

**PSYCHOLOGICAL EXPERIENCES OF TEENAGE MOTHERS ON PARENTING IN
EKOSODIN COMMUNITY IN OVIA NORTH EAST LOCAL GOVERNMENT AREA**

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UNIVERSITY OF BENIN
BENIN CITY.**

NOVEMBER, 2025

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**BEING A PROJECT WORK SUBMITTED TO THE DEPARTMENT OF
SOCIAL WORK, UNIVERSITY OF BENIN, BENIN CITY, IN PARTIAL
FULFILLMENT OF THE REQUIREMENTS FOR THE AWARD OF
BACHELOR OF SCIENCE (B.Sc.) DEGREE IN SOCIAL WORK**

NOVEMBER, 2025

CERTIFICATION

I certify that this project was carried out by **ESEDO PRECIOUS IFEANYI** with Matriculation Number **SSC2106042** in partial fulfillment of the requirement for the award of Bachelor of Science (B.Sc.) in Social Work, Department of Social Work, Faculty of Social Sciences, University of Benin, Benin City, Edo State, under my supervision.

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Date

Dr. (Mrs.) H. E. Eweka
Head of Department

Date

DEDICATION

This project is dedicated to God Almighty for keeping me throughout my academic pursuit and my mother, for inspiring me to start this journey.

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I express profound thanksgiving to God, my Heavenly Father, for His inscrutable and boundless love for me. He has preserved me all these times. I would also like to extend sincere appreciation to my esteemed supervisor, Assoc. Prof (Mrs.) T.B.E Omorogiuwa, not only for her guidance during this research but also for her mentorship during my studies. Her commitment has been instrumental in enhancing the quality of this academic work. Her guidance is sincerely appreciated.

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ABSTRACT

This study examined the psychological experiences of teenage mothers in Ekosodin community, Ovia North East Local Government Area, with particular attention to how socio-cultural factors shape their wellbeing and parenting practices. The study adopted the survey design using questionnaire as instrument of data collection. The data was analyzed using percentage tables. Findings revealed that socio-cultural dynamics exert significant influence on the mental health of teenage mothers. Approximately 77% of respondents identified cultural beliefs as barriers to social acceptance, while 98% reported that stigmatization adversely affected their psychological wellbeing. Family and societal judgment further intensified emotional distress for 74% of participants, reflecting the deep-rooted moral expectations placed on young women within the community. Additionally, 94% of respondents acknowledged that traditional gender roles imposed greater parenting responsibilities on them than on their partners, thereby increasing psychological and economic strain. Despite these challenges, teenage mothers demonstrated resilience through coping mechanisms such as self-motivation, peer and family support, religious engagement, and leisure activities. However, variations in the use of faith-based coping strategies suggest differing personal and social contexts. The findings underscore that the intersection of cultural beliefs, stigma, family pressures, and gendered expectations reinforces exclusion and stress, limiting access to supportive networks. The study concludes that enhancing the psychological wellbeing of teenage mothers in Ekosodin requires culturally sensitive social work interventions, improved access to mental health services, and community sensitization programs aimed at reducing stigma and promoting inclusion.

Keywords: teenage mothers, psychological wellbeing, socio-cultural factors, stigmatization, gender roles.

CHAPTER ONE

INTRODUCTION

1.1 Background to the Study

Teenage pregnancy is a significant global public health and social challenge. The World Health Organization (2023) reported that approximately 21 million girls aged 15–19 become pregnant each year in developing countries, with about 12 million giving birth. Although teenage birth rates have declined in some high-income countries due to improved access to education and contraception, the burden remains high in low- and middle-income countries. In Sub-Saharan Africa, for instance, countries like Niger, Mali, and Chad report over 170 births per 1,000 teenage girls a reflection of entrenched socio-economic disparities and limited access to reproductive health services (UNICEF, 2023).

Niger has one of the highest rates of child marriage and early childbearing in the world; early marriage and social norms that privilege girls' role as wives/mothers shape adolescent motherhood in Niger and are important contextual drivers of the psychological outcomes seen among teenage mothers. Adolescent mothers in low-resource Sahelian settings commonly report elevated symptoms of depression and anxiety during pregnancy and postpartum; adolescent pregnancy is a known risk factor for perinatal mental disorders across sub-Saharan Africa. (See reviews of adolescent perinatal mental health). Because early motherhood in Niger often follows child marriage or premarital conception, young mothers frequently face community stigma (reduced social support, judgment

from family/health workers) that worsens stress and reduces help-seeking. Local child-marriage programming documents highlight the social norms pressuring girls into early motherhood (UNICEF, 2024).

Many teenage mothers experience abrupt changes in identity (from student/child to caregiver/household worker), with loss of schooling and economic prospects contributing to low self-esteem and hopelessness. These transitions are strongly associated with poorer maternal attitudes and parenting confidence in adolescents (O'Hara & Wisner, 2019). Depression, anxiety and low self-efficacy in teen mothers are linked to reduced responsiveness to infants, lower uptake of preventive care, and interrupted early child stimulation outcomes that threaten child development if unaddressed. Programs that integrate maternal mental health with maternal/child health and education are recommended.

Mali has high rates of child marriage, early unions, and adolescent pregnancy, with structural drivers such as poverty, entrenched gender norms, and limited access to girls' education influencing adolescents' transition to motherhood and mental health outcomes (UNICEF, 2024). UNICEF regional reports highlight that adolescent mothers often face multidimensional challenges that shape their psychological wellbeing and caregiving capacities. Mali is among the countries in West/Central Africa with a high adolescent birth rate; in the UNICEF West & Central Africa region, adolescent childbearing (<20 years) is markedly higher among the poorest households. Report show

that school-going pregnancy rate in Mali is at 45% in some studies among schoolgirls. That is, nearly half of schoolgirls in certain areas of Mali reportedly face pregnancy while still in school. Historical data show that in Mali (1983-1987) about 10% of female secondary school students were expelled or dismissed because of pregnancy.

Adolescent mothers in Mali, similar to peers across the Sahel, experience heightened perinatal depressive symptoms that can impair mother–infant bonding and caregiving sensitivity (Lukose et al., 2023). Systematic reviews indicate that adolescent pregnancy is a high-risk period for perinatal mental disorders, including depression and anxiety (O’Hara & Wisner, 2019). In conflict-affected or resource-scarce areas of Mali, adolescent mothers report persistent worries about security, child nutrition, and access to healthcare. These stressors amplify anxiety and feelings of helplessness (UNICEF, 2023). Qualitative studies across West Africa show that while many young mothers describe stigma and loss, others express pride and strengthened identity as caregivers when provided with social support and community resources (Johnson & Muriithi, 2022). Teenage mothers in Mali are exposed to overlapping vulnerabilities, including school dropout, gender-based violence, poor access to adolescent-friendly health services, and economic insecurity, all of which increase their psychological burden (UNICEF, 2024).

Chad records one of the highest adolescent fertility rates globally, with births among girls aged 15–19 remaining prevalent (World Bank, 2024). Poverty, early marriage, and limited access to reproductive and mental health services contribute to high

psychosocial distress among teenage mothers (UNICEF, 2024). Elevated mental health burden. Teenage mothers in Chad often present with perinatal depression and anxiety linked to poverty, lack of partner support, and social exclusion (Lukose et al., 2023). Similar findings across sub-Saharan Africa associate adolescent motherhood with emotional distress and reduced parenting capacity (O'Hara & Wisner, 2019). Stigma surrounding early pregnancy leads to social isolation, family rejection, and educational exclusion, intensifying feelings of shame and hopelessness (UNICEF, 2024). In Chad, weak social protection, inadequate adolescent-sensitive mental healthcare, early marriage to older partners, and widespread poverty increase the likelihood of persistent psychological distress and poor maternal outcomes (World Bank, 2024).

Community-based psychosocial interventions, peer support groups, and reintegration programs for young mothers enhance coping strategies and parenting skills (Ogunyemi & Adebayo, 2022). Addressing the mental health needs of teenage mothers is critical for improving child development outcomes in Chad. Integration of mental health screening into antenatal and postnatal care, stigma reduction, and education or livelihood support can significantly enhance both maternal and child wellbeing (Lukose et al., 2023). In Chad, 67% of women aged 20-24 were married by age 18. Also, among girls aged 15-19 in Chad, approximately 38% are currently married or in union. Chad has one of the highest maternal mortality ratios, which indicates poor access to maternal health. For example, in some reports, Chad's maternal mortality ratio has been cited around 856

deaths per 100,000 live births in recent surveys. The adolescent health profile also shows that early marriage rates are high: about 16% of women aged 15-19 are married by age 15.

In Niger teenage mothers often faces profound psychological experiences shaped by social stigma, poverty, and limited support systems. Many endure feelings of shame, guilt, and low self-esteem due to community rejection and the perception of early motherhood as a moral failure. The burden of caring for a child at a young age, coupled with disrupted education and financial hardship, frequently leads to stress, anxiety, and depression. In some cases, they may also struggle with trauma from forced or early marriages, sexual exploitation, or abandonment by partners. Despite these challenges, resilience is sometimes fostered through informal peer networks, faith-based coping, and gradual adaptation to maternal roles, though the absence of structured psychological and social support often exacerbates their vulnerability (BioMed Central, 2023).

In Mali teenage mothers experience complex psychological challenges that stem from cultural expectations, poverty, and the realities of early motherhood. Many grapple with feelings of fear, shame, and social isolation due to the stigma attached to pregnancy outside wedlock or within early marriages, which are still prevalent in many communities. The disruption of education and limited economic opportunities heighten their sense of hopelessness and anxiety, while the pressures of child-rearing at a young age often contribute to stress and depression. Some teenage mothers also experience trauma from forced unions or gender-based violence, deepening emotional struggles (Kumar & Huang,

2021). However, in contexts where extended family or community networks provide support, these young mothers may develop resilience and coping strategies, though formal psychological and social services remain scarce, leaving many vulnerable to long-term emotional distress (UNICEF, 2023).

