Life-Changing Coping Mechanisms and Resilience Strategies of Post-Natal Unmarried Teenage Mothers in the Central Region, Ghana

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ABSTRACT

Aim: The paper aimed at exploring the life-changing coping and interventional strategies adopted by unmarried teenage mothers in Enyan Denkyira in the Central Region of Ghana.
Methods: The paper adopted the phenomenological design and through Snowballing and Purposive techniques, sampled 15 unmarried teenage mothers, 10 church leaders, and 2 District Assembly officials who accounted for their daily coping mechanisms and interventional strategies existing for teenage mothers in the Enyan Denkyira District.
Results: The study revealed that teenage mothers in Enyan Denkyira continued to engage in labor-intensive occupations such as fetching water for construction works and washing other people's clothes to make ends meet. It was evident that when the support they got from sympathizers did not come and their other sources of income also failed, they were pushed into relying on men which made them become perpetual victims of unprepared pregnancy and premature motherhood.
Conclusion: It was therefore recommended that the Livelihood Empowerment Against Poverty (LEAP) money should be expanded to benefit more teenage mothers. Also, religious bodies,

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institutions, and the family must be encouraged and supported by the government to continue to play their roles as sources of social protection for teenage mothers instead of neglecting them.

1. INTRODUCTION

Coping is an important construct in understanding how teenagers react to the stressors and adjustments they experience in their lives [1,2]. However, few studies have explored how teenage mothers cope with the various challenges they experience after birth in Ghana. Coping is defined as the thoughts and behaviors mobilized to manage internal and external stressful situations [3]. It is a term used distinctively for conscious and voluntary mobilization of acts, different from 'defense mechanisms' that are subconscious or unconscious adaptive responses, both of which aim to reduce or tolerate stress. In this study, coping refers only to effort-driven activities that require adaptation, and not all the things that a person does concerning the environment. The phrases "constantly changing" and "specific demands" as opined by Folkman [3] reflect the dynamic nature of coping as a process rather than an individual trait or style. As such, coping is conceptualized as what the individual thinks or does to manage specific demands within a specific context. As the context changes, there is the likelihood that an individual's method of coping may change. McKinney and Peterson [4] described coping to involve "cognitive and behavioral measures designed to master, tolerate or reduce external and internal demands and conflicts" while Pottie and Ingram, [5] simply referred to coping as those strategies that are used to deal with stress or stressors. Maputle and Cur [1,2] contended that the coping process involves four steps: determining the meaning of an event or situation and its implications for one's well-being; selecting a coping strategy after taking stock of one's coping resources, carrying out the coping strategy and finally evaluating one's coping efforts concerning their effectiveness in managing one's response to the stressful event. From these, it is therefore evident that coping strategies appear to form a very important part of human functioning in the everyday environment. To live and function effectively within the environment, an individual requires a sufficient repertoire of coping strategies to cope effectively with stressful situations, which will result in a subjective sense of contentment and happiness although individuals appear to differ in their range and effectiveness of coping strategies [3].

It is worthy to note that the high incidence of teenage motherhood is worrying and a matter of grave concern in Ghana, particularly given the socio-economic status of both the teenager and the infant. In Ghana, about 57,000 teenage pregnancies were recorded nationwide in the first half of 2017 (City FM, 2017). In Ghana, when a teenager gets pregnant it is usually unexpected, unplanned and a rude shock for her and the family since as she is a child herself, motherhood is believed to be problematic. On the other hand, in the past and traditionally, families provided support and guidance to new mothers. However, in recent times, it appears that the above support and guidance are disappearing in Ghanaian communities. In some families, teenage motherhood may be considered a natural and desired event, especially when there is a stable union between the teenager and the father of the child [6]; in other families, this event may come permeated with violence by parents of the teenage mother's parents [7,8] noted that spouse conflicts were a result of teenage mothers, and this, in turn, increases teenage mothers' stress levels. The family, especially the mother, may represent fundamental support since this is usually the most important figure of identification with the teenage mother, among the women of the family but the situation is different with most teenage mothers in Ghana as their families sometimes leave them to their fate. The parent-teenage mother relationship is fraught with conflict and disagreement. From this perspective, George [8] showed that the teenage mothers' parents hardly understand the teenage mother and most of these parents turn to have a negative or frustrating perception about the teenage mother that in turn affects the teenager's quality of life in the future. According to Holborn and Haralambos [9], since teenagers are of significance in the family and the society, concerning their inheritance and successful family continuity, any misfortune that affects them, affects the entire family's expectations.

