

## Understanding Resilience Development in Teenage Mothers: Insights into Effective Mechanisms and Intervention Programmes

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### Abstract

*Understanding resilience development can highlight how some teenage mothers successfully navigate these challenges; and offering insights into their coping mechanisms and strengths is of great concern. The objectives of this research sought to explore the psychological outcomes associated with participation in resilience programmes, including changes in mental health, self-efficacy, and coping skills. Furthermore, they sought to examine the policy implications of research findings, and thereafter provide recommendations for policymakers to support resilience programmes for teenage mothers. To develop best practices influenced by the paper for designing and implementing resilience programmes that are tailored to the unique needs of teenage mothers, a qualitative integrative literature review approach was used. Inclusion criteria were based on studies that focused on teenage mothers aged 13 to 19 years. Exclusion criteria were based on excluding quantitative studies, reviews, or meta-analyses that did not focus on qualitative methodologies. A purposive sampling strategy was used, and thematic analysis was utilised to analyse the data. The results indicated that the formation of support groups, family support, financial support, and life skills are vital for promoting resilience. The paper has shown that effective resilience programmes often combine educational, emotional, and social support, addressing multiple facets of a teenage mother's life. One of the recommendations was that there was a need to foster collaboration between schools, healthcare providers, social services, and community organisations to create a cohesive support system for parenting teenage mothers.*

**Keywords:** resilience, parenting teenage mothers, teenage mothers, mental health empowerment, sexual reproductive health

### Introduction

In Africa, the adolescent birth rate remains high, with the largest number of estimated births to 15–19-year-olds in 2021 occurring in sub-Saharan Africa (6,114,000) (WHO, 2024). Zimbabwe's adolescent birth rate, currently estimated at 93 (World Bank, 2024) stood at 108 in 2019 (ZIMSAT & UNICEF, as cited in Hofisi & Hungwe, 2025). The need to understand the operation and meaning of resilience in African teenage mothers' lives is significant. Resilience is conceptualised as the teenage mother's ability to cope and solve problems in the

presence of multiple risk factors (Lacy et al., 2021). One could argue that resilience is the product of the intuitive application of positive psychology to the management of personal adversity experienced by teenage mothers. Resilient teenage mothers are those individuals who display the capacity to remain well, recover, or even thrive in the face of adversity and choose not to become victims (Lupac & Alvarez, 2020). Programmes that foster resilience can improve mental well-being and reduce risks of depression and anxiety for this vulnerable group. Strengthening the resilience of parenting teenage mothers may contribute to overall community health, reducing societal costs related to health care and welfare. Though the government of Zimbabwe considers parenting teenage mothers as disadvantaged and at-risk with specific sexual and reproductive health needs, not many mental health programmes have been implemented for this vulnerable group (Berejena, 2019).

Little is known about teenage mothers' exposure to health information within their daily lives, their familiarity with preconception health, and their preferences for receiving health messages and other information in most marginalised countries deter them to effectively build on mechanism and programmes that strengthen their well-being (Bosire et al., 2021). Collins (2010) notes that commentators on teenage motherhood see teenage mothers as lacking rationality and thus making bad choices that disadvantage their own and their child's future. Some 38% of teenage mothers are unaware that a woman can become pregnant after having sex only. If teenage mothers do not have enough knowledge, experience, and counselling on SRH, they may face health-related issues such as unintended pregnancies, leading to adverse health consequences and long-term psychosocial, social, and economic problems (Lat et al., 2022). Generally, mental health has not received priority policy attention across most of sub-Saharan Africa (Eboreime et al., 2022). Few studies have been found that tested interventions that enhance resilience in teenage pregnancy (Kuasit et al., 2018). This paper could inform policymakers on effective interventions and support systems, ultimately leading to better resources for parenting teenage mothers.

### **Aim of the study**

The purpose of the paper was to assess the effectiveness of current mechanisms and programmes aimed at identifying best practices as well as areas of improvement to create and recommend new programmes that specifically address the unique challenges faced among parenting teenage mothers.

## **The objectives of the study**

These sought to:

- i) To explore the psychological outcomes associated with participation in resilience programmes, including changes in mental health, self-efficacy, and coping skills.
- ii) To examine the policy implications of research findings, providing recommendations for policymakers to support resilience programmes for teenage mothers.
- iii) To develop best practices influenced by the paper for designing and implementing resilience programmes that are tailored to the unique needs of teenage mothers.

## **Methodology**

### **Research approach**

The paper employed a qualitative integrative literature review approach to gather published studies on resilience mechanisms for parenting teenage mothers.

