A Retrospective on Teenage Pregnancy in Poland: Focussing on Empowerment and Support Variables to Challenge Stereotyping in the Context of Social Work

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Abstract

The article focuses on selected predictors of successful and fulfilling teenage motherhood. It contains analysis of qualitative data, obtained through comprehensive interviews and field notes from social work practice, based on the personal experiences of teenage mothers and a court appointed family curator. Using herstory perspective, it aims to present positive examples of teenage motherhood as a source of empowerment and independence, to unveil and combat stereotypical views on adolescent mothers in Poland. Moreover, the authors discuss systemic issues and challenges as well as a social stigma created by public opinion and aim to challenge harmful stereotyping. The article contributes to social work practice for the purpose of enhancement of the international comparative studies in this field.

Keywords Adolescent mothers · Family curator · Empowerment · Predictors

In Polish pedagogical and social work discourse, teenage pregnancy is vilified and often shown as one of the societal evils, characteristic of poor and uneducated social groups (c.f. Skowrońska-Pućka, 2016; Izdebski et al. 2011). This stereotypical view may harm the self-perception of teenage mothers and enforce their social stigmatisation by policy, social service workers and the wider community. Our paper aims to contribute to the volume of global comparative social work studies and to the demystification of the Polish context. The paper examines an issue relevant to thousands of social workers worldwide who must decide how to support the best interests of a child and a teenage mother. In the past the issue was perceived as a social problem, but it may also be an empowering experience and a phenomenon that requires further exploration in order to correct inadequacy in law. In many schools, social workers work with students and other school personnel to improve awareness of preventive methods and safe sexual practices to improve sexual education. However, the topic is still somewhat of a taboo in more

traditional regions, where abstinence is believed to be the best solution. Hechtman (1989) found that a combination of factors leads to teenage pregnancies. These are biological and societal factors, personal needs, ignorance concerning sexual matters and problems with contraception. The outcomes of teenage pregnancies relate to health, economic, and emotional effects for both mother and her baby. According to Hechtman, early sex education programmes including family planning and counselling, access to inexpensive contraception and safe abortion would significantly decrease teenage pregnancy levels. This opinion is also shared by the co-author of this paper, a social work practitioner, based on her own observations in practice. Sex education in Polish schools has been limited by the current conservative government to be an optional, 14-h, post-school subject that requires parental consent and has no solid curriculum. Its content depends on the individual view of the person who teaches it. The Polish parliament is currently discussing a new project to eliminate sexual education from schools entirely and to criminalize it as it is viewed by conservatives as the propagation of sexual activity amongst children (c.f. Citizens' project, 2019). This, combined with difficulty of access to contraception for girls under 18 (a parent must be present and contraception is also expensive) and the citizen's initiative to tighten the law on abortion (that is currently under discussion in parliament and has caused considerable

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heated debate in Poland, (c.f. Citizens' project, 2017) contradicting Hechtman's findings and potentializing a negative impact on the situation of young mothers. This article is aimed to be a voice of reason, focusing on empowering and supporting young mothers by breaking stereotypes, sharing positive stories and reflecting on possible systemic change.

Our study was inspired by Winokur et al. (2018), who established by reviewing 102 empirical studies, that kinship care in contrast to foster care has greater emotional benefits for children. Kinship as a source of support for both a teenage mother and her baby was highlighted in our study as a key resource when confronting the paradoxes in the Polish legal system, linked to children's rights, parental rights and pro-life choices. The kinship care option is not dictated by the need to separate a baby from its parents, but by a legal requirement for a child under 18 to have an adult guardian. In Poland the age of sexual consent is 15, however, to have full parental rights one must be 18. This creates a loophole in the system. It is legal to have a sexual intercourse, but not to keep the baby that may result. There are some exceptions to this rule, probably originating from the Roman Catholic impact on traditional family models. If the teenage mother gets married, the court will grant her parental rights and obligations to bring up her children as if she were an adult. Another problem is that if the intercourse occurs between a 14 year old girl and an 18 year old or older man, the act is treated as a criminal offence, which may limit the willingness to take paternal responsibility in order to avoid police custody.