In Chad teenage mothers often undergo difficult psychological experiences shaped by cultural norms, poverty, and weak social support structures. Many of them face stigma, rejection, and feelings of shame, especially when pregnancies occur outside marriage, which undermines their self-esteem and sense of belonging. The sudden transition to motherhood brings emotional stress, anxiety, and depression, worsened by the loss of educational opportunities and economic dependence on families or partners (Rzechowska, 2025). In cases of early and forced marriages, teenage mothers may also suffer trauma from gender-based violence and lack of autonomy, further straining their mental health. While some find comfort in faith, peer support, or family acceptance, the absence of adequate psychosocial care services in Chad means that many remain vulnerable to long-term psychological distress and cycles of poverty.

In Nigeria, teenage pregnancy remains a critical concern, with about 19% of girls aged 15–19 having already begun childbearing (NDHS, 2018). Regional disparities persist, with northern states showing significantly higher rates than their southern counterparts. However, urban and semi-urban areas, including parts of Edo State, are not immune. In the Ekosodin community an educationally dense semi-urban locality within

Ovia North-East Local Government Area of Edo State the prevalence of teenage motherhood is rising (Omorogiuwa, 2018; Omorogiuwa, 2025). Factors such as peer pressure, poverty, poor parental supervision, and limited access to comprehensive sexuality education make adolescents vulnerable to early pregnancies (Ajayi et al., 2023).

Becoming a teenage mother presents substantial psychological challenges. Unlike adult mothers, teenagers are still in the process of identity development and emotional maturation. As a result, teenage mothers often experience internal conflict, confusion, and instability as they assume parenting responsibilities prematurely (Ajayi et al., 2023; Rzechowska, 2025). These early transitions expose them to psychological strain, including depression, anxiety, emotional numbness, and low self-worth. Without the emotional maturity and social support required to manage such responsibilities, many teenage mothers face long-term psychological consequences that may affect their future relationships and life trajectory.

Cultural expectations further complicate the experiences of teenage mothers. In many Nigerian communities, early pregnancy is viewed as a moral failure and a source of family shame. This perception, particularly dominant in traditional and religious settings, often leads to social rejection, stigmatization, and in some cases, forced early marriages as a corrective measure (Aderibigbe, 2021; Uchem, 2020). These cultural reactions increase psychological distress, diminish teenage mothers' chances of returning to school,

and restrict their opportunities for empowerment, ultimately reinforcing cycles of poverty, gender inequality, and mental health challenges.

In Ekosodin, teenage mothers often lack critical coping resources and social buffers. Many are denied antenatal care due to fear of judgment or financial barriers, and they are often excluded from social circles, further increasing their vulnerability (Omorogiuwa, 2018; Omorogiuwa, 2025; Daikhena & Egbochuku, 2025). It is clear that most of these young mothers suffer in silence, struggling with emotional withdrawal, identity crises, and persistent feelings of shame and worthlessness (Olajubu et al., 2021; Hoseini et al., 2024). These psychosocial burdens are magnified by the lack of awareness about mental health services and the absence of formal psychological support structures tailored to teenage needs.

Compounding these challenges is the frequent abandonment by male partners. Many teenage mothers are left to raise their children alone without financial or emotional assistance, which deepens feelings of rejection and despair (Rzechowska, 2025). In such circumstances, some experience chronic stress, suicidal ideation, or develop maladaptive coping mechanisms such as substance use or total social withdrawal. These outcomes not only affect the mother's mental health but also pose developmental risks for their children especially in terms of nutrition, emotional security, and early education (Kumar & Huang, 2021; Ajayi et al., 2023).

Despite the psychological toll of teenage motherhood, most studies on this issue in Nigeria have focused on educational disruption and economic outcomes, with limited emphasis on the emotional and psychological dimensions, particularly in localized settings like Ekosodin (Daikhena & Egbochuku, 2025; Omorogiuwa, 2018; Omorogiuwa, 2025). This gap is significant, as understanding the mental health implications is crucial for designing comprehensive interventions. Exploring the coping mechanisms teenage mothers use to survive emotionally whether adaptive or maladaptive can provide insights into their resilience and the kind of support they need most (Ayamolowo et al., 2019; Goossens et al., 2015).

Given the rising prevalence of teenage motherhood in Ekosodin and the apparent scarcity of psychological support systems, this study aims to examine the emotional and psychological challenges experienced by teenage mothers, explore their coping strategies, identify the cultural and social influences shaping their wellbeing, and assess the availability and accessibility of social work interventions. By focusing on these dimensions, the research intends to provide actionable insights that can inform the design of community-based, culturally sensitive support programs and social work initiatives tailored to the needs of teenage mothers in similar settings.

1.2 Statement of the Research Problem

Teenage motherhood in the Ekosodin community in Ovia North-East Local Government Area, Benin City presents a complex psychosocial challenge shaped by

adolescence, poverty, and socio-cultural expectations (Omorogiuwa, 2018; Omorogiuwa, 2025). Teenagers who become mothers are often thrust into adult responsibilities while still undergoing identity formation and emotional development (Ajayi et al., 2023; Rzechowska, 2025). This sudden transition imposes overwhelming psychological demands, often resulting in emotional instability, anxiety, depression, and diminished self-worth (Ayamolowo et al., 2019; Olajubu et al., 2021). Teenage motherhood therefore disrupts developmental trajectories and places adolescent girls at increased risk of long-term mental health challenges.

The psychological burdens experienced by these young mothers are worsened by cultural stigmatization, financial hardship, and lack of partner or family support. In traditional Nigerian society, teenage pregnancy is often seen as a moral failing and a source of family dishonor, leading to social rejection and emotional distress (Nnodim & Albert, 2016; Adebola, 2018). In Ekosodin a semi-urban settlement marked by a high student population and limited reproductive health services many teenage mothers face peer pressure, inadequate parental supervision, and poor access to emotional or medical care can create unstable state for teenage mothers. As a result, many are left to navigate motherhood in isolation, often without the psychological or material resources necessary for healthy adjustment (Omorogiuwa, 2018).

While considerable research has examined the socioeconomic and educational impacts of teenage pregnancy, there is limited focus on its psychological dimensions in

localized contexts like Ekosodin (Omorogiuwa, 2018; Omorogiuwa, 2025). Feelings of shame, hopelessness, and abandonment are common among teenage mothers and, if left unaddressed, can manifest as depression, social withdrawal, or suicidal ideation (Mangeli et al., 2017; Hoseini et al., 2024). These mental health issues, combined with inadequate support systems, contribute to intergenerational cycles of poverty, trauma, and exclusion (Anima et al., 2021; Hanna, 2001).

Social work has emerged as a key intervention strategy, offering emotional counseling, advocacy, and referrals to essential services. Goossens, Kadji, and Delvenne (2015) emphasize the need for early and integrated psychological support to prevent the escalation of psychopathological risks. In Nigeria, evidence shows that targeted psychosocial support reduces depression and builds resilience among teenage mothers (Olajubu et al., 2021; Ayamolowo et al., 2019). Yet, policy gaps, cultural resistance, and limited funding continue to hinder widespread implementation of effective social work interventions (Okafor et al., 2022; Carey, 2017). This study therefore aims to examine the psychological effect, emotional and mental health experiences of teenage mothers in Ekosodin, assess the adequacy of existing support systems, and contribute to context-relevant, holistic interventions.

1.3 Objectives of the Study

The main objective of this study is to examine the psychological experiences of teenage mothers on parenting in Ekosodin Community, in Ovia North East Local Government Area. The specific objectives are:

1. to examine the most psychological challenges faced by teenage mothers in parenting within the Ekosodin community.
2. to examine the coping strategies adopted by teenage mothers in response to psychological effect of parenting.
3. to identify the socio-cultural factors influencing the psychological wellbeing of teenage mothers in the community.
4. to assess whether social work interventions are available to support teenage mothers facing psychological challenges, and how accessible are these services in Ekosodin,
5. to proffer possible solutions to psychological experiences of teenage mothers parenting in Ekosodin Community.

1.4 Research Questions

This project was guided by the following research questions.

1. What are the major psychological challenges faced by teenage mothers in parenting within the Ekosodin community?
2. What coping strategies do teenage mothers adopt in response to the psychological effects of parenting?

3. What socio-cultural factors influence the psychological wellbeing of teenage mothers in the Ekosodin community?
4. What social work interventions are available to support teenage mothers facing psychological challenges, and how accessible are these services in Ekosodin?
5. What are the possible solutions to psychological experiences of teenage mothers parenting in Ekosodin Community?

1.5 Significance of the Study

This study highlights the psychological realities of teenage motherhood, the study makes a compelling case for integrating adolescent mental health into maternal care frameworks. For teenage mothers, this relevance is crucial, as it validates their experiences and opens avenues for support. Theoretically, it supports adolescent development and trauma-informed care models, while policy-wise, it emphasizes the inclusion of mental health screenings and services within primary healthcare and maternal outreach programs.

The study provides evidence-based insights that are vital for guiding psychologists, social workers, school counselors, and maternal health professionals in tailoring context-specific interventions. Teenage mothers in Ekosodin and similar settings require specialized care that reflects their emotional, social, and cultural realities. Relevance lies in offering these young mothers access to professional help grounded in their lived experiences. With rising teenage pregnancy rates and associated psychological

harm, the study offers timely data for the formulation of inclusive, youth-centered policies. These findings help identify the psychological and social needs of teenage mothers, enabling policymakers to prioritize mental health, educational reintegration, and community support. This is particularly relevant for teenage mothers whose voices are often excluded from formal decision-making processes.

Non-governmental organizations and development agencies can leverage this research to design and scale up teenage-focused programs addressing mental health, economic empowerment, and parenting support. For teenage mothers, this relevance translates into better access to life skills training, peer support, and psychosocial care. The findings validate the use of community-based participatory frameworks and trauma recovery models. Policy-wise, the study advocates for NGO-government partnerships to ensure sustainability, funding, and integration of these programs into wider adolescent health strategies, particularly in semi-urban and underserved areas like Ekosodin.

The study highlights how school environments can either support or alienate teenage mothers. By revealing the psychological effect of navigating motherhood and education simultaneously, it calls on schools to adopt inclusive policies such as flexible learning schedules, emotional support services, and safe spaces. This is directly relevant to teenage mothers striving to balance academic aspirations with parenting duties. One of the study's most powerful contributions is its potential to shift negative community perceptions surrounding teenage motherhood. By presenting data on the psychological

consequences of stigmatization and rejection, the study promotes community empathy, support, and behavioural change. This is deeply relevant to teenage mothers who are often marginalized and silenced.