### **Purposive Sampling**

The paper selected studies that specifically addressed the research questions or themes of interest. This method focused on relevant literature rather than random selection.

### **Inclusion and exclusion criteria**

Inclusion criteria used multiple databases such as PubMed, Scopus, Web of Science, Science Open, and Google Scholar to gather secondary data sources to ensure a comprehensive search. Keywords and synonyms used during the search of literature were “resilience,” “strategies,” “teenage mothers,” and “pregnant and parenting” to capture relevant studies. Inclusion was based on qualitative studies only, for example, interviews, focus groups and ethnographies that explored resilience mechanisms, coping strategies and intervention impacts were used. The paper used publications that were in English or with accessible translations. The paper used studies published over the last 10 years from 2015 to 2025 to ensure relevance. Exclusion criteria were based on studies involving participants outside the age range of 13 to 19 years or non-mothers. This research that did not specifically address resilience or related themes in teenage mothers. Studies that were not available in English or without adequate translations were also excluded.

### **Data analysis**

The paper utilised thematic analysis by identifying common themes, patterns, and trends across the studies to synthesise findings and draw conclusions. By employing these methods, an

integrative literature review enabled effective compilation and synthesising of existing knowledge on the topic, providing valuable insights for future research, practice and policy.

## **Ethics in research**

### **Plagiarism**

The authors ensured proper citation of all sources to avoid plagiarism and acknowledged the original authors' contributions accurately.

### **Data integrity**

The authors presented findings and interpretations honestly and transparently, avoiding misrepresentation of the literature.

## **Results**

### ***Teenage-friendly health services***

Studies show that teenage pregnancy is mainly due to a lack of teenage-friendly services, inadequate comprehensive sexuality education, nonavailability and cost of contraceptives, inadequate health personnel, judgmental attitude of service providers, and inadequate counselling (Geda, 2020). Statistics from Europe and sub-Saharan Africa suggest that various interventions aimed at reducing teenage pregnancies have had little or no success (Nkabura, 2016). Empowered teenage mothers are more likely to attend facility-based reproductive health services, utilise modern family planning methods, and experience fewer pregnancies. An increased emphasis on male engagement in women's health may assist in preventing reproductive health issues, increasing acceptance of contraceptive methods, and empowering women's decision-making (Wisofski & Pell, 2020). The establishment of adolescent youth centres is requisite for all teenage mothers' issues, including legal resources and professional services, information on potential policies, sexual and reproductive health training, mental health education, and well-being (UNICEF, 2023). Research has shown that teenage mothers seem to understand that their importance and value only exist when they repeat what is reinforced by their social group (Butler as cited in Anima, 2019).

### ***Resilience-enabling relationships and participatory programme development***

Resilience-enabling relationships can involve a supportive family, supportive peers, supportive community members, leaders, faith-based supports, and service providers from education, mental health, welfare, or criminal justice services for parenting teenage mothers (Zhange, 2020). These relationships protect and enhance the resilience of teenage mothers by offering

them an optimal environment in which they have the capacity and ability to adapt to adverse conditions that are likely to threaten their physical, social, and psychological functioning (Zhange, 2020). Interventions such as the Paying Attention to Self-intervention in Australia that involved adolescent mothers in the development and implementation of these groups, in addition to involving other key social networks such as family members, were also successful at improving teenage mothers' mental health and emotional well-being (Tinago et al., 2020).

### ***Contextual resilience mechanisms***

Social cohesion helps to strengthen self-confidence and a sense of belonging essential for enhancing resilience among parenting teenage mothers (Kwembeya & Mutambara, 2022). The psychological development of teenage mothers requires a stable environment that enables them to develop a positive self-image and self-identity (Tfwala & Mpofu, 2022). Resilience skills have been conceptualised to include an individual's ability to adapt to change, to cope with stress, and to tolerate negative emotions (Marta et al., 2022). Therefore, resilience can be increased in a universal capacity, and allow pregnant teenagers to prevent and overcome adversities, as well as the damaging effects of adversity. Teenage mothers need to have their resilience enhanced such that they develop more competency, including inner strength, external support, and interpersonal and problem-solving skills, to manage the several adversities they may face in their lives (Kuasit et al., 2020). These include feeling stronger, having a meaningful life, maturity, and independence, becoming more responsible due to having a child they were responsible for, and considering a career and education (Okine et al., 2020).