Method

This study is a preliminary sociological 'scouting expedition' (Gadourek, 1976, p. 113) that uses an autoethnographic approach. The core of this study is based on autoethnography (Odrowąż-Coates, 2015, 2016; Spry, 2001) as the main qualitative method of enquiry, using comprehensive, understanding interviews (Kaufman, 1996) and autoethnographic notes (Odrowąż-Coates, 2014, 2015). The raw research materials were obtained in Polish, in the form of interview transcripts and autoethnographic notes, and pertain to the lived experiences of three volunteering participants in their thirties and forties, chosen from the overall study group, who had all become underaged mothers when in their teens. Data was also drawn from the professional experiences of a court-appointed family curator, supporting teenage mothers and their families in the capital city of Poland.

Multiple studies from a medical and social work perspective on teenage pregnancy, used the retrospective approach (Bozkaya et al., 1996; Sarkar et al., 1991; Rudra et al., 2013). A retrospective approach enables one to look back at one's life and reflect on the impact of the past on the present.

Retrospective, practice-based studies are well known in social work research (c.f. Mason et al., 2001; Williams, 2017) and therefore this method, combined with autoethnography gives the data authenticity and depth, normally unavailable to an outsider and impossible to capture utilising quantitative tools for data collection. In summary, this study uses an interpretative paradigm built on 'herstory' framework. Participants of the study have unique experiences, enabling social work professionals to gain an insight into their private, retrospective woman's view on the personal experience of teenage pregnancy. A social worker's personal work experience is also a herstory. Herstory is drawing from biographies and experiences of women in order to deconstruct contemporary history and analyse it from a female perspective, emphasizing the role of women and bringing a woman's point of view to the forefront of the discussion (Odrowąż-Coates, 2017).

Sample Selection

A call for participants was distributed through support groups, NGOs and parental groups. The call was addressed to female adult volunteers who had children when in their teens. A group of mature women aged 30–44, representing a diverse socio-demographic selection, were chosen to provide a retrospective on their personal experiences. The interviewees were aware that the interview pertains to their past teenage pregnancy experience. They had at least a week to think about the subject of the interview and were asked to reflect on their earliest memories of becoming pregnant, the birth-giving and being a young parent. Several interlocutors withdrew from the study during this time. From the 10 successfully completed in-depth interviews, we purposely selected those which fulfilled the following criteria: the children had a positive emotional bond with the mother, they were living with the mother throughout their lives, the mother was coping and being supported by a family member, the mother had revealed a high level of resilience, the mother perceived her early motherhood as empowering, or in another sense as a positive experience. Three out of the ten interviews were categorised as a positive experience (Table 1). In all cases the child was not taken away from the young mother, the mother received support of a family member, did not regret their decision to deliver their baby and declared to have a positive, loving relation with their child (positive attachment, Bowlby, 1988). The three cases came from different social groups, diversified by education, level of income, family composition and living in urban or rural area. MAXQDA 2020 software was used to categories and code the interviews in order to make a selection of the most positive cases and identify the factors responsible for positive scenarios (See the code trees for the interviews: Fig. 1).

Table 1 Socio-educational factors and sources of support

Interviewee	1	2	3
Rural/Urban	Village	Town	City
Age	33	41	44
Age when first pregnant/father age	15/19	16/20	14/ teenager – unknown
Age when gave birth	16	17	15
Number of children	3	2	3
Employment	No – full time mum	Yes – full time – medical representative	Yes – at partner's business
Social work support	Yes, social housing, benefits, special school, transport to a special school	No, medical staff support, social worker at school	Yes, interventions when lost parents and when pregnant and gave birth, ongoing for the younger children due to alcohol history
Educational attainment	Vocational – baker	University level – medical representative	Evening College – Accountant
Circumstances related to parents	Basic and vocational education, lack of employment, father alcoholic	High power jobs, higher education,	Mother committed suicide, father unknown, stepfather drinking, uninterested in children
Support of Extended family/social groups	- wedding, – church (spiritual support), – school (teachers)	Parents, work, teachers, medical professionals	Aunt – fostering the interviewee and her first child, AA group, neighbours, teachers, social workers, medical professionals
Partner then/now	Father of all 3 children/ last one after divorce – limited contact	Father and husband – over 20 years together	Teenage father of first child / current partner, father of the 2 young children

