

# Grounding Evidence Synthesis in Lived Experience: Priorities of Adolescent Mothers

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# Disclosure Statement

We have no affiliations (financial or otherwise) with a pharmaceutical, medical device or communications organization.

# Background and Objectives

*Shift ideas about what counts as evidence and expertise* in the context of maternal health among marginalized women in Canada

To ground available evidence in the lived experience of disadvantaged young mothers to identify and better understand priority issues affecting their care as pregnant and parenting young people

# Methods

## What does the research tell us?

Mixed Methods Review on Perinatal Experiences and Outcomes of Young People in Canada

Share evidence with pregnant and parenting young people to identify priority concerns

## What does the research tell us?

Mixed Methods Review on priority concern(s)

Ground published evidence in experience of pregnant and parenting young people using cognitive maps

# What does the research say?

## 1) Mixed Methods Evidence Synthesis

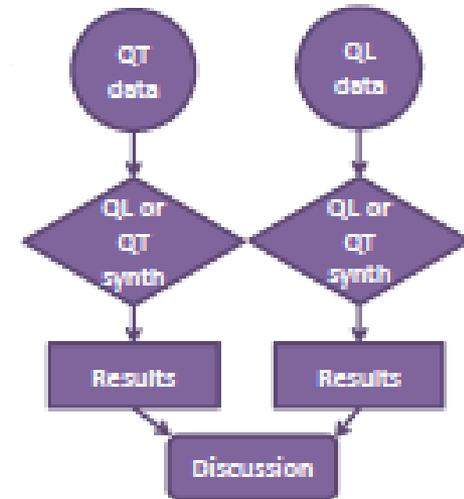
Parallel-results convergent synthesis design

Thematic synthesis (qualitative results)

Descriptive statistics(quantitative results)

Identified 771 records identified

28 eligible (15 qualitative; 13 quantitative)



## 2) Extracted data from Better Outcomes Registry & Network (BORN) database

Adolescents (under 23) compared to adult population in Champlain LHIN and across Ontario

- Perinatal health indicators (pregnancy rate, preterm, antenatal care, labour and birth complications)
- Risk factors commonly reported among adolescent pregnancies (substance use, sexually transmitted infections, mental health concerns, experience of abuse)

# Community-based Partnership



St. Mary's Home is an Ottawa-based social service agency that provides a full range of programs and services for young pregnant women, young moms and dads, and their infants and young children.

Pregnant or parenting youth (12-25) and their children (0-4 years) can access:

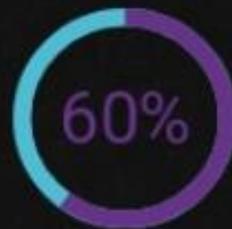
- Crisis and counselling support
- Life skills, parenting, attachment and personal development programming
- Addictions counselling
- Primary care and obstetrics clinics
- High School credits
- Children's programming to support development growth
- Only Residential/Shelter for young pregnant and parenting people in Eastern Ontario

## 10 661

babies were born in Canada to women under the age of 19 in 2014. This is down by 27% from 2010. (Statistics Canada, 2017)

## 90%

of young mothers are single (Thompason 2015)



of young mothers have graduated or are attending high school/post-secondary school (Singh 2015; Thompason 2015)

Young mothers are **4x** more likely to be living in poverty (<\$30 000/year) (Al Shabab 2015)



Young pregnant women are **3x** more likely to have experienced abuse than adult women (over 23 years) (BORN, 2017)



Young pregnant women are 75% more likely to experience anxiety compared to adult women (BORN, 2017)



Young pregnant women are twice as likely to experience depression compared to adult women (BORN, 2017)

Young women are **6x** more likely to report drug use while pregnant than adult women (BORN, 2017)

## BEING SEEN AS A RISK



"Workers were highly critical of policies that made child protection the only possible means to access supportive services. Young mothers' needs for respite, day care subsidies, teaching homemakers and so forth needed to be viewed as positive supports which would strengthen families." (Rutman 2002)

65%

of young women attending a Young Families Outreach program had child protection services involved in their child's care (Singh 2015)



"She chose not to take any painkillers during her labour, in part, because she was afraid that it might demonstrate to child protection workers that she was not a suitable mother" (Carson, 2017)

## SUPPORT NOT JUDGEMENT



"it's like there is a lack of information about where women can go to get information without feeling judged "  
(Gill 2016)

"Laura states that her family thought that early childbearing was shameful, denoting a woman who was a failure. Consequently, she felt completely alone, which made life hard, to the point where she was suicidal" (Whitley 2008)



"While they were grateful for non-judgmental support and guidance, they explained that this support was not very common in their lives. They expressed frustration that they are not treated like other mothers, and frequently experienced judgmental stares and comments." (Fortin 2013)



"Changes in the women's social network contributed to the loss of self and the experience of health behavior expectations as oppressive" (Reszel 2014)

## MOTHERHOOD AS AN HONOUR



'To me it is an honour and a privilege to pop out three lovely bouncing [kids].' (Fortin 2013)



".. everybody has their story, everybody has their past, and one thing I notice are the similarities between us even though we are all different. We are a group that takes care of each other's children and takes care of each other. (Levy, 2010)

