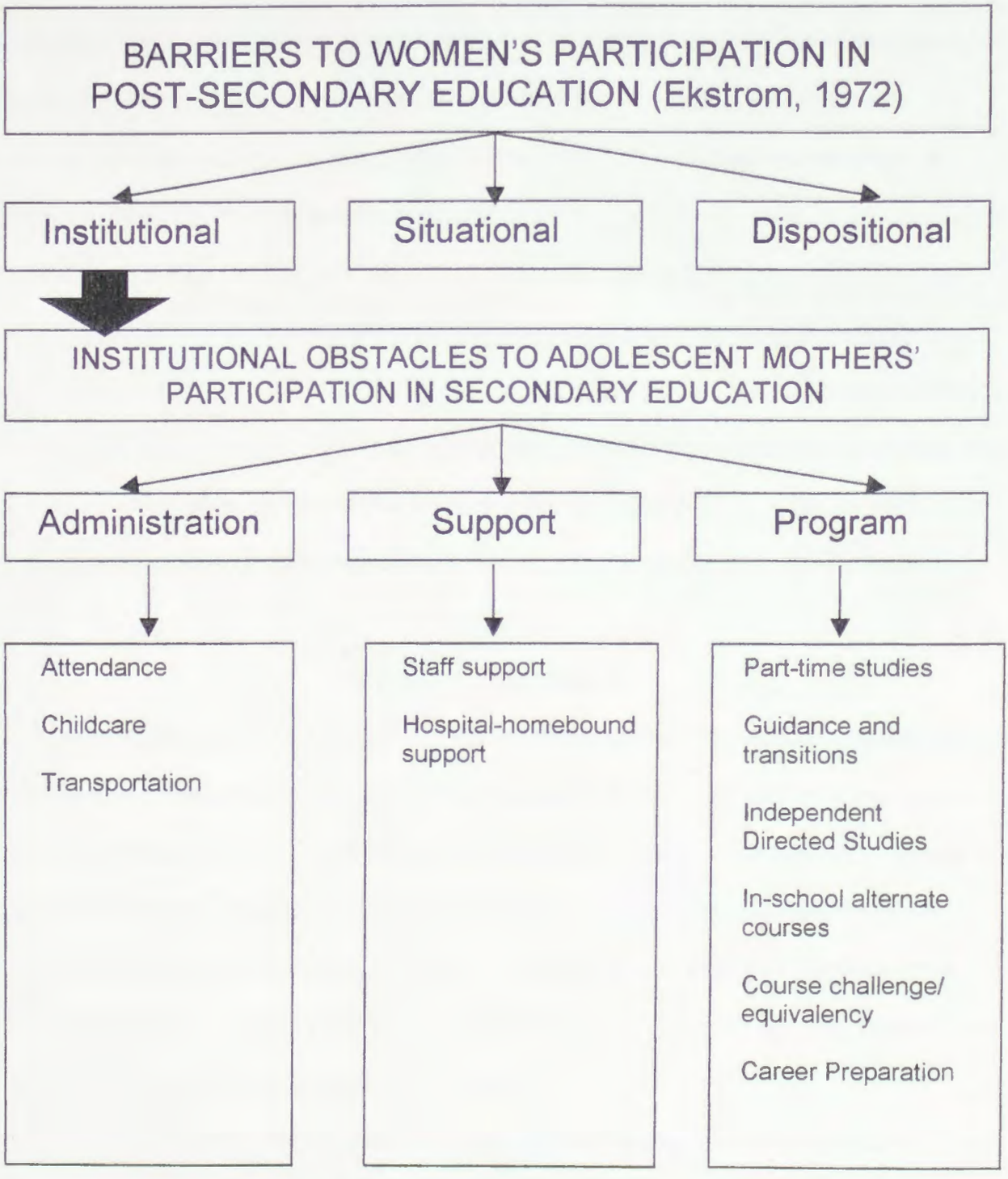

Figure 1. Organization of institutional obstacles to high school graduation for young mothers.

Contribution

Teachers, counsellors and administrators are often searching for ways to make a high-school education more accessible and relevant. Young mothers might have a difficult time attaining their educational goals. Increasing accessibility and relevance for school-aged mothers would hopefully result in a higher graduation rate and improved economic and social outcomes. School counsellors can have a tremendous impact on the lives of these young women. Counsellors are often some of the first professionals to learn of a student's pregnancy. In addition to the other counselling and support provided for an unplanned pregnancy, counsellors can help these students plan and guide their educational program from the outset. Counsellors can help young mothers understand the bigger picture and can help sort out any necessary resources. Counsellors develop individual educational programs for young mothers and they will have an advantage if they are aware of the components of educational programs that have been most useful to other young women in this situation. Because there are a variety of options for young mothers in SD #73, a clear map of the different paths available will prove helpful.

Research Question

The principal question directing the proposed investigation has evolved from the literature and from my own professional experience. What educational path best facilitates high school graduation for young mothers? The literature has identified a host of variables that are positively associated with dropouts returning to school as well as variables associated with the final educational level attained by adolescent mothers. This study will hopefully illuminate some patterns of institutional practices in SD #73 that contribute to educational success. To that end three parts to the question are proposed as follows:

1) What services exist in SD #73 that facilitate young mothers' graduation? To address this question, the service-providers were interviewed. Furthermore, to get a sense of where SD #73 was relative to the rest of the province, a query was sent to every school district superintendent in the province asking about the existence of any adolescent mother programs in their districts. The results of this query are summarized in Appendix A.

2) What specific educational paths facilitated educational attainment for young mothers? To determine if there was a pattern that represented a favored path, respondents were asked to chart the different educational institutions they passed through from pre-pregnancy to parenting.

3) What do young mothers report about the helpfulness of certain components on their path? This aspect of the study was addressed through a questionnaire.

Limitations and Delimitations

As with any type of research, this study had some inherent limitations and some delimitations. In addition to the detailed questions on the survey, I wished to include an opportunity for respondents to bring forward their own concerns on the topics in case I had neglected any significant issues. The study categories were listed but there was also an opportunity to record additional comments. This technique did allow respondents to introduce new issues and is, therefore, a limitation of the study. To cope with this limitation, the unstructured response data were sorted according to the selected variables and the new topics. A new topic was included as a finding only if at least 25% of the respondents elected to comment on it. A summary of all the issues is described in Appendix B.

The variability in the survey completion constitutes another limitation of the study. The respondents completed the survey in different settings depending on the choice of the respondent. The settings included schools, restaurants, the respondents' homes with children around, and the respondents' home with children asleep, away or otherwise occupied. Because of this variability, the comfort and attention level of the respondents had to differ, which may have affected their openness about bringing up new issues. To combat this limitation, the survey includes both open-ended and structured questions. As well, when the survey was completed orally, responses were copied verbatim.

Another limitation was the varying memory level of the respondents regarding where and when they went to school. Since many of the respondents had several transitions within a single year and these were several years in the past, most of the respondents took longer than

anticipated to complete the chart. To combat this, I told the respondents how to complete the chart. I used the same instructions for each respondent.

Two delimitations of this study are the sample size and sample composition. This investigation examined what is happening in SD #73. The potential participants are limited to those adolescent mothers who were or are being educated in this district. This population is not large and tracking down sufficient participants was a challenge. In the end, 39 participants were included. These participants had a varied background and demographic profile, but they were eligible for inclusion because they represented different patterns and paths within SD #73. The exceptional variation of the sample constituted a delimitation because parts of the interview questionnaire offered opportunities for limited responses that may not have accommodated the breadth of the variability of the sample (Palys, 1992). However, the focus of the study is description and the stories of all participants added to the richness of the description.

A difficulty that was presented in the interview of service-providers was that their relevance to a young mother's pursuit of high-school education was not always clear. Some service-providers had much more relevance than others to the focus of this study. To deal with this I have included a thorough description of the more relevant service-providers. Where relevance was questionable, I have catalogued a brief description of the services provided to allow the reader to come to his/her own conclusions.

This study will have limited generalizability. The pattern of programs and services offered in SD #73 may not be replicated in other locations. I have attempted to combat this bias by surveying the other school districts to determine what programs are in place and have presented this information in Appendix A. Though this will not give a complete comparison, it will suggest what level of educational program for a young mother might be looked for in the other districts.

Definitions and Operational Terms

For the purposes of this study, the mothers studied had either completed or were completing regular or adult graduation requirements subsequent to the birth of each participant's first child. Alternatively, they were enrolled in a program leading to a General Educational

Development (GED) certificate. Three young women who were not currently parenting were also included in the study. These young women were included because of what they had to offer about school attendance during pregnancy. Two of the young women had given their children up for adoption and a third was due to deliver within a month of the interview. For the purposes of reporting, unless otherwise specified, the term "mothers" will also include these three young women.

The terms "young women" or "women" in addition to "girls" have been used throughout this report for a variety of reasons. The moment of transition from girlhood to womanhood is inexact. It could be argued that because the respondents have become mothers, they have made this transition, albeit prematurely. Also, as will be detailed elsewhere in the study, many of the respondents gave birth after turning 18 and thus would be considered women by other standards. Finally, many respondents had already completed their graduation requirements and were at a different stage of their lives. Though they may have been girls at the time of their first birth, they were certainly women by any standard at the time of the interview. It would be awkward to try and describe the respondents in terms of girls *and* women for each reference; therefore, the more general terms of "young women" or "women" have been used interchangeably with the term "girls".

Although the terms "adolescent mothers" and "teen mothers" will be used in this investigation, older mothers were included. Virtually all of these mothers were in their teen years when they gave birth to their first child. Despite their current status as adults, they were teenagers during the early stages of their parenting careers. The literature almost exclusively calls these individuals adolescent or teenage mothers even when discussing follow-up studies where the young women are in their twenties or thirties (Furstenberg et al., 1987). For the purposes of this study, the terms "young mothers", "teen mothers" and "adolescent mothers" will be interchangeable.

Throughout this paper the terms "successful" and "success" have been used to identify those young mothers who have completed or were in the process of completing high-school graduation requirements or a GED program. In this report, the opposite of success is not failure.

Use of these words in no way implies that young mothers whose paths led them elsewhere are considered failures.

The Regular Graduation Program is the term used to describe the program of studies followed by most secondary school students in the British Columbia public school system. For the purposes of reporting, there is no need to distinguish between the old course-based program and the newer credit-based program, but both are described in Appendix C. The "Adult Graduation Program" is the term used to describe the requirements for eligible students planning to graduate with a British Columbia Adult Graduation Diploma which is also known as an "Adult Dogwood". The specifics of this program are detailed in Appendix C.

An "alternate program" or "alternate school" is the term used to describe a program administered in a non-traditional school setting or time but which still leads to either a Regular or an Adult Graduation Diploma. The alternate programs available in SD #73 are described in Appendix D.

An "in-school alternate program" (ISA) is the term used to describe a program administered within a regular secondary school but which is somehow different from the program in which the majority of secondary school students are enrolled. In some schools this is called an "adapted program". The ISA programs available in SD #73 are described in Appendix D.

A correspondence program refers to courses offered through the regional correspondence centre in Merritt. Although the South-Central Regional Correspondence School is technically in another school district, their material is used by many non-traditional SD #73 students; therefore, it warrants consideration as a form of program delivery. As well, Virtual School (described in the body of this report) uses the correspondence curriculum. The correspondence program is described in Appendix D.

The "General Educational Development program" (GED), is also called the "Graduation Equivalency Diploma". This program of studies does not lead to a Dogwood graduation certificate. Though the GED has been under scrutiny in the literature (see Cameron & Heckman, 1993), this program was included because some respondents used the GED program as a stepping stone to the regular graduation program. As well, many of the issues that challenge

students on a regular or adult graduation program also challenge students on a GED program. Finally, there is potentially some transferability of credit possible and this will be an important consideration for planning. The GED program is described in Appendix D.

"Part-time study" is the term used to apply to any program of studies that is not full time. A part-time program will take various forms depending on the institution. One school might have a part-time student attend every morning. Another school would have a part-time student attend every other day. Students who are registered in one or two study blocks but who otherwise have a full schedule are considered full-time students.

An "Independent-Directed Study" (IDS) course is a one or two credit option that allows students to learn in areas that are

> beyond those usually taught in [a] school course. This could take the form of extending the curriculum at a higher level, addressing parts of the curriculum that have not been taught, conducting an in-depth study of an aspect of the curriculum, or doing more focused activities relating to parts of the curriculum. (BC Ministry of Education, Skills, 1996, paragraph 2).

For further detail about the Independent-Directed Study option, readers are recommended to access the British Columbia Ministry of Education web page at <http://www.bced.gov.bc.ca/policy/96/09.htm>.

In the British Columbia secondary education system, students may obtain grade 11 and 12 course credit through any of the three modes of external credit, course challenge, and equivalency. Since professionals and students often confuse these three terms they will be distinguished here. External courses refer to Ministry of Education approved credentials for programs that are offered outside the British Columbia school system. An example would be the external credit awarded for specific achieved levels in Girl Guides or Royal Conservatory dance.

Equivalency recognizes documented learning from other jurisdictions and institutions outside the British Columbia school system. For equivalency to be awarded, there must be approximately an 80% match in the learning outcomes of the proposed equivalent Ministry-authorized or locally-developed course. A frequently cited example of equivalency is language equivalency for students who have English as a second language. In this case, documentation of one year of junior secondary school in a foreign language is considered equivalent to the grade

11 course for that language. School districts and schools have the authority to report equivalency.

Course challenge is the process employed if equivalency can not be demonstrated through documentation. The course challenge procedure provides an opportunity for students to obtain credit for Ministry-authorized or locally-developed courses. The purpose is to "acknowledge learning which students have done in other settings and which correspond to the learning outcomes in the provincial curriculum" (BC Ministry of Education, 1998, p. 1).

A Career Preparation (CP) program allows a student to develop skills in a specific career sector. It consists of 24 credits of study (six courses) related to a particular career area and includes a four credit work experience course. Students must also meet provincial graduation requirements and upon successful completion of all requirements their transcripts will show a Career Preparation Program designation.

Finally, the terms "high school" and "secondary school" are used interchangeably in this document. In British Columbia, the more common term used is "secondary school" and represents the school years of eight through twelve.

Literature Review

Introduction

The roles and expectations of young women have changed extensively over the last one hundred years. Although the rate of single motherhood differs little from a century ago, the reasons differ greatly. Widowhood is no longer the root cause of single motherhood (Grey, 2000). In the past, there have been social sanctions against an unmarried adolescent choosing to retain custody of her child. For those young women who carried their pregnancy to term, the acceptable options were adoption or marriage to the infant's father to legitimize the birth (MacNider, 1998). For all the young women, there was a social stigma associated with being teenaged and pregnant (Petrie, 1998). Schools were not supportive of an expectant mother who wished to continue with her education and she was often not even welcome to remain in school once her pregnancy became known. If a girl chose to keep her infant and marry the father, she generally did not continue with her schooling as her new role of housewife and mother absorbed her energies. Her husband was presumed to provide for her and the newborn and as a family they were expected to forge a new life

Today, the scenario for a pregnant teenager is different. Society no longer has such stern social sanctions against young unwed mothers. Though many adults still lament the lost futures and potential difficulties faced by these young women and their children, the teenage single mother is no longer an anomaly. Pregnant and parenting young women are permitted to

attend public school and a variety of programs designed especially to support them have sprung up across Canada and the United States (Furstenberg, 1976; MacNider, 1998; Polit & Kahn, 1987; Ray & Roloff, 1994; Roosa, 1986; White & Cummings, 1995; Wood, Bloom, Fellerath, & Long, 1995). Young women can no longer count on marriage to their infant's father as a route to economic security. As well, family and other informal support networks are less likely to provide for single mothers (Grey, 2000). Increasingly, their role models are working women as opposed to housewives. Through formal and informal means, these young women have been repeatedly instructed that an education is necessary to get ahead in life. Additionally, they watch many of their non-parenting female peers select goals that include independence and self-sufficiency.

The relationship between teenage mothering and education constitutes a fairly broad research topic. Within this general topic a number of subordinate issues exist. One question that is frequently addressed is the causal order of dropping out of high school and adolescent mothering. Other aspects of the topic include the nature of the population, the consequences and outcomes of educational decisions, and the issues related to service provision. Additionally, there are economic, and thus political, overtones to the topic because the perception exists that teenage mothers drain welfare reserves (Kelly, 1996b).

Due to the variety of underlying issues associated with teenage pregnancy and parenting, the approaches of researchers seeking to study the phenomenon of school completion have been diverse (Upchurch, McCarthy, & Ferguson, 1993). Teen "mothers are not a homogeneous group, and the relationship between adolescent childbearing and schooling is different for different groups" (Upchurch, 1993, p. 439). Studies have examined racially, economically, and geographically diverse populations using varied methodologies and theoretical orientations. Generalizations about one group of adolescent mothers may not be applicable to another population. In the associated field of pregnancy prediction, complicated interactions are evident. As Walters, Walters, & McKenry (1987) state,

> clearly, the right model of high risk has not yet been developed. It is possible that some of the psychological and family variables—particularly if combined with predictors of being in the right place at the right time—could be assembled into a model to predict early pregnancy. Such a model is likely to be a complex one combining subsets of models. (p. 27)

An analogy might be made about the complexity of a model of high school completion for adolescent mothers.

Despite a public impression that teenage parenthood is an out-of-control phenomenon, the actual rate of births to American teens has decreased since 1960 with the majority of teen births concentrated in the 18-19 year old age group (Coley & Chase-Lansdale, 1998). Canadian teenage pregnancy rates, though reported to be half that experienced in the United States (Alan Guttmacher Institute, 1998), have some similarities to the rates reported by Coley and Chase-Lansdale. Statistics Canada (1996) indicates a drop in actual pregnancies and live births for all adolescent groups but notes that pregnancy rates for teenage women have been underrepresented in the Reproductive Health compilation. The majority of live births are reported for the older teenage group (see Table 1).

Table 1

Births for Canadian Adolescents

Year	All Ages[a]		Under 15		15-17		18-19	
	Live Births	Birth Rate	Live Births	Birth Rate	Live Births	Birth Rate	Live Births	Birth Rate
1974	346,913	59.9	337	1.4	13,513	19.7	27,110	59.6
1993	388,394	50.0	256	1.4	7,975	14.1	15,462	40.4
Change	+41,481[b]	-9.9[b]	-81	0.0	-5,538	-5.6	-11,468	-19.2

Note. Rates are represented per 1,000 females of the same age as per the original data source.
[a]Includes cases where age was not reported. Denominators for the rates are women aged 15 to 49 years.
[b]Despite an increase in the number of live births during the 19 year period, the rate decreased because the population of women of "All Ages" increased yet the rate of births did not keep pace.
Data source: Wadhera & Millar (1996).

As demonstrated in Table 1, actual births and rates of births to teenagers have decreased in Canada since 1974. What these statistics do not represent, however, is the number of unwed teenagers electing to raise their children or being financially dependent on public assistance. Local statistics do no separate teenage births by age of mother, but 1996 information derived from vital statistics indicates that eight percent of live births in the Kamloops region were to teenage mothers. This is higher than the 5.1 percent province wide but is similar to other communities in the area (Selected Perinatal Statistics, 1996).

Adolescent mothers who persist with their schooling represent a minority of teenagers. Since the late 1950's, the proportion of adolescent mothers who complete high school has been increasing, yet research indicates that teen mothers are still much less likely to complete school than are those who delay childbearing. Whether the birth was a causal factor in school dropout is, however, still very controversial (Nord, Moore, Morrison, Brown & Myers, 1992). Since pregnant and parenting young women may experience complete or partial school dropout, an examination of general dropout characteristics is in order. Additionally, there are many special issues related specifically to school continuation for this group. The remainder of this literature review addresses the topics of dropout characteristics, special issues for pregnant and parenting adolescents, and a discussion of programs and interventions for this population.

The High School Dropout

In British Columbia, the majority of students enrolled in school progress through to graduation thirteen years after their kindergarten enrollment ("Elementary-Secondary Education," 1999). For some, the high school portion may take an extra year and these students manage to graduate a year behind their grade cohort. Another group progresses through high school on a modified or special education program and within the standard five or six years exits with a school-leaving certificate. A minority of overage students who have struggled with school take home an adult graduation certificate. A final group of students do not graduate within a reasonable time and do not continue to attend school. These students are classified as high school dropouts. Dropouts have bucked the trend to high school graduation and a sizable body of research has been devoted to attempts to understand them. It is felt to be an extreme outcome due to the small number of students who do not graduate by the time they turn twenty (Astone & McLanahan, 1991).

The high school dropout phenomenon is portrayed in the media as an enormous problem (Dierkhising, 1996), and accusations about poor teaching skills, ill-behaved children and inattentive parents are just some of the causes attributed to the problem. It is more likely, however, that the root of the dropout problem has a societal, rather than individual basis. The

problem is not likely caused by the failure of a single social group, institution or ministry to meet students' needs (Bearden, Spencer & Moracco, 1989). Rather, the "school dropout may be a symptom as much as a cause" (Cairns, Cairns & Neckerman, 1989, p. 1451).

Definition and Reporting

How to define school success is one of the first problems tackled by researchers in this subject area. To provide clues, a survey can be made of the literature on high school dropouts. Rather than providing a clear-cut answer to the definitional problem, a new set of problems becomes evident. The difficulty of determining an accurate and consistent definition of a high school dropout has been noted by a number of authors (Cairns et al., 1989; Dierkhising, 1996; Forste & Tienda, 1992; Phelan, 1987; Rumberger, 1987; Weisner, 1984). Many young people who are classified in the literature as high school dropouts are really just undergoing a delay or temporary setback and will later continue with their education. This is documented by Furstenberg et al. (1987) in their longitudinal study. It is also supported by Canadian research that indicates that roughly a quarter of the 1991 school dropouts had returned to school at some point and graduated by 1995 ("The Drop-outs," 1999). Rather than a discrete event, others view dropping out as a

> *process* of failure in school that begins early in a student's academic career....[as] some students begin to disengage from school at a relatively early age. When disengagement reaches a certain level during the high school years, the student leaves school. (Astone & McLanahan, 1991, p. 310)

For some researchers, high school graduates may include both those young persons who have obtained a high school diploma and those who obtained a General Educational Development (GED) certificate (Cameron & Heckman, 1993; Upchurch & McCarthy, 1990). Other authors make no mention of GED certification. Still others defined dropouts as those students who were not enrolled in school at the time a sample was selected (Wood et al.,1995). Rumberger (1987) has written a comprehensive review of the dropout literature in relation to definition and samples and states that

> no one knows what the high school dropout rate really is in the United States. That is because there is no consensus definition of a high school dropout, nor is there a standard method for computing the dropout rate. (p. 103)

He cites the two most widely used statistics in the United States as showing very different dropout rates. He claims the differences are due to differences in purpose, cohort, initial membership in cohort, definition, time for determining dropout status, information source, and level of determination. The typical educational agency definition of a dropout refers to someone who has not graduated from, or is not currently enrolled in, a full-time, state-approved education program. GED certificate holders, and attendees at an alternate education or part-time program may be considered dropouts. Length of time to graduation also affects dropout classification as students who take longer than the usual number of years to complete school are often classified as dropouts. The other side of the spectrum is represented in the United States by Census Bureau criteria which allows for high school equivalency and includes as non-dropouts those who are still attending school without reference to type of program or years behind peers. Further problems arise due to school transfers and inaccurate or inconsistent school record keeping, and it can be inferred that the variability in reported estimates of dropout rates may not reflect actual differences (MacMillan, Balow, Widaman, Borthwick-Duffy, & Hendrick, 1990; Rumberger, 1987; Phelan, 1987; Wallace, 1990). As far as Canadian statistics are concerned, a recent report by some Quebec researchers claims that "roughly one third of all students will drop out of high school without having received their high school diplomas, both in Canada (Canada Manpower and Immigration, 1990) and in the United States" (Vallerand, Fortier, & Guay, 1997, p. 1161). These statistics, however, suffer from the same variability of definition described above.

Despite the noted inconsistency, the literature is replete with studies that investigate characteristics of students as related to their dropout status and some general themes have emerged. A student at-risk for dropping out is most often a male from a racial, ethnic or language minority. He is likely to experience low socioeconomic levels, previous school failures, poor ability and grades, attendance and behavior problems, boredom, problems with school staff, and substance abuse. Other predictors of dropping out include specific family characteristics, age, social issues, and psychosocial variables (Bearden et al., 1989; Rumberger, 1987).

For pregnant young women, it is very difficult to distinguish the causal order of pregnancy and dropping out of school. For example, some reports cite that one third of teenage mothers

drop out of school before becoming pregnant (Coley & Chase-Lansdale, 1998). From a comprehensive review of the literature, Rumberger (1987) reports that a third of all female dropouts report pregnancy or marriage as reasons for leaving school. On the other hand, Tidwell (1988) reports that few respondents cited marriage or transportation as a reason for dropping out. Others have observed that though pregnancy may not cause dropping out, for women with poor school attitudes and ambitions, it may provide a convenient rationale (Prater, 1992). Despite the unknown causal direction, it has been found that there is an association between level of educational attainment and age of first birth.

The inconsistency in reported dropout rates continues once a girl moves from pregnancy to parenthood. Studies have yielded findings of a majority of teen mothers graduating from high school (Nuzum, 1990). Earlier results have found that approximately half of all students who become mothers drop out of high school (Card & Wise, 1981). More recent statistics looking at all teen mothers (married and unmarried) have indicated that 70% of teen mothers completed high school (Alan Guttmacher Institute, 1998). This conflicts with other literature reporting an 80-85% dropout rate among teen mothers (Wallace, 1990). Some authors have stated that teen mothers comprise one quarter of the total dropout population (McGee & Archer, 1988). When looking at women who have experienced a marriage, only 18% of teen mothers (childbearing initiated when mother was below age 18) ever completed high school compared to 57% of those who initiated childbearing at later ages (Trussell, 1981). Even beyond the initial post-partum stage, it has been stated that young mothers are dropping out at three times the rate of their female peers (Anderson, 1993b). Clearly these reported rates differ widely. Regardless of the actual numbers, the consequences of dropping out for young mothers can be devastating and the risk may persist for several years.

Family Characteristics

Some researchers have been very specific about the role of the family in the education of the child. For example,

> the association between family disruption and lower educational attainment raises the question of whether the sharp increase in family instability during the past two decades will have lasting negative consequences on the educational attainment of the next generation. (Astone & McLanahan, 1991, p. 309)

It would be difficult to dispute that parents are role models for their children and, as such, influence academic achievement (Wallace, 1990). Astone and McLanahan have suggested that ineffective or inadequate parental assistance may lead to a school dropout if the child feels overwhelmed. Some authors have also cited the educational level of parents, occupational level of parents, number of reading materials in the home, and aspirations of parents as influencing school motivation, persistence and aspirations in their children (Anderson, 1993b; Astone & McLanahan, 1991; Rumberger, 1987; Tidwell, 1988; Upchurch, 1993; Upchurch & McCarthy, 1990; Vallerand et al., 1997; Wallace, 1990). Others have reported conflicting results (Bearden et al., 1989).

Specific findings for the education level of the parents of teenage mothers have also been made. In a longitudinal study it was found that those adolescent mothers who had better-educated parents were more likely to experience success later in life (Furstenberg et al., 1987). More specifically, teen parents whose mothers were at least high school graduates, were one-third less likely to drop out of school than were teen parents whose mothers had less education. When the father of the teen mother was a high school graduate, the teen mother was 15 percent less likely to drop out (Upchurch & McCarthy, 1990; see also Upchurch, 1993).

In addition to parental achievement level, other family factors influence the decision to drop out. Such factors as lack of discipline, little parental interest in school/education, demanding home responsibilities, financial problems and abuse make it difficult for some teens to persist (Egginton, Wells, Gaus & Esselman, 1990).

Living arrangements also seem to have an impact on dropping out. Belonging to a single-parent family may negatively impact a student's grade-point average, attendance, college expectations, educational attainment and school engagement (Anderson, 1993b; Astone & McLanahan, 1991; Rumberger, 1987; Upchuch, 1993; Upchurch & McCarthy, 1990). Additionally, the number of people living in a household can negatively impact schooling (Anderson, 1993b; DeBolt, Pasley & Kreutzer 1990; Wallace, 1990). The more children or the fewer parents, the less individual time is received by a teen. The picture is even more complex when stepparents are considered. In single parent families, Zimiles and Lee (1991) found that children living with

like-gender custodial parents were less likely to drop out. However, in stepparent families, children living with like-gender custodial parents were more likely to drop out.

For dropout adolescent mothers, family configuration has an even greater impact. Living in the family of origin can promote a return to school and some researchers have found a large proportion of teen mothers living with their parents (Herrmann, Van Cleve & Levisen, 1998). However, for those who choose to drop out, there are indications that the family's expectation is that the adolescent does most of the housework and childcare with little assistance (Colletta, Lee, & Gregg, 1980). Additionally, "it is known that most teen mothers move away from their family of origin after a short duration" (Furstenberg, 1991, p. 133) and so the benefits for educational attainment are limited.

The effects of family characteristics can not be underestimated. In a qualitative study where dropouts were queried directly as to their reasons for dropping out, 39.1% cited family reasons (Tidwell, 1988).

Ethnicity and Socioeconomic Status

Findings for ethnicity and dropout status are mixed. Researchers have reported findings for race and dropout status (Cairns et al., 1989; Streeter & Franklin, 1991). In his comprehensive review of the literature, Rumberger (1987) reports that students from racial, language and ethnic minorities are more likely to drop out. In Canada, Aboriginal teenagers older than 14 have lower levels of schooling than do similar non-Aboriginals ("The Drop-outs," 1999). Anderson (1993b) found higher than average rates of dropping out for African-American and Hispanic mothers.

Though not specifically tied to dropping out of school, racial differences in teenage pregnancy and parenting rates have been observed as well but are somewhat mixed (Coley & Chase-Lansdale, 1998; Upchurch, 1993; Wallace, 1990; Walters et al., 1987). To understand the association, a number of hypotheses have been brought forward. Furstenberg (1987) notes that the differences in adolescent birth rate between Caucasian and African-American women has been declining but is still much higher for younger African-American adolescents. He also suggests that poor, minority young women enter parenthood early because they may feel there are few disadvantages. Similarly, Upchurch suggests that teenage parenthood may be a route to

adult status for young women from disadvantaged economic and educational backgrounds. Within disadvantaged communities, it is hypothesized that a subculture of teenage motherhood has developed that provides positive feedback for young women who might get little otherwise (Rauche-Elnekave, 1994; Roosa, 1986). Nor is this just an American trend as it has been recognized that Canadian street youth are giving birth at increasing rates. The described rationale is that it gives them some legitimacy, importance, and identity (Philp, 1998).

One of the most commonly reported correlates of early high school leaving is socioeconomic status (SES). Generally, adolescents from less advantaged backgrounds are less likely to graduate (Astone & McLanahan, 1991; Cairns et al., 1989; Rumberger, 1987; Streeter & Franklin, 1991; Upchurch, 1990). In Canada, the dropout rate for all children has been declining but in 1992, poor children dropped out of school almost twice as often as did children who were not poor (Canadian Council on Social Development, 1994).

Gender and Age

The literature reveals that dropouts are mostly male and just over legal minimum age (Bearden et al., 1989; Cairns et al., 1989; Rumberger, 1987). Ramifications for younger dropouts are that they appear to be less successful when retrieved into alternative programs (Dowling, 1994). A similar positive correlation between age and success in returning to school has been found for adolescent mothers where a younger age at first birth is correlated with a greater risk for dropping out (Wallace, 1990; Anderson, 1993b; DeBolt et al., 1990). This dropout pattern is unfortunate since "parenting adolescents have as much potential for academic success as their nonparenting cohorts" (Prater, 1992, p. 141).

School Factors

Well-researched and intuitive predictors of dropout status are ability and school achievement. The literature generally reveals consistent results. Poor academic performance and a history of grade retention are predictive of early school leaving for both the regular population and for teen mothers (Anderson, 1993b; Astone & McLanahan, 1991; Bearden et al., 1989; Cairns et al., 1989; DeBolt et al., 1990; Marin, 1990; Rumberger, 1987; Streeter & Franklin, 1991; Tidwell, 1988; Wallace, 1990). An associated finding is that college-preparation academic

programs yield fewer dropouts (Anderson, 1993b; Upchurch, 1990). In a study by Tidwell, school was reported as being "boring" by dropouts. Other reasons for dropping out in this study included being behind on credits and being unable to graduate with peers. Pregnancy and parenthood create obstacles for even the most academically capable adolescent. When pregnancy and parenthood are paired with a history of poor achievement the results can seem insurmountable (Prater, 1992).

There is a strong association between grade retention and early school leaving (Roderick, 1995). Roderick reports three aspects of the retention experience that place students at risk for dropping out: (a) students receive the message that they are not capable, (b) students are overage for grade level in adolescence, and (c) students may become increasingly frustrated and disengaged. The notion of students receiving the message that they are not competent is supported by Vallerand et al. (1997) who found that dropouts perceived themselves as being less competent and autonomous at school activities.

For educators, some of the most obvious characteristics of a student at-risk for dropping out of school are poor attendance and behavioral difficulties. A student who experiences conflict in one or more of these domains will likely have a significant disruption in schooling and quite possibly, subsequent failure. Wallace (1990) describes this pattern well:

> It would seem to be a self-fulfilling prophecy, that students who are bored, act out. To avoid unpleasant situations, they arrive late, or have sporadic attendance, and, by virtue of that behavior, end up doing poorly academically. (p. 23)

This notion is supported by the research which found that in general, persisters exhibited regular attendance whereas dropouts demonstrated poor attendance (Astone & McLanahan, 1991; Dierkhising, 1996; Egginton et al., 1990; Rumberger, 1987; Wallace, 1990). Behavioral difficulties of dropouts are also reported in the literature (Cairns et al., 1989; Marin, 1990; Upchurch, 1990).

Conflict with teachers and school administration also accounts for some early-school-leaving behavior (Rumberger, 1987). In a qualitative study of reasons for leaving school, 24.3% of respondents cited teacher problems, particularly the unmet need for academic help, unavailability of counsellor time, and teacher insensitivity and intolerance (Tidwell, 1988).

Vallerand et al. (1997) found support for the suggestion that teacher and administrator support can impact the decision to remain in school. This aspect may be particularly salient for young mothers as they battle biases and prejudice from their teachers regarding their status as adolescent parents. Prater (1992) found that the teen mothers experienced insensitivity on the part of teachers about their differing needs.

A student's program (academic versus vocational) has been hypothesized to have an association with early school leaving but the findings in this area are not clear. The prevalence of the use of vocational training in dropout prevention programs

> seemingly is based on the assumption that a lack of interest in school is a major driving force in the decision to leave and that by focusing on vocational education, students become more interested in the academic portion of school and thus are more likely to remain. (Pittman, 1991, p. 288)

However, Pittman notes there is an inconsistency in research results in this area and in his study, using a large national data sample, he found no association between participation in vocational/business courses and dropping out. Students who participated in vocational or business courses were no more persistent than their peers who did not participate in these types of courses.

A final school factor related to dropouts is the transition difficulty faced by elementary students as they enter secondary school. Phelan (1987) reports a higher dropout rate in the first year compared to later years and suggests this is indicative of transitional difficulties.

In terms of issues specific to teenage mothers, it was found in a longitudinal study that women who experienced high achievement and had high educational aspirations at the time of the first birth were much more likely to have a successful later life (Furstenberg et al., 1987). In a study by Rauche-Elnekave (1994) it was found that in reading and language skills, the mothers scored one or more years below grade level. She suggests that there may be a high incidence of undetected learning difficulties in this group who were part of a comprehensive program for teen mothers and their infants. She further hypothesizes that these learning problems are associated with the high rate of early school leaving among teen mothers. Other researchers have also reported findings of teen mothers being below expected grade level (Herrmann et al., 1998). Finally, Polit and Kahn (1987) found some evidence that conflicts with the other dropout research

results. In their study, the teen mother's history of repeating grades had no effect on her dropout status. What was significant was that mothers who were closer to graduation at the beginning of the study were more likely to have graduated or remain in school. This suggests that those teen mothers who have further to go to reach graduation are more likely to give up and drop out. Taken holistically, it would appear that school factors are very important in the decision to drop out of high school for all types of students.

Substance Use

Although some conflicting results are noted by Bearden et al. (1989), it appears that drug and alcohol issues do have an association with early school leaving (Eggert & Herting, 1993; Marin, 1990). This rationale is succinctly stated by Egginton et al. (1990) who wrote "regular use of drugs and alcohol produce effects and a state of mind within students which are incompatible with the responsibilities of student life" (p. 35). This factor also affects teen mothers as Upchurch and McCarthy (1990) found that adolescent females who began smoking or drinking before age 16 were 26% more likely to leave school early.

Social Issues

It has been asserted that bonds to the school are maximized by successful school experiences that may not be related to curriculum (Finn, 1989; Gottfredson, 1980; Hemmings, Jin & Low, 1996). The results of a variety of studies, however, have not completely clarified the role that these social issues play. Athletics and extra-curricular involvement have been shown to be important for school persistence (McNeal, 1995; Pittman, 1991). A reason for this may be that,

> involvement may provide an identity within the school that is derived from some formal school-sanctioned activity....the greater sense of identity with the formal structure of the school becomes a part of the students' personal identities, and those individuals are less likely to separate themselves from a source of personal meaning. (Pittman, 1991, p. 291)

Some conflicting evidence for these findings do exist, however, as Bearden et al. (1989) found that most of the dropouts had participated in extra curricular activities, primarily athletics, and Cairns et al. (1989) found that their sample of dropouts did not experience being "unpopular". Egginton et al. (1990) reported that dropouts and at-risk females did indicate problems with peer pressure. For adolescent mothers, the relationship of extra-curricular involvement to school

persistence has special meaning. Young parents who must collect children from day care can suffer from role overload and generally do not have the time or energy for extra-curricular activities and this may contribute to feelings of isolation (Prater, 1992).

Although peer relationships of dropouts have received less attention than some of the other factors, it has been determined that dropouts tend to associate with other dropouts, with the association being stronger for girls than boys (Cairns et al. 1989; Pittman, 1991; Rumberger, 1987). One aspect of peer relationships is the initiation of sexual activity. For girls, the earlier the sexual debut occurs, the higher the likelihood of dropping out (Upchurch, 1993; Upchurch & McCarthy, 1990).

The role of social issues is no clearer for adolescent mothers. The conventional wisdom is that adolescent mothers often encounter alienation from friends, peers, and partners as time and attention devoted to the new baby isolates them from the support of, and social experiences with, previous associates. However this notion is only partially supported by the literature (Boisseau-Goodwin, 1993; Colletta et al., 1980). Elsewhere it is described that many adolescent mothers do not report peer isolation (Wallace, 1990).

In time, the social issues aspect of the dropout profile may become more certain but currently it is risky to assume that dropout status can be predicted on the basis of feelings of social alienation.

Psychosocial Variables

Some of the most common psychosocial concepts are locus of control (LOC), motivation, and goal orientation. Some authors reported finding that dropouts had lower self concepts, lower educational aspirations and lower levels of intrinsic motivation than did persisters (Marin, 1990; Polit & Kahn, 1987; Rumberger, 1987; Vallerand et al., 1997).

An assumption that may be made about pregnant or parenting adolescents is that they were unable to practise wise reproductive decision-making and were lacking control and were irresponsible. In other words, they had low internal LOC as defined by Reber (1987). Locus of

control is a

> general term in social psychology used to refer to the perceived source of control over one's behavior. It is measured along a dimension running from high *internal* to high *external*, with an internal person being one who tends to take responsibility for his own actions...and an external as one who tends to see control as residing elsewhere.... (p. 407)

The verdict on the relationship of LOC to pre-marital adolescent pregnancy is, however, far from definitive. White and Cummings (1995) note in a review of studies examining LOC and teen pregnancy that some research has shown an association between external LOC and teen pregnancy while other research has not. In their own study, these researchers found no significant differences in LOC for their pregnant or parenting subjects as compared to a control group. Similarly, LOC was not systematically related to non-marital childbearing in a study using a large national database (Plotnick & Butler, 1991). Walters et al. (1987) found that female adolescents who had experienced a pregnancy were not distinguishable from the general population of adolescents nor from a matched sample of never-pregnant girls for LOC. Cairns et al. (1989) found no difference for LOC between young mothers and "never pregnants", whereas Boisseau-Goodwin (1993) found that teen mothers tended to possess an external sense of control and have lower self-esteem. For her sample of young mothers, Nuzum (1990) reported significant interactions between grades and self-concept and between grades and LOC. In this study, teenage mothers with low grades, a high internal locus of control and low self-concept were more prone to drop out. This finding of a higher *internal* LOC is counter-intuitive yet reflects an important subtlety and has ramifications for program planning. Those students with a high internal LOC attribute poor achievement to something within themselves. Drop out prevention attempts to increase internal LOC for all at-risk students could be detrimental. Wallace (1990) points out that time of measurement of the variable is important because measurement after a birth may reflect more typical feelings of uncertainty associated with becoming a new mother. This construct does not provide a clear-cut way to distinguish girls at risk for becoming pregnant or distinguish already pregnant and parenting girls at risk for dropping out.