Source: Self-generated

The past experiences of mothers were complimented with the experiences from practice, based on autoethnographic notes from a court-appointed family curator. This part of the study constitutes a practice-based research (Epstein, 1995). The autoethnographic notes were organized using the MAX-QDA software and analysed by their author to answer the following questions: what are the key factors in becoming a teenage mother in Poland? What are the most important factors in the prevention of pregnancies amongst adolescents? What systemic loopholes can be found in law? Do they have a positive or a negative impact on a teenage mothers' situation? What are the most successful sources of support and wellbeing for teenage mothers and their children? The court appointed family curator worked with 5 teenage mothers and their babies during the years 2015–2019. In 4 of the cases the maternal grandmother became a legal guardian for the baby. In the fifth it was the paternal grandmother, when the teenage mother moved in with her boyfriend and his family. This mother was the only one who declared that she was unsure if she wanted to keep the baby, which was probably caused by lack of support from the family of belonging. There was also a case of a teenage mother who decided to give her baby up for adoption due to the illness and disability of the baby at birth. As she did not establish a long-lasting acquaintance with the social worker, this case was not considered. In all above cases, it was the baby who was under

the supervision of the court's family curator and in only one case, it was also the teenage mother. The field notes were anonymised and kept separate from the court files. They were focused on the self-reflection of the social worker and written after each visit to enable her to deal with difficult emotions, to self-analyse and to reflect on her social work practice. The emotional component enabled her to capture attitudes towards her and her work, relationships between teenage mother, her baby and her social environment, the self-perception of teenage mothers and the challenges they face. In her practice she came across several other teenage mothers who were however, not amongst her assigned cases, so these were not used as material for analysis.

Limitations

This is a small scale, country specific study that has a unique character, which captures the personal histories of teenage mothers through the lens of age and experience. There are many factors that remained unmeasured, such as personality traits or the personal life orientation of the mothers. However, obtaining the deep personal accounts from people in a specific personal situation has merit, contributing to our understanding of the intersectionality of teenage pregnancy from a social work perspective.

Single-Case Model (Code Hierarchy)

Single-Case Model (Code Hierarchy)

Fig. 1 Code trees for 3 cases. (Source: Self-generated, MAXQDA, 2020)

Single-Case Model (Code Hierarchy)

Fig. 1 (continued)

Results

A Retrospective on Being a Teenage Mother

According to Thompson (1978, p. 209) interviews should not be a dialog or a conversation, its aim is to encourage the informant to speak and share their experiences at the deepest possible level. The informant is an expert in telling their personal story and interpreting it for the interviewer, using their own experience whilst reflecting on past events.

Although there are some confirmed social risk patterns related to teenage pregnancy, every story is different and there is hope that this diversity of narratives will enable policy makers to look at teenage pregnancy from a different, social justice perspective (Miller, 2001). In our selection of interviews, we decided to focus on the three cases where the positive experiences and outcomes outweighed the stereotypical, negative ones. We coded the interview answers and grouped them into positive and negative categories. As demonstrated in Table 2, positive experiences deriving from empowerment of teenage mothers (25,34%) and from external support (24,66%) outweighed (when considered together) the stereotypical negative experiences (26,03%). Moreover, we observed that when external support and empowerment of the mothers are both at a similar level to the level of negative stereotypical situation (in the Table 2 all around 25%), it may be a predictor of the overall parental

success and wellbeing of both the mother and her child. In the remaining cases, eliminated during the positive selection process, the balance tended to lean the other way. In the eliminated cases, lower scores on empowerment and external support were observed. Moreover, negative outcomes were observed in cases with a greater disparity between the levels of empowerment and external support. This may be an unusual finding as one might expect one high value of support factor to offset the negative impact of a low support factor. However, if grouped together, they do not outweigh negative stereotypical experiences when this large disparity exists. These preliminary findings will have to be further explored on a larger-scale sample as they may contribute to the assessment and prognosis for new teenage mothers and contribute to the planning of their support.

The documentary “*Chcę być z Tobą MAMO*” reveals the social injustice that takes place in Poland in cases of institutionalized teenage mothers and perpetuates stereotypes pertaining to them (<https://www.youtube.com/watch?v=V7cRQXtTE2U>). Adolescent mothers in resocialization centres and in children’s homes, usually have no possibility to stay with their new-born babies. They are often forced to sign adoption papers and are rarely able to be reunited with their children when they reach the age of legal guardianship at 18. This is not only a personal tragedy for the mothers, but also for their babies, leaving space for social action and advocacy. Focussing on empowering young mothers, providing