Besides, the possibility of a greater tendency for a teenage mother to experience a poor socioeconomic situation is possible if she is from a poor home or single home. This is clear that this segment of the Ghanaian population has not received the necessary attention and society has negative thoughts and perceptions of them even though Eshelman [10] emphasized that the majority of teenage mothers fall within the risk category because they are exposed to average levels of psychosocial stress. This compels them to make the necessary adjustments to changing life conditions due to teenage parenthood, while other potential stress-provoking factors in life that cause distress and anxiety are superimposed on the stress and concerns resulting from the event of teenage motherhood. This situation calls for effective coping strategies for a living [11].

More importantly, through the researchers' interaction with the teenage mothers in the Enyan Denkyira community, the researchers found out that they appear to be in perpetual agony since they are thrown into an adult world without adequate preparation for parenting. The period of their bad experience is dependent on their ability to exhibit emotional, social, and financial adjustments and role loss. Preliminary interactions with the teenage mothers confirmed that these varying coping mechanisms are accountable for the long-term bitter experiences, and this has forced these teenage mothers to make decisions and sacrifices that they would never have thought of in their lives in their quest to cope. It is upon this research gap that this current study aims at filling by exploring the coping and resilience strategies experienced by teenage mothers in Enyan Denkyira in the Central Region of Ghana.

2. LITERATURE REVIEW/ THEORETICAL FRAMEWORK

2.1 Resilience Theory

The term "resilience" is frequently used to describe a person's ability to adapt, recover, or remain strong in the face of adversity [12]. Resilience, according to Ledesma [13], is the ability to recover from hardship, frustration, or disaster. Bearing a child while still, a teenager entails numerous hazards and obstacles, not only for the young first-time mother and her child (or children in the event of twins) but also for their extended families and communities. Balancing the necessity to make a livelihood with the obligations of parenthood, such as being able to provide for the baby's financial, physical, and emotional requirements without a job through the usual developmental tasks of adolescence, are among the challenges [14]. When faced with these difficulties, some adolescent mothers show resiliency and manage to meet both their own and their children's developmental needs. Challenges include balancing the need to find a living on the streets with the responsibilities of parenthood, including being able to provide for the financial, physical, and emotional needs of the infant while working through the normal developmental tasks of adolescence [14].

Confronted with these challenges, some teenage mothers exhibit resilience and manage to satisfy their own developmental needs as well as those of their children. These mothers find ways to continue their education and support themselves economically. Others are overwhelmed by the intricacies and strains of early parenthood and show indicators of developmental distress, such as depression, anxiety, and low self-esteem. Within two schools of thought, the topic of resilience has been widely debated. The individual, according to the first school of thinking, is the source of change [14]. This school of thought considers resilience to be an intrapersonal attribute, rather than a personality trait. This perspective is shared by famous theorists such as Bandura [15], who coined the term "self-efficacy," and Antonovsky [16], who coined the term "sense of coherence."

Another school of thought that has evolved and reflects a more current perspective of resilience is that of resilience as the result of beneficial interactions between an individual and his or her social environment [17]. Ungar was a key figure in advancing this viewpoint, emphasizing the importance of recognizing resilience about the opportunities for personal development available to individuals. Ungar [17] also recognizes the paradigm shift from understanding resilience primarily through the lens of individual capacities to looking at the possibilities within the social ecology, and advocates for the imperative interrogation of resilience to be expanded to include interactional, environmental, and cultural pluralistic perspectives.

Even though Ungar [17] claims that resilience is both an individual's ability to navigate their way to social support and a condition of the individual's social environment, his essential works fall short of offering strong and contextual empirical insight into this interface. Different

perspectives on resilience are offered by Zimmerman and Arunkumar (1994). Compensatory factors neutralize exposure to specific stressors or dangers in a compensatory model. These compensating factors have a direct impact on the desired outcomes and do not interact with risk factors in most cases. Resilience is enhanced when compensating processes coexist with fewer risk factors. In the compensating model, resilience is viewed as a factor that mitigates risk exposure.