Motivation is a construct associated with high school success. Prater (1992) found that most of the teen parents were motivated to graduate from high school. The effect of motivation

and aspirations should not be underestimated. As Wallace (1990) reports, "the greatest differences between those teens who stayed in school and those who dropped out...was either a total absence of career aspirations/job aspirations, or unrealistic expectations associated with job goals" (p. 95).

Goal orientation is a related construct that is relevant to teen mothers but little research on the goal-setting behaviors of this group has been conducted (White & Cummings, 1995). Though White and Cummings did not find any significant differences in goal orientation between their sample of pregnant and parenting adolescents versus a control group of non-pregnant and non-parenting teens, they did discover that there were significant differences regarding the most important goals. Pregnant and parenting teens were more concerned about interpersonal goals compared to the intra-personal goal interest of the control group. The authors suggest that these differences may be due to the control group teens feeling there are fewer "restrictions and more options when thinking about their personal futures" (p. 263). Farber (1989), in a qualitative study, found some support for the notion that higher educational and vocational aspirations among some teenagers cause them to engage in behaviors that minimize the risks of pregnancy. On the other hand, Walters et al. (1987) found no significant differences for their sample on the psychological dimension of purpose in life. Similar to the LOC construct, the evidence is equivocal. Assumptions that these girls do not have clear life goals cannot be totally supported. This small subgroup of the adolescent population may in fact be more *like* other adolescents than *unlike* them on this dimension.

Employment and Economic Factors

Another factor associated with early school leaving is economic need. Rumberger (1987) reported that 20% of all dropouts cite this as their reason for dropping out of school. Tidwell (1988) also found support for this notion with 29.8% of respondents identifying work as the reason for dropping out.

Despite this reason, many dropouts are not successful in the world of work, particularly if they have a learning disability. In their study of learning disabled dropouts, Sitlington and Frank (1993) determined that one year after the graduation date of their peers, only 56% of their sample

were employed full or part time. This was compared to 77% of their peers who had graduated. Female, learning disabled dropouts were even less likely to be working than were their male counterparts. When they were employed it was generally in laborer or service-worker positions. In another study, only one half of the dropouts had managed to obtain full- or part-time employment (Tidwell, 1988). Canadian statistics from 1997 show lower unemployment rates for high school graduates compared to those persons who did not graduate from high school ("The Drop-outs," 1999).

Consequences of Dropping Out

In general, the research clearly supports the notion that negative consequences follow the decision to drop out of school (Rumberger, 1987; Tidwell, 1988). For dropouts with learning disabilities, the consequences for adult adjustment appear to be even more negative (Sitlington and Frank, 1993). The difficulties caused by a dropout's educational deficits lead to limited economic potential which can, in turn, lead to lower levels of social well being. These consequences can then lead to social costs of billions of dollars through lower tax revenues, and increased demands on social services (Rumberger, 1987). An early school leaver might initially get a job and work while his or her peers remain in school. However, over time those who graduated will have more potential for competitive employment. The level of employment initially experienced by the dropout may continue throughout his or her life.

Most of the dropout literature opens with statements about the bleak future prospects for dropouts but there have been relatively few studies done on this topic. Using a large database, McCaul, Donaldson, Coladarci, & Davis (1992) made comparisons of dropouts and graduates with no post-secondary training to determine the consequences of dropping out. Major findings included no difference for self-esteem, greater alcohol consumption by male dropouts, less political and social participation by dropouts, less work satisfaction for female dropouts, no difference in salary earned, greater numbers of jobs held by male dropouts and fewer numbers of jobs held by female dropouts. Although not as devastating as one might assume, the results suggest that, particularly for female dropouts, the future is not altogether promising. For

adolescent mothers who drop out, there are predictions of an even more discouraging future which includes a perpetuation of the cycle of poverty (Wallace, 1990).

Recommendations from the Literature

Most researchers who study the dropout phenomenon make recommendations at the end of their report. Generally, the issue is credited as being highly complex and the recommendations include multi-dimensional programming to serve the many sub-populations of early school leavers (Rumberger, 1987; Streeter & Franklin, 1991). A greater understanding of the impact of non-school aspects is required. Programs with a mix of educational and non-educational components are suggested in order to encourage at-risk students' non-academic involvement. The importance of early identification and prevention of dropping out is highlighted. Appropriate educational programming, teacher training, and attention to scheduling and location are all noted. The encouragement of parent and community support and the promotion of strong positive individual relationships between students and school staff is another topic of recommendations (Phelan, 1987; Pittman, 1991; Prater, 1992; Rumberger, 1987; Streeter & Franklin, 1991).

Special Issues for Pregnant and Parenting Students

Certain school attitudes and experiences have been associated with early childbearing. Specifically, a number of authors have noted that those girls having a more positive attitude toward school were less likely to have a non-marital birth (Coley & Chase-Lansdale, 1998; Furstenberg, 1976; Plotnick & Butler, 1991). Using a large national database, Anderson (1993b) determined that pregnant students and mothers are much more likely to drop out than are students who are not pregnant or mothers (see also Klepinger, Lundberg & Plotnick, 1995). Nuzum (1990), however, discovered that "a surprisingly large number of teenage mothers...graduated from high school" (p. 143). She further notes this conflicts with the literature but notes that her sample may be representative of all teenage mothers. The direction of causality between dropout and pregnancy has been studied and debated (Anderson, 1993a; DeBolt et al., 1990; Forste & Tienda, 1992; Furstenberg, 1991; Roosa, 1986; Upchurch, 1990;

Upchurch et al., 1993). However, it does not change the fact that teen mothers wishing to complete high school face many obstacles (Hayes, 1987).

Support

The notion of conflicting role demands, "role overload" (Prater, 1992) or "status-conflict" (Furstenberg, 1976) refers to the difficulty experienced by school-age mothers as they try to juggle the concurrent demands of being a student and a parent (see also Musick, 1990). One can imagine the overwhelming stress for a teenager who must deal with an unplanned pregnancy and subsequent parenting while still grappling with the tasks of adolescence. There is support for the staggering effects of this role-conflict and associated stress. Telleen and Colletta (1987) found that, in a sample of dropouts, those who were mothering suffered from depression more often than did those who were not. For street girls, higher rates of abuse, attempted suicide, depression, family conflict and drug use have also been reported by pregnant or parenting girls versus their non-pregnant or non-parenting peers (Ray & Roloff, 1994).

Support to continue with schooling is a multidimensional concept and particular types of support may be warranted in different situations (Boisseau-Goodwin, 1993). In order for a teen mother to persist in her schooling, she requires emotional support (including encouragement), economic support and childcare support (Anderson, 1993b; Wallace, 1990). Findings in the literature indicate that the infant's grandmother is most often the source of the majority of the support provided (Colletta et al., 1980; Davis, 1994; Wallace, 1990). Not surprisingly, the grandmother has this role more often with younger unemployed teen mothers and fathers (Voran & Phillips, 1993). However, Oritz and Bassoff (1987) found that almost half of the teen mothers in their study felt relatively distant from, and were lacking in guidance and help from their parents. Some researchers have found that social support dropped significantly between six and eighteen months after the birth (Herrmann et al., 1998).

Educational and economic gains can most often occur when the teen mother resides with her family of origin (Burden & Klerman, 1984; Furstenberg, 1976; Furstenberg et al., 1987; Furstenberg & Crawford, 1981). These gains have later been found to translate into more positive economic outcomes (Furtstenberg et al., 1987). Conversely, mothers on assistance

received less support to continue their education (Oritz & Bassoff, 1987). When family support is received, teen mothers experience fewer obstacles in school attendance but for mothers who dropout, lower levels of support are reported (Colletta et al., 1980; Oritz & Bassoff, 1987). Overall, however, adolescent mothers report less social support than do their non-parenting peers or older mothers (Burke, 1990).

Trussell (1981) linked a rising incidence of poverty with a falling age of motherhood. In their review of the literature, Coley and Chase-Lansdale (1998) also noted that those teenage girls raised in poverty were more prone to adolescent parenthood (see also Lu, 1987; Upchurch, 1993; Walters et al., 1987). Second generation teen mothering also contributes to circumstances of poverty. In Prater's (1992) study, most of the participants' mothers were also teen parents. The cycle continues for if poverty is linked to adolescent pregnancy then most certainly adolescent parenthood is associated with continued poverty and limited opportunity (Oritz & Bassoff, 1987). Adolescent mothers who elect to remain single form part of a larger group of single parents. With one-half of Canadian single mothers living below the poverty line, this is not an enviable group to join. Many of these mothers face the distinct possibility that they may spend part of the parenting time without adequate shelter (Grey, 2000; Morrison, Page, Sehl, & Smith, 1986). The situation is not improving. In 1996, the incidence in Canada of child poverty in single mother families was 65%. BC children fare slightly better with an incidence of 58.6%. By comparison, overall child poverty in Canada at the same time was 21.1% and in BC was 20.2% (The Centre for International Statistics, 1993). Clearly the children of single mothers face dismal prospects.

This issue has sparked keen governmental interest due to its relationship to welfare. The reason for concern becomes clear when rates of assistance are examined more closely. In 1993, American women who became mothers as teenagers accounted for 55% of the total of mothers receiving aid (Alan Guttmacher Institute, 1998). In Canada, single parents account for 29% of the welfare caseload. In BC the rate is 25% (The Centre for International Statistics, 1998b). When published, these types of statistics contribute to the social stigmatization that still seems to haunt many adolescent mothers.

The financial woes of an adolescent mother attempting to provide quality care for her child are exacerbated if she lives independently. "Teenage mothers who continue to live with their parents and do not marry are less likely to rely on welfare than [mothers] who leave home without marrying or than [mothers] who marry, leave home, and subsequently become single parents through separation and divorce" (Burden & Klerman, 1984, p. 13). Few would argue that children are inexpensive. In 1998 in Canada, raising a child to age 18 cost roughly 160,000 dollars (The Centre for International Statistics, 1998a). If an adolescent mother is attempting to hold down a job to defray expenses, she has little energy left to devote to schooling. The lack of schooling contributes to the young mother's financial worries as she is unlikely to secure a well paying job and is, therefore,

> likely to become part of the growing population of young parents who have trouble making ends meet. Not surprisingly, then, many young mothers struggle with poverty, often alternating between work and welfare for years. (McGee & Blank, 1989, p. 14)

The wage disparity with men occurs even among women who delay childbearing. Young full-time female workers who have less than 12 years of education earn less than do 70% of their male counterparts (Levy & Murnane, 1992). Without some measure of support, the life prospects of adolescent mothers are grim.

Additional Children

Common sense might suggest that once an adolescent has encountered the difficulties inherent in raising one child she would ensure that she did not jeopardize her situation further by having another child. However, many teen mothers have subsequent children as adolescents, and in general women who begin childbearing during adolescence have more children than do women who delay childbearing (Marin, 1990; Nord et. al., 1992; Polit & Kahn, 1986; Prater, 1992; Scambler, Adler, & Congdon, 1980; Seitz & Apfel, 1993; Wallace, 1990). It is difficult to get a high school education while simultaneously caring for one child. The extra burden on time, finances, and personal resources that an additional child poses can place the goal of a high school education out of reach. Conversely, those mothers who are involved in an educational program are less likely to have a second child while still in school (Polit & Kahn, 1986). Consequently they are more likely to graduate and to experience success in later life

(Furstenberg, 1976; Furstenberg et al., 1987; Hayes, 1987; McGee & Blank, 1989). However, many teen mothers are unsuccessful in meeting their goal of delaying a second pregnancy (Furstenberg, 1976; Alan Guttmacher Institute, 1998). The psycho-social mechanisms behind this phenomena are not well understood but there is no evidence to support the myth that teenagers have their first and subsequent children in order to obtain welfare benefits (Kelly, 1996b, Polit & Kahn, 1986). With a second or third child to care for, the obstacles related to poverty and social stigma become even more salient.

Childcare

The need for appropriate and affordable day care for their children is the most obvious need of adolescent mothers planning on returning to school. This notion has been supported by a variety of researchers (Colletta et al., 1980; Prater, 1992; Tidwell, 1988; Wallace, 1990). When the provider of childcare is the adolescent's mother or other close relative, this obstacle is often overcome without financial hardship. The grandmother can also provide care when an infant is ill. Those mothers who do not have this option have both the financial hardship of affording daycare and the disruption to their routine when their child falls ill and they must stay home to provide care (Wallace, 1990). As well, adolescent mothers are unlikely to return to school in the event that their children are not healthy (Roosa, 1986).

In Canada, childcare subsidies can help offset the costs for single mothers who are returning to work or school. However, mothers are not necessarily aware of these subsidies as was discovered in a Toronto study (Morrison et al., 1986). Group daycare is advocated as providing high quality care compared to other childcare services, yet in Canada it is most often accessed by the wealthiest and most educated parents (Mahoney, 1984; Kivikink & Schnell, 1987). The lower-income parents must often rely on unregulated or unlicensed childcare. Even when care is subsidized, the quality of the care arrangements is often unknown (BC Ministry of Social Development, 1999b). Importantly, subsidized daycare is only helpful if it is accessible. Waiting lists can be long and once a child is accepted, the location of the daycare may seriously impact healthy family functioning due to stress dictated by travel demands (Mahoney, 1984; Michelson, 1990).

Childcare concerns crop up locally as well. A needs assessment for British Columbia childcare was conducted in 1997. A number of concerns relevant to this study topic were highlighted. Childcare concerns prevented nearly a third of the study's parents from pursuing work or education, frequent child-care problems were encountered by 43% of the parents attending a school or training program, and 61% of the parents reported that childcare was too expensive. As well, this needs assessment found that the gap between the subsidy rate and the real cost of childcare was $100.00 per month (BC Ministry of Social Development, 1999b). Other problems have also been reported with subsidy use. A 1993 BC study reported that over a quarter of the study participants had experienced a refusal to provide care because of subsidy issues (BC Ministry of Social Services, 1993). As well, inconsistencies in funding young parent programs exist which does little for the stability of these programs (Rivers & Associates, 1995). The local picture for childcare for adolescent mothers does have some promising aspects however. In British Columbia, the Ministry of Education (MOE) and the Ministry for Children and Families (MCF) have collaborated with a number of school districts to support school-based childcare so that appropriate childcare is available while the young parent accesses an educational program (L. Taal, personal communication, February 18, 1999). These young parent programs are funded from the childcare subsidy budget and currently consist of 800 childcare spaces operating at BC secondary schools (BC Ministry of Social Development, 1999b). Qualitative data collected on these programs indicate they have assisted the young mothers with attendance, academic performance, school behavior and school persistence (Rivers & Associates, 1995).

Transportation

Transportation issues are often entwined with daycare issues and can pose a seemingly insurmountable obstacle to high school graduation (Grobe, 1995; Roosa, 1986; Wallace, 1990). This is often an overlooked obstacle for teen mothers. To successfully attend a neighborhood high school, a teen mother must arrange to transport her child to daycare and then get herself to school on time. It is the rare teen mother that owns her own vehicle or even has access to one. Many young mothers do not have a driver's license. Public transit is often the only route available

and may involve numerous transfers. Mothers in outlying areas often do not even have the option of public transit and must transport their children on foot. In the winter, this can be enormously difficult and frustrating. If a teenager in an outlying area would normally rely on a school bus to get to school, she has even fewer options than does a mother who lives in a town or village. Some teen mothers are fortunate to attend an alternate school that provides daycare. Although this has advantages, the centre is often well across town and transportation is again an issue. Wallace found that 50% of those teen mothers having transportation problems dropped out. In contrast, of the teen mothers who did not drop out, 70% reported satisfactory transportation. Other researchers have reflected upon the importance of transportation in other areas of an adolescent mother's life. A high level of infant immunization was attributed to the efforts of public health nurses who case managed young mothers and helped them with transportation for clinic appointments (Herrmann et al., 1998).

Attendance

Attendance may prove to be an obstacle for school-attending pregnant or parenting adolescents. Absenteeism can result from nausea, infant ill health, delivery recovery time or complications, medical or financial assistance appointments, post-natal depression, exhaustion or nursing issues. A great deal will depend upon the nature of the program in which the mother is enrolled. A self-paced alternate program can be quite flexible with regard to absenteeism. Conversely, missing a few days in a row on a quartered or semestered school program can be devastating to the student who has few spare minutes in her life to spend catching up. Additionally, some schools may have rigid attendance policies that penalize students who are absent (Roosa, 1986).

With the overwhelming nature of obstacles facing adolescent mothers, it is a wonder that any of them are able to persist with their schooling. Evidence indicates that those mothers who interrupt their schooling as little as possible, returning as early as two weeks post-partum but on an average of 6-8 weeks post-partum, have the best chance for success in persisting with their education (Wallace, 1990).

Consequences of Early Motherhood

Much like the consequences for the general school dropout, the consequences for the parenting dropout are almost uniformly reported as negative. However, it is unclear whether these consequences are the result of the early birth or whether unmeasured underlying differences between early and late childbearers are the source (Nord et. al., 1992; Upchurch, 1993; Upchurch et al., 1993). Research into this issue has uncovered consequences for high school graduation, family size and economic well-being that exist independent of family background issues (Hoffman et al., 1993; Simkins, 1984). As well, childbearing adolescents can range in age from 12 to 19 and the consequences are not uniform across this age range (Scott-Jones & Turner, 1990).

One of the reported consequences is a larger family size for women who had their first child as adolescents. And with this increase in children comes a drastic increase in the likelihood of welfare dependence (Scambler et al., 1980; Furstenberg et al., 1987; Hayes, 1987). Welfare dependence is of primary concern to governments and policy makers. When the adolescent mother drops out of school, her low level of educational attainment dictates that options for economic independence are drastically reduced (Card & Wise, 1981; Coley & Chase-Lansdale, 1998; Furstenberg, 1978; Polit & Kahn, 1987; Simkins, 1984; Wood et al., 1995). Polit and Kahn describe this chain reaction nicely.

> Education still represents the best vehicle for upward mobility in our society. The teens who are affected by teenage pregnancy are precisely the ones whose lifelong economic prospects in our society are most bleak, even in the absence of an early pregnancy—they are females, they are disproportionately minority, and they are disproportionately from lower-income backgrounds. This group's need for a high school diploma is acute. (p. 134)

Actual numbers to support this notion are supplied by Hoffman et al. (1993) who report that a teen birth doubles the probability of poverty and the probability of being at least middle class is reduced by more than 50%.

This reduction in economic well-being is described as human capital formation which is the product of a woman's labour force participation and the wage rate available to her if she were to work (Trussell, 1981). Even if a woman enters the work force earlier than a peer, "a year of education is more important than a year of work experience, other things being equal" (Trussell,

1981, p. 253). Additionally, Trussell points out that the psychological fulfillment that arises from engaging in more stimulating work is lost for adolescent mothers who drop out.

The subject of the health consequences of adolescent motherhood is a vast area of research that can not be fully described here. Briefly, a typical teenage mother has a complicated pregnancy and poor birth outcome (Furstenberg, 1978; Pete-McGadney, 1995).

Individual circumstances will have a large bearing on the particular social and psychological consequences experienced. There is some evidence for impaired self-esteem in pregnant and parenting adolescents (Herrmann et al., 1998; Pete-McGadney, 1995; Plotnick & Butler, 1991). Others, however, have found no difference in self-esteem measures for this population (Rauche-Elnekave, 1994; Streetman, 1987). Streetman suggests that "the responsibilities accompanying motherhood would appear to have an impact on one's personal and social identity. Viewing oneself as a mother may indeed be a profound identity change for a young female" (p. 463). Herrmann et al. also remark on the role change and its effects on self-esteem. In their study, the self-esteem of mothers dropped in the first six months after the birth but it was felt that becoming a mother "stimulated positive change in their lives" (p. 432). The noted changes might offset any setback in self-esteem.

A topic that has far-reaching ramifications is the stigmatization experienced by pregnant or parenting adolescents. Certainly, the sexual mores of the 1990's and the new millennium are significantly different from those of the 1950's, and the stigma of teenage pregnancy and parenthood is "popularly perceived to have lessened in recent times" (Kelly, 1996c, p. 422). Evidence for the more accepting nature of society and the past half-century of change can be found in the steadily declining registrations at British Columbia's prenatal homes which were noted as early as 1980 (Petrie, 1998; Scambler et al., 1980). Media-promoted sexuality in a variety of forms is ubiquitous and pregnant or parenting teenagers are less often portrayed as pariahs in a politically correct media. In spite of this more accepting moral tone in society, stigmatization still presents as a force to be contended with by young mothers (Kelly, 1996c, 1997). Cooper and Moore (1995) reported that teacher-expectations for grades, school completion and post-secondary attendance were lower for adolescent mothers. Ortiz and Bassoff

(1987) found that teenage fathers garnered twice as much respect as teenage mothers. As well, these researchers found that peers pitied the young mother and the young father but devalued only the young mother. This sense of pity or sympathy for teen mothers who were perceived as victims and the unfairness of the double standard as applied to teen fathers was echoed in some Canadian research (Kelly, 1996a, 1997). The double standard for teen fathers is also reported by Anne Petrie in her 1998 book on Canadian maternity homes. She writes that the moral pendulum has swung and now adolescent girls feel pressured to keep their baby yet "the second part of the baby equation—the old 'putative father'—seems as elusive and unimportant as ever" (p. 243). Shapiro (1995) reports that unmarried teenaged girls still suffer from stigmatization whereas the fathers, who are often adult males, suffer little censure. Print media frequently target teen mothers for story subjects and a number of misconceptions are popularly promoted in the media including the beliefs that (a) poverty causes teenage motherhood, (b) teenage motherhood causes poverty, (c) women become pregnant in order to obtain welfare, and (d) teen motherhood causes welfare dependency (Kelly, 1996c). Few people are prepared, like the Alberta alderman who called young mothers too stupid to educate ("This Redneck's," 1993), to voice politically incorrect opinions in public. However the more subtle evidence of stigmatization will inevitably work its unwelcome way into the lives of young mothers. For a thorough, current review of the stigma issues faced by teen mothers see Kelly, (1996c).

Conflicting Information

Despite the significant amount of research that predicts dismal consequences of an early birth, some evidence has accumulated that puts some assumptions into question. One of the most oft-cited researchers in the field of adolescent motherhood is Frank F. Furstenberg, Jr. This researcher, on his own or in conjunction with others, has authored numerous papers, reports, books and chapters on this topic (Furstenberg, 1976, 1987; 1991, 1992; Furstenberg, Brooks-Gunn & Chase Lansdale, 1989; Furstenberg et al., 1987; Furstenberg & Crawford, 1981; Furstenberg, Levine, & Brooks-Gunn, 1990; Brooks-Gunn & Furstenberg, 1986; Hoffman et al., 1993). The basis for much of his earlier work was a longitudinal study of over 300 primarily urban African-American women in the United States (Baltimore) who gave birth as adolescents in the

middle to late 1960's. Follow-up studies were done at various times. At the 17-year follow-up, it was shown that a substantial majority of the young women had completed high school. They also had found regular employment, and most eventually were no longer dependent on welfare. One of the surprising elements of this study for the researchers was how diverse were the mothers' pathways to success (Furstenberg et al., 1987). Some mothers attained economic security and success through a stable marriage, but in general, the finding was that over time the differences between early and late childbearing seemed to decrease (Furstenberg et al., 1989).

Another researcher in the field who has presented some research that conflicts with the expected outcomes is Dawn Upchurch. She is a more recent entrant into this field but has authored numerous papers and reports (Upchurch, 1990, 1993; Upchurch & McCarthy, 1990; Upchurch et al., 1993). Her research focussed primarily on the sequencing and timing of dropping out and giving birth and used data from the National Longitudinal Survey of Youth and an event-history technique. She reported that though an adolescent birth does influence eventual graduation, the nature of that influence has been incorrectly described by other researchers. Women who were enrolled in school during pregnancy and who returned to school shortly after the birth were no more likely to drop out than their non-parenting peers. For those young women who had already left school, an adolescent birth reduced the chance of eventual graduation (Upchurch & McCarthy, 1990). The Upchurch work, however, has not been without its critics (Anderson, 1993a). In a re-interpretation of their data, Anderson stated that unambiguous evidence is provided to show that "women who give birth are far more likely to drop out and are far less likely to return to school and graduate than are their peers—rates of eventual graduation are lower for mothers" (p. 736). Even with further responses from Upchurch, the issue does not appear settled so it is sensible to use caution in interpreting both sides of this debate.

A remark by Trussell (1981) sheds a different light on the whole issue of the negative outcomes of adolescent childbearing. He notes that these negative consequences "must be matched against the benefits, if any. Such benefits might include the satisfaction of being a mother, the comfort of conforming to some social norm, and the pleasure of procreating" (Trussell, 1981, p. 251-252). This notion has received some support by other authors who have

discussed the possibility of a subculture of adolescent motherhood that provides more benefits than negative consequences (Rauche-Elnekave, 1994; Roosa, 1986). Other benefits that might be included here would be a teen mother's new-found maturity which evolves by necessity from caring for an infant (Kelly, 1997).

Nord et al. (1992) have conducted a thorough review of the research and indicated that researchers have controlled for pre-existing conditions of poverty, education, ability, temperament, and family structure yet still have found adolescent mothers having "lower career aspirations, lower wages and annual earnings, lower occupational prestige, less satisfaction with job and career progress, and less time spent on the job when compared to their peers" (Nord et al., 1992, p. 313). The reviewers go on to note, however, that the more sophisticated methodologies applied in recent research have uncovered a negligible effect of age at first birth on wages. Reasonably recent research on the educational attainment and income of black adolescent mothers found significant but modest effects for early childbearing. These authors caution that the results for African-American women do not necessarily reflect the situation for Caucasian mothers (Scott-Jones & Turner, 1990).

In considering the available research on the topic of adolescent mothers and schooling, it would be rash to assert that any of the positions put forward by various researchers are absolute and correct. The degree of interaction between the variables is enormous and the outcomes obtained clearly depend upon how the topic is studied. What is supportable is the notion that increasing the opportunity for young mothers to complete their schooling is a valuable endeavor (Roosa, 1986). A higher level of schooling for the adolescent mothers has been linked to a variety of outcomes including ramifications for the offspring of the young mothers.

Outcomes for Children of Young Mothers

Physical, psychological and social outcomes for the children of adolescent mothers is a bounded research area itself. This review does not attempt an exhaustive investigation of this topic.

It has generally been found that an early birth yields negative outcomes for the children of the adolescent mother. The research has produced varied results and not all researchers have

looked at all consequences but a number of issues have received attention in the physical, social and cognitive realms. Such outcomes as a higher mortality rate (caused possibly by respiratory infection, accident, low birth-weight, developmental problems, membrane disease and hypoxia), neglect, abuse, increased health problems and hospitalization, learning disabilities, grade repetition, delayed language, lower math ability, delayed social skills, hostility, poor behavioral self-control, intellectual differences and activity level difficulties are some of the consequences reported for these children (Alan Guttmacher Institute, 1998; Brooks-Gunn & Furstenberg, 1986; Canadian Council on Social Development, 1995; Furstenberg et al., 1987; Nord et. al., 1992; Rauche-Elnekave, 1994; Ray & Roloff, 1994; Simkins, 1984). These outcomes have, in turn, been linked to such possible causal factors as the age of the mother, birth order of the child, gender of the child, lack of prenatal care, denial of pregnancy and risky prenatal behavior, incompletely developed bodies and parental practices of the teen mother (Brooks-Gunn & Furstenberg, 1986; Stengel, 1985). These factors may not be strictly tied to the mother's adolescent status but may be entwined with such variables as SES, alternate care-givers and family background (Simkins, 1984).

There is some research that indicates a more positive picture. A study conducted by Herrmann et al. (1998) found that the teen mothers' infants tested as developmentally normal and over 90% of the sample were up to date on immunizations. These results are attributed in part to the case management of public health nurses. One finding of Furstenberg et al. (1990) that conflicts with some of the myths surrounding teenage pregnancy was that the majority of the first-born children did not become teen parents, although they were still more likely to be teen parents than were the children of older mothers. Another and bleaker finding of these researchers was that compared to their mothers, current teen parents were less likely to overcome the handicaps associated with early motherhood. A call has been made for more systematic study of the influences and outcomes for the children of adolescents (Brooks-Gunn & Furstenberg, 1986; Simkins, 1984).

Young Mother Programs

There exists a vast array of programs designed to help offset the negative consequences generated by adolescent pregnancy and parenthood. Programs vary in scope, intensity, availability, duration, objectives, and sponsoring agency. A complete cataloguing and assessment of all the varieties of available programs has not been made. Further, though some individual programs are described in the literature, few have undergone a comprehensive and systematic assessment to determine their efficacy (Wood et al., 1995). The following paragraphs describe a variety of programs and the available outcomes. The intention is to give a sense of the diverse nature of programming for teen parents and the possibilities that exist for program creation and development.

The adolescent mother program that is probably the most often cited is the Baltimore project which underwent repeated evaluations including a long-term follow-up (Furstenberg et al., 1987). This physician-designed program was based at Sinai Hospital and offered comprehensive medical and social services to pregnant adolescents. The goal was to improve the quality of prenatal and neonatal care provided to the adolescents and their children. The first evaluation, which occurred as a five-year follow-up, compared the group of adolescent mothers with women who delayed childbearing. This follow-up examined transition to adulthood and the impact of early childbearing on life chances. At this time, slightly less than half of the young mothers had completed high school. However, these authors discovered at a 17 year follow-up that more than half of the educational activity experienced by these young mothers took place more than five years after the initial interview. This activity included post-secondary education for the graduates but also included one third of the previous non-graduates who completed high school requirements at a delayed time. What these findings indicate is that early dropout "reduces, but does not foreclose, a young mother's chances of further schooling" (Furstenberg et al., 1987, p. 27). This study is significant because of the long-term follow-up data. Many of the following studies have only had short-term, if any, evaluation.

Wood et al. (1995) provided a thorough description of Ohio's Learning, Earning, and Parenting (LEAP) program, which is a statewide program designed to encourage school

attendance among pregnant and parenting teens on welfare. This program uses a system of bonuses and penalties to encourage attendance in a school or in a facility providing GED instruction. Absenteeism that is excused is neither rewarded nor penalized. Though the program is mandatory for all adolescent mothers on welfare, exemptions are made for late pregnancy, for the first three months following the birth, and for teens living in areas where transportation to school proves to be an insurmountable obstacle. Once a teen completes her schooling or turns twenty she is no longer required to participate. The staffing involved in running the program includes case managers who monitor compliance and assist teens to overcome obstacles. Assistance for childcare and transportation are also provided. The early findings of the program evaluation suggested that the program was successful in its primary short-term goal of increasing the enrollment and attendance of teen parents on welfare. The majority of the teens elected to enter GED programs. However, even with the system of penalties and rewards, less than half of the dropout mothers resumed their education. Follow up has not yet been conducted to determine whether this increase in enrollment translates into school completion and economic independence.

In Canada, the LEAP program has been introduced in Ontario and includes funding for a one-bedroom apartment, subsidy for daycare, and funds for babysitting, clothing and transportation. These benefits are all dependent on maintaining school registration but if a young mother drops out, she loses her welfare money. There have been critics of this program in Ontario. Some feel that many mothers may not be able to focus on schooling because of competing concerns that may require counselling (Chisholm, 1999). Others worry that the mothers may be deprived of the time necessary to form a mother-infant bond which has been demonstrated as important for infant outcomes (Musick et al., 1987; "Teen Mothers," 1999). The issues of availability of resources and a young mother's level of ability are also not addressed. The scenario of a mother who must stay home with a sick child yet lose her income due to absenteeism-based school dropout has been presented as another argument against the mandatory nature of LEAP. One of the heaviest blows against the program comes from the critics who point out that many mothers would be happy to return to school if appropriate daycare

space could be found. In Toronto, the waiting list for subsidized daycare is 12,000 spaces (Chisholm, 1999).

Wood et al. (1995) describe several other American programs in their review. Learnfare is a program in Wisconsin begun in 1987 that requires all adolescents receiving public assistance to attend school. Reduction of funds is the process used to enforce their mandate. The government-sponsored "Teenage Parent Demonstration" began in 1988. It also uses a reduction in welfare funds as a means of enforcing adolescent mothers on welfare to attend school or engage in employment-related activities.

A final program that Wood et al. (1995) describe is "Project Redirection." This program experienced significant systematic evaluation. This program was a voluntary, multi-dimensional service program for adolescent mothers. It operated in four sites in the early to mid 1980's. The services included counselling and support, as well as links to education, pre-employment skills training, health services, parent education services, and family planning services. One of the key objectives for the program participants was high school graduation. At the two year evaluation date, education, employment and other outcomes were not significantly more positive for program participants. At the five-year follow-up, however, employment or school involvement and economic independence was significantly improved for program participants. An additional finding was that the children of participants experienced more positive outcomes in behavior and vocabulary (Polit, 1987; Polit & Kahn, 1987; Polit, Quint & Riccio, 1988; Wood et al., 1995).

The Graduation, Reality, and Dual-role Skills (GRADS) is a public school home economics intervention program aimed at helping at-risk pregnant and parenting adolescents graduate from high school, set life goals and feel empowered. Program objectives include remaining in school, carrying out positive health care practices, learning about child development, developing parenting skills, preparing for employment, and learning to balance work and parenting responsibilities. Goal setting is the major thrust of the program (White & Cummings, 1995).

"Cross walk" is an intervention program offered in Spokane, Washington. It opened in 1985 offering food, counselling, employment readiness, a place to hang out, recreation, clothing

and personal items, an alternate school, shelter and transitional homes (including one for mothers under age 18 with six spaces and apartments for young families ages 18-21). A modified "Headstart" program for the infants was added in 1993. The Headstart program serves the needs of infants and toddlers up to three years of age and focuses on parent involvement, developmentally appropriate education, health, social services, and nutrition. The alternate school provides instruction and the opportunity to earn a GED or regular high school diploma. The staff includes counselors, a teacher, public health nurses, a social worker, and a public health advocate (Ray & Roloff, 1994).

Volunteer programs where experienced mothers lend support to teenaged mothers are offered in two Missouri cities. These community resource-based programs increase teen mothers' access too community services, provide emotional support and encourage education. Concrete support such as help with transportation, childcare, errands and problem solving are also part of the program's mandate ("Resource Mothers," 1995).

In Roosa's (1986) review of adolescent mother programs, he concluded that those mothers who dropped out of school before, during or after pregnancy were not being effectively served. He suggests that the generic teenage parent program available in schools provides a small, immediate increase in the young parent's knowledge but that little long-term impact on parental attitudes or offsprings' development is evident. He does maintain, however, that these programs can help some young mothers complete their education if they can manage to persist in the program.

In her report, Rhodes (1993) is critical of the transition services offered to adolescent mothers when they move from a specialized program back to their regular school (see also Zellman, 1982). She highlights the benefits of alternate programs for pregnant teens. They include "smaller classes, a less stigmatizing environment, and specialized health and social services" (p. 169). However, she laments that in many cases students are expected to return to their regular school after delivery and suggests that the lack of transition services may contribute to young mothers dropping out. She suggests that "a negative trajectory that begins with multiple conflicting demands can easily progress toward poor school attendance, underachievement, and

eventual school drop out" (p. 171-172). This trajectory is graphically represented in Figure 2. However, Rhodes does note that some schools offer course work and special services appropriate to pregnant and parenting students within the regular school context, and others have provided a transition liaison person to help with difficulties in the move from an alternate school to the regular school. She is clear that there is a need for such support. A similar observation is made by Polit and Kahn (1987) when they remark that the "provision of services to pregnant and parenting teens is typically fragmented and uncoordinated" (p. 132). Clearly, these researchers support a network of services that would offer a continuum of support for the adolescent as she progresses from pregnancy to parenthood.

With the one noted exception, the programs described have been American. Canada is certainly not lacking in programs for adolescent parents but the research investigating Canadian alternatives is a bit thin and much of the information stems from newspaper accounts. An example is The Elizabeth Fry society in Prince George, British Columbia which runs a teen parent program that focuses on prevention, breaking the cycles of poverty and abuse, developing self-confidence and education (Brekenridge, 2000). One innovative intervention with teen mothers that has received some attention from a Canadian researcher involved the format of play building or the writing and performance by teen mothers of a theatrical production (Kelly, 1997). The purpose was to combat the stigma surrounding teenage motherhood by presenting the world-view of teen mothers. Though intriguing as a unique approach, the activity did not prove entirely efficacious for its original purpose, yet it still held some educational promise.

Some literature on other aspects of the adolescent parent culture and service options is also available. The BC Alliance Concerned with Early Pregnancy and Parenthood (BCACEPP) is a not a teen parent program but rather a "network of practitioners who work with and have concerns about pregnant and parenting youth and their children" (Kerr, 1996, p. 5). Personal communication with Leonard Taal (February 18, 1999) from the Special Programs Branch of the Ministry of Education indicated that in British Columbia, in 1999, there were 385 school-based childcare programs. Of these programs, 47 were specialized Young Parent Childcare programs that were operated in conjunction with the Ministry for Children and Families (MCF). As well, he

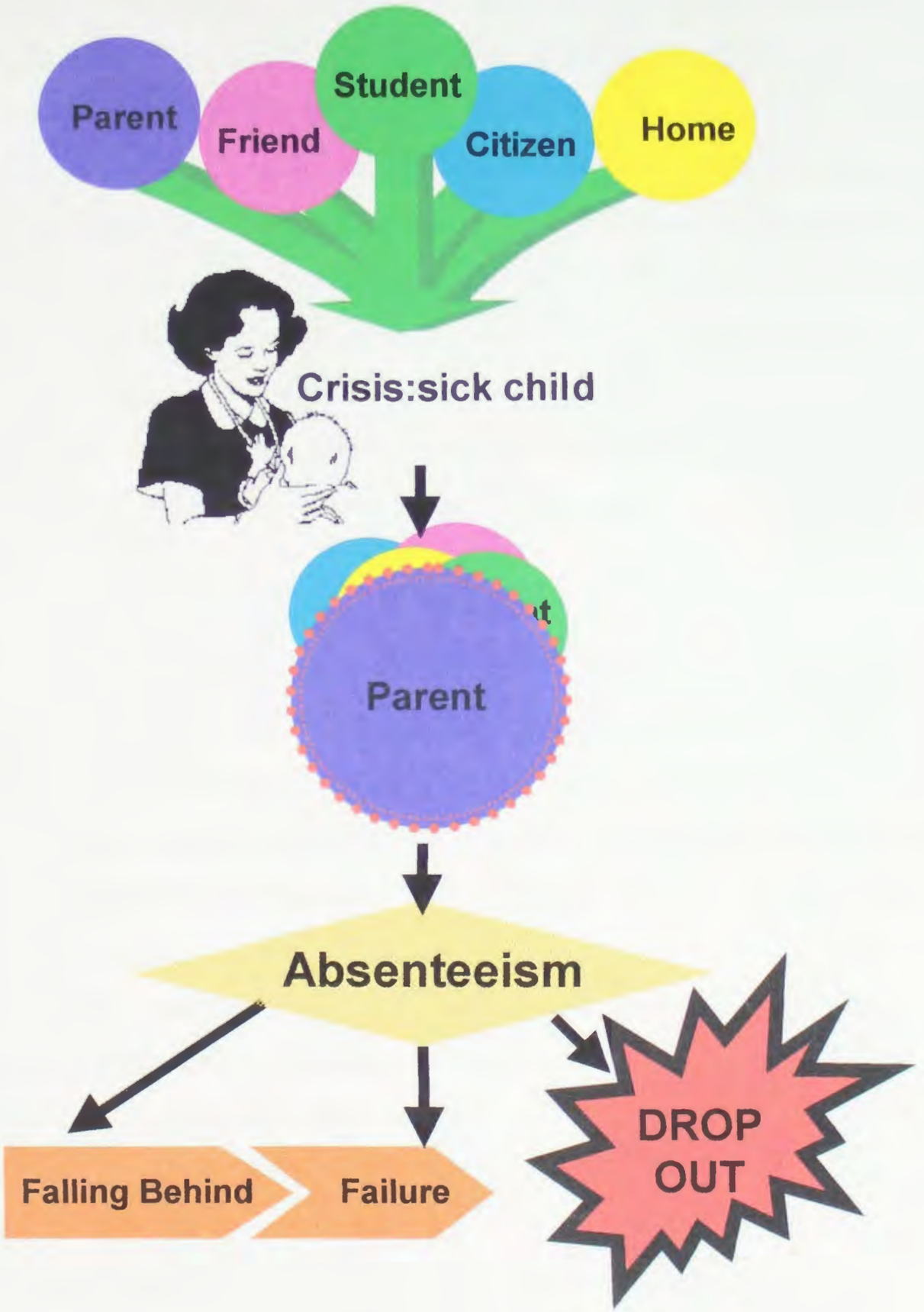

Figure 2 Negative trajectory leading to dropping out of school.

indicated that MCF was developing a Provincial Childcare Policy and Evaluation Framework which would assist in the planning of childcare services including the promotion of partnerships between local government, schools, businesses, unions, and community service-providers. He also indicated that there was a school-based working group that was examining the potential for a BC school-based childcare policy because the policies and practices varied between school boards and ministries. A review by Rivers and Associates (1995) of BC young parent programs concluded that these programs not only provided quality care for young children but also improved school completion rates and academic performance levels of the adolescent mothers. Hopefully, newly developed policies will result in an increase in programs for young mothers. Research into the efficacy of these programs is the logical next step.