Table 2 Code scores levels for positive and negative categories

Colour parent code	Code	Cod. seg. (all documents)	Cod. seg. (active documents)	% Cod. seg. (all documents)
Negative experiences and stereotypical situations	Negative view or experience of social work	7	7	4.79
Negative experiences and stereotypical situations	Stereotypical views or situations	38	38	26.03
Positive experiences	Auntie, parents, extended family	10	10	6.85
Positive experiences	Husband, partner	8	8	5.48
Negative experiences and stereotypical situations	Difficulties, barriers, problems	1	1	0.68
Positive experiences	Medical care as positive experience	1	1	0.68
Positive experiences	Bowlby, bond, attachment	1	1	0.68
Positive experiences	Empowerment	37	37	25.34
Self-help, self-motivation	Self help	2	2	1.37
Positive experiences	Social support (neighbours, spiritual groups)	3	3	2.05
Positive experiences	External support	36	36	24.66
Positive experiences	Self-help, self-motivation	2	2	1.37

Source: Self-generated, MAXQDA (2020)

institutional support, drawing on extended family resources and encouraging self-help are the key elements of a mother's resilience and her ability to overcome barriers and difficulties in a positive way. Amongst the empowering factors identified by the interlocutors were; economic aspects, emotional aspects, educational aspects, self-development and working on oneself, positive attachment, the power to regain control and to maintain agency *"Becoming a mother gave me extra strength. This kind of stronger, more defined identity (...) I started to do some little jobs at home, badly paid, but paid. When I finished weekend studies, I started working full time in health service administration and then in public administration. At this moment in time I am a medical representative. This is since I have had a driving licence, so approximately for the last 4 years"* (F41). The interviewees reported that they managed to continue their educational path and gain some form of qualification. They reported that having a stable partner or/and support of a family member or extended family member, enabled their stability and led to them feeling empowered *"It was not until Mr X got me out of this, kind of slowly and patiently. He is so lovely, will cook a dinner, give one message if one is in pain"* (F44). In all 3 cases they received lodging support, motivational support and financial support from their family or partner, but this situation was in 2 cases initiated by social worker intervention *"Well, I have dealings with social workers a lot... They come to visit frequently, but sometimes one or another has a good piece of advice, what kind of additional benefit I could apply for... There was a time when they came every day to check on my daughter, if there is no harm to her and if she has the right conditions."* (F 33). In the cases above, the housing, financial and motivational support could have been provided by the system, however it was provided by

the family. In all 3 cases the mothers kept their babies with them and built a permanent positive bond that contributes to their feeling of empowerment *"I love my children very much, all of them (...) because they are mine!"* (F33). The positive attachment might not have been possible without the mother marrying (2 cases) or in one case, the mother living with an aunt who was awarded guardianship of the baby in the legal proceedings, which was returned to the mother when she was an adult.

A Social Worker's Practice

Social Factors

WHO reports that every year approximately 16 million girls below the age of 18 become mothers worldwide. In Poland, about 5000 girls age 15–18 become teenage mothers. They require special attention and multilevel medical, financial and social support. Support from family, doctors, teachers, social workers and amongst the latter, the court appointed family curator. The curator who represents the interests of the adolescent mother who is still a child in the eyes of law, and her child. The family curator plays a double agent role: a court representative enforcing the court's decisions on safeguarding teenage parents and their child, and as a social worker, who provides help and support to them. Being immersed in the researched environment 2016–2020, the family curator noticed that she was able to identify loopholes and deficiencies in the system, which prevented her from providing adequate and holistic help. Acting as a family curator and often cooperating with minors, including teenage mothers and their families, neglect and ignorance were encountered. Article 18 of the Constitution of the Republic