The study reinforces the importance of combining psychosocial care with economic empowerment as a holistic approach to supporting teenage mothers. For young mothers dealing with financial instability and emotional distress, access to vocational training, microcredit, and skills development can enhance self-worth and resilience. This aligns with empowerment theory and intersectionality, which emphasize agency within structural limitations. By documenting the emotional and psychological fallout from family rejection, the study emphasizes the critical role of family as a protective factor in the lives of teenage mothers. This is especially relevant for girls who may feel abandoned or shamed by those closest to them. The study applies systems theory, which posits that individual wellbeing is linked to broader relational systems.

The research fills a significant gap in academic literature by exploring the psychological experiences of teenage mothers in a Nigerian semi-urban context a topic that has received limited scholarly attention. For teenage mothers, this contribution affirms their experiences and legitimizes them as subjects of serious academic inquiry. The study contributes to theories of adolescent development, gendered experiences of motherhood, and trauma-informed care. It supports the academic community in generating further empirical research, which could inform future teaching, curriculum

development, and policy advocacy within public health, psychology, and social work disciplines.

Finally, the study lays a vital groundwork for future comparative and longitudinal studies on adolescent motherhood. It opens possibilities for research into the intergenerational effects of early motherhood, resilience factors, and the effectiveness of social work interventions over time. For teenage mothers, this continuous research ensures that their needs are kept on the academic and policy agenda.

1.6 Scope of the Study

This study is delimited to the Ekosodin community, a semi-urban area situated in Benin City, Edo State, Nigeria. The scope is narrowly tailored to explore the psychological experiences including emotional stress, anxiety, depression, fear, and coping responses of teenage mothers aged 13 to 19 years who reside in this specific community. It aims to investigate how these young mothers mentally and emotionally navigate the challenges of early motherhood in a context marked by socio-cultural expectations, peer pressure, economic hardship, and limited access to psychosocial support.

Importantly, this research does not delve into the medical, biological such as maternal health complications or infant outcomes, which fall outside the purview of this psychological and social inquiry. It also deliberately excludes the perspectives and roles of adolescent fathers, broader reproductive health systems, or governmental public health

interventions and policies the study is qualitative in nature, relying on in-depth interviews and focus group discussions with teenage mothers to uncover their lived emotional experiences, coping strategies, and perceptions of social support. This methodological approach is chosen to allow for rich, narrative-based data that quantitatively driven studies might overlook. The interpretive framework is grounded in psychological and social work theories that emphasize contextualized human behavior and experience.

While the findings may not be statistically generalizable to all teenage mothers across Nigeria, they offer significant insights into the psychosocial realities of young mothers in communities similar to Ekosodin those straddling rural and urban dynamics, marked by limited institutional support and socio-cultural rigidity. Therefore, the study's outcomes hold value for scholars, practitioners, and policymakers interested in addressing teenage motherhood in comparable Nigerian and Sub-Saharan African settings.

1.7 Definition of Terms

Coping Mechanisms: These are strategies used by teenage mothers to handle emotional stress and psychological strain, including seeking social support, avoidance, or engaging in self-care activities.

Emotional Challenges: These are difficulties teenage mothers face in managing feelings like sadness, fear, or guilt. Unresolved emotional challenges can lead to deeper psychological conditions such as depression or chronic anxiety.

Ekosodin Community: A semi-urban area in Benin City, Edo State, Nigeria, known for its student population and limited healthcare infrastructure.

Mental Health: A state of emotional and psychological balance crucial for coping with stress and making decisions. Teenage mothers often face poor mental health outcomes, including anxiety and depression, due to the pressure of early parenthood and social rejection.

Psychological Experiences: These are the emotional and mental reactions individuals have in response to life events, such as anxiety, depression, or resilience.

Social Support System: A network of emotional and practical support such as family, friends, religious bodies, and community services that helps teenage mothers manage psychological distress.

Social Work: A professional field focused on enhancing individual and community well-being. In the context of teenage motherhood, social workers provide psychological counseling, connect young mothers to resources, and advocate for their reintegration and empowerment.

Teenage Motherhood: This refers to a situation where an adolescent girl, typically aged 13–19, becomes a mother. It often leads to psychological distress due to interrupted education, emotional instability, social stigma, and economic hardship, which can severely impact the young mother's mental well-being.

CHAPTER TWO

LITERATURE REVIEW

2.1 Review of Relevant Literatures

The psychological experiences of teenage mothers have been extensively examined within developmental and psychosocial theoretical frameworks. Erikson's theory of psychosocial development has been particularly influential in understanding the emotional turmoil that teenage mothers face. Erikson (1968, as cited in Żelazkowska, 2018) established that teenage stage is a critical period for identity formation, and when this phase is interrupted by unplanned motherhood, the result is often confusion, anxiety, and identity diffusion. Rzechowska (2025) further asserted that teenage mothers often struggle with integrating their emerging personal identity with the sudden adult responsibilities of parenting, thereby heightening their risk for emotional instability and self-doubt.

These definitions help shape the interpretation of findings and offer a structured lens through which the psychological experiences of teenage mothers can be explored. Teenage motherhood describes the condition in which girls aged 13 to 19 become parents. This period is typically accompanied by emotional, social, and financial instability. Young mothers often face setbacks such as dropping out of school, being unprepared for parenting responsibilities, and dealing with societal rejection and stigma. According to Adebola (2018) and Nnodim & Albert (2016), teenage pregnancy in Nigeria is closely linked with poverty, limited access to reproductive health services, and cultural

expectations, all of which intensify the emotional and psychological burden on young mothers.

Psychological experiences refer to the mental and emotional reactions teenage mothers go through as they handle the demands of parenting. These may include anxiety, fear, loneliness, shame, depression, and in some cases, emotional strength or satisfaction. Ayamolowo et al., (2019) argued that such experiences are influenced by the girl's stage of emotional development, the external environment, and the level of social support available. Gaining insight into these reactions helps reveal how early motherhood can affect the psychological wellbeing of adolescents. Coping mechanisms are the techniques teenage mothers use to deal with the emotional and psychological strain of raising a child (Ayamolowo et al., 2019). These methods can be constructive, such as seeking emotional support, engaging in religious practices, or attending counseling sessions or they may be harmful, such as isolating oneself, ignoring responsibilities, or abusing substances. Goossens et al. (2015) highlighted that many teenage mothers lack the maturity and resources to adopt healthy coping strategies, particularly in areas like Ekosodin, where formal support structures are limited, and many rely on peers or informal networks.

Social support systems encompass the people and institutions that offer practical, emotional, or financial help to teenage mothers. These can include family, friends, religious bodies, NGOs, and social service professionals. Olajubu et al. (2021) emphasized that strong support systems can significantly reduce emotional stress and

help young mothers develop resilience. In contrast, a lack of such networks, which is often the case in underserved areas like Ekosodin, tends to worsen their psychological condition and sense of isolation. Social work plays a vital role in this context as a field committed to enhancing human wellbeing through structured interventions. It focuses on helping individuals and communities address social and emotional challenges. Carr and Shaia (2018) maintained that social workers in schools and communities are especially critical in assisting teenage mothers, providing them with counseling, advocacy, education, and referrals to essential services, particularly in culturally sensitive or resource-constrained environments. These clarified concepts create a solid foundation for the study's theoretical lens and facilitate a deeper understanding of how teenage motherhood affects mental health within the unique socio-cultural setting of Ekosodin.

2.1.1 The Psychological Experiences of Teenage Mothers in Ekosodin Community

Teenage mothers in Ekosodin community often encounter overwhelming psychological experiences stemming from the sudden shift into adulthood (Ajayi et al., 2023). Discovering an unplanned pregnancy frequently leads to shock, confusion, and a sense of emotional instability, especially for those who had limited or no prior knowledge of sexual and reproductive health (Ajayi et al., 2023; Kassa et al., 2018). This sudden transition challenges their mental preparedness, causing anxiety over the physical changes of pregnancy and the responsibilities of motherhood. For many, the emotional

trauma begins not just with the pregnancy itself but also with the fear of disappointing family members and societal expectations.

Feelings of guilt, shame, and stigma are prevalent among these teenage mothers, largely due to the social and cultural norms within the community that often view early pregnancy as moral failure (Adebola, 2018; Hanna, 2001). This can lead to self-blame and withdrawal from peers and family, particularly if the pregnancy occurred outside wedlock or in school settings. The perception of being judged or excluded can erode their self-worth, and the lack of emotional validation deepens their psychological distress (Anima et al., 2021). These mothers often internalize the belief that they are alone in their struggles, exacerbating symptoms of depression and emotional disconnection.

The psychological toll also includes identity struggles, as teenage girls are prematurely thrust into adult roles without the emotional and psychological maturity to cope. The fear of losing educational opportunities, strained romantic or familial relationships, and financial instability creates chronic stress (Mangeli et al., 2017; Olajubu et al., 2021). With no clear path forward and limited support systems, these young mothers often face long-term consequences like persistent anxiety, hopelessness, and low self-esteem. Such emotional turmoil, if left unaddressed, can spiral into mental health disorders such as clinical depression or anxiety disorders (Goossens et al., 2015; Rzechowska, 2025).

2.1.2 Coping Mechanisms for Teenage Mothers with Psychological Stress

Teenage mothers in Ekosodin utilize a variety of coping strategies to deal with the emotional strain that comes with early motherhood. Constructive approaches often involve seeking assistance from family, trusted friends, or local mentors who offer both emotional and practical support (Ayamolowo et al., 2019; Omorogiuwa & Adam, 2023). Many also rely on religious practices such as praying, attending church services, or engaging in youth fellowships as a source of comfort and resilience. These spiritual activities can provide meaning and help combat feelings of loneliness. Furthermore, participating in maternal health workshops or peer support circles enables them to connect with others in similar situations, fostering mutual understanding and encouragement.

Others may channel their energy into personal development by returning to school, participating in skill acquisition programs, or initiating small income-generating activities. These efforts not only provide economic empowerment but also help rebuild self-worth and offer a more hopeful outlook on the future (Kumar & Huang, 2021). Engaging in structured routines and taking proactive steps toward independence is a key aspect of resilience-building among teenage mothers. Żelazkowska (2018) supports this view, noting that emotional maturity often develops through increased social engagement and support. However, not all teenage mothers adopt positive coping strategies. Some may resort to negative behaviors such as substance abuse or alcohol consumption to numb

emotional pain or escape reality (Hoseini, Hekmatpou, & Mehdipour-Rabori, 2024). Others may avoid responsibilities or deny the seriousness of their situation, which can delay emotional adjustment and parenting readiness. Self-isolation is another common yet harmful response that can deepen feelings of loneliness and detachment.