The resilience theory explains why some teenage mothers who suffer adversity can thrive in the face of danger (Zimmerman & Arunkumar, [18]; [12]. The resilience process refers to youth who have been exposed to one or more risk factors making positive adjustments [19]. Risk factors can both improve the likelihood of positive adolescent outcomes (compensatory factors) and/or protect youth from negative outcomes linked with risks. Individual assets (such as self-efficacy) or resources from one's surroundings, such as mentors, are examples of positive influences. Because it allows the researchers to focus on elements that may predict positive development within the teenage mothers-risk populations. The resilience theory is a viable strategy for estimating outcomes among these populations who were at risk. As a result, a resilience strategy is distinct in that it emphasizes the individual's strengths as well as the individual's surroundings, rather than focusing simply on weaknesses and blaming at-risk populations for their issues.

Moreover, few studies have used a resilience approach to identify specific elements that may mitigate or shield adolescent mothers from the negative consequences of the risks they experience. Some of the few studies which have looked into promoting variables for this population have discovered that having a solid supportive relationship can help African American adolescent mothers be more resilient [20]; Klaw, Rhodes, & Fitzgerald, [21]. The resilience theory was used to investigate the research questions that motivate this study. Teenage motherhood was influenced by protective variables such as social support, resilience, and social capital. Finally, the resilience theory looked at the difficulties that come with being a teenage mother, focusing on coping techniques. Thus, the deployment of resilience theory was necessitated by the fact that teenage mothers may experience challenges when family members and government institutions caring for them are not able to provide for their responsibilities.

2.2 Coping Mechanism

Coping is defined as the thoughts and activities used to deal with stressful events both inside and outside [3]. It's a concept that distinguishes conscious and deliberate mobilization of actions from 'defense mechanisms,' which are subconscious or unconscious adaptive responses aimed at reducing or tolerating stress [22]. When individuals are subjected to a stressor, the varying ways of dealing with it are termed 'coping styles,' which are a set of relatively stable traits that determine the individual's behavior in response to stress. These are consistent over time and across situations [22].

Reactive coping (a reaction to the stressor) and proactive coping (a response before the stressor) are the two types of coping (aiming to neutralize future stressors). Reactive persons do better in a more variable environment because they are more routinized, rigid, and less reactive to stressors, whereas proactive individuals perform better in a more variable environment. After all, they are more routinized, rigid, and less reactive to stressors [23]. Coping is often classified into four broad types, [3]): Problem-focused, which explains the issue that is generating the distress: Emotion-focused, to reduce the problem's negative emotions: Meaning-focused, in which a person employs cognitive strategies to deduce and regulate the situation's meaning and Social coping (support-seeking) in which an individual seek emotional or instrumental help from their community.

In some instances, many of the coping mechanisms are beneficial. Some research implies that a problem-focused strategy is the most effective; others have found consistent data that certain coping methods are linked to poorer outcomes [3,24]. Maladaptive coping, for example, refers to coping mechanisms linked to poor mental health outcomes and increased levels of psychopathology symptoms. Disengagement, avoidance, and emotional suppression are examples of these behaviors [25]. Thus, the sort of coping mechanisms used by young mothers in Enyan Denkyira will likely impact their health and overall well-being in this study.

2.3 Impact of Teenage Motherhood on Teenage Mother's Well-being

Although peer relationships have a strong influence on self-concept, research on typically-developing children and adolescents shows that parents and other family members can still have a significant impact on their socio-emotional well-being [26,27] According to Sodi [28], teenage motherhood has imposed negative consequences and outcomes such as being unable to attain sufficient education needed to compete in the economy, often leading to poverty and psychological distress. Psychological distress is a serious problem for many adolescents and is characterized by feelings of anxiety, worry, frustration, sadness, and withdrawal [29]. West and Sweeting [30] reported that factors such as substance abuse, physical and sexual abuse, family dysfunction, anxiety, and depression may influence adolescents to pregnancy. Thus, as a result, they are treated as a nuisance and devalued by society. Domenico and Jones [29] reviewed that young females become pregnant intentionally because they have no life goals, poor performance in school and low educational expectations, lack of positive role models, or attempting to escape from abused home situation, making these young adults drift into sexual affairs, thus leading to pregnancy. Domenico and Jones further stated that factors such as family structure, age at first intercourse, goals, and child abuse have been associated with adolescent pregnancy.

