



Advancing Adolescent Maternal Development: A Grounded Theory

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Key words:

Public health nursing;
Pregnancy in
adolescence;
Adolescent parents;
Prevention;
Grounded theory;
Qualitative research

Objectives: This paper reports a substantive grounded theory called the theory of Advancing Adolescent Maternal Development. **Design:** A grounded theory approach was used. **Sample:** Thirty public health nurses working with adolescent clients in a state public health nurse home visiting program volunteered to participate in this study. **Results:** The basic social psychological problem that emerged from the data was incomplete and at risk adolescent maternal development. Social support and public health nursing interventions are central in the problem resolution process which occurs in stages. **Conclusions:** Study results can be used to inform the nursing care of pregnant and parenting adolescents.

Published by Elsevier Inc.

MORE THAN 80 percent of teen pregnancies are unplanned (Finer & Henshaw, 2006). Compared to older mothers, adolescent mothers and their children have higher rates of adverse health and social outcomes including infant morbidity and mortality, preterm birth, low birth weight, unintentional injuries, failure to complete high school, and poverty (Chen et al., 2005; Folkes-Skinner & Meredith, 1997; Flynn, 1999; Flynn, Budd, & Modelski, 2008; Koniak-Griffin & Turner-Pluta, 2001; KoniakGriffin, Anderson, Verzemnieks, & Brecht, 2000; KoniakGriffin et al., 2003; Nguyen, Carson, Parris, & Place, 2003). The birth rate for adolescent females age 15–19 years began to rise in 2005, reaching 42.5 births per 1,000 in the US in 2007 (Centers for Disease Control & Prevention [CDC], 2010). Beginning in 2007, the birth rate for adolescent females age 15–19 years began to decline, reaching 33.3 births per 1,000 women in 2011 (CDC, 2012). Research supporting a theoretical basis for the nursing care of pregnant and parenting adolescents is

lacking in the literature. The weak theoretical base for the public health nursing care of pregnant and parenting adolescents, the high rate of unintended adolescent pregnancies, and the poor health and social outcomes associated with adolescent pregnancy provide firm incentives for researchers to develop a stronger evidence-base for public health nursing practice intended to improve adolescent pregnancy outcomes.

The purpose of this study was to identify the problems, challenges, and needs specific to pregnant and parenting adolescents in a state public health nurse (PHN) home visiting program, and to determine the process by which these problems, challenges, and needs are resolved within the context of the program. A grounded theory research method was used to develop a substantive theory of PHN supported adolescent maternal development. This theory, Advancing Adolescent Maternal Development, can be used as a basis for understanding the basic social psychological problem, and the basic social psychological process by which the problem is resolved in PHN home visiting programs that target pregnant and parenting adolescents. Increased understanding of these processes has the potential to enhance patient care and contribute to positive adolescent maternal pregnancy outcomes by helping PHNs to

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provide more effective support and interventions for pregnant and parenting adolescent clients.

Literature Review

Review of the literature yielded few descriptive studies that inform the basis for nursing theory development concerning pregnant and parenting adolescents. Five home visitation programs by PHNs aimed at changing infant and adolescent maternal health outcomes in the past decade were studied. The findings of these research reports are discussed here as the supportive literature informing the theory of Advancing Adolescent Maternal Development.

KoniakGriffin et al. (2003) compared the effects of an early intervention program of home visitation by PHNs and traditional public health nursing care on 2-year post-birth infant health and maternal outcomes in first time adolescent mothers. These researchers used a prospective, longitudinal, pretest-posttest randomized controlled trial design. Findings indicated that infants in the intervention group had significantly fewer days and episodes of hospitalization than infants in the control group and were significantly less likely to be seen in the emergency room for child health problems. Mothers in the intervention group had 15% fewer repeat pregnancies than mothers in the control group and were significantly less likely to increase marijuana use over time.

Nguyen et al. (2003) compared the effects of the Nurse Family Partnership home visitation program with traditional public health nursing on pregnancy outcomes in first-time Hispanic adolescent mothers and their infants. In this experimental, randomized controlled trial, researchers measured maternal weight gain during pregnancy, gestational age, birth weight, premature birth, and birthing complications. There were fewer premature births in the intervention group than in the control group (4.3% and 8.2%, respectively). Fewer infants in the intervention group had a low mean birth weight (< 2500 g) compared to those in the control group (5.6% and 10.6%, respectively).

The purpose of the study by Flynn et al. (2008) was to determine the effect of an interdisciplinary home visiting program called Teen Parenting Partnership on the use of health care resources by pregnant and parenting adolescents. Outcomes that were measured included selection of a designated prenatal care provider, number of visits to this provider, Women Infants and Children (WIC) and Medicaid usage, infant birth weight, and gestational age at birth. Researchers used a quasi-experimental design with a nonequivalent comparison sample constructed from electronic birth certificate records. After three months in the program, participants were significantly more likely than when they were admitted to the program to have (a) selected a prenatal care provider, (b) made and kept appointments with their provider, (c) enrolled in WIC, and (d) enrolled in Medicaid.

The intervention group had significantly more prenatal visits and fewer teens receiving no prenatal care than the nonequivalent control group.

The purpose of the study by Olds et al. (2004) was to evaluate the maternal-child outcomes of a prenatal and infancy home visiting program by para-professionals and a home visiting program by nurses in a population of first time mothers. The mean maternal age of the sample was 19.81. The study was a 3-armed, randomized, controlled trial using a pretest, posttest design. One intervention group received nurse home visits, one intervention group received para-professional home visits, and the control group received only screening and referral services. Nurse visited women had significantly greater birth spacing intervals between first and second child, less domestic violence, more supportive home environment, better language development and executive functioning, and better behavioral adaptation than the control group.

Olds et al. (2010) evaluated the long term effects of a PHN home visiting program called the Nurse Family Partnership on maternal life course and government spending among urban, primarily African American women who were first time mothers (64.1% were younger than 19 years). The study was an ongoing randomized controlled trial in which the intervention group received prenatal and infant home visits and the control group received only screening and referral services. Data for the study had been collected at several previous time points, with this phase of the study reporting outcome data 12 years after the birth of the child. Nurse visited mothers had lower usage of food stamps, Aid to Families with Dependent Children (AFDC), and Temporary Assistance for Needy Families (TANF). The mothers in the intervention group also had less role impairment due to alcohol and other drug use, fewer cumulative subsequent births, longer partner relationships, and a greater sense of mastery.

While the five aforementioned studies support and inform the theory of Advancing Adolescent Maternal Development, the paucity of studies concerning the nursing care of pregnant and parenting adolescents warrants further investigation into the basic social psychological problem of pregnant and parenting adolescents, and the basic social psychological process by which the problem is resolved of pregnant and parenting adolescents. It is precisely this gap in the literature that the theory of Advancing Adolescent Maternal Development seeks to fill.

Method

A grounded theory method based on Glazer's approach was used to identify concepts, the basic social psychological problem, and the basic social psychological process unique to pregnant and parenting adolescents visited by PHNs in a state home visiting program (Boychuk Duchscher &

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