Intervention

The implications for intervention are multi-faceted. Depending on the desired focus, intervention can occur in the physical, psychological, or social domains. It can encompass prevention, schooling, parent education, health issues, childcare, employment issues and life skills. Interventions can be delivered as part of comprehensive site-specific programs or through a network of related service-providers. Adolescent mothers who remain in school often have different needs than do those who have dropped out. As part of Weisner's (1984) review of available literature on the problems and needs of women re-entering higher education, she identifies a number of areas that are also barriers for teen mothers. These include such obstacles as shortage of time, role conflict, admissions procedures, and childcare concerns. Her statement that "these women needed to coordinate their family and job responsibilities before they could feel free to focus on academic studies" (p. 52) applies equally well to adolescent mothers seeking high school graduation. Although also discussing women re-entering post-secondary education, Ekstrom's (1972) categorization of obstacles to education is helpful in orienting oneself to the difficulties faced by adolescent mothers. He divides the barriers into the following three categories: (a) institutional barriers—issues concerning the ways institutions deal with the students, (b) situational barriers—the circumstances in the family/home of the student,

and (c) dispositional barriers—the student's concept of herself and the world. Though it would be difficult for schools and agencies to have a great deal of impact on situational and dispositional barriers, there is a great deal of scope for change to institutional barriers.

One critical area for the development of interventions is the provision of services for those students who have already dropped out (Roosa, 1986). Another critical area is the development of effective pregnancy and dropout preventive programs (Bearden et al., 1989; Cairns et al., 1989; Furstenberg, 1978; Polit & Kahn, 1986). This type of program is supported by the finding that even after controlling for family background, the estimates of high school education completed would rise from 54% to 86.4% if adolescent parents postponed their first birth until the age of twenty (Hoffman, et al., 1993). Intuitively, prevention seems a logical focus for coping with adolescent pregnancy but it would be wise for program planners to bear in mind that some external variables will be difficult to affect. Variables such as peer pressure, coercion, and the role played by older men in the pregnancy of many adolescents are obstacles that most programs would be hard-pressed to address (Kelly, 1996a; Fisher, 2000; Shapiro, 1995).

One approach, for the development of intervention programs, is to question teen mothers directly about what works and what does not work since they might be able to provide valuable input about the school characteristics that are important in order to retain more students (Tidwell, 1988). Polit and Kahn (1987) found that, in their study, 80% of the adolescent mothers had been enrolled in some kind of educational program during a two-year follow-up period, and they suggest that this indicates a desire to complete schooling even if the girls were not eventually able to manage it. This further suggests that efforts to remove obstacles to high school graduation may reap significant results.

One of the obstacles that may be easily removed is the lack of educational counselling for this population since this form of counselling was associated with a significantly more positive school status, particularly for Caucasian mothers (Polit & Kahn, 1987; see also Tidwell, 1988). As part of this educational counselling, there needs to be consideration given to the unique career trajectories and training needs of young mothers. Employment for non-graduated young mothers is often in unskilled and low-paying jobs ("The Drop-outs," 1999; Polit, 1987). In her study of

adolescent mothers, Prater (1992) found that only two participants had received any type of vocational training in high school. Though her subjects reported having a goal of receiving a high school diploma, she questions whether they had the understanding that an appropriate education should also include the development of marketable skills. The career education available for teen mothers has been examined by Imel and Kerka (1990) who state that as "teen parents mature, they have diminished educational and career expectations [and] they face significant challenges in completing their high school education, pursuing post-secondary education, and entering the work force" (p. 2). These authors advocate career education and feel young parents should be encouraged to pursue careers leading to a higher standard of living. Finally, educational counselling would also encompass guidance around accessing community resources. It would be advantageous to have the counsellor act as a liaison with other agencies to provide information on "how crucial opportunity structures work ... and how to gain access to them" (Farber, 1989, p. 526). All of these forms of counselling will aid the adolescent mother who may be overwhelmed by her life situation.

Roosa (1986) presents a useful description of three distinct types of adolescent-mother school dropouts. The first type of dropout is generally unsuccessful in school and drops out before or during pregnancy. Her status as an adolescent mother is not uncommon in her subculture and education may not be a priority. The second type includes those girls who intend to complete high school but drop out shortly after delivery. These young women lack an adequate support network that will allow them to overcome the obstacles to their education. Particular obstacles faced by this group include obtaining appropriate childcare, solving transportation problems, and meeting attendance requirements. The third type of dropout is the young woman with high aspirations and a strong network of support. She would likely complete high school except that she experiences a second birth. Managing two children and school is simply overwhelming. Roosa suggests that many intervention programs are designed for a fourth group of young mothers. These young women have high aspirations, a strong support network and a base of resources to help them manage the obstacles inherent in the dual role of parenting

and being a student. This group manages to stay in school and though they will certainly benefit from intervention programs, they are likely not the women most in need.

Roosa (1986) also makes recommendations for interventions for these types of students. He recommends that pregnant/parenting programs be housed in neighborhood schools instead of remote external sites. Use of the neighborhood school would alleviate many transportation problems and build upon the natural support network of peers. On-site childcare and flexible attendance requirements are also recommended. A similar recommendation is made by Mahoney (1984) who advocates a neighborhood centre model of daycare with group, home-based, regular, after-hours and emergency services included. Providing education with the goal of preventing a second pregnancy would also be important. Of critical importance for program developers is to "distinguish between these groups, determine their particular needs, and design programs specifically to meet those needs" (Roosa, 1986, p. 316).

Though they do not separate adolescent mothers into distinct types, Polit and Kahn (1987) make similar recommendations for intervention efforts. They feel that it is critical to design efforts at keeping pregnant girls in school as well as to develop intensive outreach for those who have already dropped out. Further, they recommend that in the post-natal period, adolescent mothers would benefit from educational counselling. Evidence to support this approach is provided by Seitz et al. (1991) who determined that there was a lower likelihood of an ensuing pregnancy when an extended post-natal intervention was in place.

Another of the difficulties faced by this population is that often their problems are considered personal and not the responsibility of the school system (McGee & Blank, 1989). This difficulty is compounded by a judgmental public that views the mothers as "bad" and voices displeasure with the notion of schools being associated with services to this group (McGee & Archer, 1985). Empathic and non-judgmental service-providers can go a long way towards offsetting these potentially damaging experiences. The self-concept of young mothers may already be suffering (Pete-McGadney, 1995). Many of these marginalized members of society

have developed attitudes that are

> less hopeful than those of their peers, presumably because the pregnant teenagers have already encountered the well-documented social and economic sequelae of unintended teenage motherhood. Their pessimism may contribute to subsequent life experiences. (Oritz & Bassoff, 1987, p. 401)

Researchers call for a variety of specific intervention efforts such as creating a school environment that is caring and relatively obstacle free. This may include extra time scheduled into the day for homework, assistance with goal setting, improvement of the mother's self-concept (including development of interpersonal skills and social relationships). Other suggestions are for the establishment of sites serving non-traditional students, development of support and referral networks that would link community services and agencies, and newsletters to increase communication. A case-management approach is recommended as providing support, guidance and monitoring. Teacher-training and specific sex-education are also advocated as is a focus on the prevention of repeated early childbearing (Imel & Kerka, 1990; Nuzum, 1990; Oritz & Bassoff, 1987; Prater, 1992; Seitz & Apfel, 1993; Wallace, 1990; White & Cummings, 1995). Clearly there is no dearth of suggestions for helping adolescent mothers with their schooling and life-management. The difficulty comes in determining what particular aspects are most important for a local population and how best to deliver those services.

In planning educational programs for dropouts and teen mothers, it is important to have a sense of the characteristics of the local population. There are enough conflicting results in the literature to encourage the planner to be cautious about adopting a ready-made program intended for a very different group. In fact, the program may indeed fail if the source of the data is too different from local characteristics (Dierkhising, 1996). Simply knowing the characteristics of the local population is insufficient. Even the most conscientious planners may well "lack the insight necessary to make a substantial impact on the unfortunate consequences of this socially devastating decision" (Dowling, 1994, p. 29). And any program, ready-made or customized, is bound to suffer criticism from some sector of society. Planners who keep basic tenants in mind when developing local programs will almost inevitably latch onto the concepts of community supports, networks with other teen mothers, educational opportunities, childcare arrangements and parenting skills (Nozick, 1998).

Areas with limited community services provide special challenges for program developers. When "adolescent mothers feel the need for community services which are unavailable to them they feel less contented in their maternal role and are more likely to experience difficulty in child rearing" (Colletta et al., 1980, p. 5). Difficulty in child rearing will have consequences for the child that will in turn contribute to chances that the child will later become a dropout.

In spite of the importance of the content of the teen mother programs, an equally critical area for attention is administration and service-delivery. An evaluation of several youth programs led Hahn (1992) to conclude that "it is possible (and likely) that successful programs simply had more able staff and a better-run organization than other programs" (p. 2). The complex nature of adolescent pregnancy and parenting and the myriad social difficulties that ensue can be bewildering and disheartening to a service-provider who hopes to implement change. However, a planner can go a long way toward developing an effective program by culling the best of what the literature has to offer and using a large dose of common sense.

School Options

Clearly a schooling component is an important aspect of a young mother program since it is well-documented that one of surest routes to self-sufficiency is through the venue of education and abbreviation of this part of development can have far-reaching consequences (Chisholm, 1999; Prater, 1992). In 1980, there were few school options for pregnant or parenting young women in BC. Aside from the programs offered by the prenatal residential homes, young mothers could choose between attending a regular school, accessing correspondence or accessing a home-bound program with a visiting teacher with the proviso that this "must be budgeted for in April for the next year" (Scambler et al., 1980; p. 22). There are now a variety of schooling options available for dropouts and pregnant and parenting adolescents. A simplified version of the three most common programs would be the regular high school program, the alternative school program, and the comprehensive program.

A neighborhood high school can integrate dropouts and pregnant and parenting adolescents into regular classes and have common expectations for attendance and participation. A variation on this program is the high school that offers these students a regular program with additional supports. These supports may take the form of remedial classes, "studies" in which to do homework, in-house alternate programming or special groups for at-risk students (Bearden et al., 1989). Regular school special education services might be employed since "students who are adolescent parents, though not considered disabled, are impaired by their situation. Their condition is the disabling effects of the environment, including the school community" (Prater, 1992, p. 141). The advantages of attendance in this type of setting are that students are able to remain with their peers and to participate in a wide range of extracurricular activities and specialized courses, aspects reported to be important (McNeal, 1995; Pittman, 1991; Roosa, 1986). Students also benefit from contact with a wide variety of adults. The disadvantages of this type of program are that flexibility in attendance is often difficult to achieve, and although supports are provided, the student must manage and monitor much of his/her own program. Missed classes in key areas such as a science lab or Government exam course may be difficult to make up as the teacher must keep the class moving. Additionally, these students may have experienced difficulty in a regular school setting in the past and the young mother may find the environment less supportive due to her unique status (Zellman, 1982). Interventions at this level should focus on producing "clearer future goals, greater commitment to high school, and better integration into the academic and social life of the high school" (Hemmings et al., 1996, p. 19).

A second option is the alternate school. Alternate schools take a variety of forms and may offer regular academic courses or a GED-based program. Attention to the structure of proposed alternate programs is important as there have been findings of different needs for Junior versus Senior high school students (Dowling, 1994). Alternate schools often provide far more flexibility in attendance and generally employ fewer staff and maintain a lower teacher-pupil ratio so students can get more personally acquainted with teachers and receive more individual attention (Rhodes, 1993). The downside of a flexible attendance policy is that mothers may lose momentum and may slide into academic lethargy. Attendance monitoring has been found to be

critical in assisting young mothers to complete their education (Grobe, 1995). The teachers who work at alternate schools often have an interest in and a willingness to work with the particular needs of the dropout or teen parent. Ideally these alternate schools offer such options as flexible schedules, a shorter instructional day, more experiential learning, and programs that combine education and work (McGee & Blank, 1989). Independent course work is often the staple of the alternate school curriculum and though this approach offers tremendous flexibility, completion rates for independent study courses are quite low relative to regular high school courses (Disilvestro & Markowitz, 1982). Despite the advantages, alternate schools rarely offer the breadth of vocational courses and sometimes lack a focus on getting a high school diploma. As well, some students who take the GED feel it is not of same quality or standard as the "real thing" of high school graduation (Wallace, 1990) (see also Cameron & Heckman, 1993). Transportation may also pose a problem as one alternate school will generally provide service to the same region as a number of high schools.

A third option available to pregnant and parenting adolescents in some communities is the comprehensive program. A comprehensive program may have many or few components and may have aspects that overlap with the regular school program or the alternate school program. These programs vary widely from live-in programs where pregnant teens learn academic, parenting, and life skills to day programs that offer an attached childcare centre and tutorial support to work on correspondence courses or life skills programs. These settings have the advantage of tailoring the program to the specific needs of the students. Other students in the program are experiencing similar difficulties with life and the peer support that many young women have lost can be renewed. Childcare worries may be made more manageable with an attached daycare and there is often a supportive network of professionals near by who can be consulted on various aspects of education, child rearing, and life, including budgeting and career counselling. Transportation may again pose problems since these types of programs are even less common than alternate programs. Students from outlying areas may not be able to access them at all. As well, there may be little focus on high school graduation requirements or the educational goals may only involve the GED. The politics of developing programs for adolescent

mothers can interfere with planning effective programs and there is some evidence of an over-reliance on GED certification to meet political objectives (Mittelstadt, 1997).

A concern about relying on the GED for one's education is examined by Cameron and Heckman (1993). These authors have determined that GED graduates are statistically indistinguishable from high-school dropouts on a number of measures and they indicate that its chief value lies in opening the doors to post-secondary schooling and training. Despite these shortcomings, a GED based program may offer more flexibility for lower-ability clients than one that requires participants to accumulate credits toward high school graduation. Some comprehensive programs may lack a complement of truly comprehensive services in that they are short term or only available to pregnant students (McGee & Blank, 1989; Rhodes, 1993). These types of programs fail to take into account the changing needs of the adolescent mother.

Summary

In order to provide a background on the different paths to high school graduation for young mothers, the review of the available literature addressed issues relevant to dropouts as well as issues relevant to adolescent mothers. The student who has dropped out of high school or is at-risk for dropping out of high school may display a number of characteristics. Within this population is a subset of teen mothers who have their own particular needs, characteristics, and challenges. Providing for the needs of the potential dropout, the dropout, the pregnant adolescent and the parenting adolescent is a complex issue. A description of program types and the challenges facing planners as they develop intervention strategies was also described. Finally, school-specific issues were addressed. Obviously there is no perfect formula for an educational program for an adolescent mother. Program selection must take into account many factors including the young mother's ability, support needs, career goals, and perseverance. A goal would be to find the best match for the local population since inevitably even the superior programs will present obstacles for some young mothers.

Adolescence is a difficult period of life for any young person. It involves "attempts to find oneself in terms of the ambiguous expectations of the outside world" (Streetman, 1987, p. 459). In terms of their schooling,

> some young mothers remain in high school, managing to meet their academic responsibilities despite the profound psychological and physical changes associated with teenage pregnancy and parenthood. For many students, however, the demands of pregnancy and parenting are overwhelming. The routines, regulations, and facilities of most high schools are not well suited to the needs of pregnant and parenting students and special supports and services are rarely provided. (Rhodes, 1993, p. 169-170)

When coupled with the considerable demands of parenthood, the road to adulthood for teenage mothers is littered with obstacles and fortified with few clear signposts about the best path to follow.

Research Procedures

Introduction

The research plan was developed to evaluate and describe the state of affairs for adolescent mothers who were trying to obtain their high-school graduations in SD #73. It includes a description of services that are provided to this population by school personnel and by agencies that are outside of the jurisdiction of SD #73.

Method

Design

This study was approached as descriptive, evaluative research and it encompassed a combination of several recommended approaches. As an evaluative study does not fit tidily into either of the two clearly-defined camps of qualitative or quantitative inquiry, I have declined to situate my design exclusively within any one paradigm. This approach is supported by Worthen and Sanders (1987) who state,

> evaluation is not a discipline but merely a social process or activity aimed at determining the value of certain materials, programs, or efforts. As such, it necessarily cuts across disciplines, and evaluators are thus denied the luxury of remaining within any single inquiry paradigm. (p. 53)

These authors further describe the conundrum faced by evaluative researchers as they search for

models and theories to guide research when they state that evaluative writings are not,

> deductive bodies of knowledge. They do not enable us to develop, manipulate, or interrelate laws and explanations. They do not permit us to predict or explain. They are not tested in the empirical crucible or interrelated with or validated against other relevant bodies of knowledge. In short, they are not theories. (p. 145-146)

I have elected to use the criterion of pragmatics to dictate the selection of research methods. As a result, the research included interview protocols, surveys, and open-ended questions. Data analysis procedures were similarly varied.

It is important to provide a rationale for the mixed design strategy with respect to the specific question under consideration. This research attempts to achieve a holistic understanding of those institutional issues that hinder or facilitate high-school graduation for young mothers. Due to these broad goals, a narrowly focused research agenda was not appropriate. Additionally, since the goal was to determine what was happening across the district, an in-depth study of a small sample would also have been inadequate. Throughout the district there are a variety of program alternatives and service-providers. The study needed to allow for an appreciation of the role of these differing programs and organizations.

The Design involved two major components. The first component involved an interview of those service-providers who have an impact on the young mother population. The second component involved interviews of and survey completion by young mothers.

Setting

This study is not an evaluation of a particular program or institution, but rather an evaluation of the available resources in a particular geographic zone. Because the focus is on high school graduation, the zone is determined by the catchment area of one school district. The Kamloops-Thompson school district is one of the larger districts in the province of British Columbia. It is an amalgamation of two previous districts that were centered in the communities of Clearwater and Kamloops. The catchment area encompassed by SD #73 includes the outlying communities of Barriere, Chase, Clearwater, and Logan Lake, as well as the city of Kamloops. The rural areas associated with these communities were also included. The center of administrative operations and the majority of services are centered in Kamloops. Because

adolescent mothers are present in all communities, an attempt was made to access some of the young mothers from the outlying communities to provide a broad picture.

Participants

A purposive sampling technique was employed for this study due to the nature of the question.

Service-providers

The particular service-providers selected for interviews were representative of the various different groups. School counsellors are the school service-providers who are most likely to interact with young mothers on many levels. Therefore, one school counsellor from each secondary school in SD #73 was chosen for interview. The selection of the interviewee was based on availability. Other service-providers represent unique services. In these cases, the selection of the interviewee was based on who would have the most information to share (a program manager for example). Some programs employed individuals who fulfilled distinct roles within the program. In these cases, a number of individuals were interviewed within the same organization, and it was the advice of the program manager that determined whether further interviews were recommended. Some service-providers had an impact on the lives of young mothers but not in an educational sense and their program was noted but no interview was undertaken. The following service-providers were interviewed:

- Personnel at the Kamloops alternate program,
- a Virtual School representative.
- high school counsellors,
- a hospital/homebound teacher,
- personnel at South-Central Regional Correspondence School,
- personnel at Marion Hilliard House (a prenatal house),
- personnel at Elda Marshall house (a post-natal house),
- personnel at the First Steps program,
- a Public Health nurse, and
- a representative of Child-Care Subsidy program.

These service-providers were interviewed using a standard interview protocol (see Appendix E).

The Young Mothers

In the dropout literature, sample definition is identified as a complicating issue (Dierkhising, 1996; MacMillan et al., 1990). The large data bases used to generate highly generalizable data often have a narrow definition for successful completion of high school. The Baltimore study follow-up conducted by Furstenberg et al. (1987) illuminated the misperceptions that can occur with narrow definitions of school-completion success. The purpose of the current study was to describe the educational paths taken by young mothers and it was expected that some of these paths would include a period of time when a young mother was out of school.

Participants were young mothers who had successfully completed graduation requirements within the last 10 years or who were currently in attendance at school in a program leading to graduation or GED certification. Students were not excluded due to registration in, or completion of an alternate program, a correspondence program, an adult graduation program or a GED program. All of these are valid routes to high school completion that will allow the student to pursue post-secondary studies.

Mothers qualified as participants if they were less than 30 years of age at the time of their graduation or at the time of the initial interview.

The parenthood role of the participant was defined as having completed graduation requirements (or be in the process of working toward them) after the birth of a first child. Mothers with more than one child were not excluded. Three respondents were exceptions to this parenting description. Two of these mothers had gone full term in their pregnancies while attending high school and had subsequently released their children for adoption. A third young woman was in her final trimester of pregnancy while attending high school. The data from these respondents were included because they offered insights about attending school during pregnancy.

Respondent selection.

There was difficulty gaining a large random sample of this population. Because I was interested in the school experiences of adolescent mothers, I focused on those mothers who had completed graduation requirements or were in the process of doing so. This group afforded me

an opportunity to learn from those young women who had extended interaction with the school system. By concentrating on women who had experienced or were experiencing success, I hoped to ensure that I studied a sample that had optimum exposure to the resources of the system. This group comprises a very small subset of an already small subset of the adolescent population (see Figure 3). Because of the particular issues I wished to examine, a large sample of young mothers was not available.

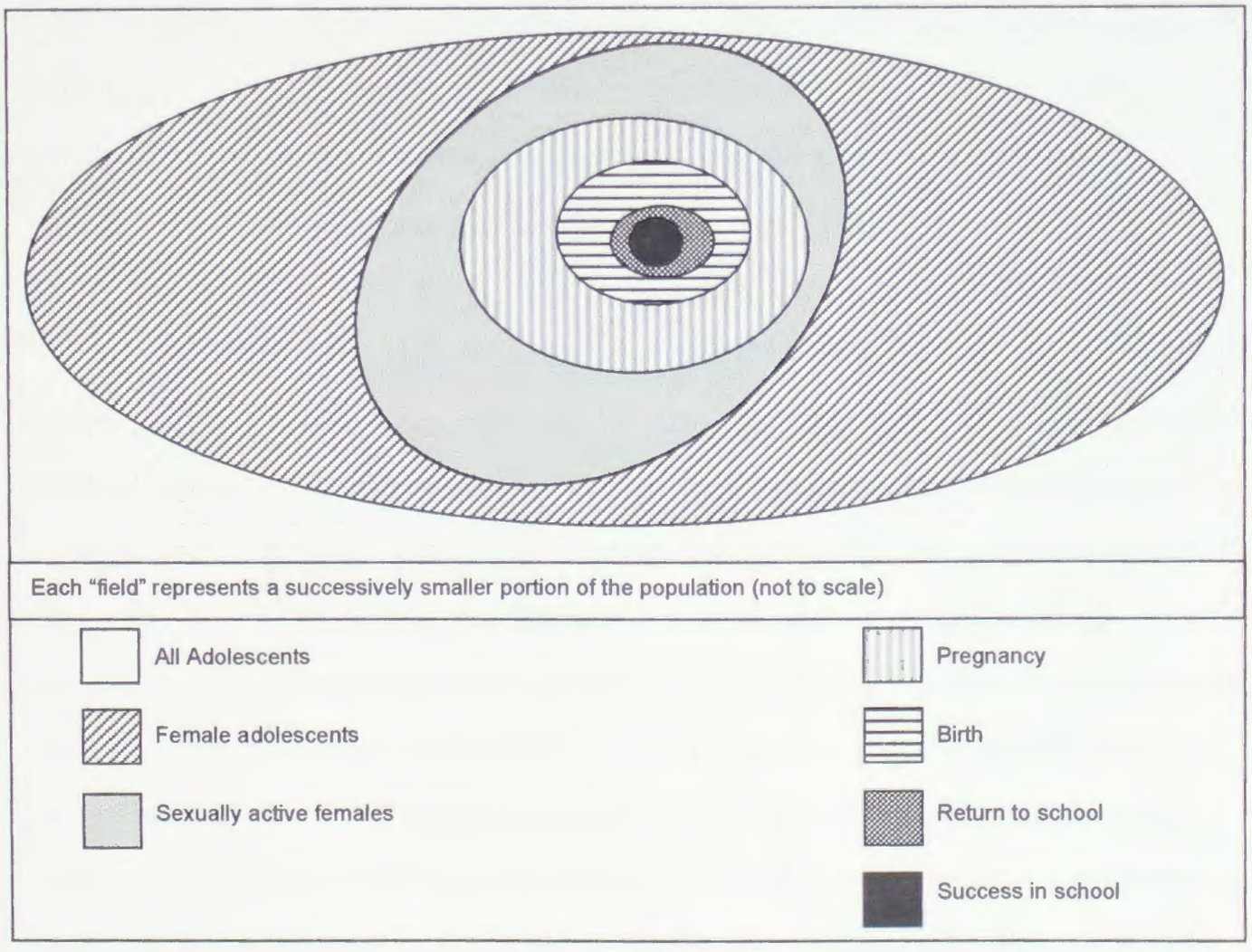

Figure 3. Sample of adolescents considered for study.

Survey respondents were identified during the service-provider interview phase. School counsellors and other service-providers suggested potential candidates. Introduction letters and consent forms (see Appendix F) were distributed to the candidates through the service-providers. Follow up consisted of identifying consenting candidates and arranging interviews for survey completion. For some candidates, these arrangements were made through the third party of the service-provider. Other candidates were contacted directly by phone to set up arrangements.

Participants were selected from both rural areas and urban centers. The terms "urban" and "rural" are used as per the Statistics Canada (1997) definition where urban includes areas with a minimum population concentration of 1,000 and a population density of at least 400 per square kilometre. Rural is defined as all geographic areas outside an urban centre. The urban centre was Kamloops and included all service-providers situated within the city limits. The rural centres included Barriere, Chase, Clearwater, and Logan Lake and their school catchment areas and included the service-providers situated within the village or town limits. Urban participants attended one of the seven Kamloops high schools, the alternate programs or the Cottonwood Centre GED program. Rural participants attended one of the community high schools or an alternate program within the town or village.

Selection bias.

In an attempt to obtain a district-wide representative selection of young mothers for the survey, each of the secondary schools was contacted and efforts made to include participants from each school. However, some schools did not have representatives. It quickly became apparent that the majority of the urban, school-attending young mothers attended one of the three programs associated with the special young-mothers subsidized day care. As well, one of the outlying schools was in the process of undergoing a change in staff during the course of the study and had no one in a position to recommend potential candidates. Another outlying school was unreachable for follow-up on potential young mother interviewees. Repeated attempts to get in touch with the service-provider during the course of the study (consisting of numerous telephone messages and a fax) yielded no response. Since no further contact was received from the service-provider and since the rest of the participants had been interviewed by this point it was decided not to pursue this source any further. Therefore, the results predominantly reflect the opinions of those mothers whose children attended the subsidized day-care in the city of Kamloops. Though this comprises a selection bias, it is also representative of the path that the majority of young mothers appeared to take.

Instruments

Description of Services

What services exist in SD #73 that facilitate young mothers' graduation? I obtained full descriptions of the roles of the different service-providers, the various components of their programs, their policies, a description of the staff roles, and any special programs that they offer. In order to guide these interviews, an interview protocol was used (see Appendix E).

A description of the services offered in other districts was requested through a letter to the superintendents of those districts. Enclosed with each letter was a stamped response card (see Appendix G).

Young Mother Questionnaire

The questionnaire addressed parts two and three of the research question. What specific educational paths facilitated successful educational attainment for young mothers and what do successful young mothers report about the helpfulness of certain components on their particular path? A self-administered questionnaire (see Appendix H) was developed and presented to 39 young women. The questionnaire was divided into the following sections: (a) General, (b) Path, (c) True/False, (d) Rating Scale, (e) Support Charts and (f) Unstructured Responses. The questionnaire items were coded for later sorting into the three categories of administration, support and program issues.

The General section examined some background details and provided information about the educational path taken. The Path section focussed entirely on the young mother's educational route. The True/False section looked at facilitative and obstructive issues and as well provided more information about the educational path. The 39 question Rating Scale was arrayed such that it covered topics within the domains of administrative issues, support issues and program issues. The scale ranged from 1 (strongly disagree) to 7 (strongly agree). Questions were written in a pattern to discourage a response set from developing with the respondents. For example, questions 8 and 9 address similar issues, namely the interruption of schooling caused by the birth and post-delivery period. These questions are phrased such that a strongly *agree* response to question 8 would also probably indicate a strongly *disagree* response

to question 9. Similar reversals were made in various other parts of the questionnaire attempting to discourage respondents from favoring a particular side of the scale (Palys, 1992). The Support Chart focused solely on institutional support during pregnancy and parenthood. Finally the Unstructured Response section invited respondents to add further detail on any of the areas previously addressed and allowed for the recording of spontaneous issues that may not have been addressed in the questionnaire.

Procedure

Data collection had two phases, service-provider interviews and young mother interviews and questionnaire completion. After each interview, a small token of appreciation was presented to the participants. Generally this took the form of some chocolates. When a meal was involved, it included picking up the tab for the meal. When children were present during an interview, they were allowed to choose a prize from a gift bag.

Rapport Building

It was important to establish "trust, rapport and authentic communication patterns with participants" (Janesick, 1994, p. 211). This was achieved with some of the service-providers through the renewing of past professional relationships. The young mothers were invited to talk and write about a topic that gave them pride, the accomplishment of a very difficult task. My status as a mother of two young children while juggling schooling and work appeared to provide some credibility and allowed a common ground to be established at the outset. The full process of the study was described to the participants during the initial phase of the interview. Participants were invited to discuss the process of the study as well as the actual research questions. The respondents were treated as the "experts" on the topic and it was explained that there were no "right" answers on the questionnaire. Generally, the rapport was quickly established and respondents were eager to share their stories. Field notes indicated a number of respondents were very pleased that someone from a school setting was taking the time to listen to their stories.

Service Provider Interviews

Collecting data from the various service-providers constituted the first stage of the study. The service-providers were initially contacted by telephone. In most cases, I was already professionally acquainted with the service-providers. Generally, the letter of introduction was sent after the initial phone contact. A second phone call was made to arrange an interview time. In some cases I was able to arrange an interview time during the first phone call and in these cases I brought the introduction letter with me.

The setting for most of the interviews was the work-place of the service-provider. In a few instances, the service-provider preferred being interviewed over the telephone. In two cases, school counsellors asked that I contact them at home in the evening when they felt that they had more time to be interviewed.

At the beginning of each interview I discussed the study generally and described how I hoped the service-provider would be able to help by providing information that would be useful. I then formally went through the interview protocol and took hand-written notes. I also collected any formal data that they had prepared. At the end of the interview, I thanked them and asked if they had any questions. Often they did have questions and this provided an opportunity to discuss the study further. Generally there was a high level of interest in the topic and a willingness to help. The interview time averaged 30 minutes. At one school, I was unable to interview a school counsellor because the position was undergoing a change in personnel and no one was available for interview.

Districts Information

In order to see how SD #73 compared to other districts, I wrote a letter to the superintendent of each district and requested information about whether the district operated a young mother program. Some districts chose to respond on the enclosed, stamped reply card. Others elected to respond to the email address that I had provided.

Questionnaire Administration

Once interview times had been set and consent forms signed and collected, I proceeded to interview each of the 39 young women.

Interview setting.

The interview setting varied according to the needs of the young women. For the young women who were still attending school, I arranged through the school counsellor, to interview them at their school. In some cases this occurred during their lunch hour. In other cases it occurred during a flexible block of time. Within the school, the interview settings were varied. They occurred in the back audio-visual room of the library, in a conference room, in a vacant counselling office, in a school kitchen, and in a classroom.

A second group comprised young women who were no longer in school and who were interviewed in their homes. Generally, these were women who lived with their child(ren) on their own or with a partner. I attempted to accommodate their needs as much as possible, and interviewing them in their home caused the least disruption in their lives.

A third group of mothers were interviewed in a public place. These mothers had completed their schooling and had other arrangements for childcare during the interview time. I met these women in a restaurant and over coffee, breakfast or lunch, interviewed them and had them complete the survey. In these cases I provided all the materials and covered the costs of the food and beverages. In some cases I also arranged for transportation by driving the participants to the destinations and returning them to their homes.

An offer to provide childcare costs for the interview time was made to each mother. Only one mother who had three children and who was paying for her childcare that day needed to take me up on my offer. The other mothers had their children with them, or they had made other arrangements.

The interview and survey could be completed in 30 minutes. However, I took my cue from the participants and paced the interview according to their needs. The interview time averaged about 50 minutes and a few interviews extended well beyond this time. In these cases the extra time was used to develop rapport and debrief the interview process.

Survey.

In most cases the young mothers completed the survey with few questions for clarification. An area that presented difficulty for some of the young women was section (b)

where they were asked to chart their path through the various educational institutions. A number of young women who had been out of the school system for a few years had difficulty remembering when they had attended each institution. As this problem presented itself within the first few surveys, I developed additional instructions for the participants. I suggested that each participant work backward from their most recently attended school. Additionally I asked them to estimate the dates and not be overly concerned with specific dates. These supplementary instructions appeared to help. Consequently the analysis of the educational paths did not focus on the dates since it was felt these could be inaccurate. On the Unstructured Response section, the respondents were encouraged to write down anything they felt was appropriate or meaningful.

In a few instances, the survey was read out loud to the participant and the answers dictated to the interviewer. This was done to accommodate the needs of the participant and unstructured responses were transcribed verbatim. In one case the survey instrument was mailed to an out-of-town participant and subsequently returned in completed form. The informal aspects of the interview were conducted electronically through email as this was the most convenient option for this respondent. This participant had moved away from the area but was interested in participating in the study.

Interview.

The interview portion of the meetings with the participants started with an introduction about the interviewer and a general discussion about the study. Once rapport was established, the questionnaire was completed. With the exceptions previously noted, the participants completed the questionnaire on their own. The interviewer was available for clarification as needed but generally, there were few questions asked. A general discussion of the research and/or the life experiences of the respondent followed questionnaire completion. This part of the interview varied in length. Some participants had little time to spare whereas others seemed eager to share their stories. Permission was requested to take field notes (hand-written notes of informal discussion) during this phase of the meeting. I concluded the meetings by thanking the participants and letting them know I would forward a summary of the study results once available if this had been requested on their consent forms.

Ethical Considerations

The identity of the respondents was protected throughout the progress of this study. Respondents were not identified in the specific responses recorded in this report. When they used names of other persons in their responses, a descriptor such as "child" or "teacher" was substituted. The communities in which specific respondents reside were not identified. Each respondent signed a consent form (see Appendix F) that described fully the nature of the study and the respondent's role in it. The few underage respondents who still lived with their parents were asked to have the consent form signed by a parent. Additionally, participants were informed of their right to withdraw from the study at any time without penalty. SD #73 administration and the University of Northern British Columbia granted approval to conduct the study (see Appendix I).

Respondents were not identified by name on the questionnaire. Completed questionnaires were placed into sealed envelopes. These envelopes were opened once all questionnaires were completed. The questionnaires were numbered one through thirty-nine, then during analysis, all references to the raw data were made through the number only. Questionnaires, interview protocols and consent forms were stored in a locked filing cabinet when not in use. Upon completion of the study, all questionnaires and interview protocols will be shredded.

If respondents wished to receive a summary copy of the results of the study they requested this at the bottom of the consent form (see Appendix F). A brief written report will be mailed to those respondents who wished to receive the summary. Once these reports are mailed, all records of names and addresses of those that requested the results will be destroyed.

Treatment of Data

Since the raw data took various forms, a description of how each data set was treated is described.

Service Provider Interviews

When the interviews with the service-providers were concluded, the field notes were transcribed. The field notes and any additional data provided by the interviewees constitute the basis of the descriptive results of these services.

Structured Responses

The structured survey data was comprised of sections: (a) General, (b) Path, (c) True/False, (d) Rating Scale, and (e) Support Charts. The data from the General, True/False and Support Chart sections were tallied and presented.

The data from the Path section was diagrammed to determine if there was an overall pattern. Each of the potential institutions was listed for the periods of pre-pregnancy, pregnancy, and parenting. Each questionnaire was assigned a color code and the path was traced. The paths were traced on the same diagram to determine if there was a particular path that was favored. Then the path charts were examined and a tally made of the number of respondents selecting an institution during a particular phase.

The Rating Scale section required a more detailed treatment. The data were first tallied and percentages were determined for each number on the Rating Scale. The data were then entered into a statistical program, SPSS (SPSS, 1995). Basic descriptive statistical results were determined and the data were charted and graphed to search for patterns. As well, the data were sorted and grouped according to the topic addressed. The data are descriptive and the sample is not random and so detailed statistical analyses were not considered appropriate for the data.

Unstructured Responses

The unstructured responses were first transcribed verbatim into a computer file. Each statement was tagged with the number assigned to the questionnaire. The data were then screened for themes. Where the data specifically addressed issues brought up in the survey, they were categorized as such. Some new themes also emerged. Codes were developed for the subordinate categories within each of the main topics of administration, support, and program.

As noted, a number of new categories cropped up in the Unstructured Response section. In part this was to be expected since there was a section entitled "other" where participants were

invited to comment upon issues that the survey had not covered. The statements that did not fit into existing categories were grouped to represent common themes. These new categories were included as a category within a major topic or added as an entirely new category if 25% or more of the respondents elected to comment on the theme. The categories that received less than 25% of the respondents making comments were grouped together and are presented as minor themes in Appendix B.

Within the general topic of Administration are the categories of Attendance, Childcare and Transportation. Within the general topic of Support are the categories of Staff Support and Hospital/homebound Support. Also within the topic of Support, new categories appeared including "self-reliance" and "support from others". Included within the Program topic is Part-time versus Full-time studies, Program choice (including transitions), Independent-Directed Studies, In-school Alternate programming, Course Challenge and Equivalency, and the Career Preparation program. An "other" program issues category also appeared within this topic. Finally, two new categories, which did not fit within any of the three predetermined topics, were addressed by sufficient numbers of respondents to warrant inclusion. These categories within the topic of Other are "hard school" and "future plans". The concept of educational path crosses all these topics. Figure 1 has now been adapted and is presented as Figure 4.

Each respondent statement was placed in only one category. Statements were usually not complete grammatical sentences that addressed a singular category or topic. They were often, run-on sentences that encompassed a number of themes. Therefore, statements were taken as fragments and the fragment placed in the appropriate category.

Once the fragments were organized thematically, they were reviewed to determine if further organization was warranted. For example, the category of staff support was further sorted into positive statements of support and negative statements of support. These subdivisions were further sorted into staff-type groupings. When the final sorting was completed, a tally was taken of the number of statements and the number of different respondents in each category. These numbers, along with the associated percents and totals are presented in the results section of this document.

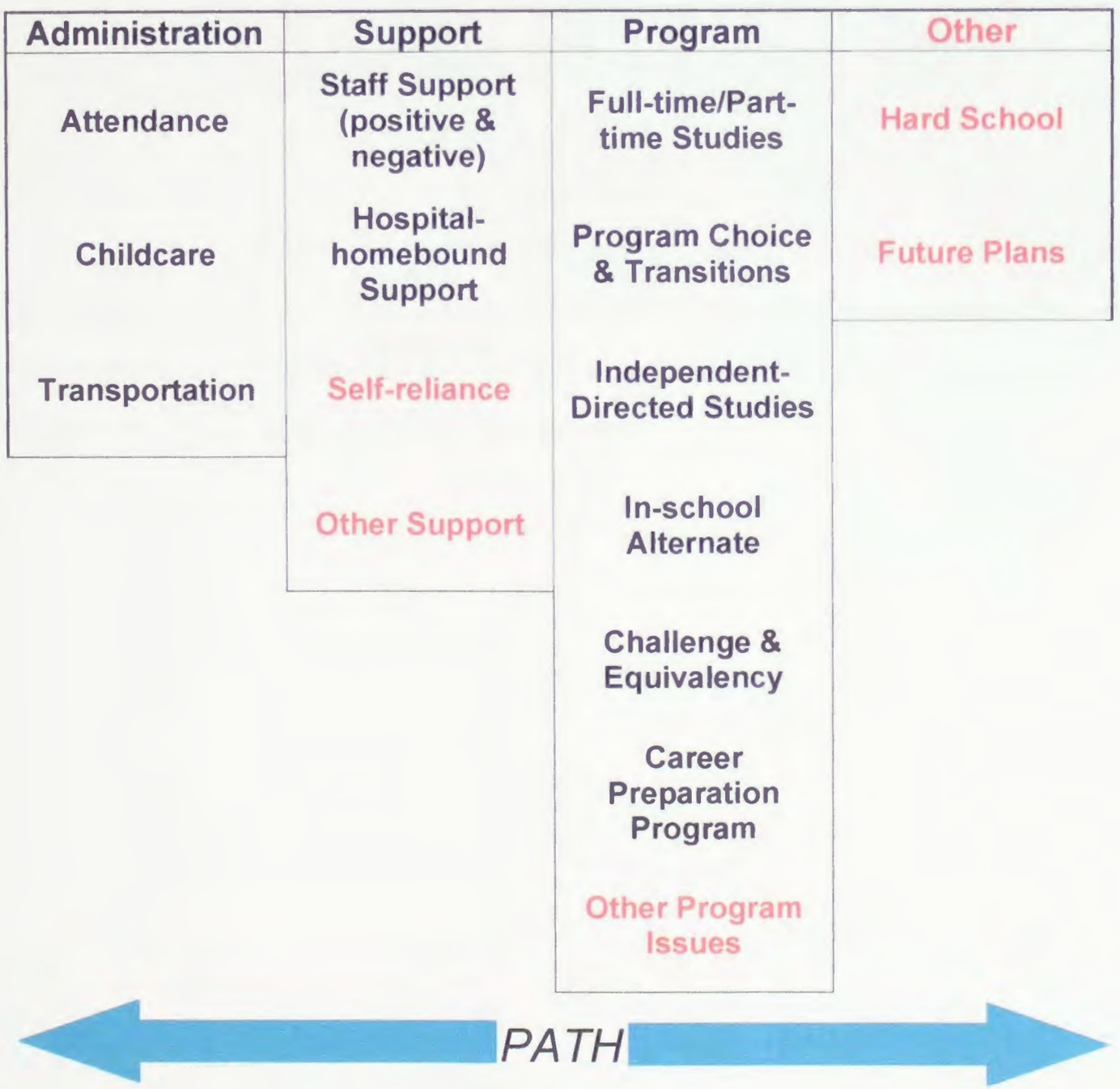

Figure 4. Organization of study data.