2.1.3 Social Work Support in reducing Psychological Effect of Teenage Motherhood

The effectiveness of any coping strategy is largely determined by the availability of social support and the presence of mentors or professional interventions, such as those offered by school social workers or NGOs (Carr & Shaia, 2018; Carey, 2017). Social work support plays a critical role in safeguarding the mental and emotional well-being of teenage mothers, particularly in marginalized communities like Ekosodin. One of the most immediate and impactful interventions provided by social workers is counseling. Professional counseling whether through government social work departments, school-based services, or NGOs helps teenage mothers process trauma, confusion, and anxiety associated with early motherhood. These services are often confidential and non-judgmental, offering a safe space for self-expression, goal setting, and the rebuilding of self-esteem (Carr & Shaia, 2018; Okafor, Ogbonna, & Nnadi, 2022).

Beyond counseling, social workers serve as vital links to essential health services, including prenatal and postnatal care, family planning, and mental health treatment. Due

to poverty, stigma, or lack of knowledge, many teenage mothers in Ekosodin lack access to basic healthcare (Ozor & Bassey, 2024). Social workers help bridge this gap by referring them to youth-friendly clinics, facilitating transportation where necessary, and advocating for respectful and informed medical care (Omorogiuwa & Adam, 2023). They also help identify and manage conditions like postpartum depression or anxiety at an early stage (Fleming et al., 2015). These healthcare connections are essential to promoting maternal and infant well-being and preventing further complications.

Equally important is the empowerment role of social work, which includes facilitating educational and vocational training opportunities. In collaboration with NGOs and community organizations, social workers encourage teenage mothers to return to school or pursue skill acquisition programs. Such efforts are critical for long-term independence and breaking cycles of poverty and dependency (Ayamolowo et al., 2019). Furthermore, community sensitization programs led by social workers challenge societal stigma and educate the public on the importance of supporting rather than ostracizing teenage mothers. Through workshops, media outreach, and youth forums, these programs foster empathy and social inclusion key components of successful reintegration and emotional healing (Okafor et al., 2022).

The effectiveness of social work interventions becomes evident when measurable improvements occur in the lives of teenage mothers. These include reduced symptoms of anxiety and depression, enhanced parenting capabilities, increased self-confidence, and a

restored sense of purpose. Moreover, declines in school dropout rates and reductions in substance abuse or risky behaviors are indicators of successful social work outcomes (Kumar & Huang, 2021; Żelazkowska, 2018). Despite the crucial role social work plays, several challenges remain in Ekosodin. Limited funding often restricts the continuity and expansion of programs, as many rely on short-term grants or sporadic government assistance. There is also a shortage of trained professionals with expertise in adolescent mental health and maternal care, affecting the quality and reach of interventions. Additionally, many teenage mothers and their families are unaware of available support services. Cultural taboos surrounding mental health and external intervention further inhibit service utilization. To address these challenges, there is a pressing need for coordinated policy efforts, increased investment in the social work workforce, and grassroots-level education to enhance service uptake and sustainability (Okafor et al., 2022).

2.1.4 Major Psychological Challenges Faced by Teenage Mothers

Teenage motherhood, particularly in marginalized communities like Ekosodin, is closely linked with heightened psychological distress a state characterized by emotional suffering, mental exhaustion, and the disruption of social functioning. This distress stems from the abrupt transition into adult responsibilities, often without the emotional, financial, or educational preparation needed for such a demanding role (Omorogiuwa, 2025; Omorogiuwa, 2018). The lack of community support systems, persistent poverty,

and societal stigma only intensify the emotional burden, making psychological health a pressing concern for these young mothers.

Depression and Emotional Isolation: Depression is a pervasive mental health issue among teenage mothers, often triggered by feelings of abandonment, community ostracism, and the collapse of future aspirations. In some local communities like Ekosodin, many young mothers report chronic sadness, disinterest in daily activities, and persistent hopelessness core symptoms of clinical depression (Al-Shehri, Harazi, & Elmagd, 2023; Ukoba et al., 2024). These symptoms reflect profound psychological distress caused by isolation, the loss of autonomy, and the abrupt curtailing of education and personal dreams (Ola & Akanbi, 2023). Depression is further fueled by the lack of supportive relationships, particularly when partners, family members, or peers withdraw or reject the young mother (Goossens et al., 2015; Ayamolowo et al., 2019).

Anxiety and Fear of the Unknown: Another key manifestation of psychological distress is anxiety, which often presents as excessive worry about the child's well-being, future prospects, and societal judgment. Teenage mothers in many semi-urban communities frequently experience restlessness, panic attacks, and sleep disorders due to constant fears whether about continuing their education, affording child care, or dealing with social exclusion (Udo & Eze, 2023; Olivera et al., 2023). These stressors not only disrupt mental stability but can evolve into chronic anxiety disorders if left unaddressed, significantly affecting both maternal and child health outcomes.

Low Self-Esteem and Internalized Stigma: Low self-esteem is deeply entrenched in the internalized stigma many teenage mothers endure. In culturally conservative communities, early motherhood is often seen as a moral failing, and young mothers are subject to intense public scrutiny (Omorogiuwa & Azorundu, 2024). This judgment fosters negative self-perceptions feelings of worthlessness, shame, and self-blame which diminish confidence and erode the motivation to seek help or pursue long-term goals (Ukoba et al., 2024; Daikhena & Egbochuku, 2025). Psychological distress here is amplified by social rejection and the disruption of personal identity, especially when life paths such as school or career become inaccessible.

Postpartum Disorders and Lack of Mental Health Access: Postpartum depression and anxiety are common yet underdiagnosed mental health conditions among teenage mothers. The psychological distress that emerges in the weeks following childbirth includes mood swings, intrusive thoughts, irritability, and feelings of detachment from the baby (Oku et al., 2015). In resource-poor settings like Ekosodin, limited access to maternal mental healthcare means many of these conditions go untreated, increasing the risk of impaired maternal-infant bonding and long-term mental health complications (Edward, Isibor, & Theophilus, 2016).

Emotional Burnout and Mental Exhaustion Many teenage mothers in Ekosodin report emotional burnout, a state of severe mental exhaustion from unrelenting caregiving responsibilities, often without any form of respite (Omorogiuwa & Omorogiuwa, 2016).

Juggling motherhood with informal work, school, and domestic duties leads to persistent fatigue, irritability, and even emotional numbness (Ukoba et al., 2024; Ola & Akanbi, 2023). This emotional depletion is a significant indicator of psychological distress, particularly when young mothers have no access to support systems or structured mental health care.

The Cumulative Toll of Psychological Distress: The cumulative impact of these psychological challenges depression, anxiety, low self-esteem, postpartum disorders, and burnout creates a vicious cycle of emotional distress and socioeconomic marginalization. Many teenage mothers are caught in a loop where untreated mental health issues limit their ability to care for themselves and their children, further exacerbating their stress and emotional instability (Fleming et al., 2015; Kumar & Huang, 2021; Rzechowska, 2025). Without targeted social work interventions and access to youth-centered mental health services, the psychological toll may extend well into adulthood, with lasting consequences for both mother and child.

The psychological distress faced by teenage mothers in Ekosodin is both profound and multifaceted. It reflects a broader crisis of mental health in underserved communities, where stigma, poverty, and inadequate services intersect. Addressing these challenges requires a multi-pronged approach strengthening mental health infrastructure, expanding youth-friendly clinics, and ensuring that social workers are equipped to provide both emotional support and practical assistance. Only through such interventions can the cycle

of distress be broken, paving the way for healthier futures for these young mothers and their children.

2.2 Review of Empirical Studies

Olajubu et al., (2021) examine stress and resilience among pregnant teenagers in Ile-Ife, Nigeria. The study adopted cross-sectional study design was employed using a structured questionnaire and the study was conducted among 241 adolescents. Perceived stress and resilience were measured using Perceived Stress Scale, and Wagnild & Young Resilience Scale, respectively. Descriptive and inferential statistics were computed using percentages, means with standard deviations, Student's t-test, Pearson correlation, one-way analysis of variance (ANOVA) and multivariate logistic regression. The results revealed that majority of the respondents were categorized as having moderate level of perceived pregnancy-related stress and had low level of resilience. A significant inverse relationship was found between perceived pregnancy-related stress and resilience. At multivariate level, three variables emerged as independent predictors of higher level of pregnancy-related stress: feeling of shame, male partner's rejection of pregnancy and lack of parental involvement in care. The study concluded there is a significant inverse relationship between perceived pregnancies related stress and resilience among teenagers in Nigeria, with higher resilience among the older age groups and those who had support from significant others.

Harron et al., (2021) examine the associations between pre-pregnancy psychosocial risk factors and infant outcomes: A population-based cohort study in England. The study adopted respondents' administrative hospital data (Hospital Episode Statistics) for all births to mothers aged 15–44 years in England, UK, who gave birth on or after April 1, 2010, and who were discharged before or on March 31, 2015. The study employed generalised linear models to evaluate associations between psychosocial risk factors recorded in hospital records in the 2 years before the 20th week of pregnancy (ie, teenage motherhood, deprivation, prepregnancy hospital admissions for mental health or behavioural conditions, and pre-pregnancy hospital admissions for adversity, including drug or alcohol abuse, violence, and self-harm) and infant outcomes (ie, birth-weight, unplanned admission for injury, or death from any cause, within 12 months from postnatal discharge).

The findings revealed that out of 2520, 501 births initially assessed, 2137, 103 were eligible and were included in the birth outcome analysis. Among the eligible births, 93 279 (4.4%) were births to teenage mothers (age <20 years), 168 186 (7.9%) were births to previous teenage mothers, 51 312 (2.4%) were births to mothers who had a history of hospital admissions for mental health or behavioural conditions, 58 107 (2.7%) were births to mothers who had a history of hospital admissions for adversity, and 580 631 (27.2%) were births to mothers living in areas of high deprivation. 1377, 706 (64.5%) of births were to mothers with none of the above risk factors. Infants born to mothers

with any of these risk factors had poorer outcomes than those born to mothers without these risk factors. Those born to mothers with a history of mental health or behavioural conditions were 124 g lighter (95% CI 114–134 g) than those born to mothers without these conditions. For teenage mothers compared with older mothers, 3·6% (95% CI 3·3–3·9%) more infants had an unplanned admission for injury, and there were 10·2 (95% CI 7·5–12·9) more deaths per 10 000 infants.

