

Navigating Teenage Motherhood: Challenges of Adolescent Mothers in Northern Samar, Philippines

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Abstract. Teenage motherhood continues to be a critical yet insufficiently explored issue in the Philippines, particularly in peripheral and underserved communities in Northern Samar. Despite policy attention, the lived experiences of adolescent mothers juggling school, parenting, and social discrimination are insufficiently documented. This study addresses the gap by exploring the academic, caregiving, and stigma-related challenges faced by adolescent mothers aged 15–19 enrolled in public secondary schools in Northern Samar from 2022 to 2024. Employing an embedded concurrent mixed-methods design, the quantitative strand utilized a validated survey (Cronbach's $\alpha = 0.914$) administered to 335 participants, while the qualitative strand analyzed thematic insights from in-depth interviews. Quantitative results revealed serious challenges in balancing school and caregiving ($\bar{x} = 3.84$), emotional strain from parenting duties ($\bar{x} = 3.89$), and stigma, especially from educators ($\bar{x} = 4.01$). Thematic analysis highlighted four major organizing themes: *Silent Emotional Suffering and Identity Strain*, *Internalized Shame and Disconnection*, *Economic Fragility and Sacrificial Living*, and *Physical Depletion and Untreated Illness*. These were clustered under the global theme, *The Burdened Resilience of Teenage Mothers in the Margins*, revealing that resilience among adolescent mothers often emerges from necessity in the absence of structured support. The study concludes that systemic interventions, such as flexible schooling, psychosocial care, and financial assistance, must be designed to affirm the dignity and developmental needs of young mothers, rather than merely accommodate them. These findings inform adolescent-responsive educational and social policies to create inclusive spaces where teenage mothers can thrive academically and emotionally, not despite motherhood, but through the experience of it.

Keywords: Adolescent motherhood; Caregiving stress; Educational resilience; Teenage pregnancy.

1.0 Introduction

Adolescent motherhood is a high-stakes life transition often marked by health risks, disrupted education, and psychosocial challenges, especially in resource-constrained settings. Across the world, millions of young girls under the age of 19 face this life-altering journey too soon. According to the World Health Organization (WHO, 2024), around 21 million girls aged 15–19 become pregnant each year, with 12 million resulting in live births. For many, especially those in socioeconomically marginalized environments, motherhood is not accompanied by celebration, but by health risks, school dropouts, and emotional distress. In the Philippines, this crisis is deeply felt, where adolescent birth rates are the highest in Southeast Asia—47 per 1,000 live births—exceeding the regional average. In Northern Samar, a province marked by isolation and poverty, the situation is more urgent. Some towns, such as Allen, Gamay, and Catarman, have reported adolescent birth rates far above national targets. However, many of these young mothers receive little or no prenatal care in their first or second trimesters.

Beyond numbers lie the lived realities of adolescent motherhood. Studies have shown that stigma imposes persistent emotional stress on young mothers, affecting their self-esteem, mental health, and ability to access care (Wittenberg et al., 2022). Research in South Africa emphasizes that delayed antenatal care among pregnant adolescents often stems from a lack of awareness, fear of judgment, and negative experiences with healthcare providers (Myburgh et al., 2024). In the Philippines, Alampay and Jocson (2020) report that adolescent motherhood can lead to shame, weakened family ties, and limited personal growth. However, the layered experiences of teenage mothers who persist in their education in resource-poor and culturally unique contexts, such as Northern Samar, remain underexplored.

This study addresses that gap by investigating the psychosocial and educational challenges faced by adolescent mothers in Northern Samar, Philippines. It aims to explore how stigma, caregiving responsibilities, interrupted schooling, and systemic barriers shape their daily lives. By centering the voices and experiences of these young mothers, this research seeks to contribute to a more grounded and context-specific understanding of adolescent motherhood in rural Philippine settings. The study ultimately aims to inform responsive, rights-based interventions that support adolescent mothers holistically, recognizing both their vulnerabilities and capacities.