Field Notes

Field notes that were taken were transcribed into a computer document and kept separate from the statements made on the surveys. Because of the variability surrounding the time and circumstances in which these notes were taken, they are not considered an unbiased representation of the respondents' concerns. When field notes are referred to, they are clearly specified as field notes or notes from the informal interviews to distinguish them from the statements made by respondents on the questionnaires.

Summary

The data set collected for this study had a complex format. It did not lend itself to neat, straightforward analysis. The purpose of the study was to provide descriptive information to assist service-providers in their roles as they help young mothers reach their educational goals. Rarely is such an endeavor simple and straightforward.

Results

Service Providers

Counsellor Interviews

Information was received from ten schools. One high-school in the district was unable to provide a counsellor for an interview due to a change in staff. Seven of the counsellors included in the study were female and three were male. All the school counsellors contacted stated that they had no formal school policy that was special to pregnant or parenting teens. Five counsellors added, however, that the informal policy was to be flexible and helpful in developing and supporting an educational program.

Many of the services provided to this population were consistent across schools whereas other services were specific to the school or to the student's need. Career, academic, and personal counselling were offered at all schools. All counsellors maintained that at the very least they would provide the same services as for any other student. However, there were many additions to their role for this population. These additional services included providing options and helping to sort out choices, finding support for the student as needed, making necessary referrals, and working as a liaison between the school, parents, and community service-providers. One extra service that was described was arranging a special course at the school (a public health course for young mothers). Another service that was described was a counsellor-sponsored presentation to school staff about the issues of teen mothers attending a regular high

school. Some counsellors described doing family counselling as part of the process to getting the family a referral. One counsellor indicated that the counselling role involved "peeling back the layers" to determine how involved the student was with her family or doctor so that appropriate support could be implemented. Another counsellor indicated she had brought a young mother's case up at a community-professionals team meeting in order to help deliver necessary resources and services.

Counsellors indicated they would help the young mother plan and maintain her educational program. Maintenance of the educational program took many forms. Some young mothers were scheduled with a study block to provide time to complete work. Other young mothers were scheduled into self-paced courses (in-school alternate courses), often under the direction of a learning assistance teacher. For some young mothers, educational maintenance included liaison with teachers to arrange for planned absences to take external programs such as a public health workshop. Another counsellor demonstrated educational maintenance by arranging for the grandmother to bring the baby to school so the young mother could nurse her infant on a schedule and yet still remain in her regular school. Some use has been made of course equivalency for young mothers to help them garner sufficient credits for graduation.

Public health nurses were available as resources at all schools and school counsellors coordinated these services as needed. Counsellors also helped the student access other health resources such as the Birth Control Clinic, the STD Clinic and pre-natal counselling. Many of the counsellors discussed the role of the public health nurse in some detail. It was described that this role is being filled inconsistently across the district. In some schools, the public health nurse is described as an integral part of the school's service delivery team. In these cases the nurse has lots of contact with pregnant or parenting girls and may do follow-up at home. In these schools the nurse generally plays a significant role in the life of the pregnant or parenting student. In other schools, the public health nurse rarely deals with this population. Disappointment was expressed about this scenario.

Liaison with other service-providers occurred for all schools with the caveat that the schools in the outlying areas had a different relationship with particular service-providers. With

regard to the First Steps program, it was described that young mothers in outlying areas less often attended the Kamloops-based alternate program with the subsidized day care. Many urban school counsellors described the First Steps program as one of the major programs for referral. A number of school counsellors noted that fewer girls were now attending Marion Hilliard Pre-natal house than had previously been the case. Counsellors described that it was often a matter of providing information to the student and her family about the availability of programs and service-providers. The Baby's Headstart program was not often referred to during the interviews. School counsellors described an inconsistent use of the hospital-homebound resource for this population.

There were a large number of referrals occurring for this population but little tracking of the girls' programs occurred once the students left the school. It was described that information was provided and liaison occurred when appropriate but the relationship ended once a student left the school. It was described that sometimes other service-providers, who were in contact with the young mother, would keep in touch with the school, as opposed to the other way around. If a student changed schools, it was treated as a permanent transfer. In the outlying communities tracking was not an issue because often the student elected to remain in the home community to attend school.

The average number of pregnant and parenting girls in a school in any one year varied tremendously. Most counsellors reported that an average simply was not representational because from year to year the numbers varied considerably. Statistical data on this topic were not kept. Estimates of pregnant and parenting students in any one year ranged from zero or one for small schools to nine for the large high school associated with the Young Parents subsidized daycare. It was suggested by school counsellors that the number of pregnancies that were known about was likely far fewer than the number of actual pregnancies, particularly for the larger schools.

The type of programs that were typical for adolescent mothers varied by school. The seven urban high school counsellors stated that students would go through on a regular graduation program. Adult graduation from these schools was either very rare or non-existent.

The results for the outlying schools were mixed with one school reporting that most mothers would take an adult graduation program, another reporting that roughly equal numbers were in each program, and a third school stating that most went through on a regular program. The outlying school that had most of its young mothers going through on a regular graduation program also had, until very recently, access to a well-established community alternate school.

Counsellors reported a flexible attendance policy for school-attending mothers. The attendance expectations were described as generally individualized and attendance was monitored but rigid standards were not imposed. One school noted that the nature of the timetable and the student's selection of courses dictated the level of flexibility.

All schools reported an option of part-time attendance and that these students would be eligible for participation in an in-school alternate (ISA) program. However, there was not consistency in the ISA programs. Some schools had active, working alternate programs consisting of combinations of Pathfinders (a computer based learning program) Points (text based, self-directed), and correspondence or Open-school courses (text based, self-directed). Other schools had very limited resources in this area.

School counsellors described inconsistent use of course-challenge and equivalency procedures. Some counsellors reported no use of the challenge or equivalency option whereas others indicated they used the processes for specific courses.

Independent-Directed Studies (IDS) courses were similarly reported as being inconsistently used across the district. Two schools reported no use of IDS, two reported reserving it for a gifted and talented program, and one reported its use with an applied skills credit Some other schools reported its use for additional studies in French or Physical Education (e.g. volleyball). A few schools use the option in a more flexible manner allowing IDS programming in a broad variety of curricular areas.

Career Preparation was available in all of the schools. No schools indicated any special initiatives for encouraging young mothers to participate.

Attitudes and acceptance of teen mothers in regular high schools is mixed according to school counsellors. Most school counsellors reflected on the positive change in acceptance of

parenting students compared to10 or 20 years ago. Many also currently reported a positive, accepting atmosphere for school-attending young mothers. Some school counsellors reported that there were still some less accepting views evident in some staff members.

All counsellors were aware that there was only one on-site, subsidized daycare program in the district. This daycare provides services for students attending one high-school, one alternate school and one GED program. Practically, students attending other urban schools or students in outlying communities must find their own child-care. One counsellor commented that the girls from her school preferred to remain at the local school. It was reported that the family structure usually allowed someone from the family of origin to care for the children of these mothers.

Correspondence

The correspondence program accessed by schools in SD #73 is the South-Central Regional Correspondence school based in Merritt. It provides materials and academic support. The academic support is provided through tutors who are available by telephone. After students register, the programming depends on the situation. If something is unusual with the registration form or if there is a note from the previous school, there may be a personal contact made with the student prior to developing a program. For example, if the correspondence school counsellor knew that an 18 year old girl was pregnant and had not yet completed grade 11 and 12, then she might be counselled to pursue Adult Graduation.

The correspondence school does not have a specific policy regarding tracking of students. Follow-up with students depends upon available time. They distribute reports five times a year. If little progress is being made in a course then the counsellor might jot a note on the report card requesting information. If time permits, the correspondence school will phone or send a form letter that indicates the student will be withdrawn within 10 days for non-activity in a course. If the student resumes progress in the course then her status will be reactivated.

The ratio of adult versus regular graduation rates varies. Currently they have roughly 270 individuals in different degrees of completion on the adult program. Roughly twenty students per year complete requirements for a regular graduation program. However, these numbers are very

imprecise because often the course completion statistics go to the school of record and the student graduates from that school.

Students currently have a one-year time limit to complete a course. If students are registered in full-time correspondence then they can sign up for as many courses as they choose (full-time is considered seven courses). Generally they recommend one or two courses at a time for a student on the adult graduation program.

The correspondence school will offer Independent-Directed Study courses as needed and may offer course challenge or equivalency in some cases.

Hospital-Homebound Services

There are two hospital-homebound teachers providing 1.5 full-time equivalent service to SD #73 students. These teachers can provide up to three hours of direct schooling per week. They act as a liaison with the students' home schools and they deliver curriculum. They sometimes help with marking. They meet with the students at the students' homes or at Kamloops Community Learning Centre or at the Henry Grube Education Centre. A pregnant or parenting student would be eligible for services like any other homebound student. A student who is incapacitated by nausea, and consequently homebound, would be a candidate for their services. The two hospital-homebound teachers act as a liaison with other service-providers as needed. In the outlying communities, a substitute teacher would be hired to provide service for a student.

The goal of the hospital-homebound service is to be very accessible. The mandate is directed at those students whose education is interrupted because of absence from regular classes for an extended period of time. The primary function is to provide direct educational instruction and support to those students who are absent from school and to facilitate their re-entry into the school. The mandate is to focus on any student at any grade level who is confined to hospital, home or a rehabilitation institution for a period of ten days or longer. Exceptions may be made for some students away less than ten days. Students may be referred for the following reasons: Illness (physical or psychological), injury or pregnancy. The school maintains registration and program ownership of the student, and the homebound teacher acts as an agent

of the classroom teacher and the school. Materials will be picked up and delivered to the student and completed assignments returned to the teacher for marking. The amount of instructional time spent is determined by individual needs. Principals, counsellors, learning assistance teachers, and classroom teachers can make referrals.

Virtual School

In addition to the services offered by the hospital-homebound teacher, a new program called Virtual School has recently started in SD #73. This program allows students to do their schooling totally at home. It is electronically based and is a Ministry of Education accredited distance education program. In this program, a computer is provided to students at home, they are provided with Internet access, and they have access to a full time teacher for personal tutorial help or on-line assistance. There are a variety of course offerings and students have access to their local school for special classes such as music or French. Most of the current secondary course offerings are based on correspondence courses. Currently the program has a size restriction of 80 students. Intake occurs twice a year in September and January. There is wait list for the program since, unlike traditional schools, the Ministry caps the funding. Screening takes place through a written application and interview and students are selected who will likely do best in the program. They have developed a web-site at <http://www.sd73.bc.ca/virtualschool/Default.html>. To date, no teen mothers have accessed the program (T. Dale, personal communication, December 30, 1999).

Kamloops Alternate School

The Kamloops alternate school includes a senior and a junior Pathfinder lab (see Appendix D). The majority of the young mothers accessed the senior Pathfinder lab. A primary contact for these students was the School Support Worker (SSW) who has childcare and youth worker training. Other educational staff at this site included two teachers with backgrounds in English, Math and Science. The teachers and the SSW were available to all the students in the continuing education program but the SSW primarily focussed on the young mothers. An evening program staffed by two teachers was also available. Curriculum was administered through the Pathfinders computer program. Courses were also offered through the Points program. Other

specialized courses were also offered to the young mothers including a foods program offered through an organization known as Community Kitchens. A special fitness program and a swimming program for mother and child were also offered to these students. Life skills were taught and the mothers were taken on field trips to such places as the food bank.

The SSW monitored attendance for these students and was a liaison with the First Steps intake counsellor. Information was shared several times per week and monthly attendance was monitored. Continued registration in the First Steps program was conditional on achieving satisfactory attendance. The SSW also provided emotional support, helped with social networking, checked on academic progress, and implemented programs such as Community Kitchens. As well, the SSW did any necessary liaison work with other agencies or schools.

Students must register with the First Steps program in order to receive the subsidized day care services. If they have alternate childcare arrangements they may register as regular students. In order to qualify for the subsidized day care program, the mothers must log 18 hours per week (a full-time program) whereas a regular student may register on a part-time program. The computer monitors attendance and students must sign in and out each day. First Steps students are expected to attend Monday through Thursday. Friday is an optional day for those mothers who need to or wish to log more hours. Up to thirty young mothers are served in a school year at the Kamloops Alternate School.

Most of the young mothers were registered in the adult graduation program (about 75%). When they finish their program they are eligible to go through the school's commencement ceremony in June.

The SSW and teachers provided personal, career or educational counselling. A school counsellor was not available at the alternate school. Issues requiring more attention were referred to community services.

The daycare accessed by the mothers attending the alternate school is housed on the grounds of a nearby high school and was designed to serve the needs of the alternate program students and the high school mothers.

The alternate program also has access to a half-time work experience teacher. Primarily this position serves the junior program but is it open to some of the older students. This teacher noted that she is just starting to see older students become involved in the Career Preparation program. At the time of the service-provider interview, only one young mother had engaged in a work experience placement.

First Steps

First Steps is the name associated with a comprehensive young mother program in SD #73. The ten-year old program is the center of young mother services in the district. The program is sponsored by SD #73, Kamloops Youth Resources Society, the University College of the Cariboo, and the Boys and Girls Club. The staff includes a coordinator, a college instructor, daycare workers, a family support worker and a Kamloops Youth Resources counsellor. Facilities include two day-care sites, an administrative office, an intake and counselling office and a set of classrooms. The coordinator administrates the programs and supervises all the staff.

The program mandate is to provide an opportunity for young mothers to upgrade or complete their basic education in a supported environment. In addition to the school curriculum, the program provides day care, counselling, career and education planning, and parenting instruction. The program serves mothers who are14-24 years of age. If there are openings, mothers who are between 24 and 30 and who need to complete basic education (i.e., they have no grade 12) may be permitted to register. The age range for the mothers tends to be 18 to 20 for the GED program and the alternate school. The mothers attending the regular high school tend to be a little younger. According to the program coordinator, in an average year, the whole program serves roughly 50 mothers. Table 2 shows the available enrollment from First Steps. The whole program has a continuous intake until roughly mid-April but classes are in session from September to June. To qualify, potential students must have a child who is less than six years of age. Except for exceptional circumstances, students are required to attend school full-time in all the programs. School policies dictate specific hours of attendance.

Table 2

Enrollment in First Steps Programs for High School and Alternate School

School Year	Total	Returnees	Quit	Graduated	Post-Secondary.[a]
95/96	18	6	7	5	1
96/97	24	9	4	11	6
97/98	31	8	11	12	4
98/99	31	8	17	6	1

Note. Enrollment numbers were not available for the GRE program. Enrollment by institution was not available.
[a]Numbers in this column represent only those mothers who were *known* to move directly to post-secondary schooling and likely under-represent the numbers of mothers pursuing further education.

The intake worker reported that the trend has been that more mothers are now attending the alternate school than are attending the regular high school. In the 1998/99 school year, only two mothers attended the regular high school. In the spring of the 1999/2000 school year, no mothers were attending the regular high school whereas 20 mothers were attending the alternate school.

The alternate school and the high school attached to the day care offer separate programs. Each have advantages and disadvantages. The high school program meets the needs of more traditional students—school-age mothers who have support available to help them meet the institutional requirements for attendance. The alternate program caters to the other mothers. The high-school program has a dwindling population (no current registrants) and the alternate program seems to have expanded. Currently 20 mothers are participating. Consequently, some special considerations may be warranted. As of the spring of 2000, there is a proposal for a self-contained classroom at the alternate school that would serve the needs of the young mothers. This classroom would be staffed with a teacher and possibly a school support worker. One of the goals would be to provide a program that would alleviate the intensity of continuous self-directed learning. Currently, First Steps and alternate program staff try to do this through workshops, field trips and community presenters. Quarters are cramped, however, and the alternate facility and program were not really designed to accommodate this kind of special programming. Another goal is to provide direct parenting education similar to the content

of the First Steps GED program. A third goal is to provide the young mothers with a school environment that is responsive to their particular needs.

The First Steps daycare programs are part of a select group of school-based daycare centres in the province of British Columbia. There are only about 50 high schools in the province that have Young Parent programs (BC Ministry of Social Development, 1999a). The two First Steps day care centres are fully funded for the mothers and have a staff to child ratio of 1:3 because the children are classified as high-risk. One of the centres is on the grounds of the high school and provides care for up to 12 children under four years of age. This day care serves the mothers who attend the regular high school or the alternate school. A second day care is at the same site as the GED program and provides care for up to thirty children of the mothers who attend that program.

Students have the option of attending a regular high school, an alternate school or a GED program using Adult Basic Education (ABE) curriculum (see Appendix C). The first part of the process is the intake. Once contact is made with program personnel (directly or through a referral), the intake counsellor conducts a home-visit to determine an appropriate program. A number of issues affect program choice. If the mother was currently registered at a regular high school then she would generally be advised to attend the regular high school program. The mother's goals, age, ability level, and past educational history factor into the program choice. The living situation and level of support, the need for parenting skills and the need for the emotional safety provided by a small self-contained group also factor into the program choice.

Mothers who choose to work toward a regular high school graduation diploma or an adult graduation diploma may attend the associated high school or the alternate school. In practice, however, most mothers attended the alternate school. The students who did attend the regular high school were on a regular graduation program. The students who attended the alternate school participated on either a regular graduation program or an adult graduation program.

The GED program is housed in a community centre (Cottonwood Centre) adjacent to the high school. Hours of this program are from 9-12 and 1-3 with some flextime built into the program. The program employs a self-paced academic curriculum and students may be in the

program for up to five years. There are spots for twenty students. This non-degree educational program is designed for older mothers or for mothers who are not concerned with getting their high school graduation diploma. It is a comprehensive program taught by a college instructor using a college ABE curriculum. Generally the highest academic level that the ABE curriculum provides is the equivalent of grade 10, which will also prepare the mothers to write the GED (see Appendix D). Potentially, mothers could work beyond the grade 10 level of the ABE curriculum and work on courses that would be equivalent to grade 11 and 12. There is flexibility in the program to allow a student to attend other courses if she finishes the basic program early. Some mothers have attended the college for an upper level ABE computer course. Another has attended the alternate school in order to register in Accounting 11. The breakdown for the different components of the ABE program is 1/3 academics, 1/3 life-skills, and 1/3 parenting. As part of the parenting component, mothers do a practicum at the on-site daycare for a minimum of 15 hours. There is no fee for the ABE courses and students who are on income assistance can receive funding for texts and supplies. If the mothers complete the program (pass the required grade 10 level courses), then they receive a certificate and may participate in commencement ceremonies at the University College of the Cariboo. Very recently, the parenting course taught at the GED program has become eligible for credit for Family Studies 11 which is a Ministry of Education authorized course. This occurred through the equivalency process. Some mothers have elected to transfer to the alternate program to pursue a Provincial graduation diploma after spending time in the GED program.

Some counselling and related services are available to the young mothers. In addition to the regular teaching and support staff at the high school and the alternate school, the mothers attending those schools have access to a Kamloops Youth Resources counsellor who works from an office at the high school daycare. This counsellor conducts the initial intake to determine appropriate program placement, monitors attendance, provides personal counselling, provides parenting instruction and does outreach. The parenting component includes such topics as RCMP lady awareness, parenting videos on developmental issues, sexual assault centre information, information on custody issues, and Financial Aid Worker (FAW) issues (rights and

responsibilities). The mothers who attend the GED program have access to a full-time youth counsellor. This counsellor works directly with this program and is also available to help with the parenting component of the program.

For mothers at all the schools associated with First Steps, special programs are brought in; for example, the Salvation Army's good food box which helps the mothers deal with concrete issues such as providing enough nutritious food for themselves and their children. Poverty is a pervasive issue with these clients, and it is addressed formally through education and informally through personal counselling. Additionally, First Steps personnel try to provide for recreational opportunities for their clients. Activities include a mums' and tots' swim, a visit to a game farm, and exposure to different kinds of recreation such as playing tennis.

Marion Hilliard House

Marion Hilliard House is a Provincial pre-natal house sponsored by the Cariboo Home Society and overseen by a volunteer board. The home is under the umbrella of the Anglican Church. The Ministry for Children and Families provides 75% of the funding with the remainder provided through donations.

Clients for the program are in care either involuntarily or by agreement. This program has five components: Academic, individual and group counselling, parenting and life-skills, daily home and family management instruction and training, and prenatal classes. The coordinator also delivers the individual and group counselling. A house-mother manages the day-to-day aspects of the program. The clients are referred to community agencies when the need arises.

The academic requirements are met through attendance at a local high school, the alternate school, the First Nations Storefront School, or by registration in correspondence. The program policy requires all clients to attend school but this policy has been relaxed recently to accommodate the changing client base. Many current clients present multiple concerns. For example, a current client might suffer from mental illness, poverty, and low ability. When the client has very low ability and the secondary school options are not appropriate, then program staff flexibly work something out to accommodate the academic requirements.

Elda Marshall House

Elda Marshall post-natal house is unique in the province of British Columbia. This centre, which is administrated by Kamloops Family Resources Society (a charity organization), is a teaching home which helps young mothers prepare for independent living. Staff also conduct parenting assessments when requested by the Ministry for Children and Families. Services are provided for emergency clients such as a young mother with no support. As well, staff voluntarily provide outreach services for about 65 families. They also conduct teaching programs, such as infant first aid, as part of their voluntary outreach program. They publish a newsletter that is distributed to former clients. The primary mandate is for new mothers under the age of 21. They are mandated to accept only one mother at a time who is over 21. There is room for up to five mothers and their children. Clients are referred by a social worker. The girls may be in care by agreement, involuntarily or have previously been on social assistance. Clients do not fund their own stay at Elda Marshall house.

The agency encourages and supports continuing education but also supports a mother's decision to stay home to bond with her child. Staff supervise tests for clients and outreach clients as needed. Liaison with SD #73 personnel is informal and occurs as needed. A comprehensive parenting component is integral to the program. Clients live at the house and attend the mandatory teaching program for 4 1/2 to 6 months with the provision for an extension if needed. Each client has a key worker and she has weekly meetings with this worker for about one hour each week. The primary goal of these meetings is to help the young mother develop independence.

The centre employs five full-time and seven relief workers. All employees undergo intensive on-site training. For 1998, Elda Marshall house provided 938 person-days of care. During their fiscal year, they served 8 residential clients with 9 children, 3 emergency clients and 54 outreach families comprising 1858 contacts and 1097 person-hours of contact.

Public Health

Public Health runs a number of services and special programs that are accessed by the population of young pregnant and parenting girls. These include Nobody's Perfect (a parenting

program), the Birth Control Clinic, the Sexually Transmitted Disease (STD) clinic, and the Teen Prenatal program which offers a free rotating four-class series with continuous intake. Public Health also conducts home-visits once the young mother returns home with her infant. With high-risk families, public health nurses will do more intensive follow-up. Public Health also has a liaison nurse at the hospital who does screening for handicaps, low birth-weight, and interaction factors which make for high risk.

Other Programs

An interagency committee, devoted to advocacy for young mothers, exists in Kamloops. This committee, which handles referrals and shares information, meets every two months and has representatives from Elda Marshall house, Marion Hilliard house, First Steps program, Public Health (Nobody's Perfect), Kamloops Youth Resources (Families First), Kamloops Home Support (Baby's Headstart), and SD #73 (Alternate Program).

Baby's Headstart is a program run by the Kamloops Home Support agency. This agency provides support and counselling to young pregnant women and provides concrete support such as pre-natal vitamins and vouchers for milk. Kamloops Home Support will also provide support to young mothers through lay home visitors. These are paid positions where a helper goes into the home of the young mother.

PAID and Healthy Beginnings are two other programs run by Kamloops Home Support Society. PAID is a parenting program for both parents. This program offers weekly group meetings. Healthy Beginnings is a program that follows up after Baby's Headstart. This program offers group meetings run by parents and the focus is parenting and life skills.

Families First is a community program sponsored by Kamloops Youth Resources that supports mothers parenting for the first time. It includes intense follow-up for mothers who are high-risk such as those with low education, low socio-economic status, or relationship problems. This program's mandate is to reach out to parents who have a first child under six months of age. They provide in-home support, life skills, parenting, budgeting, and support for weekends (24-hour support through a pager number). They would even go to court with a young mother over custody. They will do follow through until a child is seven years old.

The Indian Friendship Centre informally provides support to young mothers. Young women can access personal and family counselling. As well, staff are skilled at providing referral services.

In addition to funding Elda Marshall house, Kamloops Family Resources Society provides a variety of services including pregnancy counselling, residential teaching, and outreach.

Childcare Subsidy Program

The British Columbia childcare subsidy program is designed to assist lower-income families so parents may attend school or enter the job market. Currently this program has an annual budget of $188 million and is administered by the Ministry of Social Development and Economic Security (BC Ministry of Social Development, 1999a). The subsidy program is income-tested which means eligibility for the program depends on a family's income level. Subsidy rates usually do not cover the entire cost of full-time day care and day care centres generally charge a monthly fee over and above the subsidy rate. In 1997 the extra costs averaged $100.00 per month (BC Ministry of Social Development, 1999a, 1999b). The First Steps program does not charge mothers a surcharge because of an historical agreement between the Ministry for Children and Families, Human Resources and the First Steps program. The maximum rate per child per month is $800.00 for the First Steps program and funding levels for similar programs across the province of British Columbia vary greatly. On the regular childcare subsidy program a mother can only get the subsidy rate for which a maximum is currently $585.00 (BC Ministry for Children, 1998).

There are other options to group daycare. A lower subsidy is available for a family-based daycare versus a group daycare. The family rate is the same whether the family daycare is licensed or unlicensed. A subsidy is also available for a babysitter to come into the home. With the exception of an in-home babysitter, the care-giver is paid the subsidy directly. For in-home babysitters, the parent is considered the employer and is entrusted with the subsidy funds.

Mothers who have no additional sources of childcare funding and who are limited to the usual subsidy rate must find an unlicensed or family childcare provider who is willing to accept the subsidy rate. Otherwise the mothers must find funds to cover the surcharge on their own.

District Contacts

A request was made of each of the 59 school districts in British Columbia to forward a contact name and number for any young mother programs offered in the district. Of the 59 districts contacted, 40 (68%) responded. Of those that responded, 7 (17.5%) indicated that they had no program in place, 30 (75%) indicated they had a program in place and 3 (7.5%) indicated that they did not have a program in place but young mothers attended their alternate school. The responding districts provided a variable level of information. Where there was a particular program in place for young mothers, the district contact persons provided a program title and contact information. In some cases program brochures or other information was forwarded. Appendix A provides details of the programs as provided by the contact persons. In the interests of privacy and because personnel changes over the years, the names of the contact people listed have not been included in this appendix. Interested parties may request this information by contacting the researcher.

Young Mothers

Structured Responses

Section (a) General.

The mean age of the respondents was 20.54 years old with a range of 9 years. The youngest respondent interviewed was 16 and the oldest was 25. The mean age of first birth was 17.47 years with range of 8 years and a standard deviation of 1.899. The youngest age of first birth was 15 and the oldest was 23. The modal age was 16 with roughly 26% of the mothers giving birth at age 16. Figure 5 describes the data on age of first birth (n=38).

The child's birth-month was surveyed to determine the level of potential disruption to schooling by a summer birth. Seven (or roughly 18%) of the births occurred in the summer.

The modal number of months that intervened before mothers returned to school was more than 12 months with roughly 29% of the mothers responding that more than 12 months intervened. Figure 6 shows the actual numbers of respondents reporting in each category and those same responses grouped into less than and greater than six months intervening. Even

though the modal number of months intervening before the return to school was 12, Figure 6 shows that more mothers actually returned to school in six months or less.

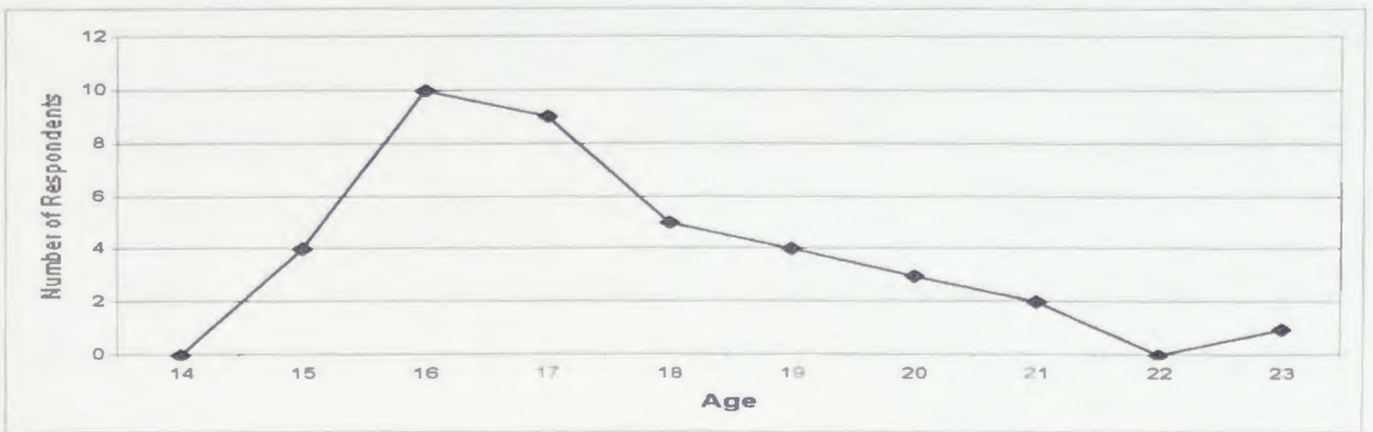

Figure 5 Age at first birth

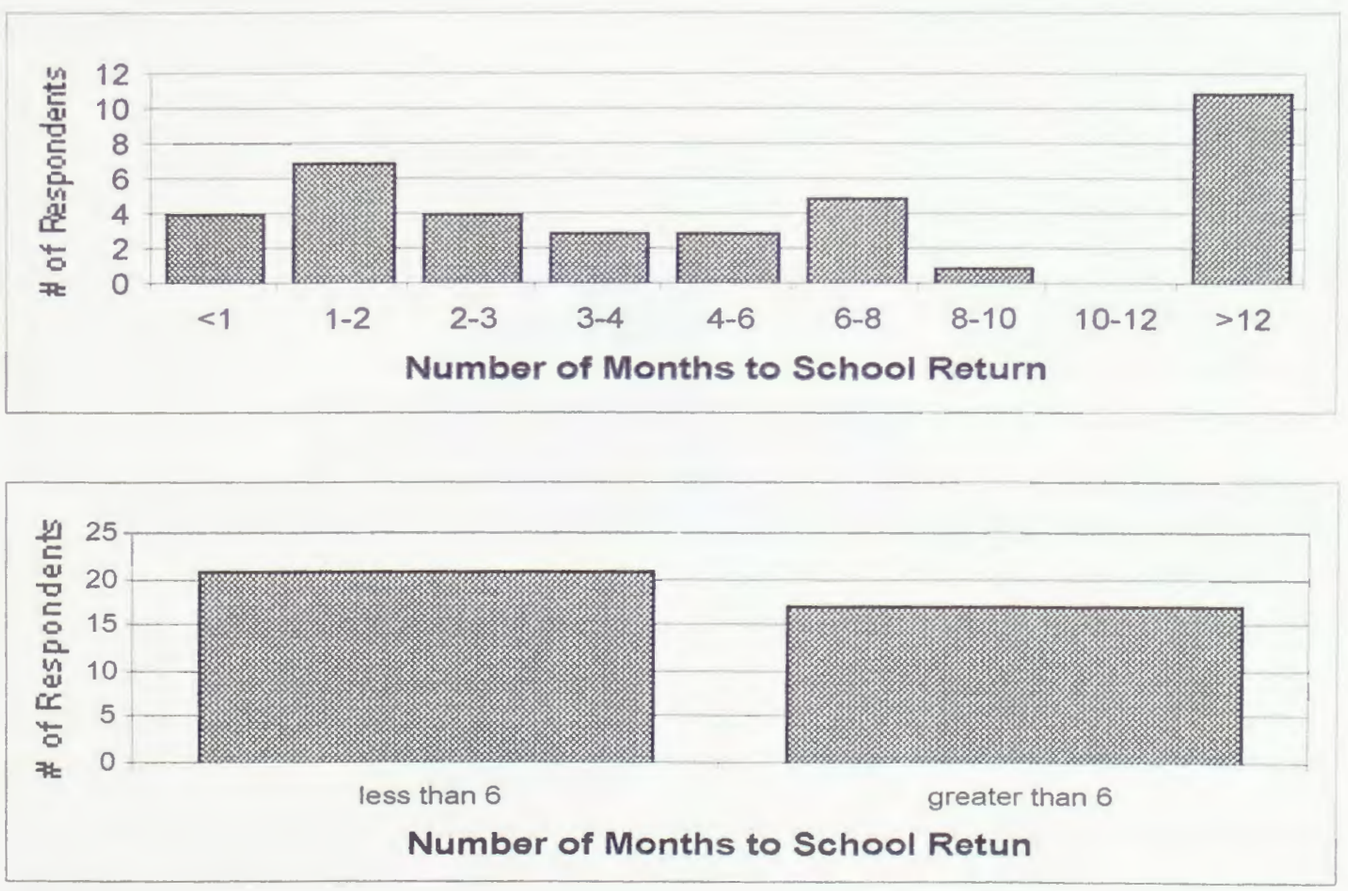

Figure 6 Number of months intervening before return to school.

Most young women only had one child while attending school. Five of the mothers had more than one child while attending school.

Most respondents were Caucasian with 34 or roughly 87% reporting this ethnic category. The only other ethnic category reported was First Nations with five or roughly 13% of the respondents reporting First Nations background. These values are compared to Provincial and National statistics in the discussion.

Most respondents reported no religious affiliation as this option was selected by 26 or roughly 67% of the respondents. The remaining 33% of the respondents indicated they were actively Catholic (8), Protestant (4) or other (Mormon, 1).

Roughly 64% or 25 of the respondents were enrolled in school at the time each learned she was pregnant. Grade ten was the modal grade of those who were enrolled with a response rate of 40% (see Figure 7).

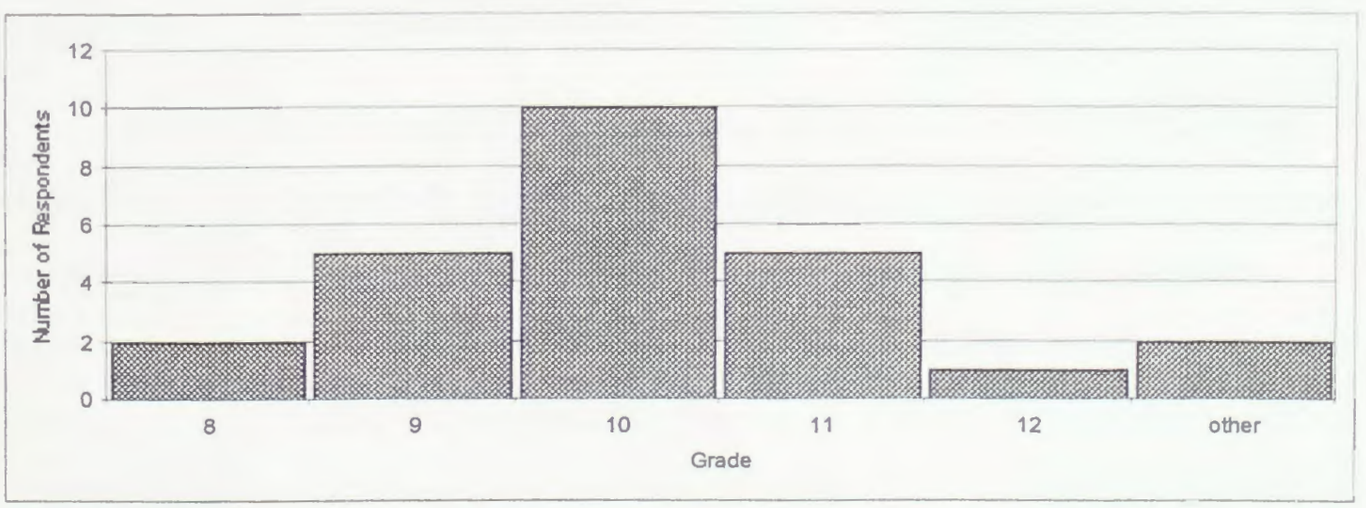

Figure 7. Grade enrolled in at time of pregnancy. N=25.

Roughly 59% or 23 of the respondents reported that they had not failed any grades prior to their pregnancy. Of the 16 respondents who reported grade failure, the majority of the failure (roughly 74%) occurred at the junior secondary level. A total of 19 grades were reported as failed by the 16 respondents. One subject reported two failed grades and another subject reported three failed grades. Of the 16 subjects who had reached senior secondary school prior to their pregnancy, 5 or roughly 31% reported failure of one or more courses.

Program enrollment just prior to pregnancy was very mixed. Most respondents indicated they were enrolled in regular school (21 respondents or roughly 54%) but a variety of other programs were also identified (see Table 3).

Table 3

Program Enrollment Choices Just Prior to Pregnancy

Type of program	Respondents	
	Number	Percent
Regular school attending full-time	21	54
Regular school attending part-time	0	0
In-school alternate program	1	3
Kamloops alternate school	2	5
Alternate program in an outlying school	1	3
Correspondence	1	3
Home school	0	0
Other [a]	5	13
Not in school	8	21

Note. All percents are rounded to the nearest whole number. N=39.
[a] Includes a school of esthetics, Abbotsford alternate school, University College of the Cariboo work experience program, a GED program in Alberta and a nail technician program.

Respondents indicated attendance most often in a Kamloops school just prior to and during pregnancy (see Table 4). Thirteen, or a third, of the respondents indicated that they were not in school for all or part of their pregnancy and a number of respondents indicated they attended school in another city during their pregnancy. The centres listed for school attendance prior to pregnancy included Toronto, Abbotsford, Vancouver, Prince George, Alberta, Bella Coola, Vanderhoof, Canmore, Chilliwack and East Vancouver. The centres listed for school attendance during pregnancy were Toronto, Abbotsford (two respondents), Vancouver, Alberta, and Canmore. Of those who indicated they were not in school during their pregnancy, four indicated they dropped out during the course of the pregnancy whereas nine (23% of all respondents) indicated they were not in school at all during the course of their pregnancy.

Table 4

Area of School Attendance

	Urban		Rural		Other		Not in School	
	No.	%	No.	%	No.	%	No.	%
Prior to pregnancy	17	44	4	10	10	26	8	21
During pregnancy[a]	21	48	4	9	6	14	13	30
After birth, first area[b]	28	74	5	13	5	13	-	-

Note The percent column reflects percent of question responses versus the percent of all respondents. Except for the note listed, n=39. [a]Respondents were permitted to select more than one area if they were transient during pregnancy. Therefore, 44 areas were selected by 39 respondents. [b]Due to one respondent not yet having given birth, n=38.

Participants were asked to indicate the latest month of their pregnancy that each attended school. If school attendance is broken down by pregnancy trimester, then roughly 10% attended only for the first trimester, roughly 21% attended into the second trimester and roughly 46% of all respondents indicated they attended into the third trimester. Roughly 33% of all respondents indicated that they attended school for the full term of their pregnancy. This was the modal response. If only those mothers who attended school at all during their pregnancy are included (n=30) then the numbers of those who went full term rises to roughly 43%. Figure 8 represents the latest month of pregnancy in which the respondents attended school.