### ***Sexual reproductive health rights***

Sexual reproductive health rights (SRHR) of empowerment equips teenage mothers with vital knowledge and improved self-concept that aids them in making crucial decisions about their reproductive life (Nkhoma et al., 2020). The rights include having access to complete information related to safe, affordable, and effective methods to plan one's family size, the spacing of children, regulation of fertility, access to health care services, and effective communication for safe motherhood that enhances the possibility to have healthy children and healthy teenage mothers (Biswas, 2020). Other strategies involve engaging families, peers, healthcare services, and schools to support and help teenage mothers make decisions that are in their best interest, particularly as they transition from childhood to adulthood (Bosire et al., 2020). The teenage mother's partner and father of her child should be included in teenage pregnancy and parenting programmes with access to education and vocational training, parenting skills classes, and contraceptive education (Shah et al., 2020). Zimbabwe National

Adolescent and Youth Sexual and Reproductive Health Strategy (2016-2020) highlighted that the provision of sexual and reproductive health services, including education, was consistently concentrated on adults and high-risk groups, leaving out the entire population, including teenage mothers (Manyange & Makunika, 2021).

### ***Comprehensive sexuality education***

Providing a comprehensive sexuality education (CSE) can play a key role in preventing and responding to teenage pregnancies. Facilitators' motivation, attitudes, and skills are essential to a CSE programme fidelity and effectiveness at the school level (Chavula et al., 2020). A review conducted by Chavula et al. (2020) indicates that the implementation of a CSE has often not been successful because the facilitators find it difficult to deliver sensitive topics on sexual reproductive health education. In Zimbabwe, various departments, ministries, and NGOs worked together to detect key strategies and approaches to provide suitable sexual and reproductive health services for teenagers (Berejena, 2019). Furthermore, limited health literacy not only influences teenage mothers' behaviours related to self-management of chronic conditions, but also affects the health outcomes of parenting teenage mothers (Sántha, 2021). This integrated model of health literacy encompasses access, understanding, appraisal, and application of health-related information in three domains: health promotion, disease prevention, and health care. (Scott-Ashley et al., 2020). Literature showed that different countries had decided to teach teenage mothers about reproductive health to increase their awareness (Tinago et al., 2020). In Africa, some studies showed that 56.9% of teenagers have access to reproductive health, and this is more common in educated and urban teenagers (Rwabukwerere, 2022). If the family does not provide sex education to children, counsellors are given that responsibility (Saputra & Sofiana, 2016). Information services aim at equipping teenage mothers with various kinds of knowledge needed to solve problems faced regarding the surrounding environment, education, occupation, and social culture (Erwinda et al., 2020).

### ***Formation of support groups***

According to Hendricks (2022), support group is an innovative method to educate students about sex and sexuality. Globally, peer support group interventions have been effective at increasing social connectedness, self-esteem, and self-efficacy, providing coping mechanisms to manage stigma experiences, in addition to empowering and improving teenage mothers and teenage mothers mother mental health and emotional wellbeing. Peer support groups provide a platform for knowledge and experience sharing to provide emotional, social and practical support (Murendo, 2020). In Cameroon, programmes that incorporated peer education to

educate girls on disease, pregnancy, sexuality, peer pressure, and dating were used to empower teenage mothers to make the right choices (Gunawardena et al., 2019). A cluster randomised trial in Zimbabwe evaluated the effectiveness of training community teenage mothers' peer counsellors in problem-solving therapy on mental health outcomes and observed improved symptoms of common mental disorders and depression (Eboreime et al., 2022). Since many children are not given thorough and reliable information at home and peers are shown to be unreliable sources, strides have been taken to provide quality sex education through schools (Chomba, 2020).

### ***Family support***

Family support is crucial and required for a teenage mother to return to school and to provide support to young teenage parents to alleviate poverty and increase the likelihood of positive parenting (Simelane, 2019). The goal of family support is mainly to provide material things to the pregnant teenager and the teenage mother. These include supplying food, shelter, finances, and clothing, helping with healthcare expenses, and equipping them with parenting skills and education. According to Simelane (2019), strong family support and the availability of adult caregiving are required for a teenage mother to return to school. Simelane (2019) suggests that parents should be allowed to examine and reflect on their own values and knowledge gaps on sexuality, sexual socialisation, sexual risks, and discomforts that they have with sexual communication. This parental reflection could create an environment where teenage mothers would feel at ease to communicate their perceptions about the consequences of teenage pregnancy without fear or prejudice (Simelane, 2019). Even though parents are an influential source of knowledge for teenagers about SRH, there is a silence between parents and teenagers on the subject of SRH. Without access to information about sexual and reproductive health, teenagers are at high risk of contracting sexually transmitted infections (STIs), including HIV/AIDS, having unplanned pregnancies, unsafe abortions, and other serious SRH problems that could negatively affect future life (Ewnetu et al., 2020). The pregnant teenage families may be the main discursive reference for them as a reliable information resource about the self-care needed during the prenatal process, rather than the care services professionals.