"It's probably one of the best decisions I've ever made for myself and really I don't know where I'd be if I hadn't become a mom. I've struggled with like depression my whole life and mental health and stuff like that but being a mom taught me...I saw the unhealthy relationships my parents had and everything they weren't able to do taught me what I needed to make sure I'd be [there] for my son. My sons are a blessing- like I really couldn't imagine where I'd be without them." (Fortier 2017)

# Service Provider Perspectives Priority Factors Affecting Young Mothers

## **Mental Health**

- Access to mental health services - Anxiety and Depression
- Untreated or undiagnosed mental health needs

## **Judgment**

- Far of being vulnerable; fear of looking stupid, flagged as a risk to Child Protection

## **Past Traumatic Experiences**

- Impact of childhood trauma on parenting
- Impact of domestic violence; unstable relationship with child's father (mother)

## **Safe and Supported Living**

- Unstable inadequate unaffordable housing
- Access cultural perspectives towards parenting and perinatal care
- Lack of lifeskills to support independent living with kids
- Poverty's impact on accessing care
  
- Lack of coordinated services for youth

# What do women say?

Old enough to have

a **BABY!**

**BUT**

Too Young to Consent?!

Navigating Access  
Barriers

Systems That Were Not  
Made for Them

# Social Isolation

Keeping your  
Friends

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This gets in the way  
because, once you  
get pregnant you  
begin to lose friends

+ family members

Disconnection from  
Resources and  
Services

## Breastfeeding

*“Young moms and moms in general are still constantly being shamed and ridiculed for breastfeeding in public.*

*If a baby is hungry, feed the little one.....it makes me mad when I see women being shamed for it. If you don't like to see it, look the other way.”*

## Housing

*“They see you as dangerous and put tons conditions on you before you can access housing”*

# What Judgment looks like...

## Seen As a Risk

Blamed for Things Outside of Control

Pressure to show “good motherhood”

Asking for Help Leads to Blame

Always under microscope

Using Past Against Me

Seen as dangerous if I stand up for myself

## Seen As a Incapable

People assume you don't know what you are doing

Consent not seen as necessary

Loss of social support

## Invisible

Own Needs Not Recognized

*“We don't need to be hovered over-we aren't terrible or scary people, or that we have no idea what we are doing. Some of us are in bad situations or made some poor choices along the way, but it doesn't mean we don't know what I was doing, they just took it upon themselves to take over with the assumption that I wasn't going to do it myself” UP*

*“.... when people look at me, nobody sees my future plans, just my present problems.” VN*

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# ...and its consequences

Internalized Blame / Self Doubt

Anger and  
Frustration  
Anxiety, Depression

Unmet Needs  
*“I sneeze and it is judged; I go to the bathroom and I wonder if it is okay.....you cannot function as a human if you are always in doubt”*  
SP *“Even postpartum, it felt that it took excessively long to get a referral to perinatal mental health. Makes me want to give up. I received great care for anything that directly affected baby's health, but my mental health didn't fall into that.” SP*

# Supportive Relationships as a Counter to Judgment

*“What made a big difference for me was having someone - for me it was my mum and grandmother - telling me that I am a good person, that I can do this. They made me believe in myself.” BB*

*“There were some good people at the hospital- they showed that they had faith in me and took the time to spend some time with me, and believed in my skills. One of these was a lactation consultant, who stood up for me within the hospital and with other professionals” VN*

Doctors/C.A.S/Society  
assume "you're young therefore  
you're an unfit parent."

## Being Identified as a Child Protection Risk

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*"They judge you for something you didn't even know you are doing. They make you feel like you are not capable of being a good mom....instead they should try to help you become the best mom you could be"*

# Implications for Research and Practice

- Lessening the role that judgment plays in the maternity and early parenthood experiences of all women, and especially those who may face high levels of stigma.
- Involving young women changed the focus of our work
  - Leveraging lived experience to inform service design, delivery and evaluation
- Adapting research processes to support meaningful engagement
  - Being explicit about whose knowledge counts where
  - Need research methods that account for cultural, social and biomedical approaches to health

# Thank you!

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<b>Women Participating in In-Depth Interviews (n=10)</b>	
<b>Completed or Completing High School</b>	75%
<b>Receives Public Income Assistance (OntarioWorks, ODSP)</b>	77% (11% no income)
<b>Age @ First Child</b>	15-23 years
<b># of Children</b>	1-4
<b>Child Protection involvement in pregnancy or parenting</b>	78%
<b>Youngest Child in Their Custody</b>	89%;
<b>Child Protection involvement in own childhood</b>	67%
<b>Experienced Intimate Partner Violence while pregnant or parenting</b>	78%
<b>Experienced abuse of any kind from family</b>	67%
<b>Experienced anxiety or depression while pregnant or parenting</b>	56%
<b>Accessed mental health services</b>	78%

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Young mothers are twice as likely to be at risk for postpartum depression (EPDS > 13) (Kingston 2012)

Young women are half as likely to have a C-section than older women (Fleming 2013; Kingston 2012)

**1/2**

Young women are half as likely to intend to breastfeed their newborn than older women (Fleming 2013; Kingston 2012)

Percent more likely to deliver preterm (<37 wks) compared to older women: **16%** (Fleming 2013)