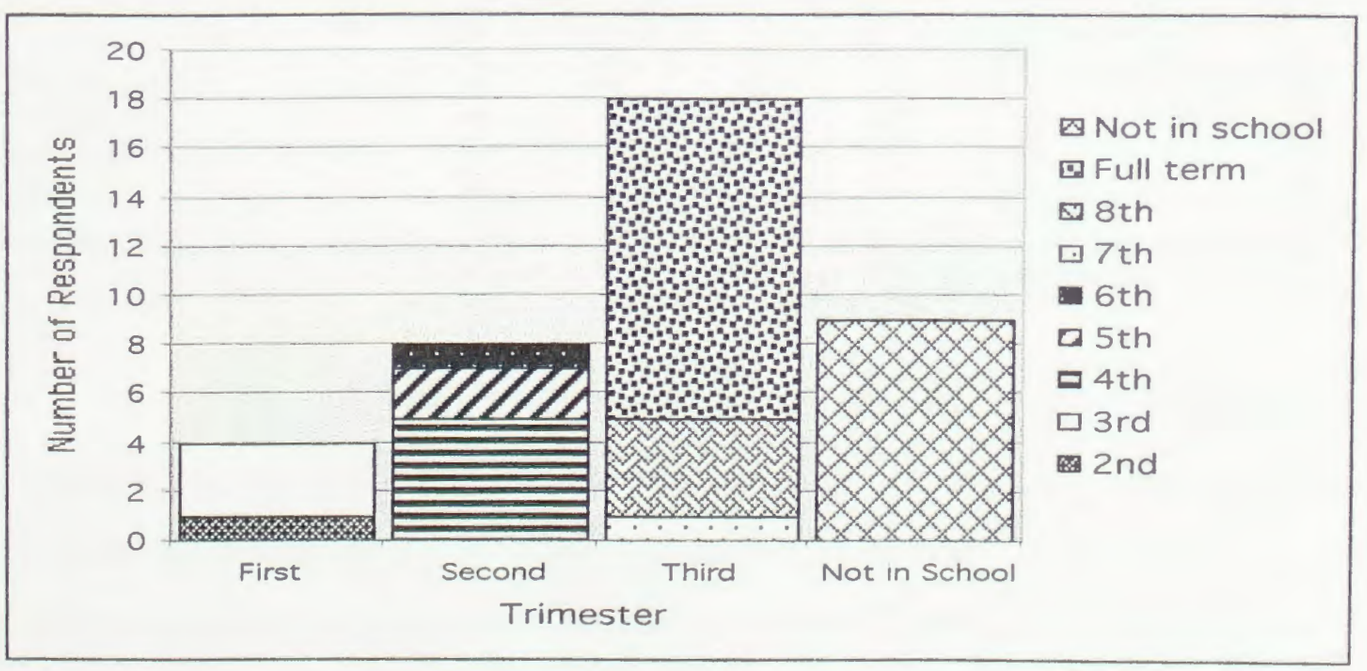

Figure 8. Latest month of pregnancy for school attendance.

Section (b) Paths.

The respondents charted their educational paths. The path components were identified as taking place during three time periods: pre-pregnancy, pregnancy, and parenting. For these time periods, respondents were asked to identify the institution that they attended. The main results from this section are listed in Table 5. Additional results not listed in the table include four respondents listing correspondence as a schooling option during one of the periods, and two respondents listing a rural alternate program as a schooling option during one of the periods. No respondents indicated that they attended an in-school alternate program or took part in an other (non-correspondence) home schooling program. This is inconsistent with the results from question 13 where one respondent indicated she attended an in-school alternate program prior to her pregnancy. An examination of the raw data indicated that, on her path chart, this respondent indicated she attended an urban school during pre-pregnancy. These two answers are not inconsistent but reflect a misunderstanding about how to complete the path chart. Only 6 respondents indicated that they attended a rural program at some point during the three periods.

Table 5

Identified Major Component of Educational Path

	Out of school		Other		Alternate School		Urban	
	No.	%	No.	%	No.	%	No.	%
Pre-Pregnancy [a]	14	36	18	46	2	5	22	56
Pregnancy [a]	17	44	9	23	7	18	12	31
Parenting [b]	18	50	7	19	17	44	13	36
Total [a]	22	56	20	51	21	54	26	67

Note. Numbers in the total row do not reflect the sum of the column but rather the total number of respondents who selected that item during at least one time period. All percents are rounded to the nearest whole number.
[a] N=39. [b] N=36.

The last school of attendance is listed in Table 6 for all respondents. This final school represents either the school the student graduated from or the school of current attendance. The results are reported for all respondents and for all parenting respondents because three respondents were not currently parenting and this could have a bearing on their choice of school.

Table 6

Last School of Attendance

	All respondents [a]		All parenting respondents [b]	
School	No.	%	No.	%
Kamloops Alternate	18	46	18	50
Urban	10	26	7	19
First Steps	5	13	5	14
Rural	4	10	4	11
Rural alternate	1	3	1	3
Other	1	3	1	3

Note. All percents are rounded to the nearest whole number.
[a] N=39. [b] N=36.

Respondents were orally asked to indicate the type of program they were enrolled in on the Path chart. Of the 39 respondents surveyed, 35 indicated the program in which they were enrolled. The possible programs are regular graduation program, adult graduation program, and GED program. Table 7 displays these data.

Table 7

Enrollment by Program

	Regular	Adult	ABE	Not indicated
Number[a]	20	10	5	4
Percent	51	26	13	10

Note. All percents are rounded to the nearest whole number.
[a] N=39

Section (c) True/False.

The True/False section of the questionnaire allowed respondents to select not applicable (NA) if they felt that the question did not apply to them. Therefore the total number of respondents (n value) varies with each question. When the expression "the respondents" is used for this section it refers to the respondents to that question as opposed to all respondents (n=39). The n value will be reported for each question but the results are more easily compared when viewed as a percentage. The percentage has been rounded up or down in the standard fashion to the nearest percent but the reader is reminded that it is not an exact representation of the number of responses. For the purposes of brevity, the word "roughly" has been eliminated from

the expression of the percent but in each case it is implied. Table 8 summarizes the data set from the True and False section.

Part-time school attendance in a regular school was indicated as an option during pregnancy by 38% of the respondents (n=29) and during parenting by 40% of the respondents (n=30). During pregnancy, 28% of the respondents indicated it was not an option and 34% indicated they did not know. During parenting, 40% indicated it was not an option and 20% indicated they did not know.

Ten percent of the respondents (n=30) indicated they took an Independent-Directed Studies course during high school. Thirty percent indicated they had the option of taking an alternate course at their regular high school (n=31). Thirty-five percent of respondents indicated this was not an option. The same percent indicated that they did not know if it was an option. Twenty-one percent (n=33) of the respondents thought that a course challenge was an option whereas 42% indicated it was not an option and 36% indicated they did not know if it was an option.

The Career Preparation program had a participation rate of 25% (n=36). During pregnancy, 43% of the respondents (n=30) felt it was not available and 33% did not know if it was available as opposed to 23% who indicated it was available. During parenting, 21% (n=34) thought it was unavailable but 35% did not know if it was available whereas 44% indicated that it was available to them.

The final True or False question asked if the respondent returned to her regular school program after the birth of her child. On this question, 60% (n=35) indicated they had returned to their regular school program.

Table 8

Data from True or False Section

#	Question	N	True No.	True %	False No.	False %	Don't Know No.	Don't Know %
1	Part-time school available during pregnancy	n=29	11	38	8	28	10	34
2	Part-time school available during parenting	n=30	12	40	12	40	6	20
3	Took IDS during grade 11 or 12	n=30	3	10	27	90	--	--
4	ISA option at regular high school	n=31	9	29	11	35	11	35
5	Course challenge option	n=33	7	21	14	42	12	36
6	Participated in Career Preparation	n=36	9	25	27	75	--	--
7	Career Prep available during pregnancy	n=30	7	23	13	43	10	33
8	Career Prep available during parenting	n=34	15	44	7	21	12	35
9	Returned to regular school after birth	n=35	21	60	14	40	--	--

Section (d) Rating Scale.

Rating scale items addressed administrative, support and program issues. In general the results appeared to fall on the poles of the scale. When data have this pattern, reporting of a mean is not a useful statistic. The most frequent or modal score provides more information. With these data, a u-shaped bimodal pattern was often observed. This overall U shaped pattern in the data is demonstrated in Figure 9 where all the Rating Scale data have been plotted on a histogram. A high standard deviation also demonstrates the bipolar nature of the data and this can be seen in Table 9.

Tables 9 through 11 present the Rating Scale data. Because each item offered respondents the option of selecting NA (not applicable), the total number of respondents (n value) varies for each question. Therefore, for each item, the n value will be reported as well as the mean and, more informatively, the mode (and minor mode if it occurs). The standard deviation is also reported for each item. The reader is reminded that the standard deviation will have more meaning when the n-value is greater than 20. As well, included for each item, is the percent of all respondents (n=39) that answered the question and the percent of responses to each value on the Rating Scale. In each case this percentage is rounded to the nearest whole number in the traditional manner. The range is not displayed. For all items it is seven with the exception of numbers 27 and 28 where the range is one.

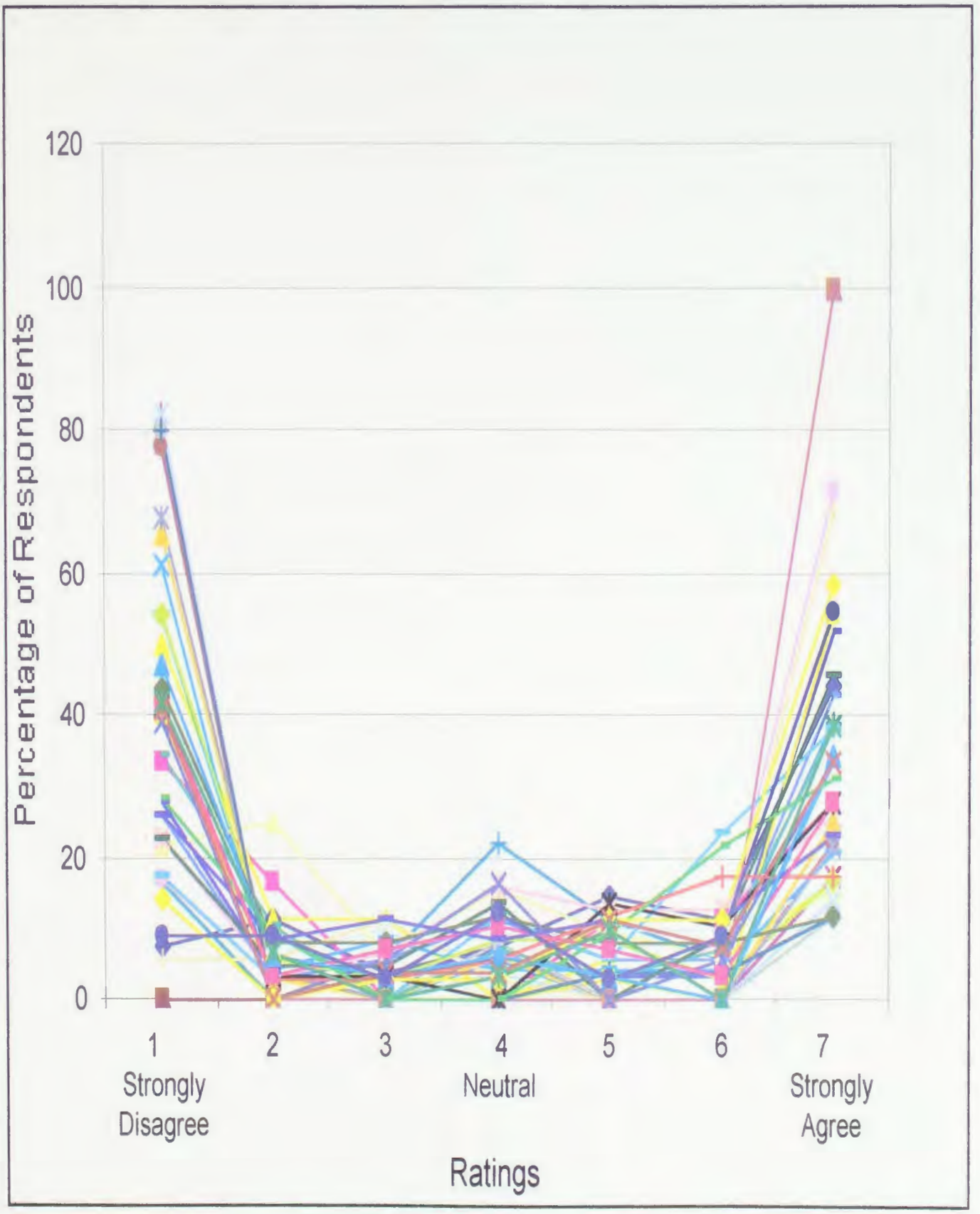

Figure 9 Rating Scale data showing bipolar nature of findings.

Table 9

Rating Scale Results for Administrative Issues

#	Question	N	% [a]	M	SD	Mode	Minor mode [b]	Percent of responses on Rating Scale						
								Strongly Disagree						Strongly Agree
								1	2	3	4	5	6	7
1	During my pregnancy, it was easy to obtain permission to be excused from class to attend medical appts.	27	69	5.22	2.10	7	-	7	11	4	7	15	11	44
2	Pregnancy-induced nausea caused me to miss school more frequently than usual.	18	46	3.83	2.66	1	7	33	17	0	0	11	11	28
3	Missed classes due to nausea disrupted my schooling.	18	46	2.83	2.41	1	-	50	11	11	0	6	6	17
4	Missed classes due to nausea interrupted my schooling and caused me to **drop** one or more courses.	18	46	3.17	2.87	1	7	61	0	0	6	0	0	33
5	Missed classes due to nausea interrupted my schooling and caused me to **fail** one or more courses.	17	44	2.06	2.36	1	-	82	0	0	0	0	0	18
6	Missed classes due to nausea interrupted my schooling and caused me to drop out of school.	18	46	2.33	2.57	1	-	78	0	0	0	0	0	22
8	I was able to quickly return to my regular school program after the birth of my child.	29	74	4.72	2.68	7	1	28	3	3	7	3	3	52
9	The birth and post-delivery recovery period interrupted my schooling.	24	62	2.96	2.53	1	-	54	4	8	4	4	4	21
10	After the birth of my child, I missed a significant amount of school in a single term due to medical appts.	30	77	3.27	2.43	1	-	43	7	10	3	10	10	17
11	After the birth of my child, I missed a significant amount of school in a single term due to my child's illness.	32	82	3.47	2.16	2	-	22	25	6	16	9	6	16
12	Missed classes due to my infant's illness(es) caused me to drop out of school.	28	72	1.96	2.17	1	-	82	0	0	4	0	0	14
17	My school's administrators were understanding when I missed school due to my child's illness.	34	87	5.09	2.26	7	-	18	3	0	12	6	24	38
14	I was able to access a daycare convenient to my school.	35	90	5.74	2.36	7	-	17	3	0	0	0	9	71
15	It was easy to find suitable childcare while I attended school.	35	90	5.77	2.06	7	-	6	6	11	3	0	6	69
16	When my child was ill, I had help to care for him/her.	35	90	4.57	2.55	7	-	26	3	6	11	6	6	43
18	I had difficulty transporting my child to childcare so I could attend school.	35	90	2.89	2.41	1	-	54	6	3	9	9	3	17
19	I usually walked to transport my child to childcare so I could attend school.	35	90	4.40	2.95	7	1	40	3	0	0	3	0	54
20	I usually relied on public transit to transport my child to childcare so I could attend school.	32	82	2.72	2.62	1	-	66	3	0	6	0	0	25
21	Prior to my delivery I relied on a school bus to attend school.	28	72	2.54	2.50	1	-	68	4	0	7	0	0	21
22	If I did not need to transport my child to childcare, I would take a school bus to school.	25	64	1.96	2.07	1	-	80	0	0	0	4	4	12

Note. Percentages are rounded to the nearest whole number. Question numbers reflect numbers from the questionnaire but in some cases they have been reordered so that common topics may be grouped for analysis. [a] Represents the percentage who responded to the item relative to all respondents (n=39). [b] Minor mode is reported only if applicable.

Table 10

Rating Scale Results for Support Issues

#	Question	N	% [a]	M	SD	Mode	Minor mode [b]	Percent of responses on Rating Scale						
								Strongly Disagree						Strongly Agree
								1	2	3	4	5	6	7
7	When I missed classes due to nausea or medical appointments, I received support to make up missed work.	18	46	4.83	2.23	7	-	17	0	6	22	11	6	39
13	After the birth of my child, when I missed school for medical reasons, I received support to make up the work.	31	79	4.35	2.29	7	-	23	3	6	16	13	13	26
23	I received helpful services from the hospital-homebound support teacher during my pre-natal and post-natal period.	25	64	2.04	2.15	1	-	80	0	0	0	4	4	12
24	It would have been helpful to receive the services of a teacher during my pre-natal through post-natal period when I wasn't attending school.	29	74	4.07	2.74	7	1	34	10	0	7	3	7	38
27	At Marion Hilliard pre-natal house, the environment was supportive of continuing my high school education.	2	5	7.00	0.00	7	-	0	0	0	0	0	0	100
28	At Elda Marshall Post-natal house, the environment was supportive of continuing my high school education.	4	10	7.00	0.00	7	-	0	0	0	0	0	0	100

Note. Percentages are rounded to the nearest whole number. Question numbers reflect numbers from the questionnaire but in some cases they have been reordered so that common topics may be grouped for analysis. [a] Represents the percentage who responded to the item relative to all respondents (n=39). [b] Minor mode is reported only if applicable.

Table 11

Rating Scale Results for Program Issues

#	Question	N	% [a]	M	SD	Mode	Minor mode [b]	Percent of responses on Rating Scale						
								Strongly Disagree						Strongly Agree
								1	2	3	4	5	6	7
30	Part-time school attendance would have been helpful for me when I was pregnant.	29	74	3.83	2.67	1	-	41	3	3	0	14	10	28
31	Part-time school attendance would have been helpful for me when I was parenting.	34	87	3.68	2.52	1	-	41	3	3	6	12	18	18
32	It was difficult to attend school full time during my pregnancy.	32	82	4.47	2.57	7	1	28	9	0	0	9	22	31
33	It was difficult to attend school full time when I was parenting.	35	90	3.97	2.36	1	7	26	9	11	9	11	11	23
34	I felt involved in planning my high school program.	36	92	5.64	2.13	7	-	14	0	3	3	11	11	58
25	I felt my school counsellor was knowledgeable about the transitions I made between programs during my pregnancy and parenting periods.	22	56	4.73	2.55	7	-	23	5	5	14	0	9	45
26	I found the transitions between programs difficult.	25	64	3.04	2.26	1	-	44	8	8	12	8	8	12
29	I changed schools after the birth of my child but I would have preferred to remain at my regular school if appropriate programs were available.	18	46	3.72	2.76	1	7	39	0	5	17	0	6	33
35	Had they been available, I would have taken Independent Directed Studies courses when I was pregnant.	29	74	3.59	2.58	1	7	41	3	7	10	7	3	28
36	Had they been available, I would have taken Independent Directed Studies courses when I was parenting.	32	82	3.50	2.76	1	7	47	6	3	6	3	0	34
37	Had they been available, I would have taken in-school alternate courses during my pregnancy.	27	69	4.00	2.72	1	7	41	0	4	4	11	7	33
38	Had they been available, I would have taken in-school alternate courses when I was parenting.	31	79	3.87	2.80	1	7	42	6	0	3	10	0	39
39	Had they been available, I would have taken course challenges for courses such as Family Management 11 and/or 12.	33	85	5.36	2.19	7	-	9	9	3	12	3	9	55

Note. Percentages are rounded to the nearest whole number. Question numbers reflect numbers from the questionnaire but in some cases they have been reordered so that common topics may be grouped for analysis. [a] Represents the percentage who responded to the item relative to all respondents (n=39). [b] Minor mode is reported only if applicable.

Section (e) Support Charts.

Respondents were asked to identify the percentage of persons in each category that they felt were supportive, neutral, and non-supportive. These results are presented in Table 12. Non-professional staff included all other school staff members including secretaries, custodians, hallway supervisors and school support workers. If a respondent did not attend school during pregnancy or parenting they did not complete the chart. Therefore the n value differs for each table.

Table 12

Support While Attending School During Pregnancy

Group	Supportive		Neutral		Non-Supportive	
	M	SD	M	SD	M	SD
Teachers	52.73	43.17	33.18	41.30	14.09	27.84
Counsellors	44.55	50.12	46.14	50.43	9.32	29.37
Administrators	24.77	35.71	54.32	44.33	20.91	33.37
Non-professional	36.36	43.81	56.82	46.25	6.82	21.63

Note. N=22. Numbers in the M column represent the mean percent for each option.

Table 13

Support While Attending School During Parenting

Group	Supportive		Neutral		Non-Supportive	
	M	SD	M	SD	M	SD
Teachers	71.63	38.12	20.86	35.86	7.51	20.16
Counsellors	72.29	43.41	24.86	41.95	2.86	14.41
Administrators	55.57	44.34	30.86	42.80	13.57	29.79
Non-professional	63.29	45.71	29.00	43.37	7.71	24.29

Note. N=35. Numbers in the M column represent the mean percent for each option. Only 35 of the total of 39 respondents completed this chart because 2 respondents chose adoption and 1 respondent had not yet given birth. A final respondent who did not complete this chart indicated elsewhere on her questionnaire that she had graduated shortly after the birth of her child.

Unstructured Responses

The data from the Unstructured Response section of the questionnaire were organized into the categories of administrative issues, support issues, and program issues. A number of the subtopics within each category were predetermined and listed on the Unstructured Response section. Other topics within each of the three categories were brought up spontaneously. As well, entirely new topics where brought up spontaneously by the respondents. Where these topics received attention from 25% or more of the respondents, they are included in the results section. A summary of all of the major categories is found in Appendix B. Where new topics received attention from less than 25% of the respondents, they are included in Appendix B. Tables 14 through 17 summarize the major results from the Unstructured Response section of the survey. Numbers that are represented as a percent have been rounded to the nearest whole number in the traditional manner.

Table 14

Administrative Issues

	Attendance [a]	Childcare	Transportation	Total
No. of Responses	42	30	24	96
% of Responses	44%	31%	25%	100%
No. of Respondents	23	21	23	30[b]
% of Respondents	77%	70%	77%	100% [b]
%of All Respondents [c]	59%	54%	59%	77%[b]

Note. [a]This category represents responses classified under the sub-topics of attendance and illness (see Appendix B). [b] Some participants responded in more than one category, therefore this number reflects overall respondents and is not equivalent to the sum of the categories. [c]N=39.

Table 15

Support Issues

	Unsupportive Staff	Supportive Staff	Hospital-Homebound	Self-reliance[a]	Other Support[ab]	Total
No. of Responses	30	53	9	20	16	128
% of Responses	23%	41%	7%	16%	13%	100%
No. of Respondents	19	29	9	16	13	37[c]
% of Respondents	51%	78%	24%	43%	35%	100%[c]
% of All Respondents[d]	49%	74%	23%	41%	33%	95%[c]

Note. [a]New category spontaneously introduced by at least 25% of respondents. [b]Other support reflects mostly positive support (14 responses and 11 respondents). [c]Some participants responded in more than one category, therefore this number reflects overall respondents and is not equivalent to the sum of the categories. [d] N=39.

Table 16

Program Issues

Topic	FT/PT	Program[a]	IDS	ISA	Challenge	CP	Other[b]	Total
No. of Responses	17	17	6	3	8	3	20	74
% of Responses	23%	23%	8%	4%	11%	4%	27%	100%
No. of Respondents	17	13	6	3	8	3	16	34[c]
% of Respondents	50%	38%	18%	9%	24%	9%	47%	100%[c]
% of all Respondents[d]	44%	33%	15%	8%	21%	8%	41%	87%[c]

Note. [a]Reflects expressions of school choice and transitions between schools. [b]New category spontaneously introduced by at least 25% of respondents. [c]Some participants responded in more than one category, therefore this number reflects overall respondents and is not equivalent to the sum of the categories. [d]N=39.

Table 17

Other Issues

Topic	Hard School[a]	Future Plans[a]	Total
No. of Responses	16	11	27
% of Responses	59%	41%	100%
No. of Respondents	13	11	20[b]
% of Respondents	65%	55%	100%[b]
% of all Respondents[c]	33%	28%	51%[b]

Note. [a]New category spontaneously introduced by at least 25% of respondents. [b] Some participants responded in more than one category, therefore this number reflects overall respondents and is not equivalent to the sum of the categories. [c]N=39.

Discussion

The data for this study comes from two major sources: service-provider interviews and a survey of young mothers. The questionnaire items were broken into a number of different sections that had different formats. This study examines institutional obstacles and includes the themes of administrative issues, support issues and program issues. Some other issues also cropped up and are discussed. The concept of a path to graduation traverses all three themes (see Figure 4). The discussion is arranged according to these themes and will draw from the varied data sources. As mentioned elsewhere in this report, the sample is limited to those mothers who had already successfully negotiated the obstacles to graduation or were in the process of doing so. It bears repeating that the sample was chosen in order to evaluate the experiences of those mothers who had the most contact with the obstacles inherent in educational institutions. This study focused on the areas of the educational program that were lacking and the areas that were helpful.

Administration

The category of administrative obstacles encompasses the domains of attendance, childcare and transportation. The ability of a young mother to negotiate the obstacles in these domains will greatly affect her chances of eventual success. These issues are intertwined with those of support and program design but for clarity, they are addressed separately here.

Attendance

School attendance encompasses daily attendance, late arrival and early departure. Attendance at school during pregnancy and parenting phases was evaluated separately in the structured part of the questionnaire because different issues affect it. The sorting of data from the Unstructured Response section of the questionnaire did not make a distinction between attendance during pregnancy and parenting. During pregnancy, medical appointments, nausea, other pregnancy-related illnesses, and fatigue could affect attendance. During parenting, medical appointments and fatigue still may cause attendance concerns but additional issues of maternal illness (including post-natal depression) and infant illness could cause problems. Interview results indicated that from the perspective of school professionals, the young mothers and mothers-to-be are treated individually and a flexible attendance policy is employed.

The majority of the respondents that missed school due to medical appointments during pregnancy agreed that this form of absenteeism caused few problems with the administration (see Table 9). Even when nausea was an issue for school-attending pregnant women and it caused them to miss more school than usual, the majority felt it did not disrupt their schooling or cause them to drop or fail courses or drop out of school. Young mothers who missed school due to their children's illnesses similarly reported few problems. They indicated that the administration was understanding (Rating Scale item 17, Table 9). In spite of these results some young mothers did struggle with attendance issues. Roughly 26% of all respondents made some comment about attendance causing problems on the Unstructured Response section of the survey (see Table B3) and 18% expressed a comment about a sick child (see Table B4). Nausea was reported as the cause of dropped courses and failed courses for some women. For roughly 22% of the girls, who both experienced nausea and attended school during pregnancy, this health concern was identified as the reason for dropping out of school. Weisner (1984) recorded similar findings in her study of re-entry women. She found that one-fifth of the women who dropped out listed physical or mental health as the primary reason for withdrawal. At least one urban high school has an attendance policy of 80%. For some young women this is hard to achieve, especially if their infants are ill. Children in daycare who fall ill must be cared for in an alternate

setting. Many of the young mothers indicated that they did not have help to care for sick children and so absenteeism from school was unavoidable. In the words of one respondent "if your child was taking an antibiotic, then you had to miss a day in case of an allergic reaction. Usually I stayed home then." Though most of the mothers did not face such a drastic choice, of concern are the mothers who cited infant illness as a cause of dropping out of school.

Childcare

The concept of affordable, convenient, competent childcare is tied directly to the issue of school attendance. There were many positive comments made by the respondents about day care with the majority of the mothers reporting that childcare was both convenient to access and easy to find. This is not surprising since a minimum of 59% of the mothers indicated that they attended a program connected to the First Steps daycare (see Tables 5 and 6). However, there were still 13 responses and more than half of the responding mothers who indicated some difficulty with daycare in the Unstructured Response section of the survey. Only one on-site daycare exists in the district. Students attending one high school and the district alternate programs (including the GED program) can access this subsidized daycare. Students attending other in-town schools or students in outlying communities must find their own daycare. No other subsidized program exists. Accessing group daycare is often not an option for these mothers since most daycare centres demand a surcharge, which averages $100.00 per month, on top of the subsidy rate. If she has no other source of childcare funds, a mother on welfare has to make up this surcharge out of her total monthly allotment. In the words of a former director of a community-based non-profit childcare centre, child-care funds must be diverted from "grocery money" (BC Ministry of Social Development, 1999a, p. 5). The option presented by personnel at the offices for childcare subsidy is that the mothers find a childcare provider who will provide daycare for the subsidy rate. The subsidy rate is substantially below the going rate and as explained in a recent Ministerial discussion paper, "poor quality care environments are much more likely to be found in the unlicensed, unregulated child care sector" (BC Ministry of Social Development, 1999a, p. 3). These facts dictate many of the decisions for the young mothers. Issues such as which school to attend may be decided by what kind of childcare the young

mother can afford. If the First Steps program has a waiting list, then school attendance itself is likely in jeopardy. This notion is supported by other research which found that childcare related issues interfered with the ability of a parent to pursue education (BC Ministry of Social Development, 1999a). A mother who lives in a different part of the city from the First Steps program or in an outlying community faces difficult choices if she is unable to afford group daycare or unable to find competent childcare for the subsidy rate. She has a choice of either moving (possibly away from peer group and family) or negotiating often complicated transportation routes with a child in tow. In fact almost half of the young mothers indicated that they had changed schools after the birth of their child and over a third indicated they would have preferred to remain at their regular schools had appropriate programs been available. An awareness of this obstacle on the part of school counsellors might highlight the need to develop a flexible part-time program that would allow a young mother to place her child in care for part of the week and still meet educational obligations.

Transportation

Transportation was included as an institutional obstacle because of the role that the school district has in bussing students from a distance. Some mothers may be eligible for a transportation subsidy. If a mother must take two or more busses in order to get to the alternate school then she would be eligible for a bus pass after the first month. However, knowledge of this subsidy appears to be variable and even mothers who lived across town remarked that they did not have a bus pass to get to a First Steps associated program. From the Unstructured Response section, a clear trend exists in favor of transportation being cited as a problem for this population (see Table B6). This finding is consistent with the research finding of Weisner (1984) in her study of re-entry women. In that study, transportation was problematic for almost all of the women but particularly for those with children. In the Unstructured Response section, one third of all of the custodial mothers in the current study characterized transportation as a problem. The following excerpt from a respondent's survey exemplifies the ramifications of transportation on the lives of a young mother and her infant. "After having [my] child we lived in Sahali so transportation was a big issue. I wasn't sure how I would get him and myself all the way across

town. I ended up leaving my house at about quarter to seven to get to school on time." Images of struggling young mothers are easy to visualize when listening to statements like, "I walked with a stroller. It is Hell in the winter especially. I pulled my child to school in a Rubbermaid tub in the snow." Another mother told the following story,

> sometimes when I was waiting for a bus with my child the bus would drive by. I had to make a transfer every morning. My stroller was a cheap one and the wheel fell off and so it was taped on with duct tape. My child kept climbing out of it. It was a horrible experience. One time my child got frost-bite on her fingers—it was winter and I was running with the buggy. Sometimes I had to carry my child under my arm and push the stroller. Plus I had a backpack for my books. It would be really important to have a bus pass because that is $45/month out of your cheque.

According to responses from the Rating Scale, the majority of mothers walked to school and daycare while 8 custodial mothers or 22% (n=36) used public transit to transport themselves and their child. Some mothers (15% of all respondents) used a school bus prior to delivery but only a few mothers said they would be relying on a school bus for transportation if they did not have their child with them. The whole issue of getting to school each day is an obstacle that seems worthy of attention even if it is only to examine the possibility of assuring a public transit subsidy for mothers who choose to attend one of the First Steps programs.

Support

Young mothers derive support for pursuit of their education from a variety of sources. Specifically the issues of Staff Support and Hospital-homebound Support were targeted in the survey. The additional areas of support by family and by self (self-reliance) were spontaneously addressed in the Unstructured Response section of the survey.

Staff Support

In general, school staff members were viewed as more supportive than non-supportive with respect to the respondent's absenteeism (Rating Scale items 7 and 13). When the Unstructured Response items on this topic were summarized (see Tables B7 and B8) it was determined that 74% of all respondents made statements about experiences of support versus 49% of all respondents who made statements about experiences of lack of support.

There were more comments referring to non-supportive teachers versus administrators, other staff, and undefined. This may reflect the fact that students generally have more contact with teachers than with other staff members. This serves as an important reminder about the tremendous impact that teachers have on the lives of individual students. Roughly equal numbers of respondents reported non-supportive experiences with teachers and with administrators.

A number of respondents made both negative and positive statements about support. This appears to be contradictory. However, it is worth describing the behavior of the respondents as they completed the survey. When they came to the Unstructured Response section of the survey, many respondents recalled various incidents of support or lack of support. Respondents were encouraged to record on the survey anything that they felt was relevant so the results in this section appear to reflect a gathering of thoughts versus a distinct overall feeling one way or other. Even though the results appear contradictory, I felt it important to report them as written rather than try and determine if there was an overall theme about support for each individual survey. The latter approach, I felt, could introduce researcher bias.

In contrast to the Unstructured Response data, when the support charts are examined (Tables 12 and 13) teachers are seen as more supportive than the other three groups during pregnancy and more supportive than administrators or other staff members during parenting. Teachers were rated as only marginally less supportive than counsellors during parenting. Administrators did not fare so well in the ratings of young mothers. Administrators were seen as the least supportive of young mothers during both pregnancy and parenting though they also received the highest neutral rating during the parenting period. The charts also show that overall, more support was perceived during the parenting phase than during the pregnancy phase. This may reflect that many staff members may not have known about the respondent's pregnancy since not all mothers went to full term while attending school.

Despite the evidence of experienced support, of concern is the group (see Table 10) who somewhat or strongly disagreed that they felt supported around absenteeism due to nausea or medical appointments or for medical reasons. Linked to this question are the respondents who

somewhat or strongly disagreed that their school's administrators demonstrated understanding about absenteeism due to a child's illness (see Table 9). Though these respondents are in the minority and clearly many respondents felt supported, there appears to be a group that did not feel supported by school personnel during this very difficult time in their lives. Ideally, the lines of communication are very clear and open between the young mother and relevant school personnel so that legitimate absenteeism does not trigger unnecessary distress in the form of hassle around missed due dates or attendance percentages. The influence of school personnel on the lives of young mothers is communicated well by one mother who stated,

> [the administrator] told me to find another babysitter [and said] 'I don't care who you have to find, just find someone' when my child was sick and she couldn't go to daycare. I was new to town and I had a sick baby. I didn't know anyone.

On the other hand, the respondents were equally open about kindnesses they had encountered. One mother related how school personnel had helped her when her childcare arrangements faltered. She stated "[they] said I could take my baby to school and work in the kitchen. I was so close to finishing. One time [the teacher] taught Shakespeare with the baby sleeping on his shoulder." Maintaining a balance between accountability and accommodation is tricky. If repeated absenteeism interferes with the ability of a mother to manage course work then perhaps alternate arrangements are necessary.

Hospital-Homebound Support

The role of hospital-homebound support is worthy of increased attention considering the difficulties this population sometimes has with attendance and absenteeism. It could be that hospital-homebound support could have great impact during key periods when school perseverance is most tenuous. Though respondents were evenly divided as to the perceived helpfulness of a hospital-homebound support teacher, 36% of all respondents felt it would have been a helpful service yet only 13% of all respondents reported having received these services during the pre-natal or post-natal periods. It is unclear from the data what causes this gap in service delivery. It may simply be an oversight on the part of referring professionals. Or it may be that what the respondents would like in terms of service extends beyond the mandate of this resource. If a goal is to help these young women continue their education then perhaps more

use could be made of the hospital-homebound teacher. This position includes pregnancy as part of its formal service mandate. Extending the support to mothers homebound by new or ill infants does not seem unreasonable.

Self-Reliance and Other Support

The notions of self-reliance and support from other sources were brought up spontaneously in the Unstructured Response section of the survey. They are included as major findings since these topics were brought up by more than a quarter of all respondents (see Table 15). Neither topic falls within the domain of an institutional obstacle but it appears that the respondents felt these issues had a significant impact on their success at school. An understanding of these issues will assist those who are in a position to help these young women.

The topic of self-reliance is multi-faceted. It partly reflects the notion that the experience of pregnancy and parenting triggered some sort of change in the mother. Forty-one percent of all respondents spontaneously brought up this issue. It appears from the comments of these respondents that they underwent positive change that led them to be more self-directed, goal-oriented and self-reliant. Other mothers commented on a new maturity. These findings of a new directness arising after becoming a mother are consistent with the results of other researchers (Kelly, 1996b,1997; Smithbattle, 1994). This change was embraced by some while others accepted it more grudgingly since it seemed to be associated with a distance from the pre-pregnancy peer group. This complex theme is best described using the words of the respondents. One respondent wrote, "your friends don't change but you do. Suddenly they seem boring and immature." Another commented that returning to school while parenting enabled her to "be a better role model for [her] wonderful daughter." Yet another mother expressed disappointment with herself when she found out she was pregnant but then stated that she "took on the responsibility and changed [her] life." The idea that there can be positive outcomes of pregnancy in very young women is a topic that is seldom addressed in the literature. This is not surprising given the politics of the issue. Any reported positive outcomes associated with teen motherhood might be misconstrued as advocacy for this path. However it is worth considering that the future is not entirely gloomy once a pregnant teenager decides to become a mother.

Instead of perpetuating the media stereotype of a life of misery, a young mother might be encouraged to reach farther if more attention was devoted to the possibilities along this path.

Support from other sources was another topic that was brought up spontaneously by many respondents. A third of all respondents reflected on the level of support derived from family or others. Most (88%) of these statements reflected positive support. The crucial nature of this support is best described by one young mother who wrote, "I had a lot of help before and after my pregnancy from many friends and especially family! I don't know if I would have made it without them." This theme is supported in the literature (Colletta et al., 1980; Davis, 1994). Weisner (1984), in her study of re-entry women has made similar observations. In her study, a distinction is made between instrumental and emotional support. The descriptions of the mothers in the current study fall into both categories but clearly instrumental support is important. The respondents described instrumental support in a variety of ways from help with transportation, to advocacy with school administration, to help caring for a sick child so the mother could continue to attend school.

Program

The program category encompasses a range of topics. There are a number of specific programs tailored for this population. Additionally, many program options available for other high-school students have particular relevance for young mothers.

Full-time and Part-time Studies

The issue of whether young mothers would prefer to attend school part-time versus full-time yielded some unexpected results. At the outset of the study, I imagined that the concept of part-time schooling would solve many of the difficulties of school-attending young mothers. Clearly this was a naïve assumption and reflects a simplified view of the schooling issues of this population. The concept of part-time school attendance has multiple layers. Study participants responded in a bipolar fashion to questions on the desirability of part-time school. In terms of the perceived helpfulness of part-time schooling, when the Rating Scale responses are grouped on either side of neutral there was a difference of only one respondent during pregnancy and no difference during parenting. However, the respondents who disagreed that part-time school

would have been helpful, indicated they to felt more strongly about the issue than those who agreed (see Figure 10).