### ***Social support and positive relationship development***

Some studies indicate that teenage resilience is characterised by social support and positive relationship development with their bodies. For example, Jefferis and Theron (2020) reported one of the significant supportive factors that affects the well-being of children and provides them with comfort is the parent-child relationship. The definition of resilience necessarily

requires two core elements: (1) the person faces risk so significant that it threatens to disrupt culturally aligned normative development, and (2) the person adjusts well to experiences of significant risk (Jefferis, & Theron, 2020). Decreasing early marriage has become a priority of the Sustainable Development Goals (SGD). The SGD goals state that by 2030, all human beings must be free from poverty, and women and children should be free from health problems such as reproduction problems and sexual abuse, and should have gender equality (Susilo et al., 2021). However, the practice of early marriage has witnessed a gradual decrease in achieving sustainable development goals (Susilo et al., 2021). Social learning processes activities used in the teaching of life skills build upon participatory learning, which aims to develop teenage mothers' experiences by learning from other peers' experiences, and these activities can be used worldwide (Pummanee et al., 2021).

### ***Sensitisation of stakeholders on the reintegration of teenage mothers in school***

School heads and teachers should be sensitised on how to deal with retention of parenting teenage mothers (Musili et al., 2020). The guidance and counselling department in each school should actively counsel these girls who should be exempted from heavy manual duties. Musili et al. (2020) found that exposure to more hours of pre-service and in-service training in guidance and counselling improves the management of counselling resources and enhances the application of counselling skills. Nkansah et al. (2022) points out that, if people who have been previously isolated from those around them continue to suffer alone, it is very hard for them to normalise. Teachers should avoid using abusive language to these girls. Another complicated challenge these girls face is self-hatred. This is a psychological problem that needs adequate guidance and counselling. The socio-cultural barriers facing teenage mothers in Africa therefore appear related to traditional attitudes to the different roles of boys and girls.

### ***Comprehensive and balanced mental health services***

To help teen mothers to cope with the different challenges they encounter, The Mental Health Foundation report (2013) indicates that it is imperative to deal with the problems faced by teen mothers while offering them a series of comprehensive and balanced services. This could help ensure that they are prevented from being exposed to difficulties such as depression, tension, losing hope, and feelings of abandonment, which are common problems that they face after giving birth (Ketsaia, , 2020). There are people of goodwill who have joined their efforts together and formed groups to assist teen mothers in overcoming the consequences of early motherhood in Zimbabwe (Ketsaia, 2020). These support groups can be a good way to help young girls who have experienced sexual violence and become mothers at an early age fight



loneliness, build confidence, and get emotional strength (Ketsaia, 2020). Zimbabwe's primary health care services for teenagers are available through the public sector, nurse-led primary care clinics. Barriers to service accessibility for teenagers and their caregivers in Zimbabwe include user fees (currently approximately USD 5 per consultation) (Chingono et al., 2020). Eissa (2019) divides coping strategies into two categories: emotion-focused coping aims to diminish the emotional components of a stress by maintaining a sense of hope and optimism and to deny the worst.

### ***Financial support and life skills***

A strategy that non-governmental organisations tend to use to enable the generation of financial assets in poor households is employment creation. Studies show NGOs creating employment through IGAs supported by NGO loans and management support for teenage mothers. Participants in IGAs have an opportunity to gain the financial income needed to fight poverty. Disputing this notion, a study by Kabonga et al. (2021) observed some dysfunctional ISALS groups that did not improve the situation of poor households. Studies conducted in India found that life skills education was effective in preventing a wide range of problems such as substance abuse, teenage pregnancies, violence, and low self-esteem among others (Prajapati, Sharma, & Sharma, 2017). These studies concluded that life skills education has a positive effect and improves social development, and emotional and social adjustments suggesting an increase in the compatibility of teenage mothers and public health (Ochola et al., 2021). Many Zimbabwean teenage mothers are discovering that the only way to break the glass ceiling that prevents them from rising to the top of many organisations is to start their own businesses, hence the increase in female entrepreneurship. Some perceive that gender inequality is still a main factor in entrepreneurial performance. Zimbabwe is a patriarchal society that favours males over females in many aspects, and thus gender roles play an important part as well (Mandiringana et al., 2023).

### **Discussion**

Teenage mothers are the centre point of their own welfare and their children's well-being. Educating mothers about the developmental milestones of children could help them to celebrate their child's growth and achievements. By fostering a positive perspective on pregnancy and parenting, communities could empower teenage mothers to embrace their roles and envision a fulfilling future for themselves and their children.