2.0 Methodology

2.1 Research Design

This study employed an embedded concurrent mixed-methods design, integrating both quantitative and qualitative approaches to comprehensively examine the challenges experienced by adolescent mothers in Northern Samar. The quantitative strand was designated as the dominant method to capture broader patterns and assess the prevalence of issues such as academic difficulties, caregiving responsibilities, and stigma-related barriers across a larger sample. This approach ensured generalizability and statistical validity, providing a solid empirical foundation for the study's findings. Complementing this, the qualitative strand involved in-depth interviews with selected participants to contextualize and deepen the interpretation of survey results. These narratives provided nuanced insights into the lived experiences of adolescent mothers, enabling a richer understanding of the socio-emotional dimensions underlying the quantitative trends. The integration of both strands within a single phase of data collection enabled a more holistic exploration of the complex, intersecting challenges faced by teenage mothers. (Fetters, Curry, & Creswell, 2013).

2.2 Research Locale

The study was conducted in Northern Samar, Philippines, covering 12 municipalities across both the First and Second Congressional Districts. These areas encompassed a total of 45 public secondary schools, distributed across 23 districts. The chosen sites reflect geographic diversity, including coastal, inland, and remote municipalities, many of which report adolescent birth rates significantly above national targets. This locale was selected to provide a representative view of the varied challenges faced by teenage mothers in both high- and low-incidence communities.

2.3 Research Participants

The study participants were 335 adolescent mothers aged 15–19, who had given birth between the academic years 2022–2024 and were enrolled in public secondary schools in Northern Samar. Selection was based on proportional allocation using municipal adolescent birth data from the Field Health Service Information System (FHSIS) report of the province of Northern Samar, ensuring representation across municipalities with high and low birth rates. The study specifically included those actively engaged in both academic and maternal responsibilities to capture relevant, experience-based insights into their daily struggles.

2.4 Research Instrument

This study used a validated and refined researcher-made instrument to measure challenges encountered by adolescent mothers in academic, caregiving, and stigma-related domains. The instrument underwent expert validation, cognitive testing, pilot implementation, and reliability analysis. Based on a 5-point Likert scale, the tool was further refined through statistical item analysis, achieving a Cronbach's alpha of 0.914, which indicates excellent reliability. This ensured that the data collected were both psychometrically sound and contextually relevant, adhering to best practices in instrument development and validation (Boateng et al., 2018).

2.5 Data Gathering Procedure

The researcher secured the necessary approvals and conducted orientations to inform participants of the study's objectives and the ethical safeguards in place. Quantitative data were collected using a validated, self-administered survey questionnaire, while qualitative data were obtained through a semi-structured interview guide. Both underwent expert validation and pilot testing to ensure content clarity, cultural relevance, and construct alignment (Boateng et al., 2018). Data collection took place in safe, private settings within schools. For harder-to-reach participants, coordination with municipal health offices and barangay health workers facilitated broader access. Audio recordings, obtained with informed consent, ensured the capture of accurate and comprehensive data. Data saturation was achieved through iterative thematic analysis, and collection ceased once no new themes emerged (Saunders et al., 2018). To ensure trustworthiness, participants reviewed and provided feedback on preliminary findings through structured member checking, which allowed them to confirm, clarify, or expand on the interpretations (McKim, 2023). A trauma-informed approach guided all engagements, ensuring participants could engage at their own pace and comfort (Sleath et al., 2022).