of Poland states that: “Marriage as a union of a woman and a man, family, motherhood and parenthood are under the protection and care of the Republic of Poland”. It clearly defines motherhood and parenthood as values under the protection of the State. Meanwhile, as evidenced by many years of observation, mothers are often left alone without help, support, without parental rights and the possibility of raising their own children due to lack of financial means. Therefore, the question arises: where does this issue start? The findings point to the mother’s family of belonging as one of the precursors leading to teenage pregnancy. According to Kornas-Biela (2001), “Most often we deal with a system of favourable factors, and most of the motives are not related to either sexual needs or to love” and require early parental intervention, awareness-raising conversations and a level of openness. There are many deficiencies in sex education in Poland when compared to other countries in Europe. The experience of first sexual relationships is usually accompanied by a lack of knowledge about contraception and sexually transmitted diseases. The low level of teenagers’ awareness of their own sexuality and yet, being sexually active, is not only the result of insufficient sex education at school, but not discussing this topic at home. J. McWhirter et al. (2001) show that “one of the basic interpersonal variables correlating with juvenile pregnancy is the level of communication between mother and daughter and the level of mutual alienation”. This factor was often observed. Under Polish law, a teenage girl who becomes a mother before the age of 18 loses parental rights, but this does not mean that she avoids parental responsibilities and issues related to parenting. Teenage mother frequently looks after her child and tries to raise the child, providing the best conditions for life and development. The family of the teenage mother often becomes a foster family and is granted guardianship, supervision, and social assistance, e.g. financial support, food packages or clothes for the child. The question remains as to whether such help really solves problems and whether it gets to the teenage mother and their child, as there have been instances where aid has been diverted for other uses by the family. It has been repeatedly observed that the level of family assistance is seldom sufficient for the needs of a teenage mother and her child. The social assistance that is offered is only able to cover part of the material needs of a young mother and her child. Material needs are only the tip of the iceberg. Young mothers lack medical care, both for themselves and the child. They lack help in everyday life, support in accessing welfare offices, state institutions, legal support and this is where the social worker may reduce the lack of this basic deficiencies. They can help them to take care of receiving maintenance for a child or assure pregnant girls that despite the visible pregnancy, they have the right to finish school. Young mothers left without appropriate help are not able to take care of their own future and as a result, ensure a proper developmental

environment for their new-borns. “A mother often urges her pregnant daughter to keep her child. When this happens, the relationship between mother, daughter and child usually gets complicated, because the main responsibility for the child is usually taken by the grandmother. In this situation, the minor mother has support in the family, but her ability to continue education and professional development is limited” (Haveman & Wolfe, 1984). The circular nature of teenage pregnancy has been observed in multiple cases. In curator’s experience, this limitation affects not only the young mother, but also the later life of her child and in this way the circle closes, and the die is cast for another child to become a teenage parent. It was observed that when primary responsibility and care remained with the teenage mother and not with the grandmother, it led to more positive outcomes for the empowerment and maintenance of healthy family relations. It also helped to build positive attachment and to increase the parental satisfaction felt by both mothers and grandmothers. Being a teenage mother poses so many additional challenges that a question remains about how to address the issue of teenage pregnancy from the social work perspective. Due to the number and scope of difficulties that are associated with the problem of teenage parenthood, this phenomenon requires both measures to prevent teenage pregnancy and measures aimed at helping adolescent parents. First, society should inculcate the belief in responsible sexual behaviour. “Without access to information on human sexuality, reproduction and birth control, there can be no question of responsible behaviour in the field of sex” (McWhirter et al., 2001 p. 229). Curatorial observations and the conclusions drawn from them show that the best solution to this problem would be a combination of high quality sex education, wider access to contraception and above all, expanding the life possibilities of children, especially those who are identified as teenagers at the most risk of premature pregnancy. During the analysis of the observation notes family curator amended her everyday practice and took positive steps towards initiating a new social action. A social activist who noticed the dangers of a single-story narrative was born. As Chimamanda Ngozi Adichie said (Mancini, 2016): “The single story creates stereotypes, and the problem with stereotypes is not that they are untrue, but that they are incomplete. They make one story become the only story.”

Stereotypes

Working as a court appointed family curator one meets with many of the stereotypes regarding teenage mothers that are present in Polish society and amongst social workers. These include blaming the young mother for her ‘misfortune’, the assumption that teenage mothers are not capable of raising children on their own and that the child should be raised by the grandmother. Social workers are perceived as a

distributive element of the policy that does more harm than good. During years spent in service, the curator confirmed that these stereotypes exist, but her observations allowed her to form an opposite point of view. First, the branding of teenage mothers as ‘guilty’ of the events that led to their pregnancy stigmatises young mothers. Secondly, the stereotype of a helpless teenager lacking basic life skills is a social fallacy. It may still be said, supporting Kowalewska’s (Kowalewska, 1998) view, that many young people start their sex life without proper education and preparation. They indeed lack or have superficial knowledge about sex and procreation. They are not mature enough when they first have intercourse, which is often an accidental experience. Observations of the family curator, lead to specific conclusions that the majority of young mothers supported by welfare services felt fulfilled as mothers. After difficult moments, with the right support at the beginning of their transition to motherhood, they cope better than many mature women. They look after their children well, go to the doctor when needed and they feel satisfied in their new role. Many feel empowered by their transition to parenthood. They declare that their self-perceived social position and their position in the eyes of others changes and that they feel like they gain agency and confidence from being a mother. One of the interviewees recounted the point of view that the family curator came across many times: *“I am fulfilled, yes. I think that every mother has a different story and maybe this motherhood is not by choice, it may be a difficult and traumatic experience, but mine was not like that”* (woman, 41 years old, interview from 24.02.2020).