Veit and Ware [31] suggested that psychological well-being and psychological distress are two separate constructs. Psychological distress is the measure of self-depreciation, irritability, anxiety, depression, and social disengagement [32]. On the other hand, psychological well-being is composed of general positive consequences and emotional ties. The general positive effect consists of feelings of happiness, light-heartedness, and feeling relaxed, whilst emotional ties involve feeling loved and wanted and an absence of loneliness [3]. Thus, one who exhibits strength would reflect good psychological well-being and vice-versa. Nevertheless, being a young unmarried mother can be tough on the teen mothers' emotions, finances, health, and psychological well-being. In many cases, families reject their daughters who become pregnant before marriage. More importantly, the issue of teenage motherhood is an endemic social concern with damaging health consequences and thus could contribute to the total burden of disability in the population [26].

From the above, it can be deduced that teenage mothers have also been found to be at greater risk of psychological problems as compared to non-parenting teenagers and older mothers [33,27]. Depression was found to be common amongst teenage mothers [34,35]. This was similar to the rate found by Hindini and Fatusi [36] who also found that life stress events, particularly homelessness, could lead to poor psychological well-being. Contrary, these studies employed quantitative approaches to conducting their studies outside Ghana where social intervention policies are not uncommon. The researchers, therefore, want to confirm or refute these studies studies from the perspectives of teenage mothers in Ghana where social intervention policies are uncommon for teenage mothers.

The literature also revealed that family and governmental systems of care for teenage mothers have been undermined by several factors [37-40]. As teenage girls become pregnant, family bonds become weak and obligations are not binding. The researchers agree with this but want to conduct the study in the Enyan Denkyira community to confirm, refute or find out the other factors which may undermine teenage mothers' care and support. Thus, this phenomenological study was designed to address these gaps in the literature.

2.4 Social Support Factors for Teenage Mothers

For all women, the journey to parenthood is a big developmental milestone, but it is especially challenging for teenage mothers who are experiencing motherhood for the first time [41]. Social support is a complicated phenomenon that is difficult to understand. There are numerous definitions, but none has been acknowledged as definitive. In stressful situations, social assistance is widely acknowledged as a vital booster of psychological and physical health. According to Green and Rodgers [42], social support can be defined in a variety of ways, including the characteristics of specific interpersonal interactions, people's perceptions of support and connectedness, or simply having people to turn to for information, material assistance, or emotional support. These writers also indicate that mastery and support have a reciprocal relationship. Adult and adolescent

mothers gain social support in different ways. Teenage mothers in Accra, according to Gyesaw and Ankomah [43], deserve support and community involvement regardless of their age or socioeconomic status. Crnic, Greenberg, Ragozin, Robinson, and Basham found that intimate spousal support was more useful than assistance from community members or friends, supporting this position. In light of this, social support, particularly from male partners to adolescent mothers is a critical factor in reducing postpartum issues.

According to Gee and Rode [44], being an adolescent mother is a time when these mothers struggle to navigate their new, parental roles and obligations, as well as cope with the physical, emotional, and cognitive problems of adolescence. They discovered that African American adolescent mothers confront unique challenges as a result of racial persecution and economic hardship. In this context, social support from parents, classmates, and instructors has been recognized as being critical to the emotional and psychological well-being of young adolescent mothers [45]. Lander, in particular, contends that being an adolescent mother necessitates a unique need for social support to help teenage mothers through the many changes and transformations that occur during that stage of their lives [45]. Cohesive families, good self-esteem, and positive social orientation, according to Wolkow and Ferguson [46], are among the most essential elements in conferring resilience on young people. They go on to say that social support can be introduced into a young person's life at any point in their development and can help to compensate for a lack of other protective elements. According to Beier, Rosenfeld, Spitalney, Zansky, and Bontempo [47], this support can come through a mentoring relationship in which a teenager can trust someone who cares about them and is willing to help and treat them with respect. Many young people benefit from parental support in developing knowledge and skills for healthy adulthood; however, when parents are unavailable, other adults such as teachers, nurses, youth leaders, other family members, and neighbors can help. "At least one loving, competent, and reliable adult who recognizes, values, and promotes pro-social behavior" is important for resilient young people [48]. Other researchers, such as Davis [49] point out that disagreements over suitable parenting and a young woman's lifestyle can readily develop when childrearing responsibilities are shared.