2.6 Ethical Considerations

This study adhered to rigorous ethical standards for research involving human participants, with particular sensitivity to the needs of vulnerable populations such as adolescent mothers. Ethical clearance was obtained from the Research Ethics Committee of the Department of Education Region VIII prior to data collection. The fieldwork was conducted over 10 weeks from February to April 2025, ensuring sufficient time for careful and respectful engagement with participants. Informed consent was secured from all participants aged 18 and above. For those under the age of 18, assent was obtained in conjunction with signed consent from a parent or legal guardian, as per international ethical guidelines for research with minors (WHO, 2020). Compliance with the Data Privacy Act of 2012 (Republic Act No. 10173) was strictly observed: all personal identifiers were removed and replaced with unique codes, and data were securely stored in password-protected digital files accessible only to the research team. To minimize the risk of emotional discomfort, sensitive questions were introduced in the latter part of interviews and surveys, following trauma-informed research principles (Sleath et al., 2022). Furthermore, participants were informed of their right to withdraw at any point. They were provided with access to psychosocial support services through referrals to school-based guidance counselors or local health professionals, if needed. Throughout the study, the dignity, privacy, and emotional safety of all participants were prioritized, ensuring the research was not only methodologically sound but also ethically compassionate and culturally respectful.

3.0 Results and Discussion

3.1 Academic Struggles

Table 1 presents the challenges adolescent mothers face in balancing education and motherhood, with a weighted mean of 3.44, indicating serious academic struggles overall. The most significant difficulty lies in balancing schoolwork with caregiving responsibilities ($M = 3.84$), underscoring the strain of managing dual roles. Fatigue and lack of sleep also emerged as critical barriers to concentration, while limited participation in extracurricular activities further constrained school engagement. Although some challenges—such as academic unpreparedness and absenteeism—were rated as manageable, they nonetheless contribute to a pattern of disrupted educational continuity.

Table 1. Mean Distribution of Challenges Encountered by the Respondents in terms of Academic Struggles

Indicators	$\bar{x}$	Interpretation
I have difficulty finishing my schoolwork on time because I need to care for my child.	3.84	Serious Challenges
I find it difficult to concentrate on my studies because I often feel tired or lack sleep.	3.49	Serious Challenges
I feel unprepared for tests, quizzes, or assignments.	3.09	Manageable Challenges
I miss classes or school activities due to parenting responsibilities.	3.32	Manageable Challenges
I have limited opportunities to join extracurricular or after-school activities.	3.47	Serious Challenges
Weighted Mean	3.44	Serious Challenges

These findings align with Frey et al. (2020), who reported that adolescent mothers frequently experience academic disengagement due to the demands of caregiving and chronic fatigue. Similarly, Baattaiah et al. (2023) emphasize that sleep deprivation and emotional exhaustion significantly impair academic readiness. However, other studies offer a more nuanced view. SmithBattle and Phengnum (2023) suggest that, when supported by family and school networks, teenage mothers can demonstrate resilience and perform well academically. Dokuka and Smirnov

(2020) also found that while insufficient sleep generally affects performance, highly motivated learners may compensate with greater effort and persistence.

Qualitative insights from this study deepen the interpretation of these findings. The theme “living on the edge of emotional burnout” captures the toll of caregiving on academic engagement. One participant shared, “*Exhausted by day, sleepless at night – that is my life as a teenage mom,*” highlighting the persistent struggle to maintain focus and productivity. Meanwhile, the theme “rising with responsibility” illustrates the inner resolve of young mothers striving to succeed for their child’s future. “*Every grade I get feels like a step toward giving my child a better future,*” remarked another, echoing SmithBattle and Phengnum’s (2023) observation that adolescent mothers, when empowered, can achieve academic success despite immense barriers. These patterns reveal the dual reality of adolescent motherhood: it brings both disruption and potential for growth. While many face severe academic difficulties, the presence or absence of support systems plays a critical role in shaping outcomes.

3.2 Caregiving Stress

In addition to academic challenges, adolescent mothers also deal with the emotional and physical demands of caregiving, an equally influential factor in their ability to persist in school. As shown in Table 2, participants reported severe caregiving stress with a weighted mean ($M=3.54$). The most significant burden stems from caring for a sick child ($M = 4.11$). Many also felt overwhelmed by parental responsibilities and struggled to balance school with parenting time. While stressors such as financial anxiety and lack of childcare support were rated as manageable, they remain persistent sources of emotional strain.