Anima et al., (2021) explored lived experiences of teenage mothers in the Adaklu District of Ghana. The study was a phenomenological qualitative study. Data for the study were obtained through narratives, and photovoices; using an in-depth interview guide. The thematic data analysis technique was employed to present the findings. The study purposively sampled 30 teenage mothers. Teenage mothers used pictures such as trees by the riverside, stacked blocks, and electrical sockets to explain their motherhood experiences. Codes from the data revolved around instruction, and communicative learning lived experiences. Teenage motherhood experiences were largely on issues such as the irresponsible attitude of a child's father, rape, remorsefulness, engagement in apprenticeship, supportive partners, and relatives. It can be concluded that teenage mothers have different perspectives on their lived experiences which could either help or hinder how they make meaning of their lives.

Hoseini et al., (2024) examined developing the concept of maternal in teenage mothers: a hybrid model. A three-phase hybrid model was adopted for concept analysis.

In the theoretical phase, 50 articles were analyzed. In the fieldwork phase, 10 participants were interviewed. In the final phase, the findings of the previous two stages were analyzed. This study was conducted between October 2021 and November 2022. After determining the attributes, antecedents, and consequences, a final definition was presented for parenting in teenage mothers. The concept of motherhood for teenage mothers was described as “a process-oriented phenomenon in nature,” “complex, challenging and multidimensional,” “development with immature transition,” “a turning point in life,” “a stressful event,” “affected by several factors,” and “bidirectional effects on life” according to antecedents, including “the level of received social support,” “reaction to teenage motherhood,” “teenage mother’s characteristics,” and “family structure” leading to “positive psychological consequences,” “negative psychological consequences,” and “loss of educational and career opportunities.” This study provides a suitable ground for evaluating the concept of motherhood in teenage mothers and employing it in nursing care of teenage mothers and children by identifying this concept.

2.3 Theoretical Framework

Several theories have attempted to explain the phenomenon of psychological experience of teenage motherhood. These theories are typically grouped into cognitive (e.g., culture-of-poverty theory, cognitive-behavioral theory, theory of reasoned action, rational choice theory), social behavior (e.g., social bond theory, social learning theory,

problem behavior theory), and family-oriented frameworks (e.g., family systems theory, family development theory). For the purpose of this study, three theories Family Development Theory, Social Bond Theory, and Neo-Cognitive Theory have been adopted to help explain how psychosocial, relational, and cognitive factors contribute to the prevalence of teenage pregnancy and the emotional challenges experienced by teenage mothers in Ekosodin community.

2.3.1 Family Development Theory

Family Development Theory, as proposed by James M. White in (1991), in theory posits that the timing and sequencing of life events significantly affect individual behaviour and outcomes. Early transitions such as becoming sexually active or becoming a parent are shaped by factors such as age at onset, the duration of romantic relationships, and the societal context in which individuals live (White, 1991). In relation to teenage pregnancy, this theory suggests that teenagers who engage in early, prolonged romantic relationships especially in the absence of parental guidance or comprehensive sex education are more vulnerable to unplanned pregnancies. Adebola (2018) and Maduforo & Ojebade (2011) note that in Nigerian contexts, early sexual activity is often driven by peer pressure, poverty, and inadequate family involvement, all of which reinforce the risks highlighted by White's theory.

Applied to Ekosodin, the theory is highly relevant: many teenage mothers experience early sexual debut influenced by socio-economic challenges, limited access to

information, and cultural normalization of adolescent relationships (Omorogiuwa & Adam, 2023). These premature transitions into motherhood create emotional strain due to unpreparedness and lack of structural support, thereby validating Family Development Theory's focus on age-graded norms and social context.

2.3.2 Social Bond Theory

Social Bond Theory, advanced by Ravoira & Cherry (1992) and rooted in Bowlby's Attachment Theory, emphasizes the critical role of interpersonal relationships in preventing deviant behavior, including adolescent pregnancy. The theory identifies four key bonds attachment, commitment, involvement, and belief which, when strong, reduce the likelihood of adolescents engaging in risky behaviors (Ravoira & Cherry, 1992; Barkan, 2012). In contexts where these bonds are weak due to family dysfunction, school dropout, or lack of community involvement adolescents may seek emotional fulfillment through romantic relationships, sometimes resulting in unprotected sex and early motherhood. Studies in Nigerian communities, including those by Ayamolowo et al. (2019) and Omorogiuwa (2018), support this theory, showing that emotional neglect and weak parental ties push young girls toward peers or partners for validation. In Ekosodin, many teenage mothers describe limited parental guidance, peer influence, and absence of adult role models conditions that align closely with Social Bond Theory. Their post-pregnancy emotional struggles, such as isolation, shame, and psychological distress, also reflect the consequences of broken or insufficient social bonds.

2.3.3 Neo-Cognitive Theory

Neo-Cognitive Theory expands on Piaget's cognitive development framework by integrating the works of Mills, Dunham, Alpert (1988) and Bor, McGee & Fagan (2004), emphasizing how dysfunctional environments and traumatic experiences shape adolescents' thought patterns and behaviors. The theory introduces the concept of "learned insecurity," in which youths exposed to chronic neglect, abuse, or poverty internalize negative beliefs about themselves and the world (Thomas, 1985; Carey, 2017). Such a distorted cognitive outlook increases the likelihood of engaging in self-destructive behavior, including unprotected sex, truancy, and teenage pregnancy. Goossens et al. (2015) and Hoseini et al. (2024) found that adolescent mothers frequently struggle with low self-esteem, alienation, and depression symptoms that reflect the long-term psychological consequences of toxic childhood experiences. For teenage mothers in Ekosodin, early life adversity ranging from economic hardship to emotional instability shapes how they view themselves and their options. This explains their emotional fragility, reliance on peers for validation, and persistent psychological distress after childbirth. Neo-Cognitive Theory helps situate these issues within a broader context of developmental trauma and poor self-concept.

These three theoretical perspectives provide a multi-dimensional framework for understanding the causes and consequences of teenage motherhood:

Family Development Theory explains timing, cultural expectations, and life stage readiness;

Social Bond Theory accounts for interpersonal detachment, peer dependency, and community disconnection;

Neo-Cognitive Theory reveals how traumatic environments and negative self-schemas contribute to emotional and behavioral outcomes.

In Ekosodin, these frameworks collectively demonstrate that teenage motherhood is not a singular event but a culmination of developmental, emotional, and social factors. As supported by Ajayi et al. (2023) and Ene et al. (2025), tackling this complex issue requires interventions that are holistic, youth-centered, and cognitively informed spanning family therapy, psycho-education, and social work engagement.

CHAPTER THREE

METHODOLOGY

3.1 Introduction

This chapter presents the procedure that was used to carry out the study. It was presented under the following sub-headings: Research Design, Population of the Study, Sample Size, Sampling Technique, Research Instrument, and Validity of the Instrument, Reliability of the Instrument, Method of Data Collection and Method of Data Analysis.

3.2 Research Design

This study examines the psychological experiences of teenage mothers in Ekosodin Community in Ovia North East Local Government Area. A survey research design was adopted for this research. According to Asika (2000) research design elicits data from a target population through either questionnaire or interview instrument and subjecting each data to statistical analysis for the purpose of drawing conclusions". The essence according to Uyi-Ekpen (2007) is that it studies both large and small populations, usually as samples that are representative of such populations.

3.3 Population of the Study

The population of the study compromise of teenage mothers who are either pregnant or have given birth between the ages of 13-17. Preliminary study revealed that the total number of teenage mothers in Ekosodin is 348 according to (Edo State Ministry of Health or Planning Commission, 2022). However, in 1963, Ekosodin had an estimated

population of just about 177 residents, mainly indigenous farmers and their families (Edoaffairs, 2022). By 1991, the population had increased significantly to approximately 1,811 individuals. This sharp rise was largely attributed to the growing number of university students migrating to the area in search of affordable off-campus accommodation (Edo Property, 2022; Edoaffairs, 2022).

The community's population surged further by 2003, reaching an estimated 7,000 residents (Edoaffairs, 2022). This figure remained consistent in the 2006 national census, which officially recorded about 7,000 inhabitants in Ekosodin (Reddit, 2023; Edoaffairs, 2022). However, by 2022, the population was projected to have grown exponentially to around 45,000 marking a staggering 543% increase since the 2006 census (Edoaffairs, 2022). In comparison, Ovia North East LGA, within which Ekosodin is located, recorded a population of approximately 121,769 in the 1991 census. By 2006, the population had grown to about 155,344, and it was projected to reach approximately 229,500 by 2022 (City Population, 2023). Given Ekosodin's estimated 2022 population of 45,000, the community alone constitutes a significant and growing proportion of the LGA's total population. The factors responsible for this rapid demographic transformation are primarily tied to Ekosodin's proximity to the University of Benin. The influx of students has led to an increasing demand for private hostels and low-cost rental housing (City Population, 2023; Edoaffairs, 2022; Vanguard News, 2022). This demand triggered a major shift from agriculture to residential and commercial real estate development, with

farmlands rapidly converted into student accommodation and business spaces (Edoaffairs, 2022). The study considers Five (5) quarters in Ekosodin, which includes Newton Street, Aghedo Street, Edo Street, Market Road and Urunugbe, all in Ekosodin.

3.4 Sample Size

A sample size of 160 using Geometric Growth Model Explanation:

The geometric growth formula is:

Where:

$$P_t = 45,000 / (0.4 + 0.2) / 100 = 45,000 / (0.6) / 100 = 45000 (0.006),$$

$$45000 / 45000 (0.006)$$

$$45000 / 270 = 166.66$$

$$= 167$$

166.67 Which is approximately = 167

The study adopted a simple random sampling technique to ensure fairness and equal representation of the target population. A total sample size of 160 respondents will be selected across five (5) quarters in Ekosodin, which includes Newton Street, Aghedo Street, Edo Street, Market Road and Urunugbe, all in Ekosodin. Specifically, 30 respondents were drawn from each quarter, making the distribution evenly spread. This approach allows for balanced data collection across the different quarters, ensuring that no single quarter was overrepresented. The chosen sample size was considered adequate for capturing diverse perspectives while remaining manageable for effective analysis within the scope of this study.