Furthermore, young mothers with low resources sometimes find it difficult to reciprocate the help they have received, resulting in an uneasy interpersonal imbalance [44]. Other research, on the other hand, portrays paternal support in a less flattering light. For African American and European American adolescent mothers, low father support has been linked to poor parenting skills [50] and lower academic achievement. Adolescent mothers frequently cite problems with their male partners spanning from disappointment over unmet expectations for financial and childcare assistance to serious conflicts, difficult break-ups, and physical and sexual assault [51]. Again, social support is critical in overcoming adversity by facilitating access to tangible resources such as food, clothing, and shelter, as well as financial, educational, medical, and employment assistance [17]. In addition, because minority young mothers are more likely to live in poverty than older mothers, they frequently rely on others for childcare, material aid, and support. Indeed, social support aids teenage moms in their mothering duty by boosting their self-esteem and making them feel better about their children and its availability has an impact on future results as well Smith Battle [52] since it promotes the development of new abilities, emotional growth, and optimism for the future. Furthermore, young mothers can benefit from the assistance of health experts, social service organizations, and other adults in developing their abilities, resources, and assets. Community-based programs that are well-designed help young mothers improve their abilities. Home visiting programs offered by nurses before birth and during the first two years of a child's life can help prevent child abuse and neglect, as well as address any health-risk behaviors displayed by adolescent parents.

3. METHODOLOGY

This study adopted a qualitative research paradigm with a phenomenological design. This approach gave the researchers the chance to go into greater depth and concentrated on the personal meanings and descriptions obtainable by the participant. The population comprised all unmarried teenage mothers who were selected from 10 selected churches in Enyan Denkyira, namely: Roman Catholic, Methodist, Presbyterian, Christian Faith, Musama International Church and Christ Apostolic, Seventh Day Adventist, The Church of Pentecost, Apostolic Church and Assemblies of God. Church leaders from the 10 selected

churches within the Ajumako Enyan Essiam District were also involved in the study. These churches were chosen because they function as organized entities that serve a diverse range of people from various backgrounds and challenges. These participants were selected from these churches because of accessibility and also, as insiders in the research area, the teenage mothers from these churches confided in the researchers with their issues and hence the motivation to involve them. A sample size of 27 participants comprising 15 unmarried teenage mothers and 10 church leaders and 2 District Assembly officials were selected through Snowballing and Purposive techniques respectively. The 15 selected teen mothers from the ten churches were made to form a 3-section Focus Group Discussion with 5 participants in each group. The researchers earlier contacted 5 selected teenage mothers in the various churches through snowballing. These 5 participants further directed the researchers to the other 10 teenage mothers who were on suspension from their churches as a result of being pregnant. All the 10 Church leaders and 2 district officials were purposefully selected and engaged in one-on-one- interviews. All the 15 teenage participants were also engaged in the one-on-one interview to clarify some issues they may feel reluctant to share during the Focus Group Discussion. This was to enable the researchers to understand the issues as lived and experienced by the teenage mothers and as well accorded the researchers an opportunity to probe. The researchers ensured that the teenage mother participants met the following inclusion criteria: Availability and willingness to participate in the study, teenage mothers who are facing difficulties, permanent residents in Enyan Denkyira, and members of any of the ten selected churches in the community. The interview session for each of the participants lasted for about two hours. Field notes were used to support the data collected from the interviews. All discussions were conducted in Fante and Twi to allow for the free flow of discussion. Using their 'mother tongue' enabled the participants to provide detailed accounts of their experiences, which might not have been the case if they had used English. The tapes were transcribed into English. The data collection was done within a month. The trustworthiness of the study was measured against the criteria proposed by Guba and Lincoln [53] thus; credibility, dependability, transferability, and confirmability. Braun and Clarke's [54] approach to thematic analysis was employed to analyze the data. This presents a six-step process of qualitative data analysis involving familiarizing with the data, generating initial codes, identification of themes that are reflected, collecting codes, and reviewing data for "internal homogeneity and external heterogeneity" [54] to understand and explain the meaning and dynamics of themes, refining of themes and writing up of the report.

Regarding possible emotional harm, the researchers assured the participants that the information collected would unfortunately not be used to directly improve their livelihoods to avoid creating false hopes for the research participants. It was made clear that participation was voluntary and that participants were free to withdraw from the research should they feel the need to. After collecting data, research participants were allowed to reflect on their experiences during the research process, talk about their experiences, challenges they went through as well as their overall feelings about the research which serves as a piece of additional rich information to the data.