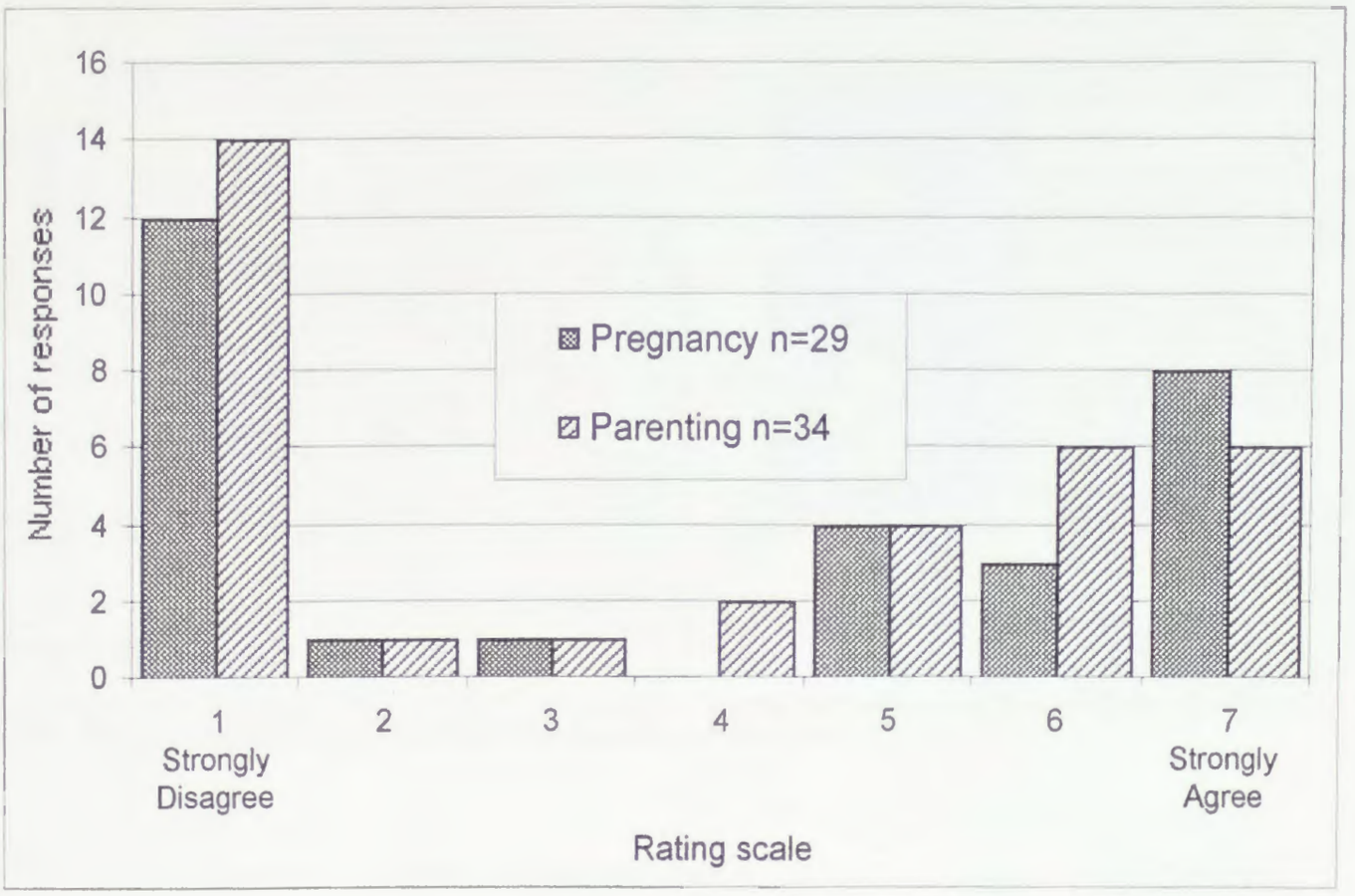

Figure 10. Helpfulness of part-time school attendance.

Preference to attend full-time or part-time was not necessarily related to the perceived difficulty of school attendance during pregnancy and parenting (Rating Scale items 32 and 33). Even though the preference for part-time school was evenly divided, more respondents indicated that full-time school attendance was difficult during pregnancy or parenthood. Therefore, it would appear that simply finding it difficult to attend school full-time does not mean that part-time attendance is necessarily desired. More respondents found full-time attendance difficult while pregnant than while parenting (see Figure 11). To complicate the matter further, 46% of all respondents either did not know, or believed that part-time schooling was not an option during pregnancy and parenting.

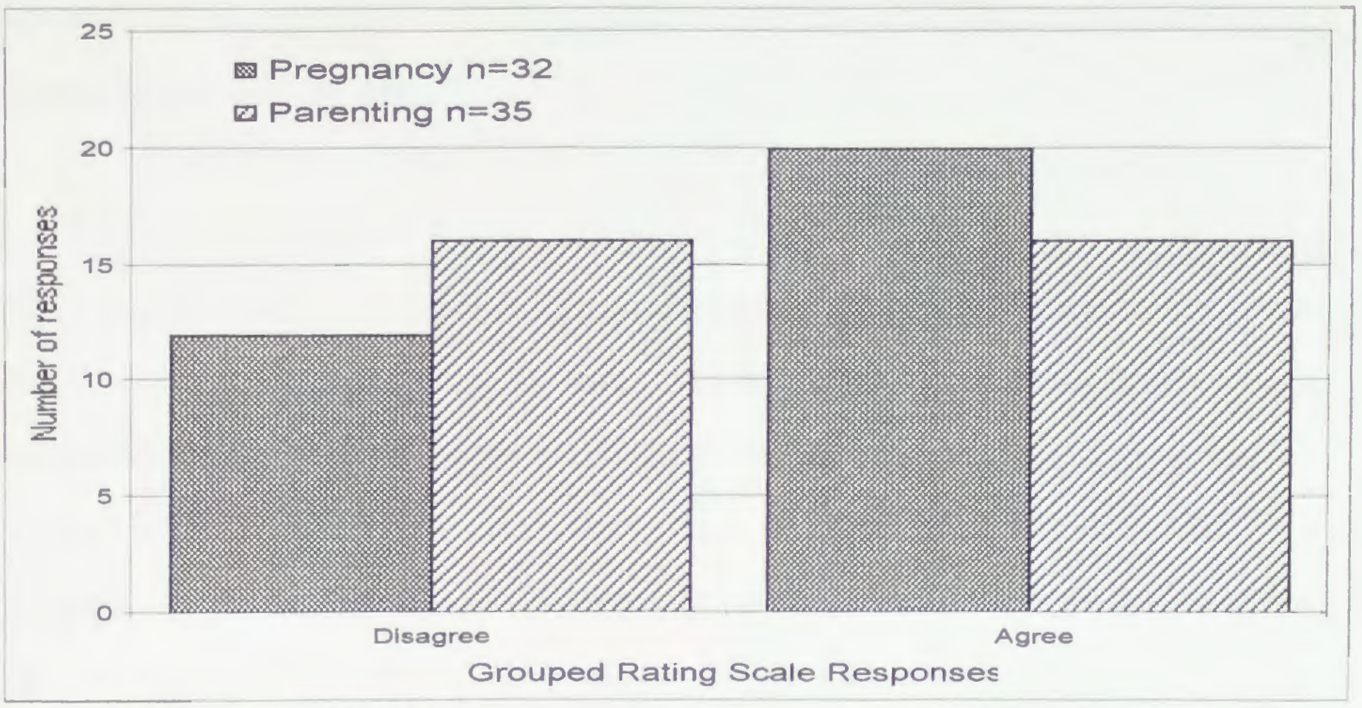

Figure 11. Difficult to attend school full-time.

Note. Rating scale responses of 1, 2, and 3 were grouped into Disagree and responses of 5, 6, and 7 were grouped into Agree. Three neutral responses (rating of 4) during parenting are not shown.

Data tallied from the Unstructured Response section of the survey revealed that the majority of the responses on this topic indicated a preference for attending school full-time (see Table B9). In conversation with the participants, many expressed the feeling that they just wanted to get through with school so that they could get on with their lives. This sentiment was expressed directly by one respondent who wrote, "I felt it necessary to pull it all together and tuff [sic] it out and finish". These results are likely tied to the expressions of self-reliance. The option for part-time schooling was, however, described as important for many mothers. Mothers of very young infants or mothers who are still nursing might choose at attend part-time at least until their children are older. This idea is summarized by a respondent who stated, " [it] was difficult to attend school full time near the end of my pregnancy and especially at the beginning of parenting."

Overall, this area appeared to elicit strong responses and both options received support but it is simplistic to equate the experience of school as difficult with a preference for part-time

attendance. Counsellors and other professionals working with the population need to be wary of assumptions about what a young mother might choose and what she is capable of managing.

Program Choice and Transitions

There are a number of programs that are designed specifically for pregnant and parenting young women in the SD #73 region. School-aged girls who find themselves pregnant face difficult decisions on many fronts. School counsellors have a wealth of options to choose from when making referrals for pregnant teenagers. Such resources as Public Health, Baby's Headstart and Marion Hilliard prenatal house are familiar territories for counsellors making referrals. Public Health continues its involvement after the birth and additional post-natal resources such as Elda Marshall House, PAID, Healthy Beginnings, and Families First fill in the gaps. At-risk young mothers may also have the benefit of a social worker involved in their case. These non-school programs were described in detail in the previous section and the information is not repeated here.

The only other programs not tied to SD #73 that the questionnaire addressed were the programs offered at Marion Hilliard Prenatal House and Elda Marshall Postnatal House. Anne Petrie (1998) described the experiences of women who attended prenatal homes during the 50's and 60's. She described a patronizing attitude of those who ran the homes. The predominant experience of the clients was one of powerlessness and condemnation. Times have changed and young women choose to attend a prenatal or postnatal house for different reasons than they did 40 years ago. Of the 39 respondents, only two mothers attended the prenatal house and four mothers attended the postnatal house. All of these respondents strongly agreed that these environments were supportive of a young woman continuing her high school education. Both these programs offer intensive education in a variety of matters pertaining to personal health, safety, responsibility, personal development, life-skills, cooking, parenting issues, childcare, and child development. The curriculum is comprehensive and there are clear expectations for the young women who attend these programs. Many of the curricular goals of these programs are consistent with British Columbia Ministry of Education learning outcomes for Family Studies 11 and 12.

One major decision facing a pregnant schoolgirl is the direction to take with her education. Pregnant and parenting young women certainly have the option of continuing in their regular home school. Some may elect to withdraw from school and attempt correspondence. Others may choose to investigate the options provided by Virtual School or an alternate program. An option developed specifically for these students is the First Steps program that includes daycare and a choice of attending three types of institutions.

Virtual school is a new and innovative option that may benefit this population. This program is designed for home-schoolers. Traditionally, secondary level home-schoolers registered in a correspondence program and there was little involvement of SD #73 personnel. With the advent of Virtual School, SD #73 now has an interactive program that includes traditional distance education courses, computers, and access to local schools for electives. This new program widens the opportunity for young mothers to gain access to a secondary level education while still fulfilling their role as mothers. An exciting combination is the option of part-time attendance at a local school for elective course work and a Virtual School program for other courses. The very nature of this program would allow mothers struggling with childcare costs and who choose not to attend the First Steps program to actively pursue their education while still remaining in their home school. Though, to date, no young mothers have yet registered with this new program, its availability is an exciting addition to the array of options for these students.

Choosing which educational option to pursue during pregnancy and parenthood is difficult. As with most decisions there are pros and cons for each option. The idea of remaining at the home school had mixed results on the survey. The final true or false question asked if the respondent returned to her regular school program after the birth of her child. On this question, 60% (n=35) indicated they had returned to their regular school program. This question does not reveal how long the respondent attended that regular school. As well, it is not clear whether the "false" responses indicate that the respondent went to another school or whether she did not attend school for some time after the birth of her child. The results from this question appear to be somewhat inconsistent with data gathered elsewhere in the survey. Fourteen participants responded that they had not returned to their regular school yet 18 responded in some way to

Rating Scale item # 29 which stated that respondents had changed schools after the birth. Though they appear similar, the questions address different issues. Roughly equal numbers of respondents would have preferred to remain at their home school versus transferring to another program. Within the unstructured responses, a third of all respondents chose to comment on this topic. Many of these respondents reported mixed feelings or preferred the regular program or commented that they changed programs because they were parenting. Because this is an important point, a more detailed evaluation of this topic is necessary to determine a clearer picture. This topic is tied very closely to the issues of childcare subsidy, program delivery method, part-time attendance, administrative attention to lates and absenteeism, and experiences of support from peers.

School and program planning may entail a transition between various programs. When the paths of these respondents were examined it is evident that there was a great deal of transition between programs. The majority of the mothers indicated that these transitions caused few problems. As well, most of the mothers felt involved in planning their high school program and most felt their counsellors were knowledgeable about transitions they faced. However, there still appears to be room for improvement in this domain since almost a third of the question respondents (n=22) disagreed that their counsellors were knowledgeable about their transitions and more than a quarter of the question respondents (n=25) found the transitions difficult. It would appear from the counsellor interviews that little or no formal tracking between programs goes on. This is likely due, in part, to the size of a school counsellor's case-load. Counsellors can not afford to follow a case once a student leaves the building. The issue of professional trust and autonomy also has a bearing here since the various programs have their own professionals who will be involved with the client. Finally, the issue of privacy comes into play. Do counsellors or other school professionals have the right to track someone who leaves the school? These issues must be balanced against the concept of outreach and the needs of those girls who may be starting to feel isolated yet not have the personal resources to reconnect.

Program Specifics: IDS, Alternate, Challenge and Career Prep

The topic of specific program choices encompasses a number of options including Independent-Directed Studies (IDS), in-school alternate courses (ISA), course challenge and equivalency, and Career Preparation programs (CP). Though individualized curricula may be helpful for these students, it is not the only or even necessarily the first choice of program. The whole issue of elective and career-related programming is inadequately understood with respect to these special students (Farber, 1989; Imel & Kerka, 1990). The general impression, as described by the questionnaire responses and the service-provider interviews, is of confusion with respect to the role of IDS, ISA, challenge and equivalency, and Career Preparation programming for this population. School counsellors were more knowledgeable than students about these topics but even within the group of school counsellors there was some confusion about where these options might apply. As well, the use of these options varied considerably from school to school. This is not surprising since a number of these options are relatively new. Time and experience will likely lead to an increase in use and more cross-school consistency. A recent question and answer session with British Columbia Ministry of Education delegates demonstrated the varied levels of understanding associated with these concepts.

The results from Rating Scale items 35 and 36 surprised me somewhat but upon reflection, I realized these results were consistent with other themes in the data (see Table 11). These particular items dealt with the desirability of IDS courses during pregnancy and parenthood. After the neutral responses are accounted for, slightly more than half of the question respondents indicated they would not likely have chosen this option as opposed to 38% who would have chosen this option in either pregnancy or parenthood. A slightly higher percentage of question respondents favored ISA programming during pregnancy and parenting. These results taken with the results from the part-time school query suggest that the respondents might fall into two camps. One group may comprise those who wish to get school done in the quickest, most efficient manner possible with few detours into independent programming which might slow their rate of completion. A second group appears to have a need or desire for more individualized programming which might include part-time school, Independent-Directed Studies or in-school

alternate programs. The results from these sets of Rating Scale items are graphically displayed in Figure 12. The left-hand columns indicate a strong disagreement with a preference for part-time schooling, IDS courses or ISA programming. The right-hand columns indicate strong agreement with preferences for these options

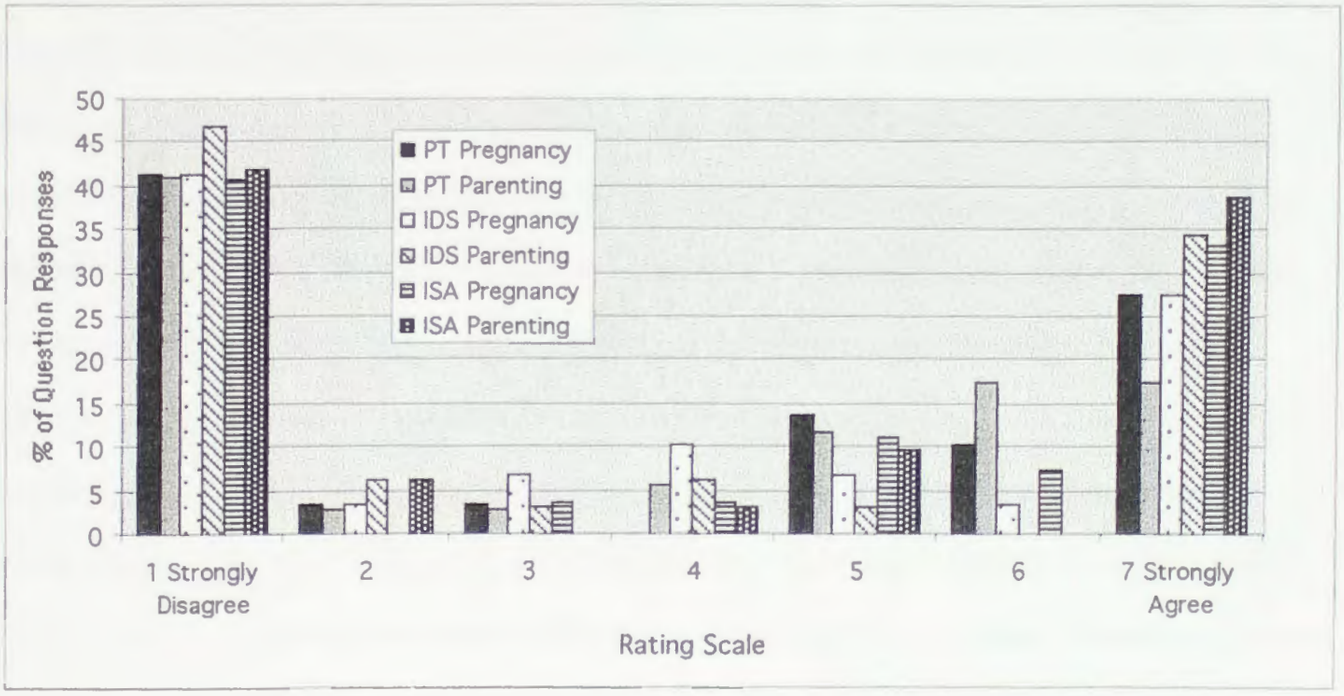

Figure 12. Preferences for school program options.

However, further analysis of the data indicate that the respondents do not fall into such tidy categories. When the data are analyzed on a case-by-case basis, only 13 respondents (33%) were consistent in the manner in which they responded to these three topics. Data were grouped as disagree or agree for Rating Scale items 30, 35, and 37 (during pregnancy) and items 31, 36, and 38 (during parenting). Six respondents indicated consistent disagreement across the topics for pregnancy, parenting or both and seven respondents indicated consistent agreement across these topics. There appears to be no systematic recommendation for programming with respect to these items. The best approach would be to educate the student about the options as the first part of a support program.

The last Rating Scale item addressed the issue of course challenge. The majority of the respondents indicated that they would have taken a course challenge in an area such as Family Studies 11 or 12 (also known as Family Management) had it been available. However, only

seven respondents indicated that they had the option of taking advantage of the course challenge procedure (see Table 8). The remainder who answered this question indicated that they did not have this option or were unaware of the option. The concepts of challenge, equivalency, and external credit still cause confusion among professionals. Only recently are students, parents and community members starting to become familiar with the external credit concept as it applies to such structured programs as driver's education programs. The concepts of equivalency and course challenge appear to be less familiar to professionals and community members. Many counsellors report the use of these options solely in the area of second languages. Both Elda Marshall house and Marion Hilliard house run programs that offer extensive curriculum in child development and childcare plus curriculum devoted to life-skills such as foods and home management, budgeting, and self-sufficiency. The complete coverage of this curriculum is mandatory for anyone who lives at Elda Marshall house. Challenge or equivalency credit for Family Studies 11 and/or 12 and/or Career and Personal Planning 11 (CAPP 11) might be an option. For some students this could have a significant impact on their life as exemplified by one respondent who stated, "A course challenge for Family Management 11 would potentially have saved me half a year as I was one course short and I did go to Elda Marshall house." Some district high schools currently do this on a case-by-case basis when planning a graduation program for returning young women, although others clearly do not since another respondent stated, "I did try to get credit for the parenting work done at Elda Marshall but [school name] refused." At a recent Ministry presentation for counsellors and administrators it was indicated that the notions of challenge and equivalency in Provincial secondary education had some of their roots in teen mother programs (P. Harknett, personal communication, October 29, 1999). The nature of the curriculum for some of these courses is quite obviously repetitive for some mothers. One mother stated "for Family Management I carried the egg around" and another said,

> I failed because I wouldn't participate in some of the studies such as carrying the egg around to show us how much care one needs to take so the egg doesn't break, almost the same care a baby needs. I refused to do this because I was actually living the situation with my baby. I think that some changes should be made when the student is living in the real-life situation.

A standard opportunity to provide mothers who attend these programs with credit in SD #73 would appear to be a feasible step.

Finally, Career Preparation (CP) programs appear to be an underutilized option for young mothers. A CP teacher observed that the perception of young mothers might be that this program involves more work and slows progress toward graduation. This belief could restrict these students' willingness to pursue this type of program considering some of the sentiments expressed by young mothers about the need to efficiently obtain graduation credits. With over a third of question respondents indicating that they did not know about the availability of Career Preparation, it appears that knowledge is inconsistent about the options this program can provide. In some cases, a student may take up to four courses for related work experience, job shadowing, and career exploration (D. Francis, personal communication, January 22, 2000). Generally, in work experience courses, credit is granted for work done and little extra homework is expected. As well, work could be completed outside regular school hours. The creditable work experience courses can all count toward graduation on the regular program. This might fit into a young mother's hectic schedule and might accommodate mothers who have alternative childcare arrangements. As well, the concept of an efficient or telescopic path to employment and self-sufficiency is handled neatly through career programming. This is a worthy goal considering the obstacles faced by young mothers as they try to secure employment (Polit, 1987).

In the Unstructured Response section of the survey there was a high rate of response overall to various program specifics with 59% of all survey participants offering a response to this topic. These items were listed within the category of Program Issues. Concrete responses to the issues generated by these comments are tangible and reflect an exciting array of opportunities to increase the flexibility of the graduation program for young mothers.

Other Program Issues

A number of issues were brought up by the respondents that were clearly related to programming yet which did not fit neatly into the pre-designated categories. These statements did not warrant categories of their own but were still relevant reflections of the concerns of the respondents. The varied nature of these types of comments is best exemplified by a sampling of

the actual statements. Some mothers commented on special First Steps programming: "I enjoyed the special programming...for example the mum's luncheon's" and "[at] Mum's luncheon's, we talked about parenting" and "at [the GED program] I got to do a practicum! I was interested at the time to get my E.C.E." Other respondents made suggestions for curricular areas that might be useful: "young mothers should be taught infant first-aid" and "I believe there should be more free programs for fathers who want to learn more about parenting, and develop programs like this for single dads. There are no options for them out there." Taken as a group, what these comments reflect is the thoughtfulness that young mothers have about their own programming. These students demonstrated the ability to critique their own program and the enthusiasm to look at program alternatives.

Other

A number of additional topics were brought up spontaneously in the Unstructured Response section of the survey. These items were not specifically addressed in the structured parts of the survey but were noted on the "other" section of the Unstructured Response section. In all, 12 new themes were identified including: hard school, future plans, nursing issues, hospital experience/public health, experiences with financial aid workers, social stigma, secrecy and shame, early maturation, older mothers, other cities and programs, adoption, and financial worries. It was decided that a novel theme that generated responses from at least 25% of the respondents would be included as a major finding. Two themes qualified in this regard: "hard school" and "future plans". The remaining ten themes have been summarized in Appendix B (see Table B1).

Hard school

A third of all participants volunteered some information on the questionnaire about how "hard" it was to attend school during pregnancy or while parenting. A direct quotation from a young mother as written on her survey illustrates some of the difficulties. Although this statement is somewhat difficult to read, it transmits the hectic nature of this young mother's life: "The academics in high school was [sic] too much. I can't do homework when I soon bus [sic] I get

home my daughter wants to play and the house needs to be clean [sic] dinner needs to be cooked laundry etc. [sic]." These comments are likely tied to the notions of perseverance and self-reliance expressed elsewhere because despite the activity being so difficult, these young women persevered with school attendance. This item was partially addressed in the Rating Scale with items 32 and 33, which focussed on the difficulty of full-time school attendance (see Table 11).

To compare the issues of difficult school and persevering on a full-time program, a detailed item analysis was conducted and inconsistent responses were discarded. For example if a respondent indicated "Not Applicable" for item 30 but gave a rating on item 32 then both these responses were discarded for the current comparison so that the items would have equal n values. For this comparison, items 30 and 32 were grouped (pregnancy) and an n value of 28 was determined. Items 31 and 33 were also grouped (parenting) and an n value of 34 was determined. Plotting the cases produced Figures 13 and 14.

The data were sorted so that cases where there was agreement are placed on the right-hand side of the figures. During pregnancy, fifteen or 54% of the 28 respondents had a perfectly consistent response. For example, if they strongly agreed that part-time school would have been helpful then they also strongly agreed that full-time school was difficult. During parenting, the rate of perfect consistency drops to 29%.

Understandably there will be some inconsistency on these items but of interest are those cases where the responses appear completely inconsistent. If only cases where respondents indicated inconsistency by responding to items on diverse sides of a neutral rating are included then during pregnancy 29% of the compared cases were inconsistent and during parenting 35% of the compared cases were inconsistent. If these paired responses are examined further, it can be seen that during pregnancy18% of these respondents indicated that though full-time school was difficult, they did not feel part-time attendance would have been helpful. On the parenting dimension 21% felt that though full-time attendance was difficult, they did not feel that part-time attendance would have been helpful. Incidentally, on these last comparisons, only one

respondent showed an inconsistency during both pregnancy and parenting. It would be inadvisable to read too much into these results but they do address the assumption that because something is difficult, these clients feel unable to do it. A sizable number of young mothers choose to persevere with full-time schooling despite finding it very hard.

Why it is that some young women persist in the face of a very hard school experience is open for interpretation and a good topic for further research. Weisner (1984) addressed this issue with her study of re-entry women. Her research examined attribution theory and she suggested that a student who is "given to attributing outcomes to effort could conceivably try harder—and harder and harder, thereby blurring the distinction between that which is impossible from that which may be just difficult" (p. 313). Unraveling this mystery could go a long way toward increasing school completion of this population.

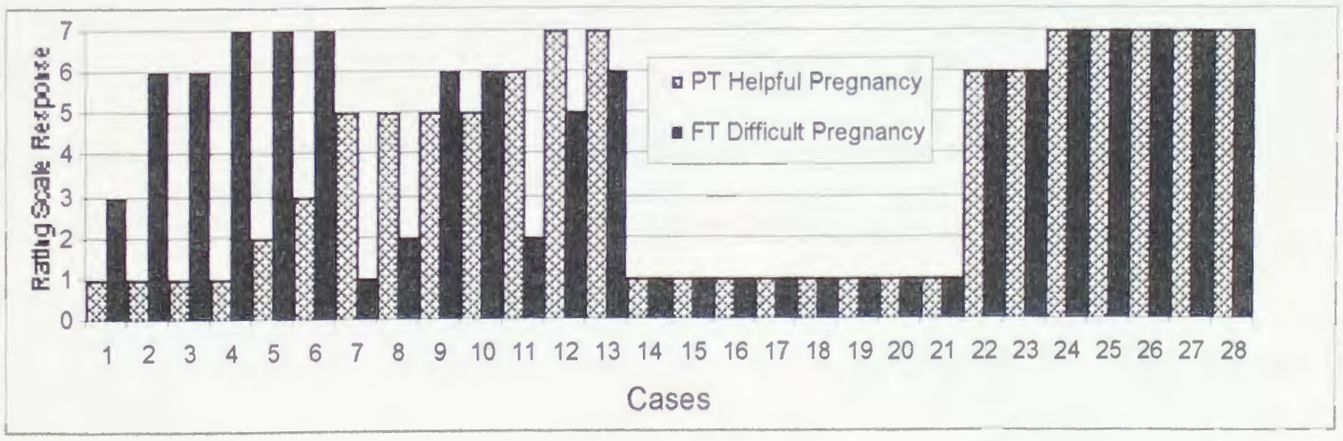

Figure 13. Part-time school helpful and full-time school difficult case comparison during pregnancy.

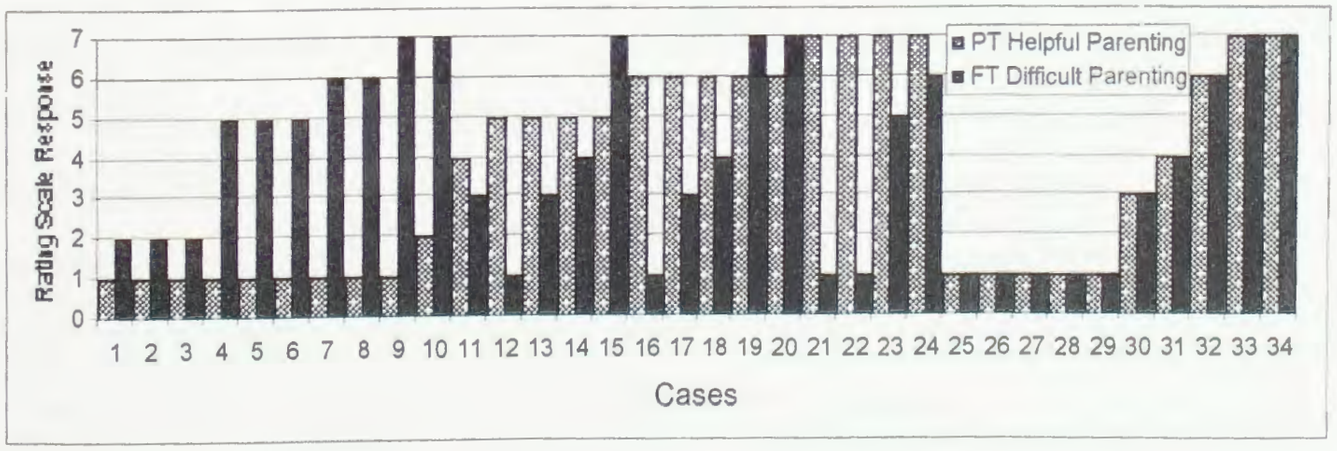

Figure 14. Part-time school helpful and full-time school difficult case comparison during parenting.

Future Plans

A respondent's future plan was not a topic covered by the questionnaire yet 28% of all respondents voluntarily wrote about this (see Table 17). During informal discussion, a record was made of 15 additional participants who discussed their future plans. This brings the total to 67% of all participants choosing to comment on the topic of future plans. Though not specifically an obstacle to high school graduation, the concept of career planning for this population is a topic that is not well addressed in the literature (Farber, 1989; Imel & Kerka, 1990). A pervasive societal view is of teenaged mothers being dependent on welfare and forever being a drain on social assistance funds. This idea receives few challenges in the literature or media, which often seems to focus on the negative side of the situation. The seminal work of Furstenberg, Brooks-Gunn and Morgan (1987) brought to light the positive life outcomes experienced by many teenaged mothers. Few studies take a longitudinal approach and so outcomes for teenaged mothers are largely unknown. Many agencies and resources are devoted to supporting young mothers in the pre-natal and early post-natal period and the focus is often crisis management and life-skills (Scambler et al., 1980). Few agencies have the resources necessary to track and support young women throughout their career development.

As an addendum to the results, through informal discussion it was determined that nine of the study participants were currently registered in a post secondary institution or had a registration confirmation for the upcoming Fall. Additionally, one young woman was part way through the documentation process of setting up her own home-based daycare and had clients already confirmed for the following September. Another had just completed a post-secondary program at the college and was in the process of seeking work in her area of training. Considering that not all the young women were in a position to be making concrete post-secondary plans yet (that is, their high school program had another year or more to go), 28% of all respondents with specific, concrete plans underway is encouraging.

Path

So far the focus has been on the institutional components of a young mother's educational path. It was informally hypothesized that though there were likely many different paths, a few paths would appear to be favored or more traversed routes. The results obtained from the Path section of the questionnaire appeared to defy organization. The specific path taken by each respondent was traced on a template of options to determine whether specific routes were more often chosen. The resulting figure was more similar to an intricate web than a path (see Figure 15). From the confusing array some order was extracted. Rather than a particular path, which might be followed from beginning to end, a more accurate metaphor is of a journey. This journey includes multiple links between hubs or landings. Some young women were highly directed and had ample provisions (support) and their journeys were characterized by clear direct progress toward a goal. The route taken by others was less direct.

A map of the different routes to the destination of high school graduation is the outcome of the section that dealt with paths. The initial web was reorganized and the links ordered. Figure 16 shows a diagram of the major paths chosen. This figure shows the major institutions accessed during the periods of pre-pregnancy, pregnancy and parenting. Each of the hubs are linked and bold arrows demonstrate some of the major paths. Some respondents visited more than one hub during pregnancy and some visited more than one hub during parenting. The path chosen was rarely a straight line with one hub for each of the three periods. The hub that represents the respondent being out of school for a time clearly had a great deal of action during both the pregnancy and parenting periods.

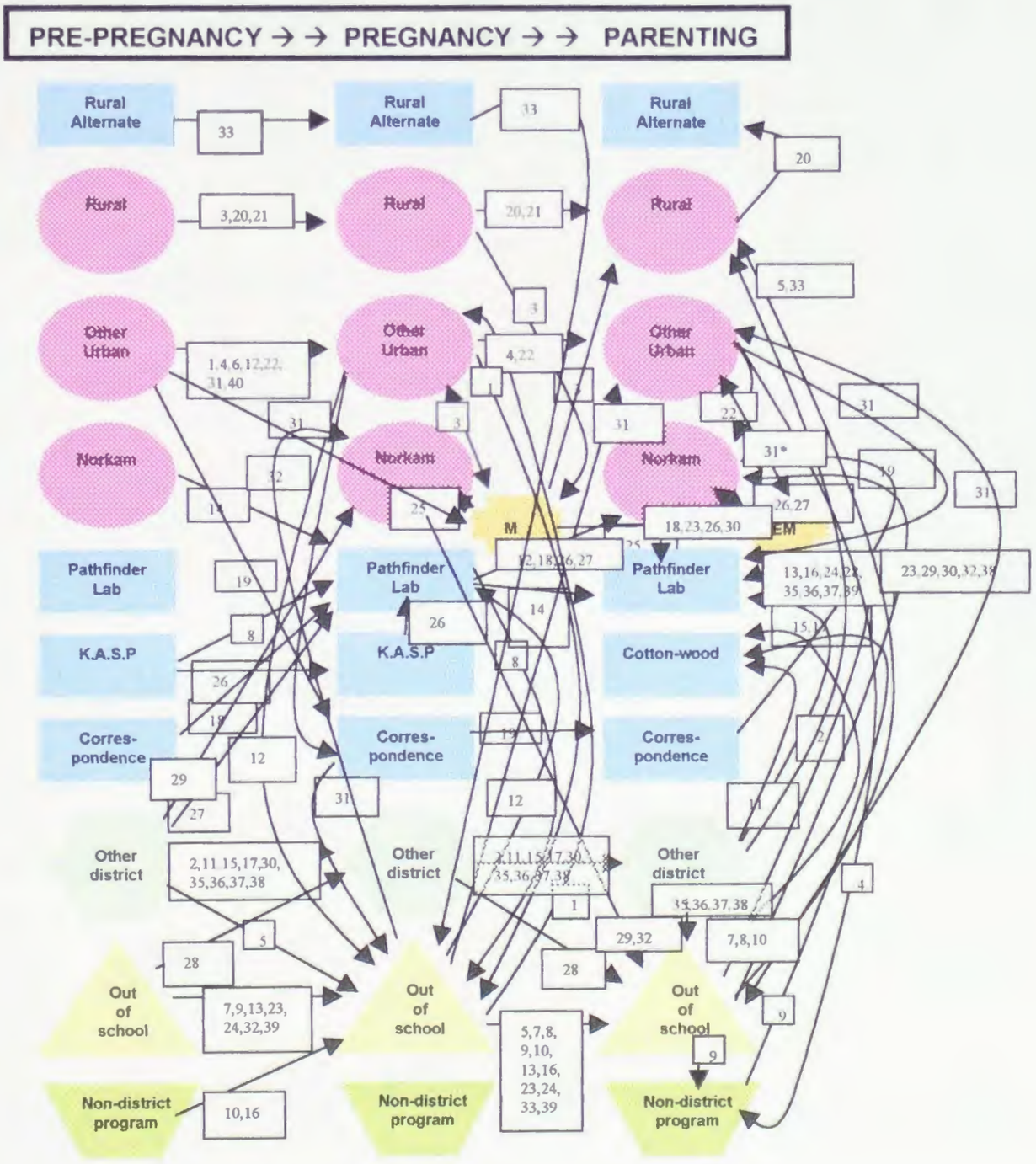

Figure 15. Web of paths traveled by young mothers.

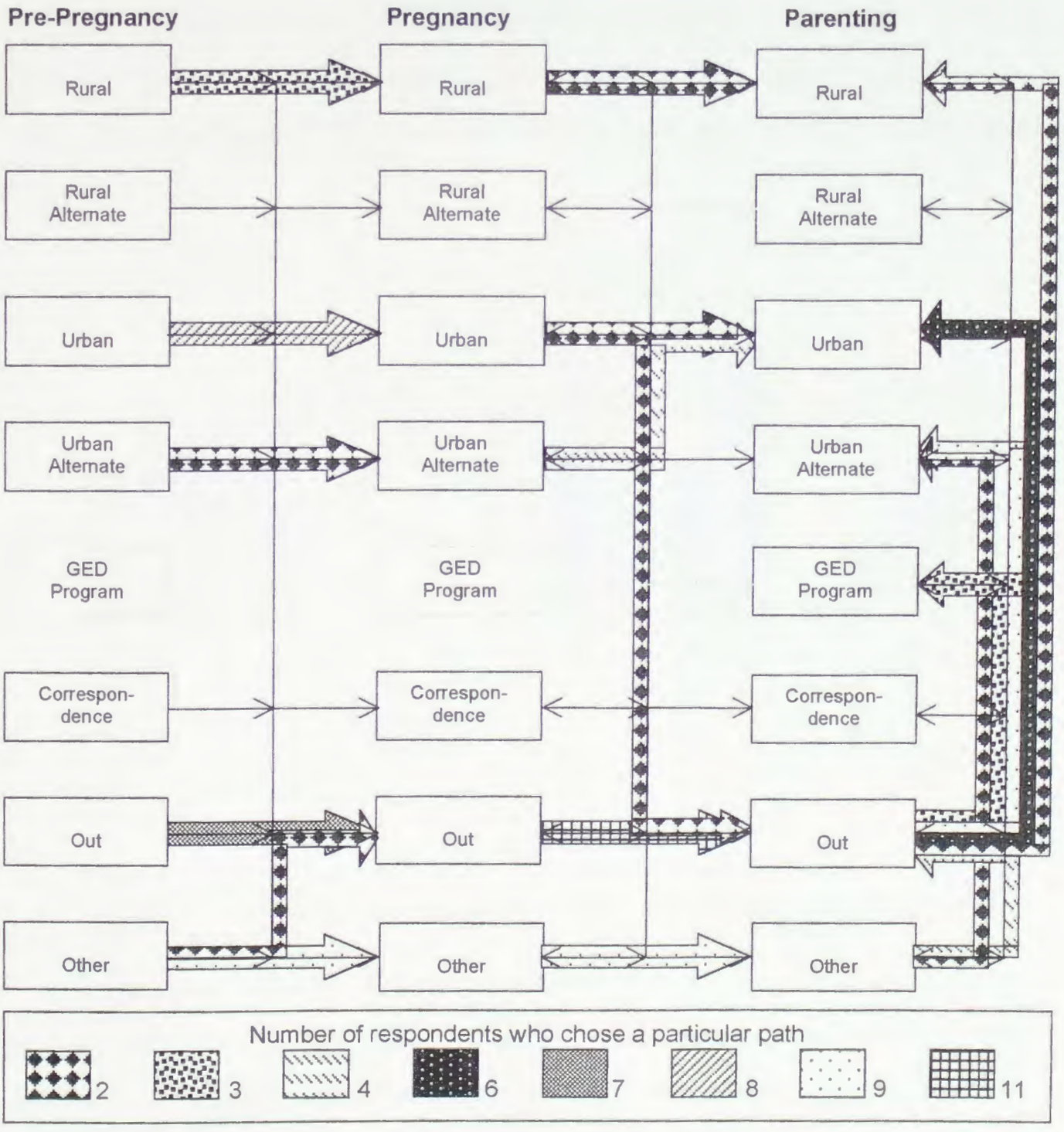

Figure 16. Diagram of educational paths chosen by young mothers.

Note. All links represented by a narrow black line signify a path taken by one respondent. Bold arrows indicate paths taken by more than one respondent. Grey lines indicate a path taken by no respondents.