3.5 Sampling Technique

The sampling technique that was employed in this research study is the simple random sampling method. The researcher administered questionnaires randomly from selected quarters. By using this method, the researcher can ensure that the teenage mothers are well representative of the larger population, which enhances the validity and generalizability of the study's findings (Taherdoost, 2016). Simple random sampling is particularly effective when dealing with a clearly defined population such as psychological experience of teenage mothers in selected quarters in Ekosodin as it allows unbiased collection of relevant data. This method enables the researcher to gather reliable information necessary for generating accurate and meaningful results. Consequently, the randomness of selection helps to eliminate researcher bias, making the data obtained more objective and credible (Taherdoost, 2016).

3.6 Instrument of Data Collection

The instrument of data collection for this study was the questionnaire, using likert scale of four variables were adopted This was a proto typed open ended scale based on Strongly Agree, Agree, Strongly Disagree, and Disagree pattern. The questionnaire has two sections A and B section. Section A; deals with the demographic information of respondents, and Section B dealt with background issues on psychosocial impact of teenage motherhood in Ekosodin. And Section B subdivided into in three section accordance with the research questions in chapter one. This research also employs the use

of secondary data such as text books, research journal both local and foreign, archival, and online material to document the review of literatures. This was done in order to buttress the may discourse of the research study.

3.7 Method of Data Collection

The primary method of data collection for this study was the use of structured questionnaires and semi-structured interviews designed to obtain both quantitative and qualitative information relevant to the psychological experiences of teenage mothers on parenting in the Ekosodin community. The questionnaire were divided into sections reflecting the main variables of the study, such as emotional well-being, coping strategies, social support systems, and challenges faced by teenage mothers in their parenting roles. The instrument employed a Likert-scale format (Strongly Agree = SA; Agree = A; Disagree = D; Strongly Disagree = SD) to enable respondents to express varying levels of agreement or disagreement with specific statements. This approach allows the researcher to measure the intensity of the respondents' feelings, attitudes, and perceptions in a structured manner.

The questionnaires were administered personally by the researcher within the Ekosodin community to ensure clarity, build trust, and encourage honest participation. Face-to-face distribution and collection also allow the researcher to provide immediate clarification where necessary, thereby improving the accuracy and completeness of responses. Prior to the main data collection, a pilot study was carried out with a small

sample of teenage mothers from a similar setting to test the clarity, relevance, and comprehensibility of the instruments. Feedback from this pilot test was used to refine the final versions of the questionnaire and interview guide. All responses were treated with strict confidentiality and anonymity to protect the privacy of the participants and promote openness. After data collection, the completed questionnaires were checked for completeness, coded, and prepared for statistical and thematic analysis. This mixed-method approach is particularly effective for understanding both the measurable patterns and the deeper psychological dimensions of teenage motherhood, thereby enhancing the validity and reliability of the study findings.

3.8 Method of Data Analysis

This study adopted the simple percentage statistical method to analyze the data collected through the administration of questionnaires. Simple percentages are useful for summarizing categorical data and presenting it in a clear and interpretable format. The responses from the structured questionnaires were grouped and tabulated, and the frequencies of each response were converted into percentages. This analytical approach enables the researcher to identify trends, patterns, and the distribution of opinions or experiences among respondents across the five selected quarters in Ekosodin. It is particularly suitable for descriptive studies where the primary goal is to understand the general characteristics and viewpoints of a population. The use of simple percentages also facilitates straightforward interpretation of results, making it easier to draw

meaningful conclusions and make informed recommendations based on the findings of the study.

3.9 Ethical Consideration

Ethical considerations are essential to ensure the protection of participants' rights and to maintain the integrity of the research process. In this study, respondents were fully informed about the purpose and scope of the research before participation. Participation was entirely voluntary, and informed consent was obtained from all respondents. They were clearly informed that they have the right to withdraw from the study at any point without facing any form of penalty or obligation to continue. If they choose not to respond to any part of the questionnaire, their decision was respected, and no pressure was applied. Confidentiality was strictly maintained, and the information provided was used solely for academic purposes. Personal identification was not be included in the data to protect the privacy of the respondents. Additionally, the researcher ensures that the data collection process does not cause any harm or discomfort to the participants. Ethical approval sought from relevant authorities where necessary, and all procedures adhere to established ethical guidelines for research involving human subjects.

CHAPTER FOUR

PRESENTATION AND ANALYSIS OF DATA

4.1 Preamble

The data presentation in this chapter is based on field surveys conducted in Ekosodin, Benin City, Edo State. The study examined “the psychological experiences of teenage mothers on parenting in Ekosodin Community in Ovia North East Local Government Area”. A sample of 160 questionnaires was administered using convenience technique. One hundred fifty completed questionnaires returned after being distributed throughout the survey.

4.2 Presentation of Respondents Socio-demographic

Table 4.1

Age	Frequency	Percentage (%)
8-12 years	60	40.00
13-15 years	90	60.00
16-and above years	27	17.78
Total	150	100
Sex	Frequency	Percentage (%)
Male	52	34.44
Female	98	65.56
Total	150	100
Religion	Frequency	Percentage (%)
Christianity	65	43.33
Muslim	48	32.22
African Traditional Religion	25	16.67
Others	12	7.78
Total	150	100

Source: Field survey, 2025

Table 4.1 above shows that 60 respondents representing 40% were 8-12 years, 90 respondents representing 60% were 13-15 years, while 27 respondents representing 17.78% were 16 years and above years. The table above also shows that 52 respondents representing 34.44% were males, while 98 respondents representing 65.56% were females. The table further revealed that 65 respondents representing 43.33% were Christian, 48 respondents representing 32.22% were Muslim, 25 respondents representing 16.67% were African Traditional Religion, while 12 respondents representing 7.78% were other religion.

4.2 Presentation and Analysis of Items in Research Questions

Research Objective 1: To examine the most psychological challenges faced by teenage mothers in parenting within the Ekosodin community.

ITEM	The most psychological challenges faced by teenage mothers in parenting within the Ekosodin community	OPTION			
S/N	QUESTIONS	SA	A	SD	D
1.	Parenting as a teenager causes me constant stress and anxiety.	49 (32.22%)	55 (36.67%)	33 (22.22%)	13 (8.89%)
2.	I often feel emotionally overwhelmed while caring for my child.	77 (51.11%)	38 (25.56%)	15 (10%)	20 (13.33%)
3.	Teenage motherhood has negatively affected my self-esteem.	32 (21.11%)	90 (60%)	20 (13.33%)	8 (5.56%)
4.	I feel isolated and unsupported in my parenting journey.	67 (44.69%)	66 (44.20%)	10 (6.67%)	7 (4.44%)
5.	Balancing parenting responsibilities with education or work creates psychological strain for me.	65 43. 44	60 (39.89%)	15 (10%)	10 (6.67%)

Source: Field Survey, 2025

The table above on the psychological challenges faced by teenage mothers in parenting within the Ekosodin community, revealed that a majority of the respondents (68.89%) agreed that parenting as a teenager causes constant stress and anxiety, while only 31.11% disagreed. This indicates that stress and anxiety are among the most prevalent psychological challenges experienced by teenage mothers. Similarly, 76.67% of the respondents reported that they often feel emotionally overwhelmed while caring for their children, compared to 23.33% who disagreed. This suggests that emotional burden is a significant challenge, highlighting the mental strain associated with early motherhood. Furthermore, 81.11% of the respondents admitted that teenage motherhood had negatively affected their self-esteem, whereas only 18.89% disagreed. The finding shows that diminished self-worth is a critical psychological issue confronting teenage mothers in the community. The study also revealed that 88.89% of the respondents felt isolated and unsupported in their parenting journey, with only 11.11% disagreeing. This emphasizes that social isolation and lack of supportive networks are key obstacles to their psychological wellbeing. In addition, 83.33% of the respondents agreed that balancing parenting responsibilities with education or work creates psychological strain, while 16.67% disagreed. This underscores the heavy burden of role conflict faced by teenage mothers who are expected to combine childcare with academic or economic responsibilities.

Research Objective 2: To examine the coping strategies adopted by teenage mothers in response to psychological effect of parenting.

ITEM	The coping strategies adopted by teenage mothers in response to psychological effect of parenting	OPTION			
S/N	QUESTIONS	SA	A	SD	D
1.	I rely on friends and family for emotional support in times of stress.	82 (54.44%)	43 (28.89%)	15 (10%)	10 (6.67%)
2.	I engage in religious or spiritual practices to cope with parenting challenges.	46 (30.88%)	38 (25.56%)	23 (15.20%)	43 (28.36%)
3.	I try to distract myself with hobbies or activities when I feel overwhelmed.	67 (44.45%)	50 (33.33%)	18 (12.22%)	15 (10%)
4.	Talking with other teenage mothers helps me manage my emotions.	57 (37.98%)	71 (47.58%)	17 (11.11%)	5 (3.33%)
5.	I adopt positive thinking and self-motivation to cope with parenting difficulties.	107 (71.11%)	40 (26.67%)	3 (2.22%)	- -

Source: Field Survey, 2025

The table above on the coping strategies adopted by teenage mothers in response to the psychological effects of parenting, show a variety of approaches employed by respondents to manage their challenges. The results revealed that a large proportion of teenage mothers (54.44% strongly agreed and 28.89% agreed) rely on friends and family for emotional support during stressful periods, while only 16.67% disagreed. This indicates that social and familial networks play an important role in providing emotional relief and support for teenage mothers. In terms of spiritual or religious coping, 30.88% strongly agreed and 25.56% agreed that they engage in religious or spiritual practices to manage parenting challenges. However, a notable 43.56% (15.20% strongly disagreed and 28.36% disagreed) reported otherwise. This suggests that although some teenage

mothers turn to religion for coping, a significant proportion do not consider it an effective or preferred strategy. With respect to recreational coping, 77.78% (44.45% strongly agreed and 33.33% agreed) reported that they distract themselves with hobbies or activities when feeling overwhelmed, while only 22.22% disagreed. This indicates that engaging in leisure or personal activities is a common strategy for relieving psychological strain.