4. FINDINGS AND DISCUSSIONS

To find out the coping strategies of the teenage mothers, the researchers asked the teenage participants to share with them how they managed to do their day-to-day activities such as how they managed to get money, what they had been doing to make a living, how they were able to go by their daily activities amid their challenges, any other means they generated income for themselves and their child or children, how they were able to survive when they had unmet needs and if they hoped their situation would change with time. The researchers also tried to find out from the participants how they survived when the assistance they received from sympathizers was not forthcoming. From the responses, ten of the teenage mothers' coped by depending on sympathizers. Five of the participants also coped with their struggles. All the participants expressed the hope that their situation could only change only when they received assistance. The themes that were discovered have been discussed as follows:

4.1 Sympathizers

From the responses of the teenage participants on how they coped with life as well as how they managed to go about their daily activities, most of the participants explained that their survival depended on sympathetic neighbors who lived in

the same neighborhood with them. They expressed that these sympathizers were passers-by who at times sympathized with their situation. They assisted by giving them food, clothing, and money. The teenage participants opined that in the absence of these neighbors, they slept without food. They expressed their various experiences as follows:

Participant 8, a 17year old teenage mother also expressed her plight that, neighbors who sympathized with her situation provided her and her child with little help in terms of food. She revealed that only neighbors who cared offered help to her. She again commented that the help did not come frequently and in the absence of this, she slept without food because she thought she could not force people to help her.

> "…I usually get little help in terms of food from neighbors who care about me and my child. But this does not come frequently as expected. Sometimes I feel shy to approach them since they offer help willingly. If the help does not come, I am compelled to sleep on an empty stomach."

The responses from the participants meant that the teenage mothers' survival depended on sympathetic passers-by. However, such people did not provide this support frequently which affected their plight. The findings revealed that most teenage mothers received most of their support from sympathizers who had no family relationship with them. This is consistent and confirmed the study of Nyanguru, Hampson, Adamachak and Wilson [55] Sackey [56], Mba [57], Dsane [58], and Apt [59] that, non-family sources of care for the vulnerable are emerging due to the inability of family members to provide care for their relatives. This is because the teenage mothers in Enyan Denkyira receive intermittent support from benevolent individuals who are not related to them by blood. This is a result of the failure of family members to provide support to them.

4.2 Personal struggles

It was also evident from five participants that they were able to survive their situations because they had devised strategies to enable them to acquire support from people. The patterns which emerged have been discussed as follows:

4.2.1 Doing petty jobs

Two of the participants commented that since they lacked money, they are forced to go out to engage in labor work such as fetching water for construction works and also selling petty things like onions and tiger nuts. One of the participants said:

> "…anytime I hear of any ongoing constructional works in my area, I quickly leave my child with a friend to the site to fetch water for the workers. Even that one if I'm not lucky, the money would be paid in the next day."

The other participant had this to say:

> "…I normally use the little money I received from sympathizers in petty trading in selling onions. This, I usually do in Onion seasons. During this time, you only need some small money to do the onion business. But when it becomes a scarce commodity in the market, I switch to selling tiger nuts. Through this, I can get food for my child and myself. Even with this, I have to do the selling with my child at my back. Who cares?"

The responses from the participants meant that the teenage mothers' survival depended on petty trading. However, such jobs are casual and did not offer frequent support and this had affected their income. The findings revealed that most teenage mothers' plight will be cyclical as their dependence on benevolent passers-by will continue to make them vulnerable.

4.2.2 Borrowing from neighbors

Eight of the participants also expressed that they always borrowed from neighbors. The participants commented that they always borrowed money from their grandmothers and friends and other foodstuffs from nearby provision stores and settled the bill anytime they got money. This supports the study of Mort [14] among migrant teenage mothers from the northern region of Accra that peer support was the third strongest factor that influenced resilience among migrant teenage girls. Teenage girls immediately resorted to their colleagues for support with childcare duties anytime they had to attend to nature's call, bathe and or undertake petty activities that they could not carry their

babies along. One of the participants expressed that in the case where she was denied, she sometimes slept without food. She opined that:

> "…I sleep like that. I go hungry because even if you go to the stores they will not give the things to you on credit."