When the data obtained from the path chart was separated into distinct units, tallied, and summarized, four major components surfaced. These included the components of being out of school (dropout), attendance at another educational institution (not a SD #73 program), attendance at an urban school, and attendance at the Kamloops alternate school. Each of these components was selected by more than half of the respondents (see Table 5). Figure 17 displays these four components

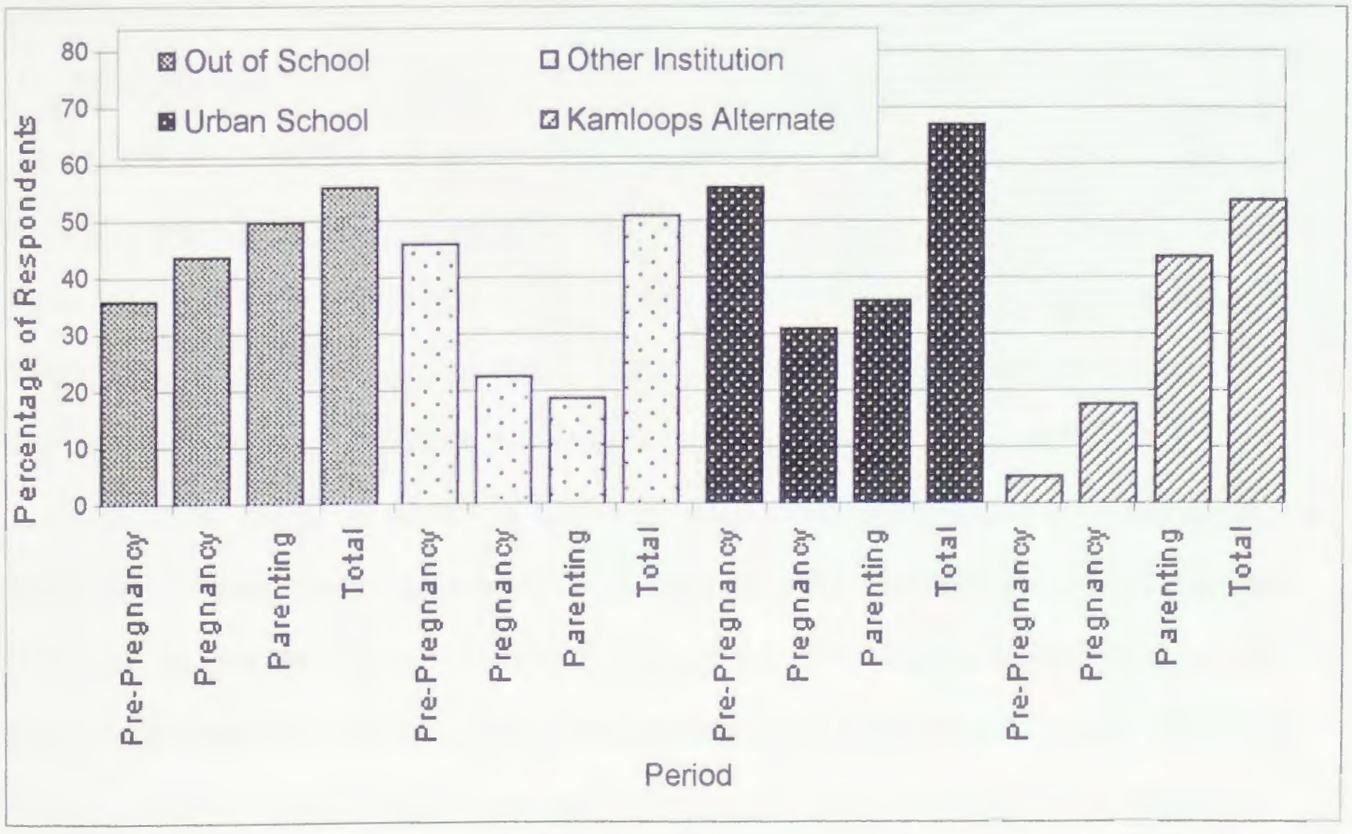

Figure 17. The four major components of the educational path. The percentage in the "total" column is not equal to the cumulative of the first three columns because some respondents selected more than one period.

Grade failure and dropout status are sometimes entwined. The majority of respondents reported no grade failure prior to their pregnancy. Furstenberg, Brooks-Gunn and Morgan (1987) reported that the strongest predictor of later success of their study participants was being at grade level, though other researchers report that young mothers with weak academic performance prior to pregnancy were still very responsive to school based intervention (Seitz et al., 1991). The selection bias of this study might account for the low rate of reported grade failure. Those at grade level are more likely to experience success and therefore more likely to be included in the current study due to the sample selection parameters. However, being out of school for some time was part of the path of the majority of the respondents. Being out of school

was an item that was partially addressed in general questions 8, 13 and 15 (see Appendix H). These questions appear to query the same issue and yet the results seem inconsistent. However, these questions tease apart subtle differences about the paths of the young mothers. Question 13 asks where they attended school just prior to their pregnancy; question 8 asks whether they were in school when they learned of their pregnancy and question 15 asks where they attended school during their pregnancy. Each question has an option of "not in school" but selection of that option for one question does not necessarily mean that option was selected for the other questions.

The respondents who were inconsistent on these three questions caused some confusion but a closer examination of the data and the questions revealed subtleties about the paths that I had not foreseen. Five of the respondents attended school during all or part of their pregnancy and yet had indicated that they had been out of school prior to their pregnancy or at the time they had learned of their pregnancy. In other words, they dropped back in to school during their pregnancy. Of these five, only one indicated that she dropped out again during her pregnancy. The other four (roughly 10% of the respondents) continued in school during their pregnancy despite previous dropout status. Though few in number relative to the larger sample, the path taken by these girls is contrary to expectations and to the presumed path. What this suggests is that it is worthwhile continuing to encourage mothers-to-be to continue with their education despite previous dropout status. It might be that as these girls underwent the social, emotional and physical changes that went with pregnancy, their priorities changed and they were open to a path different than the one they had been following.

The "not in school" option was selected for all three questions by seven respondents. These girls were not in school prior to their pregnancy, or when they learned of their pregnancy, or during the course of their pregnancy. These girls fit a more typical description of a dropout. By virtue of being included in this study, these dropouts were experiencing or had experienced success in education *after* becoming a parent. This accounts for roughly 18% of the sample and appears to be a distinct path.

Excepting an early summer birth, the extended absence that covers the birth and post-delivery recovery period constitutes a major school absence. This is true even when a young mother quickly returns to school after the birth of her child. It is to be expected that the majority of the respondents who answered questions about school interruption felt that their schooling had, to some degree, been interrupted by the birth and post delivery period. In spite of this, the majority of the question respondents (59%) still indicated that they had quickly returned to school after the birth. Due to the nature of the sample, some of those that felt school was unmanageable while parenting may have elected not to return after the birth and were, therefore, not selected for the study. This group of probable dropouts is balanced by the inclusion of young women who chose to return to school well after the birth of their child and would, therefore, report an extensive absence. In spite of this sample configuration, the group of respondents in general appears very committed. After you account for those respondents who were not parenting, 50% or 18 mothers (n=36) returned to school within 6 months of the birth. This length of time is roughly equivalent to returning within one school semester. The literature has suggested that those women who quickly return to school have a better chance of succeeding (Furstenberg et al., 1987). Though many of the respondents returned within 6 months, the modal time (29% of those who gave birth) for return to school was more than twelve months. Registering in school after her infant is a year or more old may allow a young woman to work through some issues such as mother-child bonding and/or post-natal depression. The bonding has been described in the literature as crucial for improved infant outcomes (Musick et al., 1987). Hard-won maturity obtained through parenting may also predispose a school dropout towards viewing education with fresh respect. In spite of the improved outcomes favoring early return to school, returning after an extended absence is a valid path that should not be discounted.

Transience was a major path component. Just over half of the respondents reported attending other programs at some point during their path (see Table 5 and Figure 16). Many of these programs were in other cities. The centers that were noted by the young mothers included Toronto, Abbotsford, Vancouver, Prince George, Alberta, Bella Coola, Vanderhoof, Canmore, Chilliwack and East Vancouver. Furstenberg, Brooks-Gunn and Morgan (1987) reported a

finding of frequent moves in their longitudinal study and the current results would be consistent with the results from that study.

Attendance at an urban regular high school and attendance at Kamloops alternate school were cited as part of the path by more than half of the respondents. These path components are not surprising considering that most young women would be expected to be attending a regular high school prior to pregnancy. As well, the majority of the young mothers who were able to take advantage of the First Steps program attended the alternate school.

The general section of the survey addressed a number of issues that have a bearing on the educational path. When the age at first birth was surveyed, it was expected that the results would fall into a predictable normal curve pattern. What was surprising was the number of young mothers who attended a program in SD #73 and who gave birth after age 18 (see Figure 18).

These data likely reflect the enrollment at the urban alternate school and the GED program where the mandates are continuing education versus regular high school graduation. Pursuing a high school education at a non-traditional age is a distinct path for young mothers since more than a quarter of the respondents gave birth as adults and yet still accessed SD #73 programs. These data are consistent with the results from the Furstenberg et al. (1987) study that found that "early dropout reduces, but does not foreclose, a young mother's chances of further schooling" (p. 27).

Ethnic background was queried to determine if this affected the path of young mothers. There is a tremendous research focus in the literature on African-American teenage mothers and to a lesser extent on Hispanic mothers (Colletta et al., 1980; Forste & Tienda, 1992; Furstenberg et al., 1987; Gray & Ramsey, 1986; Herrmann, Van Cleve, & Levisen, 1998; Olsen & Farkas, 1989; Rhodes, 1993; Scott-Jones & Turner, 1990; Seitz et al., 199; White & Cummings, 1995). However, these cultural groups do not exist in Kamloops to any large degree. There is little Canadian research on the First Nations connection to teen parenthood.

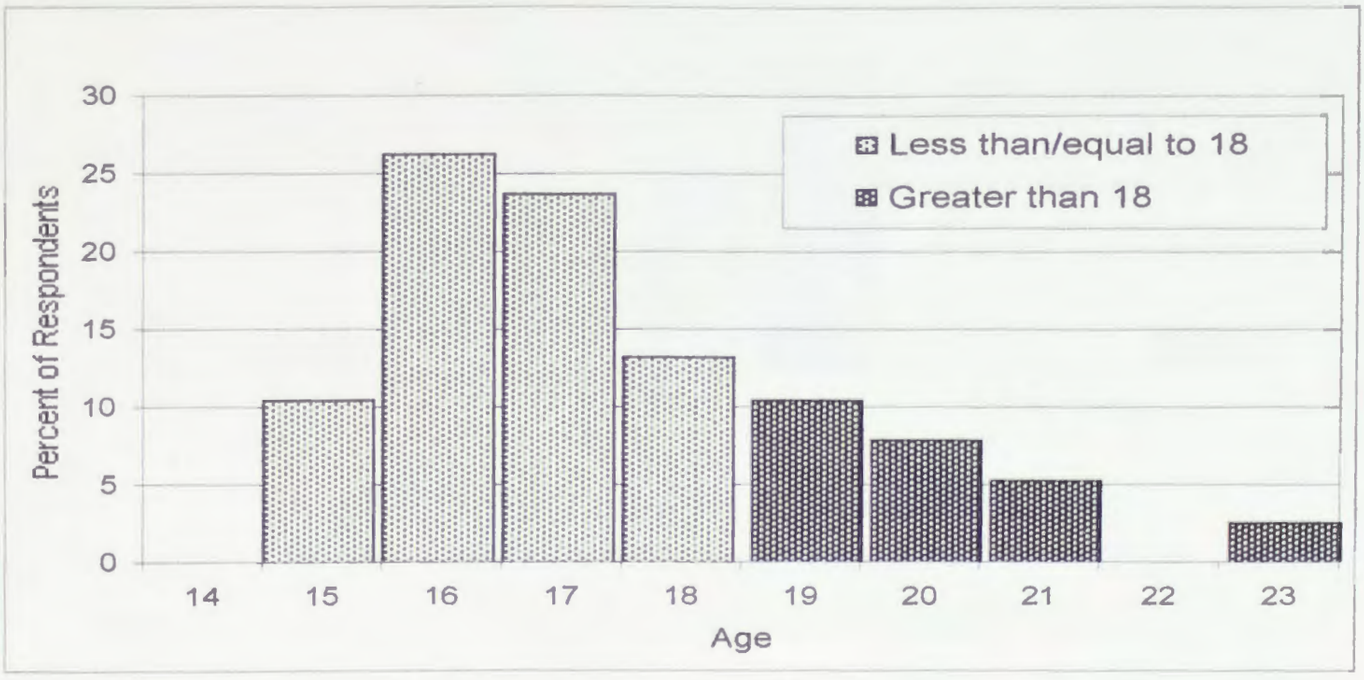

Figure 18. Age of respondents at first birth.

In the current study, it is unclear what the ethnicity breakdown would be of mothers who dropped out. Thirteen percent of the respondents indicated that they were of First Nations descent with the remainder indicating they were Caucasian. It is unknown whether this ethnic breakdown is reflective of the actual birth rate of adolescents in Kamloops. Figure 19 shows the ethnic breakdown of the respondents compared to the general population of British Columbia and of Canada as derived from the 1996 Census (Statistics Canada, 1998a). The categories for display are Caucasian, Aboriginal and other. Caucasian includes British, French, European, Canadian, other single origins and multiple origins. Other includes Arab, Asian, African, Pacific Islands, Americas (Latin, Central and South) and Caribbean. The First Nations category represents those claiming aboriginal origin. Initially it appears that the rate of First Nations teen mothers is much higher in the study than the proportional number of First Nations people in either British Columbia or Canada. However, it should be remembered that Kamloops and area is home to a number of First Nations bands. The "Other" category was not represented in this study. The proportion of Caucasians in the study is equivalent to that in British Columbia and Canada. Therefore, though there appears to be a higher rate of First Nations individuals in the study, this may simply reflect the local ethnic mosaic.

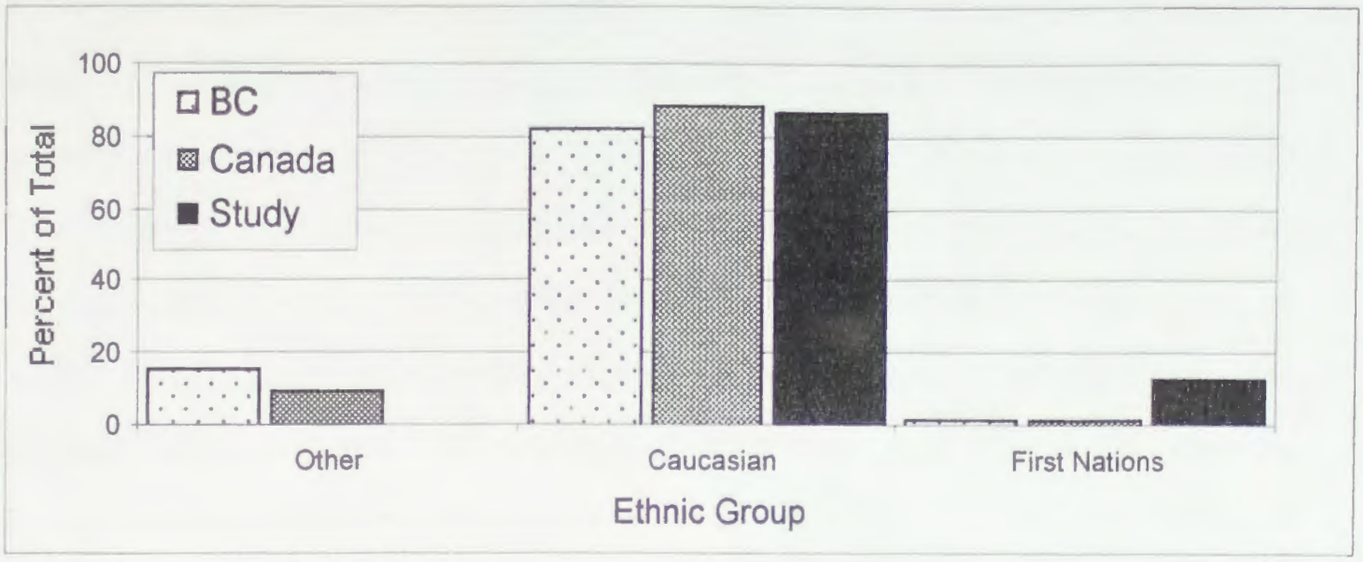

Figure 19. Ethnicity breakdown of respondents compared to provincial and national statistics.

Religious affiliation might have a bearing on the path to high school graduation for young mothers. Roughly 67% of the respondents reported no religious affiliation. Though information on the young mother population is not available, when compared against 1991 Census data, this rate is more than double the rate of no religious affiliation reported for British Columbians and more than five times the rate for Canadians (Statistics Canada, 1998b). Though the current sample is quite small, these differences appear to be notable though it must be remembered that the provincial and national data reflect all age groups. The differences displayed may be simply a reflection of the age group of this population (see Table 18). It is unclear whether the predominant lack of religious affiliation has any bearing on the path to graduation. However the large discrepancy with respect to no religious affiliation between study participants and the population at large begs the question of whether a lack of religious affiliation is correlated with early childbearing.

Table 18

Comparison by Religious Affiliation

	Canada	B.C.	Study
Catholic	45.70	18.57	20.51
Protestant	36.23	44.54	10.26
Other	.03	.07	2.56
No Religious Affiliation	12.54	30.42	66.67

Note. Numbers represent percent of the population for the group under consideration.

The mothers in SD #73 appear to share some common characteristics with the Baltimore cohort from the longitudinal Baltimore study. One of the findings from the Baltimore study was the tremendous diversity in outcomes for the adolescent parents. These outcomes were driven by the unique circumstances of each mother's history. Like the Baltimore mothers, the SD #73 mothers exhibited diversity in terms of their educational background, level of support and path chosen. Like the Baltimore mothers, the SD #73 mothers transition to adult responsibilities was "unpredictable and disorderly" with no typical path (Furstenberg et al., 1987, p. 21). Childcare arrangements and subsequent pregnancies interfered with the education of some members of both groups. Those authors observed that there is the assumption that dropping out at the time of pregnancy coincides with educational termination yet they found that many women returned to school to obtain a diploma or GED when they were in their 20's (Furstenberg et al., 1987). This finding is consistent with results from my study that found a surprising number of SD #73 students who pursued high school education at a non-traditional age.

Conclusions

School completion is an important component of the path to economic well-being for young mothers; therefore, professionals should act in ways to promote educational achievement and school completion for this population.

Recommendations

What kind of recommendations can be discerned from this study? Since the path of these young mothers' falls into no precise pattern, a multi-modal approach is appropriate.

Careful consideration of options and a willingness to be flexible are essential aspects of an educational plan. A necessary component is an ongoing supportive relationship with a school counsellor to help tackle and solve problems before they become unmanageable. A school counsellor's awareness of a young mother's level of support can significantly affect program guidance. The level of support might be a critical factor in whether a young mother chooses to attend a First Steps program. By and large, young mothers with a more intact support network would likely fair better at a community high school than would those with less support. Integral to the First Steps programs is a support network that includes professionals and peers. Since the young mothers themselves referred to the importance of this issue, it would be unwise to ignore its ramifications.

Awareness of the rules surrounding access to the transportation subsidy is equally important. There appeared to be inconsistent knowledge on the part of the young mothers about the rules of the bus subsidy. Additionally, some women do not technically qualify for a subsidy because they do not live far enough away from the school. These students may not have to make a bus transfer yet they still rely on city transportation to get themselves and their infants to school. This would be particularly true in inclement weather when walking with a stroller or sleigh might put a child at risk. A transportation subsidy for all young mothers attending school deserves further attention. It is unknown how many mothers may have prematurely discontinued their education due to difficulties with transportation. The importance of actively helping adolescent mothers with transportation has been noted by researchers (Grobe, 1995; Herrmann et al., 1998).

One of the first parts to the educational guidance process would be to determine if the young mother wishes to continue her program at the regular high school or transfer to a First Steps program. Decisions about which school to attend must account for issues of support, transportation, childcare availability, career goals and program flexibility. Though the school counsellors interviewed indicated they sought creative, innovative solutions to difficulties for their clients, a dedicated program will be the path of choice for many young mothers. The research indicates that specialized programs can be very beneficial for those who choose to attend (Seitz et al., 1991). As well, the argument could be made that there is a district program in place to serve the needs of young mothers, therefore they should be expected to access it. The First Steps program provides an excellent array of options and is the best program for many young mothers, yet, inevitably, it will not meet the needs of others.

Programs in other centres offer a middle ground where students attend a regular high school for site-dependent courses, such as some electives, yet attend a self-contained alternate program for their core studies. Though this kind of joint campus does not yet exist in SD #73 it would seem to provide the best of both worlds. It is unrealistic to expect that a self-contained classroom and single teacher will be able to provide the breadth of courses offered in a regular high school. As well, library and other resource facilities at the regular high school exceed what

is normally available at an alternate school. Providing the opportunity for some young mothers to attend select courses in the regular high school would open the doors to a wider variety of course work and eventual career choices. This type of combined school experience would require full support of senior administration and some minor juggling of the young mother's timetables but the benefits could be considerable.

Throughout this discussion, topics have arisen which could have a bearing on how school counsellors advise young mothers. Some topics bear further attention. School counsellors might investigate the option of part-time school or use of the hospital-homebound resource teacher more frequently with young mothers. Many respondents felt part-time school would have been helpful and yet so many reported that it was not an option or did not know if it was an option. For some young women this option could have a significant impact on their lives. Additionally, students in the latter months of pregnancy who determine that they are unable to continue at school could be referred to the hospital-homebound teacher and a plan made to continue their schooling for as long as possible. If a student's plan includes returning to school after the birth of a child and there is course work that will be will be missed during this time of absence, then a plan could be developed with the hospital-homebound teacher to cover this period. Because the hospital-homebound teacher is mandated to visit a student at home or in the hospital, part of this role might include maintaining the school presence and helping the young mother maintain some momentum to keep focussed on her goal. There was a discrepancy noted between the use of this resource and its perceived desirability. This population is already part of the mandate of the hospital-homebound teacher. Policy changes may not be necessary, as it may simply be a matter of bringing this discrepancy to the attention of counsellors and administrators who can then more frequently make the necessary referrals. Particularly where mother or infant health threatens attendance, an adapted or part-time program or access to a hospital-homebound teacher might make the difference between staying in school or dropping out. It must be remembered that only mothers who are still in school or who graduated were studied. Perhaps some of those mothers who dropped out could have continued using these options.

Since there is an inconsistent application of or even understanding of options like course challenge, equivalency and Independent-Directed Studies, it might be appropriate to bring these topics up for discussion with counsellors and other involved professionals.

In terms of equivalency and/or course challenge, there is general support for a Family Studies equivalency or course challenge but professionals appear to be a little unclear about how to proceed. To support increased use and understanding of this option, it would be worthy to develop comparisons of the learning outcomes of community-based programs and the learning outcomes of Family Studies 11 and 12. An increase in the valuation of life experiences and community parenting programs may encourage young mothers to return to or remain in school. By allowing credit towards the selected studies component of the graduation program, more room in a young mother's timetable can be made permitting a study period for homework completion at a regular high school. Consequently, a young mother's time at home with her infant is less absorbed by homework. With this alternative, the student gets more flexible options, the child gets more of his or her mother's time, and the school increases the likelihood of graduation of one of its students.

Another area that deserves some investigation with respect to course challenge or equivalency are the hours accumulated in cooking and food preparation at both Marion Hilliard and Elda Marshall house. Though the tasks undertaken may not meet all the learning outcomes of Food Studies 11 and 12, certainly some learning outcomes will be met and partial credit might be granted. Alternatively, the learning outcomes for these courses could be provided to these institutions since there might be room within those programs to include more of the learning outcomes of Foods and Nutrition courses. These recommendations are not tantamount to watering down graduation requirements but about recognizing young mothers for learning already completed. Concerns may be raised around the issues of professional turf. Curriculum taught by non-certified teachers is open to criticism from the local teachers' union or the British Columbia Federation of Teachers. As well, evaluation procedures would need to be addressed. Tackling these thorny issues is outside the realm of this paper, but if agreement in principle can be achieved, then workable solutions are possible.

In-school alternate (ISA) courses offer program flexibility for young mothers. Currently, most schools offer some combination of Pathfinders, Points and Open-school curriculum. The evidence from Rating Scale items 37 and 38 indicate that an ISA program is a preferred path by many of the young mothers. Having the option of completing a course that is self-paced but under supervision of a teacher allows versatility when a mother is required to stay home due to personal or her child's illness. ISA programs can provide an opportunity for a mother to get her core courses and possibly some electives completed while at the same time allowing for registration in school-based electives. The burden of catching up everything at once in courses when legitimate absenteeism threatens is reduced when ISA courses are used. Since there is an inconsistency across the district in the availability of these courses, a thorough assessment of current offerings at each school might be in order with a view to increasing the options at those schools with fewer resources.

Independent-Directed Studies courses are wide open in terms of the topic for study. Given the flexibility that IDS courses offer, counsellors, teachers, and administrators could be proactive in helping young mothers accumulate sufficient graduation credits using IDS courses as a means to an end. Schools are currently in the learning phase with this option. To date it has had limited application, but it can not be assumed that IDS courses are only for a specific type of student. Many schools have reserved the use of this course for the gifted/self-directed student. It should be recognized that young mothers might need extra support when using the option of an IDS. Because the topic for an IDS course is limited only by the subjects covered by Ministry approved courses, IDS courses are an excellent option for broadening the selected studies opportunities for students at the alternate school. As well, they offer an opportunity to pursue a subject not accessible within the standard regular high school timetable or explore areas relevant to the young mother such as childcare or infant development.

Career development for young mothers through the use of the provincial Career Preparation (CP) program is an area that appears to have room for expansion. There is flexibility within the Provincial Graduation and CP programs to develop a program of studies leading to high school graduation while concurrently supporting career development and work experience.

Many of the obstacles to high school graduation are mirrored by the obstacles to employment and self-sufficiency. Childcare, transportation, attendance and support concerns interact to make employment difficult to obtain and to keep. A tailored CP program that would take into account a young mother's needs while providing guided practice in employment would enhance her chances of later self-sufficiency. The career planning needs of young mothers are somewhat different than the needs of the regular school population, and though many teen mother programs exist across the continent, few offer employment-related services (Imel & Kerka, 1990; Polit, 1987). A school-sponsored, CP program placement would help employers offset some of the possible perceived risk with hiring a young mother and ease young mothers into the workforce in a supported manner.

Currently, there are many community programs that are accessible to this population in the SD #73 catchment area. The assortment is comprehensive and some programs are supportive of young mothers up until their children are 7 years of age. The community and school district are well armed to deal with this population but there is no method that ensures clients get access to the services they need when they need them. This problem is not unique to Kamloops, nor is it new. A 1980 overview of teenage pregnancy and parenthood in British Columbia made the same observation (Scambler et al., 1980). Service-provider knowledge of and referral to these services will help this population. Social workers do an admirable job for their clients by referring them to the necessary community agencies when needs arise, but the school connection often does not present as a high priority for these workers due to their mandate of child protection. As well, lack of familiarity with current school options might lead workers to assume that there is limited choice for a young woman who wishes to get her high school diploma. Not every young mother qualifies for the services of a social worker. Though many young women depend on social assistance for their income, older mothers may not qualify for a social worker. Conversely, because a young mother still lives with her family of origin, she may not qualify for the services of a social worker even though she might have considerable educational and social/emotional needs. A preferred option would be an inter-ministerial position which would allow for a liaison between all the various programs, agencies, and ministries. The

individual in this position would look at the needs of the client irrespective of any particular agency or ministry and would be thoroughly familiar with educational options so that a young mother could be referred to the most appropriate program. Support for the concept of a case manager for adolescent mothers is provided by Herrmann et al. (1998) who found that mothers who were case managed by public health nurses had higher rates of school attendance, higher levels of infant immunizations and fewer days of infant hospitalization. In a thorough study of young parent programs in British Columbia, Rivers and Associates (1995) determined that the impact of young parent programs on graduation rates was unclear "since there is no mechanism by which young parent participants may be tracked through the Ministry of Education's student records system" (p. ii). A case-manager could also be responsible for collecting statistics which could then be used to help determine efficacy of the programs.

Failing an inter-ministerial worker, the development of a comprehensive catalogue of options for pregnant and parenting young women would help to inform and educate. Inclusive in this catalogue would be detailed information about possible educational paths including the promotion of continuing education for older mothers who have not graduated. Counsellors naturally provide this information through their personal counselling but they do not see all pregnant or parenting young women. Currently the various programs have their own publications and school counsellors and other community professionals and helpers use these publications as part of the counselling and advisement process. These agency publications are distributed in strategic places but no comprehensive source of information exists and the array of options can be bewildering. As well, the less formal options such as course challenge or equivalency are currently getting little press for this population. The marketing of these resources within one comprehensive catalogue would be helpful. This form of communication will also support the more transient section of the young mother population. More than half of the young women surveyed spent some time in a program that was not a SD #73 program. Many of these programs were in other districts, and therefore the mothers were not necessarily receiving the benefits of educational guidance from SD #73 school counsellors.

Many girls may not be ready to tackle the idea of continuing their secondary education during the early post-partum period, and even if they had continued school during pregnancy, they may now choose to drop out. These mothers are then lost to the services provided by a school counsellor. Since health nurses or physicians generally see mothers during the child's one-year immunization period, this might be a time to provide information about school options. The promotion of educational options at various periods during the pregnancy and motherhood phases would hopefully encourage those who are ready to seek further information (Scott-Jones & Turner, 1990). A catalogue would not replace individual counselling. Rather, it would be an adjunct service or even a discussion-starter.

Research into programs offered in other districts might be useful to those designing programs in our own district. Investigating other programs and then adopting the best aspect for our own programs would certainly benefit the young mothers in SD #73.

The current research studied a variety of topics related to obstacles to high school graduation for young mothers. The major conclusions and recommendations have been summarized in Appendix J.

Suggestions for Future Research

Throughout the course of this study, the data and the literature review prompted ideas for future research. One question for future investigation asks what allows some young mothers to negotiate the obstacles while others do not succeed? This was not the focus of the current study but it is unclear if there is a continuum of determination and perseverance where someone with less of this quality drops out when faced with one too many obstacles. To some extent, this topic was addressed in the Weisner (1984) study of re-entry women. That study examined attributions for continuing and discontinuing post-secondary education. A similar study examining a population of young mothers with respect to high-school education would greatly enhance the understanding of this population. One respondent stated during the informal part of her interview that it was hard for her to imagine how she would cope in the winter. She stated that if she were to quit school, it would be during the winter when she had to cope with transporting herself and

her child on the city bus system in order to get to the First Steps program from across town. Future research might examine the paths of young mothers who tried to return to high school but eventually dropped out. It would be important to access the mothers who did try to return because mothers who never attempted a return to school do not have the experience with the institutional obstacles.

Another recommendation for future research would be a longitudinal study of career and self-sufficiency attainment of young women who recently became parents during adolescence. The Furstenberg, Brooks-Gunn and Morgan (1987) longitudinal study examined this topic but there are obvious differences in the demographic background of that sample from the current population. As well, that study is based on the experiences of young women several decades ago. The social experiences, educational opportunities and career expectations of young women are constantly evolving. Even thirteen years ago, Furstenberg, Brooks-Gunn and Morgan (1987) observed the impact of changing sexual behaviors, family patterns, and social experiences. Career development of early child-bearers is an under-researched area that would benefit from attention (Farber, 1989; Imel & Kerka, 1990).

Remaining in school during pregnancy and after the infant's birth are correlated with a higher level of economic security and a lower likelihood of dependence on social assistance (Furstenberg et al., 1987). Some of the women in this study dropped back into school during pregnancy. Others dropped back into school after their child's birth. Some were traditional school age when they returned whereas others were well past the traditional school age. The term "teachable moment" is often tossed about in discussions of education. It may be that for some young women, this time of a change in priorities provides an opening to bring them back into the school system. Some might have been able to take advantage of the change and help themselves whereas others might have missed that opportunity. An investigation into the precipitating factors of school continuation would be an area worthy of further research since the issues of school dropout, uneducated teen mothers, and youth who are disenfranchised with education are issues that are far from being solved.

Summary

The predominant perspective of social science researchers is that delayed child-bearers achieve more education and better economic outcomes than early child-bearers. However, these views have been based, primarily, on the findings of short-term studies. A thorough understanding of the complete educational, career, and economic path of young mothers is not yet fully understood. Education has become "increasingly important as an admission ticket to the labour market and to eventual occupational mobility. High school graduation . . . has become almost mandatory" (Furstenberg et al., 1987, p. 4). These same researchers question whether the social and media stereotype of a young mother with respect to social and economic disadvantage is warranted and suggest that "interpretations . . .[and] flamboyant rhetoric . . . go well beyond the available evidence" (p. 8). The current research does not suggest that early motherhood is preferable to a more traditional timeline for parenthood. However, the evidence gathered does indicate that many of these young women do experience educational success and are not necessarily destined to fulfil the stereotype of a lifetime of poverty and social disadvantage. To help ameliorate the eventual outcomes for young mothers, school personnel need to educate themselves about the obstacles faced by this population. To return to the metaphor described earlier, increased efforts to provide a map and sufficient provisions (guidance and support) will increase the chances of these young women reaching their goals.

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Appendices

Appendix A

British Columbia School Districts' Young Mother Programs

#	District	City	Program
5	Southeast Kootenay	Cranbrook	**DID NOT RESPOND**
6	Rocky Mountain	Invermere	Open Doors Box 2613 Invermere, BC V0A 1K0 Ph: 250-342-3060 bagisd06@rockies.net
8	Kootenay Lake	Nelson	Care to Learn (LV Rogers Sec. School) 1004 Cottonwood St. Nelson, BC V1L 3W2 Ph: 250-354-4676
10	Arrow Lakes	Nakusp	**DID NOT RESPOND**
19	Revelstoke	Revelstoke	**NO YOUNG MOTHER PROGRAM**
20	Kootenay-Columbia	Trail	Young Parents Program 601-7th Ave, Castlegar, BC V1N 1R6 Ph: 250-365-6036 Fax: 250-365-0791
22	Vernon	Vernon	**DID NOT RESPOND**
23	Central Okanagan	Kelowna	KSS Young Parents Program 575 Harvey Ave Kelowna, BC V1Y 6C7 Ph: 250-762-2805 loc. 259 atkinson@bc.sympatico.ca
27	Cariboo-Chilcotin	Williams Lake	Kidcare Daycare 70 S First Ave, Box 4094 Williams Lake, BC V2G 2V2 Ph: 250-392-4118
28	Quesnel	Quesnel	**DID NOT RESPOND**
33	Chilliwack	Chilliwack	Human Services (Parenting) 46363 Yale Rd Chilliwack, BC V2P 2P8 Ph: 604-795-7295
34	Abbotsford	Abbotsford	New Beginnings 2329 Cresent Way New Beginnings Outreach Centre 3164 Clearbrook Rd Abbotsford, BC V2T 4N6 Ph: 604-852-4985 Debbie_Jarvis@SD34.abbotsford.bc.ca
35	Langley	Langley	Perinatal Program Aldergrove Community Secondary School 26850-29 Ave Aldergrove, BC V4W 3C1 Ph: 604-856-2521
36	Surrey	Surrey	Growing Together Program 10707-146 St. Surrey, BC V3R 1T5 Ph: 604-588-7601 MELVILLE_S@quilpk.wb.sd36.surrey.bc.ca
37	Delta	Delta	Deltassist Family and Community Services Pregnant & Parenting Teen Program 4629 – 51st Street, Delta, BC V4K 2V8 Ph: 604-946-2122
38	Richmond	Richmond	Pregnant & Parenting Youth Program Richmond Youth Services 8191 St. Alban's Rd. Richmond, BC V6Y 2L2 Ph: 604-271-7600 loc. 11 Fax: 604-271-7626 Richmond High School Ph: 604-668-6400 loc. 2250
39	Vancouver	Vancouver	Mom's Place (Sir Charles Tupper Sec School) Ph: 604-874-9131 Fax: 604-875-6900
40	New Westminister	New Westminister	**DID NOT RESPOND**
41	Burnaby	Burnaby	Young Parent Program (Burnaby South Sec.) 5455 Rumble Str. Burnaby, BC V5J 2B7 Ph: 604-664-8560 loc. 4149
42	Maple Ridge	Maple Ridge	**DID NOT RESPOND**
43	Coquitlam	Coquitlam	Coquitlam Teen Parent Program 1411 Foster Ave Coquitlam, BC V3J 2N1 Ph: 504-939-4522 Fax: 604-939-4637
44	North Vancouver	North Vancouver	Learning Together Program (Sutherland Sec School) 1860 Sutherland Ave, North Vancouver, BC V7L 4C2 Ph: 604-985-5301 Fax: 604-988-5016
45	West Vancouver	West Vancouver	**NO YOUNG MOTHER PROGRAM**
46	Sunshine Coast	Gibsons	**DID NOT RESPOND**
47	Powell River	Powell River	The Learning House Daycare and Max Cameron Secondary
48	Howe Sound	Squamish	Teen Mothers Ph: 604-892-5261 GHALV@sd48.bc.ca
49	Central Coast	Hagensborg	**NO YOUNG MOTHER PROGRAM**
50	Haida Gwaii/ Queen Charlotte	Queen Charlotte City	**DID NOT RESPOND**
51	Boundary	Grand Forks	Fred Walker Resource Centre **Alternate School** Ph: 250-442-5313
52	Prince Rupert	Prince Rupert	**DID NOT RESPOND**

53	Okanagan Similkameen	Oliver	**NO YOUNG MOTHER PROGRAM**
54	Bulkley Valley	Smithers	**Take part in alternate programs** Ph: 250-847-2008 dmcmilla@mail.sd54.bc.ca
57	Prince George	Prince George	Pathways (at Duchess Park Secondary) 2371 Ross Cres, Prince George, BC V2M 1Y8 250-563-7124 local 130
58	Nicola-Similkameen	Merritt	**NO YOUNG MOTHER PROGRAM**
59	Peace River South	Dawson Creek	**DID NOT RESPOND**
60	Peace River North	Fort St. John	Teen Moms Program (N. Peace Sec. School) 9304- 86 Street Ft. St. John, BC V1J 6L9 Ph: 250-785-4429 canthony@oscar.prn.bc.ca dboyd@oscar.prn.bc.ca
61	Greater Victoria	Victoria	GAP/ Options 3020 Richmond Rd Victoria, BC V8R 4V1 Ph: 250-360-4321
62	Sooke	Victoria	Public Health Nurse Ph: 250-478-0663
63	Saanich	Saanichton	**DID NOT RESPOND**
64	Gulf Islands	Salt Spring Island	**NO YOUNG MOTHER PROGRAM**
67	Okanagan Skaha	Penticton	**DID NOT RESPOND**
68	Nanaimo-Ladysmith	Nanaimo	VAST Centre 10 Strickland Str. Nanaimo, BC V9R 4R9 Ph: 250-753-7741 local 22 rciolfi@island.net
69	Qualicum	Parksville	Springboard Family Centre with Parksville Alternate cmalek@sd69.bc.ca
70	Alberni	Port Alberni	Alberni District Secondary School lhurst@sd70.bc.ca
71	Comox Valley	Courtenay	Teddies & Toddlers (GP Vanier Secondary) PO Box 3369, 607 Cumberland Courtenay, BC V9N 5N5 Ph: 250-338-9262 Fax: 250-338-1308
72	Campbell River	Campbell River	Young Parents Program (Carihi Sec. School) 350 Dogwood Str. Campbell River, BC V9W 2X9 Ph: 250-286-6282
73	Kamloops/Thompson	Kamloops	First Steps C/O Boys and Girls Club Box 2101, Station A Kamloops, BC V2B 7K6 Ph: 250-376-9119 Fax: 250-554-2756
74	Gold Trail	Ashcroft	**DID NOT RESPOND**
75	Mission	Mission	**DID NOT RESPOND**
78	Fraser-Cascade	Hope	**Take part in alternate program**
79	Cowichan Valley	Duncan	Growing Together Young Parent Program 450 Cairnsmore Str. Duncan, BC V9L 1Z8 Ph: 250-748-9754 Fax: 250-746-8341
81	Fort Nelson	Fort Nelson	**NO YOUNG MOTHER PROGRAM**
82	Coast Mountains	Terrace	PACES 4924 Straume Ave Terrace, BC V8G 4V8 Ph: 250-638-8367 vrego@cmsd.bc.ca
83	North Okanagan-Shuswap	Salmon Arm	Community Action Programs for Children-Family Circle RR#1, Site 6, Box 15 Enderby, BC V0E 1V0N Ph: 250-838-6844 lnobles@jetstream.net
84	Vancouver Island West	Gold River	**DID NOT RESPOND**
85	Vancouver Island North	Port Hardy	**DID NOT RESPOND**
87	Stikine	Dease Lake	**DID NOT RESPOND**
91	Nechako Lakes	Vanerhoof	**DID NOT RESPOND**
92	Nisga'a	New Aiyansh	**DID NOT RESPOND**

Appendix B

Unstructured Response Data

Table B1

Tally of Minor New Topics Introduced in Unstructured Response Section

Topic	Nursing Issues	Hospital & Pub. Health	Financial Aid Worker	Social Stigma	Secrecy & Shame	Older Mothers	Other Cities	Adoption	Money	Early Maturity	Total
#of Responses	4	5	5	9	2	2	6	1	10	5	49
# of Respondents	4	5	2	8	2	2	6	1	9	5	25[a]
% of all Respondents[b]	10%	13%	5%	21%	5%	5%	15%	3%	23%	13%	64%[a]

Note. Topics included in this table were spontaneously addressed by less than 25% of the sample. [a] Some participants responded in more than one category, therefore this number reflects overall respondents and is not equivalent to the sum of the categories.. [b]n=39.

Table B2

Sorted Summary of All Unstructured Response Statements

Topic	Administration	Support	Program	Other[a]	New Issues[b]	Total
Number of Responses	96	128	74	27	49	374
Percent of All Responses	26%	34%	20%	7%	13%	100%
Number of Respondents	30	37	34	20	25	38[c]
Percent of Respondents	79%	97%	89%	53%	66%	100%
Percent of All Respondents[d]	77%	95%	87%	51%	64%	97%[c]

Note. This table represents all responses on the Unstructured Response section of the questionnaire. [a]Other includes new issues that were spontaneously addressed by 25% or more of the sample. [b]New issues include topics that were spontaneously addressed by less than 25% of the sample. [c] Some participants responded in more than one category, therefore this number reflects overall respondents and is not equivalent to the sum of the categories. [d]n=39.