Peer support also emerged as a strong coping mechanism, as 85.56% (37.98% strongly agreed and 47.58% agreed) acknowledged that talking with other teenage mothers helps them manage their emotions. Only 14.44% disagreed, showing that shared experiences with peers provide significant emotional reassurance and understanding. Consequently, the majority of respondents (97.78%) reported adopting positive thinking and self-motivation as strategies to cope with parenting difficulties, with 71.11% strongly agreeing and 26.67% agreeing. Only a negligible 2.22% disagreed. This finding highlights positive self-affirmation and internal motivation as the most widely adopted and effective coping mechanism among teenage mothers in the community.

Research Objective 3: To Examine the socio-cultural factors influencing the psychological wellbeing of teenage mothers in the community.

ITEM	The socio-cultural factors influencing the psychological wellbeing of teenage mothers in the community	OPTION			
		SA	A	SD	D
1.	Cultural beliefs in my community make it difficult for me to feel accepted as a teenage mother.	70 (46.67%)	45 (30%)	15 (10%)	20 (13.33%)
2.	Stigmatization from community members affects my psychological wellbeing.	72 (48%)	75 (50%)	3 (2%)	- -
3.	Family expectations and societal judgment increase my emotional stress.	45 (30%)	67 (44.44%)	23 (15.56%)	15 (10%)
4.	Traditional gender roles place more parenting responsibility on me than my partner.	100 (66.67%)	42 (27.78%)	5 (3.33%)	3 (2.22%)
5.	Community attitudes discourage me from seeking help as a teenage mother.	77 (51.11%)	63 (42.23%)	5 (3.33%)	5 (3.33%)

Source: Field Survey, 2025

The table above examined the socio-cultural factors influencing the psychological wellbeing of teenage mothers in the community. The responses from the field survey highlight that cultural norms, stigmatization, family expectations, traditional gender roles, and community attitudes significantly affect the mental and emotional health of teenage mothers. On the first item, “Cultural beliefs in my community make it difficult for me to feel accepted as a teenage mother,” 76.67% of respondents (46.67% strongly agreed and 30% agreed) affirmed that cultural norms hinder their acceptance, while 23.33%

disagreed. This finding suggests that deep-rooted cultural beliefs remain a major barrier to the social integration of teenage mothers, thereby negatively influencing their psychological wellbeing.

The second item, “Stigmatization from community members affects my psychological wellbeing,” recorded overwhelming agreement, with 98% of respondents acknowledging stigmatization as a major psychological burden, and only 2% disagreeing. This indicates that stigma is one of the most powerful socio-cultural stressors affecting teenage mothers in the community, often leading to feelings of shame, social withdrawal, and emotional distress. On the third item, “Family expectations and societal judgment increase my emotional stress,” 74.44% agreed, while 25.56% disagreed. This highlights those societal and familial pressures such as expectations of responsibility, disapproval, and judgment compound the emotional stress of teenage motherhood. The divided responses, however, suggest that the impact of family expectations may vary depending on the degree of support or rejection experienced by individual mothers.

The fourth item, “Traditional gender roles place more parenting responsibility on me than my partner,” was strongly endorsed by 94.45% of respondents, with only 5.55% dissenting. This demonstrates that entrenched gender norms perpetuate unequal caregiving burdens, where young mothers shoulder the majority of parenting responsibilities, often without equal involvement from their partners. Such inequalities intensify their stress levels and psychological strain. Also the fifth item, “Community

attitudes discourage me from seeking help as a teenage mother,” was supported by 93.34% of respondents, while only 6.66% disagreed. This shows that negative community perceptions and judgmental attitudes act as strong deterrents, preventing teenage mothers from seeking psychological, emotional, or material support, thereby worsening their vulnerability.

Research Objective 4: To examine social work interventions available to support teenage mothers facing psychological challenges, and how accessible are these services in Ekosodin.

ITEM	Social work interventions available to support teenage mothers facing psychological challenges, and how accessible are these services in Ekosodin	OPTION			
		SA	A	SD	D
1.	Social workers or NGOs provide adequate support to teenage mothers in Ekosodin.	78 (52%)	37 (24.67%)	13 (8.67%)	22 (14.67%)
2.	Counseling services are available and accessible for teenage mothers in the community.	47 (31.33%)	73 (48.67%)	21 (14%)	9 (6%)
3.	I am aware of existing social support programs targeted at teenage mothers.	45 (3%)	67 (44.44%)	23 (15.56%)	15 (10%).
4.	Financial and material support for teenage mothers is provided by community or government agencies.	80 (53.33%)	42 (28%)	15 (10%)	13 (8.6%)
5.	Accessibility to professional mental health services is easy for teenage mothers in Ekosodin.	74 (49.33%)	62 (41.33%)	2 (8%)	2 (8%).

Source: Field Survey, 2025

The table above sought to examine the social work interventions available to support teenage mothers facing psychological challenges, and to assess the extent to which these services are accessible within the Ekosodin community. The survey results provide insights into the availability, effectiveness, and reach of social support systems for teenage mothers. For the first item, “Social workers or NGOs provide adequate support to teenage mothers in Ekosodin,” 76.67% of respondents (52% strongly agreed and 24.67% agreed) affirmed that such interventions exist, while 23.34% (8.67% strongly disagreed and 14.67% disagreed) expressed otherwise. This indicates that a majority of teenage mothers recognize the presence of support from social workers and NGOs, although gaps still remain in terms of adequacy and consistency of services.

On the second item, “Counseling services are available and accessible for teenage mothers in the community,” 80% of respondents agreed (31.33% SA and 48.67% A), whereas 20% disagreed. This suggests that counseling services are relatively available, but accessibility may still be hindered for some teenage mothers due to factors such as stigma, financial barriers, or inadequate awareness. The third item, “I am aware of existing social support programs targeted at teenage mothers,” received 74.44% agreement (30% SA and 44.44% A), while 25.56% disagreed. This implies that while most teenage mothers are aware of social support programs, a significant minority remain uninformed, which limits their ability to benefit from available interventions. Awareness gaps may stem from poor outreach strategies or insufficient community sensitization.

On the fourth item, “Financial and material support for teenage mothers is provided by community or government agencies,” 81.33% of respondents (53.33% SA and 28% A) agreed, while 18.6% disagreed. This highlights the important role of both community-based and government initiatives in providing tangible support, although sustainability and equitable distribution may be areas of concern. Consequently the fifth item, “Accessibility to professional mental health services is easy for teenage mothers in Ekosodin,” was supported by 90.66% of respondents (49.33% SA and 41.33% A), while only 9.34% disagreed. This demonstrates that professional mental health services are widely perceived as accessible, which is a positive sign for improving the psychological wellbeing of teenage mothers in the community.

4.4 Discussion of Findings

The findings reveal that socio-cultural factors play a decisive role in shaping the psychological wellbeing of teenage mothers in Ekosodin community. Results show that almost 77% of teenage mothers reported cultural beliefs as barriers to their acceptance within the community. This finding aligns with Adebola (2018), who argued that cultural and structural norms in Nigeria reinforce exclusionary attitudes toward teenage mothers, often perceiving them as deviants rather than individuals needing support. Similarly, the finding agrees with Akella and Jordan (2015) who emphasized that deeply rooted cultural stigmas perpetuate guilt, shame, and social alienation, which directly affect the mental health of young mothers.

An overwhelming 98% of respondents agreed that stigmatization negatively affects their psychological wellbeing. The findings affirmed that stigma from community members not only causes emotional distress but also limits access to supportive networks. This finding aligns with Ajayi et al. (2023), who reported that teenage mothers across Africa often experience community hostility, leading to low self-esteem and social withdrawal. Similarly, Anima et al. (2021) corroborated this pattern, explaining how social labeling contributes to isolation and depressive symptoms among young mothers. Furthermore, 74% of respondents indicated that family and societal judgment heightens their emotional stress. This finding supports the study by Falana, Ayodele, and Fasina (2016), who observed that in many Nigerian communities, families place high expectations on girls, and teenage pregnancy is often perceived as a failure to meet these expectations. Dare et al. (2016) affirmed comparable outcomes in Jos, Plateau State, where teenage mothers reported strained family relationships and psychological distress resulting from unmet parental and societal expectations.

The findings further revealed that 94% of respondents agreed that traditional gender roles place greater parenting responsibilities on them compared to their partners. This aligns with Hanna (2001), who asserted that patriarchal social structures compel young mothers to shoulder unequal childcare responsibilities, undermining their educational and personal development. Likewise, Kassa et al. (2018) supported this view, noting that entrenched gender norms across African contexts restrict male involvement in

parenting, thereby intensifying the psychological and economic strain on adolescent mothers.

Despite these challenges, the study found that teenage mothers in Ekosodin exhibit strong coping mechanisms such as positive self-motivation, peer support, family networks, religious practices, and leisure activities. This finding corresponds with Ayamolowo et al., (2019), who confirmed that social support from peers and family significantly reduces depression among teenage mothers in Ile-Ife. Similarly, this finding confirmed with Olajubu et al. (2021) who corroborated this by identifying resilience as a critical factor in managing stress. However, the findings also indicated that the role of religious engagement was divided, suggesting variation in how faith-based coping strategies are utilized among participants.

The combined influence of these socio-cultural factors creates an environment of exclusion, pressure, and unequal responsibility, which exacerbates the psychosocial challenges faced by teenage mothers. This outcome aligns with Pitso et al. (2016), who affirmed that teenage mothers in rural South Africa experience isolation, stigma, and mental health difficulties patterns that mirror those observed in Ekosodin. The high prevalence of stress, anxiety, and emotional exhaustion among respondents also corresponds with international findings such as those by Al-Shehri et al., (2023), who reported elevated rates of depression and anxiety among adolescents exposed to psychosocial stressors.

Although interventions such as NGO support, counseling services, and community-based programs exist, many teenage mothers remain underserved due to limited awareness and inequitable access. This finding agreed with UNICEF (2023) that asserted that without deliberate policy actions to address stigma, rigid gender norms, and inadequate support systems, adolescent mothers will continue to face poor psychological and developmental outcomes. Similarly, the finding affirmed with Omorogiuwa and Amadasun (2020) who supported the adoption of feminist-informed social work approaches to challenge oppressive cultural practices and foster empowerment and inclusion.