The hardships these teenage mothers faced had compelled some to go to boys for money which again made them vulnerable to becoming pregnant as one of the participants opined;

> "…at times I am forced to go and see these guys for money but you know no guy will give you money freely. There is nothing like free lunch."

The responses from the participants meant that the teenage mothers' survival depended on borrowing from relatives and neighbors. Most of the time, these teenage mothers found it very difficult to repay the borrowed monies. The persistent demand for the repayment of the money makes them suffer psychological instability which caused them to be devalued. Sometimes, these teen mothers were forced to give themselves to men to get some means of survival if their expectations from lenders were declined. This supports Mort [14] that one resilient factor among migrant teenage girls was partner support. Migrant teenage girls who received partner support were more likely to be resilient but vulnerable than those without partner support.

To find out the social interventions available to assist the teenage mothers in the district, the researcher asked the teenage mothers, church leaders, and officials from the District Assembly if there were any people or organizations who offered support frequently to the teenage mothers, whether the teenage mothers receive occasional support from the District Assembly, the government, the church or any other agencies and whether there were any social interventions put in place by the District or the church to assist the teenage mothers in such situations. From the responses, it became evident that most of the teenage mothers and the church leaders accepted there was no such support in the District Assembly and the churches available for teenage mothers. The teenage mothers rather attributed their challenges to governmental failures. However, the District official accepted that there were social interventions in the District Assembly even

though they were having some challenges implementing such social interventions. The themes that emerged have been discussed as follows:

4.2.3 Lack of awareness of government institutional social interventions

One of the prime themes that emerged was the failure of state institutions to put up proper social interventions to strengthen social welfare support systems for teenage mothers. This theme emerged because it seemed to run through all of the responses given by the participants. All the fifteen teenage participants and five church leaders expressed worry about the government's failure to address the challenges of these teenage mothers by putting up proper social interventions for them. They commented on why various government leaders especially District Chief Executives (DCEs) did not show concern about their plight. They lamented that they did not think the government of Ghana have better plans for them. They further complained that they did not have any hope that their situations would change since the District Assembly had not shown concern for their plight.

A 16-year-old teenage mother bemoaned*:*

> *"…sometimes I hear that there are social interventions but I have not benefitted from any of them, I only know the social interventions for the orphans but for us I don't know about such social interventions. I don't also know any organization that helps us. I do not have any hope that the government will come to my aid."*

Another participant also said;

> "…I heard about some organizations in the previous government that sponsored some teenage mothers to learn some vocation but I have no idea of these organizations."

The experiences of the teenage mothers in this study revealed that their situation was partly caused by the failure of government and community members and social welfare institutions to provide the needed care for them. These included the inability of society and government to sufficiently provide and strengthen social welfare and other social interventions to care for teenage mothers' needs. Such welfare

systems include; the failure of the government to create enough jobs for the teenage mothers in Enyan Denkyira, the failure of community members to show love, care, and support, and the failure of the government to strengthen and extend the Livelihood Empowerment Against Poverty (LEAP) to benefit most of the teenage mothers [60,61]. These findings contradict the study of Arokiasamy [62] that provision of the physical and emotional needs of people is not solely the duty of the individual families, but also a society's function. This is because, the findings revealed that poor institutional support systems such as the absence of the social welfare systems, the inability of the government to provide and strengthen social welfare systems for teenage mothers, failure of the government to create jobs for the teenage mothers and failure of the government to strengthen LEAP had all contributed to the challenges teenage mothers face [63-65]. The findings revealed that community support systems for teenage mothers were weak and ineffective in Enyan Denkyira and thus, the community showed little concern for the plight of the teenage mothers. This is consistent with the study conducted by Twum-Barima [66] that, in today's rapidly modernizing societies, attitude towards vulnerable people in most communities in general, tends to be largely negative. The teenage mothers in Enyan Denkyira are not receiving adequate care and support from the community members because the community members' attitude towards them is negative.