Administrative Issues

Table B3 shows that there was a fairly even division of comments about attendance with respect to whether this issue posed difficulties. Since both "lates" and absenteeism were included and since there was some overlap and confounding of responses in this section, the data presentation includes a separation of lates and absenteeism. Of note is that only one respondent made comments in both categories (problem and not a problem). This respondent indicated that lates were "usual due to morning sickness" and also that "absenteeism didn't usually happen." One respondent indicated that both lates and absenteeism posed problems and generated three of the seven responses (43%) in the absenteeism-as-problem category. Three respondents indicated that both lates and absenteeism did not pose problems.

Table B3

Attendance

	Lates	Absenteeism	Total
Was a Problem			
Number of Responses	6	7	13
Number of Respondents	6	5	10[a]
Percent of All Respondents[b]	15%	13%	26%[a]
Was Not a Problem			
Number of Responses	5	9	14
Number of Respondents	5	9	11[a]
Percent of All Respondents[b]	13%	23%	28%[a]

Note. [a] Some participants responded in both categories, therefore this number reflects overall respondents and is not equivalent to the sum of the categories. [b] N=39.

Respondents commented upon both their own health difficulties and those of their children as these affected their ability to attend school. Table B4 displays these data. It should be noted that the total number of respondents from Table B3 and B4 do not equal the total number of respondents reported for attendance issues in Table 14. The reason for this is that there is an overlap in respondents for that data in Tables B3 and B4. Twenty-three participants responded to these topics.

Table B4

Illness

	Sick Children	Mother's Illness	Total
Number of Responses	10	5	15
Percent of Responses	67%	33%	100%
Number of Respondents	7	3	10
Percent of Respondents	70%	30%	100%
Percent of All Respondents[a]	18%[b]	8%	26%

Note. [a]Even though not all respondents were currently parenting, the number of respondents to this topic is compared to the number of all respondents and thus n=39. [b]For comparison, 19% of all mothers (n=36) expressed a comment about sick children.

Table B5

Childcare

	Problem	Not a Problem	Total
Number of responses	13	17	30
Percent of Responses	43%	59%	100%
Number of Respondents	11	14	21
Percent of Respondents	52%	67%	100%
Percent of All Respondents[a]	28%[b]	36%[b]	54%

Note. [a]Even though not all respondents were currently parenting, the number of respondents to this topic is compared to the number of all respondents and thus n=39. [b]For comparison, 31% of all mothers (n=36) expressed a comment about problematic child-care and 39% of all mothers indicated child-care was not a problem.

Table B6

Transportation

	Problem	Not a Problem	Neutral	Total
Number of responses	13	3	8	24
Percent of responses	54%	13%	33%	100%
Number of Respondents	12	3	8	23
Percent of Respondents	52%	13%	35%	100%
Percent of All Respondents[a]	31%	8%	21%	59%

Note. [a]N=39.

Support Issues

Table B7

Experiences of No Support

	Admin.	Teachers	Other Staff	Undefined	Total
No. of Responses	8	12	3	7	30
% of Responses	27%	40%	10%	23%	100%
No. Respondents	8	9	3	7	19[a]
% of Respondents	42%	47%	16%	37%	100%
% of All Respondents[b]	21%	23%	8%	18%	49%[a]

Note. [a] Some participants responded in more than one category, therefore this number reflects overall respondents and is not equivalent to the sum of the categories. [b] N=39.

Table B8

Experiences of Support

	General	Key[a]	Total
No. of Responses	40	13	53
% of Responses	75%	25%	100%
No. Respondents	28	11	29[b]
% of Respondents	97%	38%	100%
% of All Respondents[c]	72%	28%	74%[b]

Note. [a]A number of respondents identified a staff person(s) who provided key support. In some cases these people were identified by name and in other cases by their role. [b]Some participants responded in more than one category, therefore this number reflects overall respondents and is not equivalent to the sum of the categories. [c]N=39.

Program Issues

Table B9

Full Time Versus Part Time

	Part Time	Full TIme	Total
No of Responses	6	11	17
% of Responses	35%	65%	100%
No. Respondents	6	11	17
% of Respondents	35%	65%	100%
% of All Respondents[a]	15%	28%	44%

Note. The data for each category was sorted according to an expressed preference for a type of program or a difficulty with the opposite program. [a]N=39.

Appendix C

Provincial Graduation Programs

The New Credit-Based Graduation Program

The new credit-based graduation program (also called the regular graduation program in this report) consists of 52 credits at the grade 11 and 12 level. These credits are arranged into two domains: foundation studies and selected studies.

Foundation studies courses comprise a minimum of 28 credits and include 4 credits each of: a Language Arts 11, a Language Arts 12, a Social Studies 11, a Mathematics 11 or 12, and a Science 11 or 12. Foundation studies must also include 2 credits each of a Fine Arts 11, an Applied Skills 11, Career and Personal Planning 11 and Career and Personal Planning 12.

Selected studies courses comprise a minimum of 24 credits and must include a minimum of 10 credits at the grade 12 level excluding locally developed courses. Of these 24 required selected studies credits, a maximum may be derived from locally developed courses.

The Old Course-Based Graduation Program

Students who started school before the credit-based graduation program was implemented may still choose to graduate on the old course-based program up until June 30, 2001. After that time all programs will be converted to the credit-based system. The old program was based on a requirement of 13 courses at the grade 11 and 12 level and had many similarities to the new program in terms of required core courses. The mandatory component of the program consists of one course in each of: a Language Arts 11, a Language Arts 12, a Social Studies 11, a Mathematics 11 and a Science 11. Grade 12 Mathematics and Science courses do not meet these mandatory grade 11 requirements. In lieu of Career and Personal Planning 11 and 12, students are required to take Consumer Education 10 or 12 or Business Education 10. In addition to a Language Arts 12 course, three more courses must be grade 12 courses excluding locally developed courses. There are no requirements for a Fine Arts or Applied Skills course. Only two courses may be locally developed and there is no provision for two credit courses.

The Adult Graduation Diploma and ABE Options

Requirements for graduation on the adult program have recently undergone revision. The name of the new credential is the British Columbia Adult Graduation Diploma and was implemented beginning September 1, 1999. Previously on the adult program a student was

required to complete seven courses. This would be equivalent to 28 credits. On the new adult program, students are required to complete 20 credits or 5 courses. These credits consist of a 4 credit course in Language Arts 12, and Mathematics 11 or 12. Additionally students must complete three more Ministry-authorized four credit grade 12 courses totaling 12 credits. An option to these 12 credits would be completion of Social Studies 11 (4 credits) and two further Ministry-authorized four credit grade 12 courses. Adult Basic Education (ABE) courses at the Provincial level in the equivalent subject areas will also fulfill these course requirements. The ABE curriculum has four levels. Courses are sorted into the levels of Intermediate, Advanced, and Provincial. These levels correspond to grade 10, 11, and 12 (University College, 1999). Students may graduate with a combination of Ministry-authorized and ABE courses on the adult program.

There are some restrictions to the adult graduation program. A student must be at least 19 years of age with exceptions possible for 18 year-olds who have been out of school for a year. Three of the five courses must be completed as a course or through prior learning assessment after enrollment in the adult program. Challenge and equivalency policies may be applied on the adult program. Since they are comprised of less than four credits, Independent-Directed Studies and Partial Credit policies do not apply to the adult program (Handbook, 1999).

For more information on any of these graduation program requirements the reader is directed to the British Columbia Ministry of Education web site. This site can be accessed at http://www.bced.gov.bc.ca/exams/handbook/chapter3 and specific courses that will fulfill these requirements are listed there.

Appendix D

Alternate Programs

School District #73 Alternate Programs

School District #73 operates a variety of alternate programs. The most comprehensive program is run from Kamloops Community Learning Centre. At this site there is a junior and senior Pathfinder lab. The program most often accessed by young mothers is the Senior Pathfinder Lab that operates under the umbrella of Continuing Education. Students register for blocks of time. There are six blocks per day as follows:

Block 1	8:30 a.m.	to 10:15 a.m.
Block 2	10:15 a.m.	to 12:00 p.m.
Block 3	1:00 p.m.	to 2:45 p.m.
Block 4	3:00 p.m.	to 5:15 p.m.
Block 5	5:15 p.m.	to 7:15 p.m.
Block 6	7:15 p.m.	to 9:00 p.m.

The Pathfinder program is a computer-based curriculum management system. The courses offered at this facility primarily use this system. A broad array of courses are available including English 8 through 12, Communications 11 and 12, English Language Arts 11, Technical and Professional Communications 12, Math 8 through 11 including the A stream and applications of Math 11 and 12, CAPP 11 and 12, Law 12, Family Studies 11 and 12, Consumer Education 12, Social Studies 8 through 11, Geography 12, History 12, Western Civilization 12, Science 9 and 10, Chemistry 11, Earth Science 11, Biology 11 and 12, Science and Technology 11, Physics 11 and 12, and Data Processing 11. Students can also do GED upgrading. Young mothers attending the program have worked toward credit for Foods and Nutrition 11 and Physical Education 11. Additional courses may become available as they are developed.

In order to stay registered in this program, students are expected to attend a minimum of six hours per block, per week. Attendance is monitored through a computer. The facility has a non-loaning library to support course work. Students who successfully complete a course path, as it is termed, will receive a letter grade of C and Final exams are required.

Other alternate programs in SD #73 include Virtual School, which is described in the body of this report, and rural alternate programs. Within schools in the outlying areas (Barriere,

Chase, Clearwater and Logan Lake) there are small Pathfinders labs that are accessible to continuing education students. These much smaller labs offer a truncated version of the services and courses that are available at the Kamloops Community Learning Centre since print support resources are not always available.

In-School Alternate Programs

An in-school alternate (ISA) program is an individualized program of studies administered within a regular secondary school. These programs are generally conducted in the school's learning assistance or resource area. Students who access an in-school alternate course are generally full-time students who, for a variety or reasons, need one or more courses to be run independently. From school to school, there is inconsistency of use of ISA programs. The program and course availability tends to arise out of need. Generally the school has access to a school-based Pathfinder system but rarely relies solely on this. Other curriculum materials include self-directed print resources from the Points series or from Open School. Students using this method of completing course credit proceed in a self-paced manner. Generally courses are completed within one school year but in some circumstances, a student may request permission to stretch a course over more than one school year.

Correspondence

Some students in SD #73 elect to order a correspondence course. South-Central Regional Correspondence School is part of a separate school district and students in SD #73 are not funded for these courses. Home schooling students may register with the correspondence school at no cost and participate in a distance education program. Other students may elect to take one or more correspondence school course while registered concurrently in a SD #73 program. Students in this latter category are generally responsible for funding their own course but will receive the services of a phone tutor for assistance with course completion. The correspondence school generally uses Open School curriculum material and has all the same graduation programs available to other schools.

GED

The GED is an international testing program and is essentially a comprehensive exam focussing on literature, writing, mathematics, social studies, and science. The format is multiple choice with an essay for the writing component and the cumulative time allowed is 7 hours and 35 minutes with specific times allotted for the various tests. It is considered a comparative test that compares the examinee's skills with those of recent high school graduates ("About GED," 1999). The certificate is not a British Columbia high school graduation diploma and some post-secondary institutions or programs may not accept the GED for entrance. However, most post-secondary institutions have the option of gaining admission as a mature student. For a student gaining admission with this classification, a successful GED exam can help prepare the way for further education. The value of GED certification has been challenged by researchers who found that post-secondary completion rates for GED graduates are lower than for regular graduates (Cameron & Heckman, 1993). The focus of this American study is GED certification versus regular high school graduation. The Cottonwood Centre Young Mothers Program operated by First Steps prepares students to write the GED by having them work through the Adult Basic Education (ABE) curriculum to the grade ten-equivalency level. See the Ministry of Education web site at http://www.bced.gov.bc.ca/ged/ for further information about taking the GED in British Columbia.

Appendix E

Interview Protocols

Counsellor Interview Protocol

- School and name of service provider:
- Define role in relation to teen pregnancy/mother in own words:
- School Policy regarding pregnant/parenting teens:
- Services provided: Delivered by (role):
- Liaison with other service-providers
- Outreach mandate—ie. tracking?:
- Number of pregnant teens served per year:
- Number of young mothers served per year:
- Adult graduation versus regular graduation programming breakdown for mothers:
- Attendance policy for pregnant/mothering students:
- Eligibility criteria for program/services (such as in-school alternate):
- Part-time students?:
- Availability of in-school alternate programs:
- Use of Challenge or equivalency process:
- Use of IDS courses:
- Career Prep availability:
- Change in attitudes/acceptance of pregnant/parenting students:
- Daycare on site?:
- Other comments:
- Mums for interview:

Service Provider Interview Protocol

- Name of service provider:
- Key contact and role:
- Sponsoring agency:
- Mandate (attach or describe):
- Services provided: Delivered by (role):
- Staff qualifications:
- Role of agency in education of young mothers:
- Liaison with School District #73 personnel (describe):
- Outreach mandate?:
- Numbers of young mothers served per year:
- Adult graduation versus regular graduation programming breakdown:
- Attendance policy:
- Eligibility criteria for program/services:
- Part-time program?
- Educational counselling availability:
- Social/emotional counselling availability:
- Change in attitudes/acceptance of pregnant/parenting students:
- Daycare?:
- Other comments:
- Mums:

Appendix F

Letters of Introduction and Consent

Letter of Introduction to Young Mother

Following is a sample of a letter of introduction provided to potential study participants. The letters were printed on UNBC letterhead. When the information was available, the letter was personally addressed.

Megs Waterous
RR #1 Pritchard, B.C.
V0E 2P0

May 9, 1999

Dear Young Mother,

Hello. My name is Megs Waterous. I am a school counsellor for School District #73 and a graduate student at the University of Northern British Columbia. I am also the mother of two young children.

I am conducting an evaluation study of the different paths to high school graduation for young mothers. This study will fulfill the research requirement for a Master of Education degree in Counselling. Approval and support for this study has been granted by School District #73 and the University of Northern British Columbia.

I am contacting you because you have successfully completed secondary school graduation requirements or are currently on the path to doing so. I wish to explore your opinions of your schooling through a questionnaire. While the task of completing this questionnaire is entirely voluntary, I would like to encourage you to participate in this study. Through this study, I hope to determine those areas of high school programming that you found most helpful for your eventual success. I also hope to uncover areas that were not helpful in order to make suggestions for change. The ultimate goal of this study is to help school professionals make high school graduation more accessible for young mothers. To that end, your opinion is highly valued.

The questionnaire will take approximately 30 minutes to complete. If you have any difficulty understanding any of the questions, I can provide clarification for you. You will not be asked to put your name on the questionnaire and no attempt will be made to try and link particular questionnaires with specific individuals. All of your responses will be treated confidentially. At the end of the study, all questionnaires will be shredded.

I hope you will be willing to support this endeavor. If you have any questions that you would like answered after questionnaire completion, please feel free to contact me at 250-577-3423 or my supervisor, Dr. Bryan Hartman at 250-960-6647. If you would like to receive a summary of the results of the study when it is completed please let me know at the bottom of your consent form.

Thank you for your attention and assistance. Your involvement is appreciated.

Yours truly,

Megs Waterous

Letter of Introduction to Service-Provider

Following is a sample of a letter of introduction provided to service-providers. In each case the letter was on UNBC letterhead and personally addressed.

Megs Waterous
RR #1 Pritchard, B.C.
V0E 2P0

May 9, 1999

Dear (Service-provider),

Hello. My name is Margaret Waterous. I am a school counsellor for School District #73 and a graduate student at the University of Northern British Columbia. I am conducting an evaluation study of the different paths to high school graduation for young mothers. This study will fulfill the research requirement for a Master of Education degree in Counselling. Approval and support for this study has been granted by School District #73 and the University of Northern British Columbia.

In order to discover the best paths to graduation for these young women, it is necessary to complete a thorough review and description of particular services that they may access during this period of their lives. To obtain this information, I would like to request approximately 30 to 45 minutes of your time to obtain a description of your services and your involvement in the lives of these young women. It will be most helpful for me to have a copy of your service mandate and any formal policies or procedures that you have concerning these young women's education.

Individuals who are interviewed will not be named in the report and the information that is gained will be reported only in terms of the applicable organization. Detailed information on specific young mothers will not be sought.

I hope you will be willing to support this endeavor. I will be contacting you within two weeks to request an interview opportunity. If you have any questions that you would like answered prior to the interview, please feel free to contact me at 250-577-3423 or my supervisor, Dr. Bryan Hartman at 250-960-6647. If you would like to receive a summary of the results of the study when it is completed, please let me know at the time of the interview.

I am looking forward to meeting with you. Thank you for your attention and assistance. Your involvement is appreciated.

Yours truly,

Margaret Waterous

Consent Form

Following is a sample of the consent form provided to potential respondents. All survey respondents completed a consent form prior to being included in the study. Where a respondent was under 18 years of age and living with her parents, she was asked to have her parents indicate consent. The consent forms were printed on UNBC letterhead.

CONSENT FORM

I _____ agree to participate in this study of the different paths to graduation for young mothers. I understand that my participation is entirely voluntary. I further understand that provisions have been made to ensure that my identity is not linked to any information that I give in the questionnaire. I will not be required to put my name on the questionnaire and all data will be stored in a locked cabinet when not in use. At the end of the study the data will be destroyed. No person other than the researcher and her supervisors will have access to the data. I understand that I may withdraw from this study at any time without penalty. I understand that for the purposes of this study, the researcher may choose to review my permanent record card which lists schools attended, courses completed and achievement. Should you require further information you may contact the researcher, Megs Waterous at 577-3423 or her supervisor, Dr. Bryan Hartman at 250-960-6647.

Name: _____

Signature: _____

Date: _____

Study Results Summary Request

I wish to receive a summary of the results of this study of the different paths to graduation for young mothers. Please clearly print your name and mailing address in the spaces provided below.

Name: _____

Address: _____

_____

_____

Appendix G

Request for Other District Program Information

Information Request Letter

Margaret Waterous
RR #1
Pritchard, B.C.
V0E 2P0
250-577-3423
email: waterous@unbc.ca

February 9, 1999

Attention: Superintendent
District Number and Name
District Address

Dear Superintendent,

I am a counsellor in School District #73, Kamloops-Thompson, and I am working on my thesis through the University of Northern British Columbia. My thesis topic is The Different Paths to High School Graduation for Young Mothers. Although my focus is on the paths taken in the Kamloops-Thompson school district, I am interested to learn of any educational programs for young mothers in other school districts.

I am seeking a description or contact name and number for any young mother program you have operating in your district. Please forward this letter to the appropriate district representative or respond via my email address of waterous@unbc.ca or using the enclosed card.

Your assistance is greatly appreciated. If you would like to receive a summary copy of the results of the study, please indicate on the card or in your message.

Yours truly,

Megs Waterous

Response Card

Young Mothers Programs Contact Person School District ☐

Name: _____
Role: _____
Phone: _____
email: _____

Program Name: _____
Site address: _____

Thank you. Please forward in the provided envelope to:
M. Waterous
RR#1
Pritchard, B.C. V0E 2P0
email: waterous@unbc.ca phone: 250-577-3423

Yes, please send a copy of research summary to:

☐ address listed above or ☐ superintendent's office

Appendix H

Young Mother Questionnaire

Young Mother's Questionnaire

The Different Paths to High School Graduation

Purpose: The purpose of this questionnaire is to obtain information from young mothers who are, or were, students in School District #73 (Kamloops/Thompson) concerning their educational experiences. It is hoped that this information will assist teachers, counsellors and administrators make a high school education more accessible for young mothers. Your responses are anonymous and no attempt will be made to link questionnaires to individuals. Thank you for taking the time to complete this survey.

General Directions: Please answer each of the questions as thoughtfully and completely as possible. In all cases, the term "pregnancy" is referring to the pregnancy that resulted in your giving birth to your first custodial child. The term "custodial child" refers to a child of whom you have full or partial custody. Unless otherwise specified, the term "school" refers to any form of schooling with the goal of working towards high school graduation. Follow the directions for each part. It should take you about 30 minutes to finish. When you are finished, place the completed questionnaire in the envelope provided, seal it and give the envelope to the interviewer.

Part A: General

Circle the letter opposite the response that best answers the question asked **as shown in the example.**

Example:

1. What is your current age?

a. less than 13	***e. 16***	***i. 20***	***m. 24***
b. 13	***(f.) 17***	***j. 21***	***n. 25***
c. 14	***g. 18***	***k. 22***	***o. 26***
d. 15	***h. 19***	***l. 23***	***p. more than 26***

1. What is your current age?

a. less than 13	e. 16	i. 20	m. 24
b. 13	f. 17	j. 21	n. 25
c. 14	g. 18	k. 22	o. 26
d. 15	h. 19	l. 23	p. more than 26

2. How old were you when you gave birth to your first custodial child?

a. less than 13	e. 16	i. 20
b. 13	f. 17	j. 21
c. 14	g. 18	k. 22
d. 15	h. 19	l. more than 22 (how old?) _____

3. In what month is this first child's birthday?

a. January	e. May	i. September
b. February	f. June	j. October
c. March	g. July	k. November
d. April	h. August	l. December

4. Following the birth of your first custodial child, how many months intervened before you returned to school?

a. less than one month
b. one to two months
c. two to three months
d. three to four months
e. four to six months
f. six to eight months
g. eight to ten months
h. ten to twelve months
i. more than twelve months

5. While you attended school, how many custodial children did you have?

a. 1
b. 2
c. 3
d. more than 3

6. To which ethnic category do you belong?

a. Caucasian
b. First Nations
c. Indo-Canadian
d. Asian
e. Other

7. If you actively practise a religion, to which religious category do you belong?

a. Catholic
b. Protestant
c. Other (describe) _____
d. No religious affiliation

8. Were you enrolled in school at the time you learned of your pregnancy? (If you learned of your pregnancy in July or August and were enrolled in the preceding June, answer Yes to this question)

a. Yes
b. No (Skip to question 10)

9. In which grade were you enrolled at the time you learned of your pregnancy? (If this event occurred in the summer, identify the grade level in which you were enrolled before that summer.)

a. 8
b. 9
c. 10
d. 11
e. 12
f. other (explain)_____

10. Prior to your pregnancy, had you ever failed any grades?

a. Yes
b. No (skip to question 12)

11. Identify the grade level(s) that you failed prior to your pregnancy.

a. Primary (Kindergarten – grade 3)
b. Elementary (grades 4-7)
c. 8
d. 9
e. 10

12. Prior to your pregnancy, had you ever failed any courses in grade 11 or 12?

a. No
b. Does not apply (was not in grade 11 before pregnancy)
c. Yes, one course
d. Yes, two courses
e. Yes, three courses
f. Yes, more than three courses

13. Just prior to your pregnancy, in which type of program were you enrolled? (An in-school alternate program is one where a student attends a regular high school but takes her courses through alternate means—using, for example, the Pathfinders lab or Points or Correspondence materials)

a. Regular school attending full time
b. Regular school attending part time
c. In-school alternate program
d. Kamloops Alternate School (Kamloops Community Learning Centre)
e. Alternate program in an outlying school
f. Correspondence
g. Home school
h. Other (explain) _____
i. Not in school

14. Just prior to your pregnancy, in which area did you attend school?

a. Urban (Kamloops)
b. Rural (Barriere, Chase, Clearwater, Logan Lake)
c. Other (explain) _____
d. Not in school

15. During your pregnancy, in which area did you attend school? (may choose more than one option)

a. Urban (Kamloops)
b. Rural (Barriere, Chase, Clearwater, Logan Lake)
c. Other (explain) _____
d. Not in school

16. After your child was born, what was the **first** area in which you attended school?

a. Urban (Kamloops)
b. Rural (Barriere, Chase, Clearwater, Logan Lake)
c. Other (explain) _____

17 What was the latest month of pregnancy in which you attended school?

a 1st
b 2nd
c 3rd
d 4th
e 5th
f 6th
g 7th
h 8th
i Full term
j Not in school

Part B: Path

In the chart on the right please indicate the path you took to graduation or current school standing. The chart on the left is an example. Use as many rows as necessary per grade level. Below the chart is a list of options for Institution and Status.

Year	Grade	Institution(s)	Parenting Status
88/89	8	Urban High School	Pre-pregnancy
89/90	9	Urban High School	Pre-pregnancy
90/91	10	Urban High School	Pregnancy
90/91	10	KamloopsAlt./ Marion Hilliard	Pregnancy
91/92	10	Not in school	Parenting
92/93	10/11	Kam. Alternate	Parenting
93/94	11/12	Urban High School	Parenting
94/95	12	Urban High School	Parenting
Schooling Status: Graduated			

Year	Grade	Institution(s)	Parenting Status
Schooling Status:			

Institution
Urban High School
Rural High School
Correspondence
Home Schooling
Kamloops Alternate Program
In-School Alternate
Rural Alternate Program (housed in regular school)
Marion Hilliard House
Elda Marshall House
First Steps Cottonwood Centre Program
Other (use for a non School District #73 school)
Not in school

Parenting Status
Pre-pregnancy
Pregnancy
Parenting

Schooling Status
Attending
Graduated

Part C: True/False

This section includes a number of questions to which a True or False answer is required. Please answer the questions to the best of your ability. Circle the letter opposite the response that best answers the question. Some statements may not apply to you. If this is the case for you, circle the **N A (Not Applicable)** on the line before the statement. Some examples have been provided. Please use only your own personal experience to make a decision about each statement.

Examples:

If you did not attend school during your pregnancy you would answer NA.

__(NA)__. *Attending school part-time during my pregnancy was an option available to me at my regular school.*

a. True
b. False
c. Don't know

__ NA __1. *Attending school part-time during my pregnancy was an option available to me at my regular school.*

a. True
b. False
(c.) Don't know

__NA__ 1. Attending school part-time during my pregnancy was an option available to me at my regular school.

a. True
b. False
c. Don't know

__NA__ 2. Attending school part-time was an option available to me at my regular school when I was parenting.

a. True
b. False
c. Don't know

__NA__ 3. As part of my grade 11 or 12 program, I took an Independent Directed Studies (IDS) course. (This course allows a student, under the sponsorship of a teacher, to work on a project/program Independently and receive credit toward her graduation program).

a. True
b. False

__NA__ 4. At **my regular high school**, I had the option of taking an in-school alternate course. (An in-school alternate course **allows a student to progress at her own pace**. Example: a course based in a Pathfinders lab or using "Points" or correspondence curriculum.)

a. True
b. False
c. Don't know

__NA__ 5. I had the option to take advantage of the course challenge procedure. (The course challenge procedure provides an opportunity for a student to demonstrate knowledge and skills which reflect the learning outcomes of a course in order to gain credit for that course. This knowledge or skill may be obtained in a non-school setting.)

a. True
b. False
c. Don't know

__NA__ 6. I participated in the Career Preparation program.

a. True
b. False

__NA__ 7. The Career Preparation program was available to me during my pregnancy.

a. True
b. False
c. Don't know

__NA__ 8. The Career Preparation program was available to me when I was parenting.

a. True
b. False
c. Don't know

__NA__ 9. I returned to my regular school program after the birth of my child.

a. True
b. False

Part D: Rating Scale

For the following statements, please circle the rating scale value that best represents your opinion of each statement. Some statements may not apply to you. If this is the case for you, circle the **NA (Not Applicable)** on the line before the statement. Some examples have been provided. Please use only your own personal experience to make a decision about each statement.

Examples

If you did not attend school during your pregnancy, circle NA on the line to the left of the statement.

(NA_1) During my pregnancy, it was easy for me to obtain permission to be excused from my classes to attend medical appointments.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

If it was always easy to obtain permission to attend medical appointments you would select a value on the Strongly Agree side of the scale.

_NA_ 1. During my pregnancy, it was easy for me to obtain permission to be excused from my classes to attend medical appointments

Strongly Disagree 1 2 3 4 5 6 (7) Strongly Agree

If it was never easy to obtain permission to attend medical appointments you would select a value on the Strongly Disagree side of the scale.

_NA_ 1. During my pregnancy, it was easy for me to obtain permission to be excused from my classes to attend medical appointments

Strongly Disagree (1) 2 3 4 5 6 7 Strongly Agree

If permission was sometimes easy to obtain and sometimes difficult to obtain, you would select the middle value.

_NA_ 1. During my pregnancy, it was easy for me to obtain permission to be excused my classes to attend medical appointments

Strongly Disagree 1 2 3 (4) 5 6 7 Strongly Agree

You would use the other values (2,3,5, or 6) when permission was often (but not always) difficult to obtain or often (but not always) easy to obtain

__NA__ 1. During my pregnancy, it was easy for me to obtain permission to be excused from my classes to attend medical appointments.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 2. Pregnancy-induced nausea caused me to miss school more frequently than usual.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 3. Missed classes due to nausea disrupted my schooling.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 4. Missed classes due to nausea interrupted my schooling and caused me to **drop** one or more courses.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 5. Missed classes due to nausea interrupted my schooling and caused me to **fail** one or more courses.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 6. Missed classes due to nausea interrupted my schooling and caused me to drop out of school.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 7. When I missed classes due to nausea or medical appointments, I received support to make up missed work.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 8. I was able to quickly return to my regular school program after the birth of my child.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 9. The birth and post-delivery recovery period interrupted my schooling.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 10. After the birth of my child, I missed a significant amount of school in a single term due to medical appointments.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 11. After the birth of my child, I missed a significant amount of school in a single term due to my child's illness.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 12. Missed classes due to my infant's illness(es) caused me to drop out of school.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 13. After the birth of my child, when I missed school for medical reasons, I received support to make up the work.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 14. I was able to access a daycare convenient to my school.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 15. It was easy to find suitable child care while I attended school.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 16. When my child was ill, I had help to care for him/her.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 17. My school's administrators were understanding when I missed school due to my child's illness. ("Administrators" refer to the Principal and Vice Principal)

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 18. I had difficulty transporting my child to child care so I could attend school.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 19. I usually walked to transport my child to child-care so I could attend school.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 20. I usually relied on public transit to transport my child to child care so I could attend school.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 21. Prior to my delivery I relied on a school bus to attend school.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 22. If I did not need to transport my child to child care, I would take a school bus to school.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 23. I received helpful services from the hospital-homebound support teacher during my pre-natal and post-natal period.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 24. It would have been helpful to receive the services of a teacher during my pre-natal through post-natal period when I was not attending school.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 25. I felt my school counsellor was knowledgeable about the transitions I made between programs during my pregnancy and parenting periods.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 26. I found the transitions between programs difficult.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 27. At Marion Hilliard pre-natal house, the environment was supportive of continuing my high school education.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 28. At Elda Marshall Post-natal house, the environment was supportive of continuing my high school education.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 29. I changed schools after the birth of my child but I would have preferred to remain at my regular school if appropriate programs were available.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 30. Part-time school attendance would have been helpful for me when I was pregnant.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 31. Part-time school attendance would have been helpful for me when I was parenting.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 32. It was difficult to attend school full time during my pregnancy.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 33. It was difficult to attend school full time when I was parenting.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 34. I felt involved in planning my high school program.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 35. Had they been available, I would have taken Independent Directed Studies courses when I was pregnant.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 36. Had they been available, I would have taken Independent Directed Studies courses when I was parenting.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 37. Had they been available, I would have taken in-school alternate courses during my pregnancy.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 38. Had they been available, I would have taken in-school alternate courses when I was parenting.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

__NA__ 39. Had they been available, I would have taken course challenges for courses such as Family Management 11 and/or 12.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

Part E: Chart

In the following charts please identify the percentage of persons in each category that you feel were supportive, neutral and non-supportive. A supportive person might demonstrate their support by being non-judgmental about the pregnancy, being encouraging about you continuing your education and/or offering emotional support. A non-supportive person might have acted judgmental or have been discouraging about your continued education or somehow made you feel uncomfortable about being pregnant or parenting and attending school. Complete these charts in terms of those persons you had contact with rather than in terms of all the staff at your school. For each category of persons, the percentages should add up to 100%. Note: Non-professional includes all other school staff members such secretaries, custodians, hall-way supervisors, and teacher-aides. If you did not attend school during your pregnancy, write **NA** (not applicable) across the boxes in Chart A.

Examples:

Example of percentages adding up to 100%

	Supportive	*Neutral*	*Non-Supportive*
Teachers	*80*	*15*	*5*

If you did not attend school during your pregnancy write this across the boxes of Chart A.

	Supportive	*Neutral*	*Non-Supportive*
Teachers		NA	
Counsellors			
Administrators			

Chart A: While attending school during your pregnancy

	Supportive	Neutral	Non-Supportive
Teachers			
Counsellors			
Administrators			
Non-professional			

Chart B: While attending school while parenting

	Supportive	Neutral	Non-Supportive
Teachers			
Counsellors			
Administrators			
Non-professional			

Part F: Unstructured Responses

This section of the questionnaire invites you to reflect on areas of your schooling that were especially successful or helpful and areas that you feel were not helpful. To help you organize your thoughts, a variety of topics has been outlined. Feel free to put your comments in point form. Please take the time to think about each of the topics and comment upon those that you think were most important for your success. Your point of view on these topics is highly valued.

Administrative Issues
Attendance (lates and absenteeism)
Child care concerns
Transportation issues

_____

_____

_____

_____

_____

_____

_____

Support Issues
Staff support
Hospital-homebound support
Program continuity

_____

_____

_____

_____

_____

_____

_____

Program Issues

Part-time study issues
Career guidance and program planning
Independent Directed Studies options
Alternate course options
Course challenge
Career Preparation availability

Other Issues

Appendix I

Letters of Approval

SCHOOL DISTRICT NO. 73 (KAMLOOPS/THOMPSON)
1383 Ninth Avenue, Kamloops, B.C. V2C 3X7 • Telephone: (250) 374-0679 • Fax: (250) 372-1183

1998-12-09

Margaret Waterous,
R.R. #1,
Pritchard, B.C.
VOE 2PO

Dear Margaret:

RE: REQUEST TO CONDUCT RESEARCH

I have reviewed your proposal and hereby grant permission for you to conduct research, as described in your letter received December 8, 1998.

Permission is subject to your providing this office with a summary report of your findings, agreement to share your findings with the teacher counsellors of this district, and consent of all persons involved.

If we can be of any assistance to you please do not hesitate to enquire. Your subject of research is of great interest. I wish you much success.

Yours truly,

T.D. Grieve,
Superintendent of Schools.

TDG/nr

cc: D. Paravantes

THE UNIVERSITY OF NORTHERN BRITISH COLUMBIA

3333 University Way, Prince George, BC V2N 4Z9

D. Max Blouw, Ph.D.
Associate Vice President (Research) & Dean of Graduate Studies
Professor, biology / Fisheries
Tel: (250) 960-5821
Fax: (250) 960-5746
E-mail: blouw@unbc.ca

UNBC Ethics Committee

March 9, 1999

Ms. Margaret Waterous
RR 1
Pritchard, BC V0E 2P0

Proposal: 19990201.22

Dear Ms. Waterous:

The UNBC Ethics Committee met on March 5, 1999 to review your re-submission for the ethics proposal entitled "The Different Paths to High School Graduation for Young Mothers".

The Committee has approved your proposal and you may proceed with your research.

Sincerely,

D. Kem

for/ Max Blouw

Appendix J

Summary of Conclusions and Recommendations

Summary of Study Conclusions

	General	Positive Features	Areas of Concern
Administration			
Attendance		School personnel indicated flexible approach to attendance	Roughly 1/4 of respondents expressed concern about attendance affecting their schooling.
		Majority of mothers indicated they coped well with attendance concerns.	
Childcare	Most mothers accessed the First Steps programs and fully subsidized daycare.	Satisfaction with childcare arrangements expressed by majority of mothers.	Mothers who do not access First Steps program have very limited options due to daycare surcharge issues.
Transportation			There is confusion and lack of awareness of the transportation subsidy.
			Transportation poses many problems and may contribute to school dropout.
			Transportation is a problem, particularly in winter, even for those mothers who live within one bus ride of their program.
Support			
Staff Support	Students recalled many experiences where staff were supportive and unsupportive.	Generally, school staff reported as supportive.	Administrators being reported as the least supportive staff group during both pregnancy and parenthood.
			Lack of administrative support constituted obstacles to high school graduation for some young mothers.
			Maintaining the balance between accountability and accommodation is difficult.
Hospital/home bound		This service does have the mandate to serve this population	Option currently receiving little use despite perceived desirability on part of young mothers.
Self-reliance		Mothers felt an increase in maturity, directedness, responsibility	
Other Support	Support received from others crucial in helping mothers cope with dual roles.		
Program			
Full-time vs. Part-time	Preferences appeared split	Many mothers prefer full-time and cope with the demands of full-time.	Confusion about whether a part-time program was available during pregnancy or parenthood
	Data complicated and difficult to draw conclusions.	Some mothers were able to attend part-time at their choice	
	Mothers who prefer full-time feel more strongly.		
	Preference for part-time or full-time school attendance was unrelated to the perception of difficulty in school attendance.		

	General	Positive Features	Areas of Concern
Program Choice/ Transitions		The prenatal and postnatal houses were both perceived as being supportive of school continuation.	Many young mothers would have preferred to remain at their home school versus transferring to a First Steps program but the availability of this option is entwined with issues of childcare, program-delivery, attendance and support .
		Virtual school is an, as-yet unaccessed, option for young mothers that holds promise for increasing flexibility of programs.	Little tracking goes on between programs and some young mothers appeared to need more support in this area.
		Counsellors were viewed as knowledgeable about transitions and the transitions posed few problems.	
Program Specifics: IDS, ISA, Challenge / Equivalency, Career Prep			Confusion around issues of IDS and course challenge and equivalency by staff and students.
			ISA course use is inconsistent across schools.
			Career Prep is little used with this population and may be seen by mothers to slow down progress toward graduation.
Other Program Issues		Young mothers keen to look at alternatives to help them graduate efficiently.	
Other			
Hard School		Many mothers described school attendance while pregnant and parenting as very difficult yet still chose to persevere.	
Future Plans	Majority of mothers spontaneously discussed future career plans.	More than a quarter of the respondents reported specific post-secondary plans underway.	Few resources in place to track and support young mothers in their post-secondary and career aspirations.
Path			
	Paths taken were intricate and varied.	Many respondents returned to school after an extended absence.	
	Most common components included attendance at an urban high school, attendance at the alternate school, being out of school for a period and attendance at another institution (transiency).	Many mothers had their first births after age 18, yet were still able to access a SD #73 program.	

Summary of Study Recommendations

It is recommended that the following topics be pursued.

Administration

Attendance
- Continue flexible approach to attendance.
- Continue supportive counselling and advocacy to help young mothers cope with attendance issues.

Childcare
- Increase counsellor awareness of childcare issues and daycare subsidy issues which will aide in development of flexible, accommodating programs.

Transportation
- Increase awareness of transportation subsidy among staff and young mothers.
- Investigate the viability of a transportation subsidy for all young mothers who are attending school regardless of their distance from the institution.

Support

Staff Support
- Increase awareness of the importance of staff support for this population.

Hospital/homebound Support
- Increase awareness of/use of the hospital/homebound support service.
- Educate students and staff about when and how to implement this service.

Self-reliance
- Focus on the positive aspects of adolescent childbearing with this population to help young mothers reframe their situation and look to the future for themselves and their children.

Other Support
- Increase staff awareness of the importance of support from others.
- Develop programs with an eye to the level of personal support experienced by the young mother.

Program

Full-time and Part-time Studies
- Promote awareness that part-time studies are not necessarily the best choice for all young mothers who are finding school difficult.
- Work with young mothers who prefer full-time to find other ways to maintain balance.
- Increase awareness on the part of young mothers about the availability of a part-time program during pregnancy and parenthood.

Program Choice and Transitions
- Work with young mothers to help them find ways to stay at their home school if this is their choice.
- Continue to refer to the First Steps program for mothers who choose this option.
- Investigate Virtual School as an option that might allow flexibility for program design.
- Develop a joint campus for those mothers desiring a greater breadth of courses.

Program Specifics: IDS, Alternate, Challenge and Career Prep
- Promote professional discussion to increase awareness of the options of IDS, challenge and equivalency.
- Increase the use of these options to help young mothers enroll in a flexible, manageable program.
- Investigate a standard district equivalency for the programs run at the prenatal and/or postnatal homes.
- Develop consistency across the district with respect to ISA course offerings.
- Promote Career Preparation as a viable, efficient way to graduate and get career planning and experience.

Other

- Create an inter-ministerial position for the purposes of case-managing adolescent mothers in SD #73.
- In addition to or in lieu of a case-manager, develop a comprehensive catalogue of options to help existing service providers guide young mothers through the process of obtaining their high school educations.
- Focus (by public health) on young mothers at various stages of their infants' development to encourage a return to school.
- Research programs offered in other districts in order to enhance SD #73 programs.