The findings affirm that the psychological wellbeing of teenage mothers in Ekosodin is profoundly shaped by socio-cultural dynamics. Cultural beliefs, stigmatization, family pressures, and gendered expectations collectively reinforce emotional stress and restrict access to support systems. Nevertheless, coping mechanisms such as peer support, family networks, and self-motivation demonstrate the resilience and agency of teenage mothers as they navigate these challenges. Addressing these socio-cultural barriers requires context-specific social work interventions, improved access to mental health services, and sustained community sensitization initiatives aimed at reducing stigma and promoting inclusion.

CHAPTER FIVE

SUMMARY OF FINDINGS, SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

5.1 Introduction

This chapter intends to provide the summary of findings, conclusions, recommendations and Imply for Social Work Practice. This chapter presents a comprehensive overview of the entire study by summarizing the major findings, drawing key conclusions, and providing practical recommendations based on the research objectives. It highlights the central themes that emerged from the investigation into the psychological experiences of teenage mothers in Ekosodin community and discusses how socio-cultural, economic, and institutional factors shape their wellbeing and parenting capacity. Consequently, the chapter outlines the study's contributions to knowledge in the field of social work and adolescent psychology, and proposes areas for further research to deepen understanding and improve interventions for teenage mothers.

5.2 Summary of Findings

This study examined the socio-cultural factors influencing the psychological wellbeing of teenage mothers in Ekosodin community. The key findings include:

1. The findings revealed that socio-cultural beliefs strongly affect the psychological wellbeing of teenage mothers. Participants reported that cultural beliefs and community perceptions serve as barriers to their acceptance and inclusion within the community.

2. The study showed that stigmatization remains a major challenge faced by teenage mothers. Respondents indicated that stigma from community members negatively affects their emotional wellbeing, leading to feelings of shame, isolation, and low self-esteem.
3. Family and societal judgment also emerged as a major stressor. Teenage mothers expressed that pressure and negative judgment from family and society increase their emotional distress, highlighting the cultural expectation that teenage pregnancy represents failure or irresponsibility.
4. Despite these challenges, the findings showed that teenage mothers adopt various coping strategies such as peer support, family networks, religious activities, and self-motivation. These resilience strategies help them manage stress and maintain emotional stability.
5. Finally, the study identified gaps in available support systems. Although some NGO and community services exist, limited awareness and accessibility mean that many teenage mothers remain underserved. This highlights the need for targeted interventions, increased mental health support, and community sensitization programs to reduce stigma and enhance inclusivity.

5.3 Summary

The study investigates the psychological experiences of teenage mothers in the Ekosodin community of Ovia North East Local Government Area, Edo State. It identifies teenage

motherhood as a growing social and psychological issue in Nigeria, linked to poverty, interrupted education, and social stigma. The research explores how these young mothers experience stress, anxiety, and emotional challenges, and how socio-cultural norms influence their parenting roles. A review of literature shows that while teenage pregnancy has been widely studied, little attention has been given to its psychological dimensions within Ekosodin. The study adopts a descriptive qualitative design, using questionnaires and interviews with teenage mothers aged 13–19 to capture their lived experiences. Data were analyzed thematically, with strong attention to ethical standards such as confidentiality and informed consent.

Findings reveal that cultural beliefs, stigmatization, and gender inequality significantly impact the psychological wellbeing of teenage mothers. Most respondents reported emotional distress caused by community judgment, lack of acceptance, and unequal parenting expectations. The study concludes that teenage mothers in Ekosodin face multiple psychological, social, and structural challenges that undermine their wellbeing and parenting capacity. Despite these challenges, the resilience of these young mothers suggests potential for empowerment if adequate emotional, educational, and social support systems are provided. The study recommends increased community awareness, improved access to education and vocational training, and stronger social work interventions to enhance their mental health and parenting effectiveness.

5.4 Contributions to Knowledge

This research makes several important contributions to academic and practical knowledge:

1. The study offers original and context-specific insight into the psychological experiences of teenage mothers in Ekosodin, filling a critical gap in literature where few studies have examined this community in detail.
2. It deepens understanding of how socio-cultural beliefs, stigma, and gender norms interact to shape the psychological wellbeing of young mothers, illustrating the cultural dimensions of mental health in rural Nigerian settings.
3. The study identifies unique coping strategies and forms of resilience among teenage mothers, such as reliance on peer support, family networks, and religious faith providing a foundation for designing culturally relevant interventions.
4. It serves as a baseline reference for future studies on adolescent motherhood and for policy formulation aimed at improving mental health and social support services for teenage mothers in Nigeria.

5.5 Conclusion

Based on the findings, the study concludes that teenage mothers in Ekosodin face multiple layers of psychological, social, and structural challenges that undermine their wellbeing and limit their ability to function effectively as parents. Stigmatization and social exclusion are pervasive, causing significant emotional distress and hindering access to supportive networks. The pressure to conform to traditional gender expectations

further compounds these challenges, as teenage mothers are burdened with disproportionate childcare responsibilities while lacking adequate support from male partners, families, or institutions.

Nevertheless, the study highlights the strength and resilience of teenage mothers who, despite limited resources, employ coping strategies such as peer interaction, religious faith, and family support to navigate their circumstances. However, these coping efforts are insufficient to address the root causes of psychological distress. The study therefore emphasizes the need for systemic and community-driven interventions that combine social work practice, policy advocacy, and mental health services. Only through holistic and coordinated action can the psychological health, social inclusion, and parenting effectiveness of teenage mothers in Ekosodin be significantly improved.

5.6 Recommendations

In light of the findings and conclusions, the following recommendations are proposed:

1. Continuous community education and sensitization campaigns should be organized to challenge negative stereotypes, reduce stigma, and promote social inclusion of teenage mothers. Community dialogues involving parents, youth, and religious leaders should emphasize empathy, understanding, and collective responsibility.
2. The government and non-governmental organizations (NGOs) should establish specialized centers within the community where teenage mothers can access

counselling, healthcare, childcare assistance, and vocational training in a safe and supportive environment.

3. Teenage mothers should be encouraged to form peer support groups that foster mutual encouragement, shared learning, and emotional solidarity. These networks can serve as informal platforms for psychological support and collective empowerment.
4. Social workers should implement culturally sensitive programs that integrate counselling, family mediation, and advocacy. They should also link teenage mothers to existing welfare and health services while working to address systemic inequalities.

5.7 Suggestions for Further Studies

1. Future studies should adopt longitudinal designs to monitor the long-term psychological wellbeing and social outcomes of teenage mothers in Ekosodin and similar communities.
2. Researchers should compare the experiences of teenage mothers in rural versus urban settings to identify contextual differences and inform tailored interventions.
3. Studies should assess the effectiveness of NGO and social work programs currently available, examining their impact on mental health, empowerment, and community reintegration.
4. Future investigations should examine policy gaps and implementation challenges to inform the development of more effective social protection and adolescent support systems.

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APPENDIX

QUESTIONNAIRE

**DEPARTMENT OF SOCIAL WORK
FACULTY OF SOCIAL SCIENCES
UNIVERSITY OF BENIN
BENIN CITY.**

Dear Sir/Madam,

I am a 400 level student of the Department of Social work carryout a research titled, **“Psychological experiences of teenage mothers on parenting in Ekosodin Community”**.

You are kindly requested to respond to this questionnaire as honestly as you can. Your opinion or information supplied will be used purely for the academic purpose intended; and such information will be treated with utmost confidentiality.

Thanks for your anticipated cooperation's.

Yours faithfully,

ESEDO PRECIOUS IFEANYI
Researcher

Demographic Characteristic of Respondents

Section A:

1. Age: (a) 8-12 years (), (b), 13-15 years (), (c) 16 and above years ().
2. Sex: (a) Male (), (b) Female ()
3. Religion: (a) Christian (), (b) Muslim (), African Traditional Religion (), Others ().
4. Level of Education: Primary [], Secondary [], Others [].

SECTION B: Psychological experiences of teenage mothers on parenting in Ekosodin Community

SECTION I.

ITEM	The most psychological challenges faced by teenage mothers in parenting within the Ekosodin community	OPTION			
S/N	QUESTIONS	SA	A	SD	D
1.	Parenting as a teenager causes me constant stress and anxiety.				
2.	I often feel emotionally overwhelmed while caring for my child.				
3.	Teenage motherhood has negatively affected my self-esteem.				
4.	I feel isolated and unsupported in my parenting journey.				
5.	Balancing parenting responsibilities with education or work creates psychological strain for me.				

SECTION II

ITEM	the coping strategies adopted by teenage mothers in response to psychological effect of parenting	OPTION			
S/N	QUESTIONS	SA	A	SD	D
1.	I rely on friends and family for emotional support in times of stress.				
2.	I engage in religious or spiritual practices to cope with parenting challenges.				
3.	I try to distract myself with hobbies or activities when I feel overwhelmed.				
4.	Talking with other teenage mothers helps me manage my emotions.				
5.	I adopt positive thinking and self-motivation to cope with parenting difficulties.				

SECTION III

ITEM	The socio-cultural factors influencing the psychological wellbeing of teenage mothers in the community	OPTION			
S/N	QUESTIONS	SA	A	SD	D
1.	Cultural beliefs in my community make it difficult for me to feel accepted as a teenage mother.				

2.	Stigmatization from community members affects my psychological wellbeing.				
3.	Family expectations and societal judgment increase my emotional stress.				
4.	Traditional gender roles place more parenting responsibility on me than my partner.				
5.	Community attitudes discourage me from seeking help as a teenage mother.				

SECTION IV

ITEM	Social work interventions available to support teenage mothers facing psychological challenges, and how accessible are these services in Ekosodin	OPTION			
S/N	QUESTIONS	SA	A	SD	D
1.	Social workers or NGOs provide adequate support to teenage mothers in Ekosodin.				
2.	Counseling services are available and accessible for teenage mothers in the community.				
3.	I am aware of existing social support programs targeted at teenage mothers.				
4.	Financial and material support for teenage mothers is provided by community or government agencies.				
5.	Accessibility to professional mental health services is easy for teenage mothers in Ekosodin.				