On social support and positive relationship development, creating spaces where teenage mothers can share experiences, challenges, and solutions could foster some sense of resilience. These groups promote companionship and reduce feelings of isolation. Young mothers should try to engage their partners in parenting education and support activities to foster a collaborative environment.

Establishment of an online platform or app where young mothers can easily access resources, articles, and videos related to parenting and personal development could go a long way to promote and strengthening positive outcomes in the lives of parenting teenage mothers. Incorporating activities that promote self-esteem and confidence, such as public speaking, assertiveness training, and personal reflection exercises is of paramount importance in such platforms.

Comprehensive and balanced mental health services are required to provide access to cognitive behavioural therapy and other evidence-based therapies to help parenting teenage mothers cope with anxiety, depression, and stress. Offering telehealth services for both primary health care and mental health support, provide teenage mothers with convenient access to care, especially if they have childcare responsibilities.

Mass digital campaigns for sex education targeting pregnant and parenting teenagers are an effective way to disseminate important information, promote healthy behaviours, and reduce stigma. These campaigns can leverage various digital platforms to reach young mothers and their support networks, ensuring they have access to comprehensive and relevant education. Materials shared should ensure that they are culturally sensitive and resonate with diverse backgrounds and experiences.

Financial support and life skills development are crucial for parenting teenage mothers, enabling them to navigate the challenges of motherhood while promoting their independence and self-sufficiency. The authors believe that governments and other stakeholders should prioritise programmes that offer scholarships for young mothers to continue with their education, including college or vocational training.

Furthermore, because most interventions for teenage mothers' have been conducted in high-income countries, little is known about whether such interventions could similarly improve mental health in low- and middle-income countries. There is still a gap in the relevance and effectiveness of sex education in schools in African settings. The practical integration of mental

health into public health clinic systems and services has not gained so much traction in lower-middle-income countries, more studies have to be done on this area.

### **Limitations of the Study**

Differences in methodologies across studies, that is, qualitative vs. quantitative, cross-sectional vs. longitudinal, made it challenging to compare results and draw comprehensive conclusions.

### **Conclusions**

The paper has shown that effective resilience programmes often combine educational, emotional, and social support, addressing multiple facets of a teenage mother's life. Strong support systems, including family, peers, and community resources, are critical in fostering resilience among teenage mothers. This therefore indicates that programmes that are culturally and contextually tailored to the specific needs of parenting teenage mothers tend to be more effective. Teaching life skills, such as problem-solving, stress management, and decision-making, is essential in enhancing resilience among parenting teenage mothers. To add, addressing mental health issues through counselling and therapy is crucial, as psychological well-being significantly impacts resilience of parenting teenage mothers. Empowering teenage mothers through education and vocational training can enhance their self-efficacy and resilience. Resilience programmes that provide ongoing support can lead to long-term positive outcomes, including better parenting practices and improved socio-economic status for this vulnerable group. Based on the analysis of the data, more diverse research is needed to understand the varied experiences of teenage mothers across different backgrounds, ensuring that programmes are inclusive. These conclusions highlight the complexity of supporting resilience among teenage mothers and underscore the need for multifaceted, context-sensitive approaches in programme design and implementation among parenting teenage mothers.

### **Recommendations**

- i) There is a need for developmental agencies, government ministries and communities to develop and implement programmes that provide holistic support, including education, mental health services, parenting skills training, and social support networks for parenting teenage mothers
- ii) There is also a need to ensure that programmes for parenting teenage mothers are culturally sensitive and tailored to the diverse backgrounds of teenage mothers to increase engagement and effectiveness.

- iii) Furthermore, there is a need to foster collaboration between schools, healthcare providers, social services, and community organizations to create a cohesive support system for parenting teenage mothers.
- iv) Stakeholders ought to incorporate life skills training into programmes, emphasising problem-solving, decision-making, and stress management to enhance resilience for parenting teenage mothers
- v) In addition, stakeholders involved in the affairs of parenting teenage mothers ought try to leverage technology to provide virtual support services, online resources, and mobile applications that could help teenage mothers access information and connect with peers.
- vi) There is a need to engage families and caregivers in resilience programmes to strengthen support systems and improve outcomes for parenting teenage mothers.
- vii) Government ministries and community agencies could attempt to conduct regular evaluations of resilience programmes to assess their effectiveness and make necessary adjustments based on participant feedback and outcomes.
- viii) Researchers ought to advocate for policies that provide funding and resources for resilience programmes, ensuring that they are sustainable and widely available.

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