Furthermore, views on social services and their work was noted as wrapped in false stories, prejudice and stereotypes, causing hesitation and resentment from the family at first contact. However, long-term engagement with the teenage mother and her baby led to changes in perception. The work of social service representatives is often commissioned by a specific institution; a court, social welfare office or a penal institution, which is why their help is often treated at first as a “necessary evil”, but evil nevertheless. Once the benefits and support that the social worker brings are clear, this first impression is gradually changed. The obstacles to achieving a positive outcome are predominantly based on negative social opinion, fuelled by cases of neglect or extreme cases that have led to a loss of life. These are very harmful to the reputation of social workers, especially in Poland, where due to vast numbers of people in need, there is a national shortage of social workers. This means that it often takes longer to gain social trust and to build a positive relationship with the teenage mother and her family. Moreover, family curator is often asked to control the compliance of a teenage mother with obligations imposed by the court. These obligations are often burdensome for the mother and even contrary to their personal beliefs, so the interventions are at first perceived as

interference in her private life and an attempt to supplant the wishes of a minor. However, the perception evolves as the mother receives the support and care that she was unaware existed. Many teenage mothers felt reassured that there is someone out there who cares about them and their baby. It gave them a feeling that they are not alone when they come across a difficult situation and they claimed that the social worker became a part of their ‘safety net’.

Implications for Practice and Research

Since the democratic turn of nineteen nineties and the liberation of Poland from soviet influence, there has been steady progress in social work, returning to pre-war ideals and following the best practice from the west. The focus of additional training was to improve the empowerment of social service users and on supporting the independence and agency of teenage mothers. Despite progress in social work approaches, Poland remains caught up with legal paradoxes pertaining to age-based parental rights and patriarchal solutions, granting teenage mothers more rights if they become married. In our study this situation drove one of the interviewees to making a conscious decision on becoming a mother and getting married. Another of our interlocutors married to be able to raise her child and to follow cultural expectations. In the first case, the couple has remained together for over 20 years, in the second, the relationship was terminated despite them having 3 children together. In the third described case of an orphaned teenage mother, her aunt provided a ‘safe base’ and lasting support. In all 3 cases, the mothers showed resistance, agency and empowerment doubtlessly aided by their support system. The cases highlighted the sources of strength and support that are available for young women, and their positive experiences of social work intervention. The stories contained some stereotypical elements, but also help one to realise that each story is different and may have a different outcome depending on many variables. This image is much needed in the wider community to overcome stereotypical views and to support self-recognition, instead of stigmatization of teenage mothers.

Conclusions

Adolescent mothers and the support that they receive is veiled with number of negative stereotypes in Polish society. However, teenage motherhood is also a positive story, where mothers declare resilience, self-fulfilment, resources of strength, agency, motivation and mobilization to be an active parent. Amongst our interlocutors we found mothers who planned their early pregnancy and who associated it with satisfaction and feeling of wholesomeness. Regardless

of the age of becoming a mother, the desire to provide the best for the child and to create and maintain a bond was observed amongst the interlocutors, and in the majority of cases observed by the court family curator. Motherhood is a live changing event that may lead to positive outcomes for young mothers such as self-development and independence. Despite their background, they tended to continue in education and look for employment, whilst bringing up their children and often successfully built a new family, outside of the family of belonging. Quite often, success of a teenage mother was built on many contributions from external sources, including social workers, who were often perceived as 'necessary evil' rather than a 'guardian angel'. Young mothers, as in the above mentioned interviews, admit that they perceive their early motherhood as an event that made them stronger, gave them direction and enabled them to resist stigmatization and stereotyping with help of a family member, a social worker or a stable partner. In contrary to oft-heard opinions, teenage mothers are not always from a challenging background or with a disadvantaged set of experiences. In fact, their family of origin is often the greatest source of support. The level of external support and of feeling empowered balancing the level of stereotypical situation can be a predictor of teenage mothers' success. In most cases, adolescent mothers, despite the initial suspicion caused by public opinion against social workers, appreciated the support and help received during their pregnancy and early years. These positive experiences of teenage motherhood and of successful social work support should be more exposed in the public space, so that the stereotypes can be counteracted, weakened, and eventually dispersed.

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