Based on the responses from the in-depth interview and the focus group discussions, most of the teenage mothers in Enyan Denkyira suffered from chronic poverty and lived in poor and vulnerable conditions. In addition, they suffered from poor health and a lack of employment opportunities for themselves. Furthermore, most of the participants were school drop-outs. They also did not have any remunerative vocation which could have allowed them to free themselves from poverty. Due to this, many of them were financially incapable to meet their day-to-day needs. The unawareness of institutional support coupled with the breakdown of the family care system had worsened their situation. These challenges had compelled the teenage mothers to depend on sympathizers for their survival [67,68]. They had also been forced to adopt various surviving strategies such as borrowing, selling petty things, and fetching water for construction works which all have effects on their physical, economic and social wellbeing. This supports the study [69,70] that teenage mothers often experience multiple stressors, including decreased financial resources, physical exhaustion, task overload, role restriction and confusion, social isolation and depression symptoms which could affect their survival strategies and wellbeing.

5. CONCLUSION

The study sought to examine coping and interventional or resilience strategies of teenage mothers in Enyan Denkyira in the Central Region of Ghana. The study had established that teenage mothers in Enyan suffered challenges due to their lack of awareness of government institutions and the insufficient government support to strengthen social welfare services in the community. This made them adopt several strategies to cope with life which affected their health and also continually make them vulnerable to men in the community. The study, therefore, concludes that the destiny of these teenage mothers in Enyan Denkyira will continue to be in the hands of irresponsible men in the community and benevolent individuals who give them occasional support as long as the teenage mothers do not have any business on which they can depend. In the same vein, if the family of these teenage mothers, the government, and non-governmental institutions do not put in place the support and provide the needed services to these teen mothers, this menace will continue to hurl its wings among the teenage mothers of Enyan Denkyira.

6. RECOMMENDATIONS

We recommend that teen parenting support centers should be established in key suburbs throughout the Enyan Denkyira District, where teenage girls can obtain services such as adolescent and reproductive learning, skills training, how to start small-scale businesses, and counseling and guidance on skilled parenting. Simultaneously, the centers should act as places where teenagers can receive early learning and development instruction, primary healthcare, and nutritional assistance. In connection to this, the Livelihood Empowerment Against Poverty (LEAP) money should be expanded to benefit more teenage mothers and also should be released on time to the teenage mothers in Enyan Denkyira. This will assist teenage mothers who are school drop out and do not have any secured trade or vocation by equipping them with little start-up capital. The

religious bodies, institutions, and the family must be encouraged and supported by the government to continue to play their roles as sources of social protection for teenage mothers instead of neglecting them.

In addition, since most the teenage mothers are school dropouts and depended on sympathizers, borrowing and engaging in menial jobs for their livelihood, the government of Ghana through the Ministry of Gender and Social Protection should also make scholarships available for the teenage mothers who want to further their education or learn a vocation. Also, the teenage mothers in Enyan Denkyira should be encouraged by Government through the use of LEAP to engage in self-initiated projects such as learning vocation, and the erection of kiosks in front of their homes to be used for trading. These will provide them with a means of livelihood and would minimize their dependence on men and passers-by. Families should also up their game in taking care of their wards to protect them from falling prey to activities that expose them to teenage pregnancy to reduce or prevent the canker of teenage pregnancy. This research adds to the body of knowledge by presenting a variety of implications for social work practice and policy, as well as recommendations for further research.

The findings of this study have implications for improving awareness of teenage mothers' reproductive health and that of their children in the provision of holistic healthcare and welfare services to them in Ajumako Enyian. Basic parenting skills could be taught to teen mothers in the district through well-designed and developed outreach programs. This study is useful for social workers because it emphasizes the importance of shifting the institution's focus from individuals to groups and communities, as well as providing practitioners with access to the data regarding teenage mothers. It adds to the body of knowledge about social work practice with teen mothers in Ghana, especially those without social capital. In the future, social work practice in Ghana should concentrate on building welfare programs for vulnerable groups such as teenage mothers.

7. LIMITATIONS

Upon careful review and observation following the study's conclusion, the limitations identified in this investigation have been explicitly acknowledged. With a qualitative research methodology and phenomenological design, the study was only carried out in Enyan Denkyira. As a result, conclusions cannot be applied to the entire Central Region or the entire nation. Additionally, some participants found it awkward to answer the interview questions when their friends were there. To get around this, the researchers visited the participants at home and conducted one-on-one interviews with them at a time that worked for them.

CONSENT AND ETHICAL APPROVAL

Ethical clearance was obtained from the University of Education Winneba. Confidentiality of the participants' identities was guaranteed. Participants' consent was sought by informing them of their rights to refuse to answer certain questions that they were not comfortable with

COMPETING INTERESTS

Authors have declared that no competing interests exist.

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