Table 2. Mean Distribution of Challenges Encountered by the Respondents in terms of Caregiving Stress

Indicators	$\bar{x}$	Interpretation
I feel overwhelmed by my responsibilities as a young mother.	3.89	Serious Challenges
I worry about providing for my child’s needs while studying.	2.66	Manageable Challenges
I feel stressed or worried when my child gets sick or needs extra care.	4.11	Serious Challenges
It is difficult for me to balance studying with spending quality time with my child.	3.79	Serious Challenges
I do not have sufficient childcare support while attending school.	3.23	Manageable Challenges
Weighted Mean	3.54	Serious Challenges

These findings align with Dilorio et al. (2017) and Jenkins et al. (2019), who note that caregiving challenges, especially in the absence of support systems, often lead to heightened stress and academic withdrawal among teenage mothers. A lack of institutional and familial support further compounds these pressures. Qualitative data deepens this understanding. The theme “making ends meet” reflects how financial insecurity pushes some mothers to skip meals or take on informal work to care for their children. Meanwhile, “left to cope alone” captures the isolation felt by many, especially those who have been abandoned by partners or unsupported by their family. These experiences echo Dlamini and Sodi’s (2017) findings on the psychological toll of unsupported motherhood. Despite these burdens, narratives of resilience emerged. Themes like “between duty and dream” and “grit rooted in motherhood” highlight how caregiving, though demanding, can also be a source of strength. Van Breda (2022) similarly emphasized that when adolescent mothers are given institutional support, such as flexible schooling and peer networks, the pressures of caregiving can become powerful motivators for personal and academic growth.

3.3 Stigma-Related Barriers

While caregiving demands weigh heavily on adolescent mothers, their emotional and academic journey is further shaped by the social environments they navigate, particularly the stigma they encounter in schools. Table 3 shows that respondents experienced moderate stigma-related barriers, with a weighted mean of $M = 3.21$. The most pronounced issue was feeling judged or treated differently by teachers ($M = 4.01$), indicating that institutional stigma, not just peer behavior, remains a significant concern. Although other challenges, such as peer exclusion, fear of judgment in group settings, and reluctance to seek help, were rated as manageable, they still reflect persistent feelings of marginalization and disconnection from the school community.

Table 3. Mean Distribution of Challenges Encountered by the Respondents in terms of Stigma-related Barriers

Indicators	$\bar{x}$	Interpretation
I feel judged or treated differently by my teachers because I am a teenage mother.	4.01	Serious Challenges
I often feel left out or excluded by my classmates due to my situation.	2.79	Manageable Challenges
I avoid joining group activities because I am afraid others might judge me.	2.99	Manageable Challenges

I feel misunderstood or unsupported by my school because of my situation as a teenage mother.	2.93	Manageable Challenges
I am hesitant or shy to ask for help from teachers or classmates because of my situation.	3.32	Manageable Challenges
Weighted Mean	3.21	Manageable Challenges

These findings echo those of Ruzibiza (2021), who documented how stigma in educational spaces led adolescent mothers in Rwanda to conceal their identities or abandon schooling altogether due to shame and isolation. Morgan et al. (2025) similarly found that Ghanaian teenage mothers returning to school often encountered discrimination from both teachers and peers, hindering reintegration and emotional recovery. However, the data also reveals a capacity for resistance and resilience. As highlighted in the theme “resilience amid rejection,” many participants described how even small gestures of empathy — such as a teacher’s encouragement or a peer’s friendship — made school feel safer and more welcoming. One mother shared, *“School became the only place I could breathe,”* illustrating how inclusive relationships can counteract the isolating effects of stigma. In contrast, another recalled, *“I am often judged and belittled... sometimes I think of dropping out,”* underscoring how a single negative encounter can have a profoundly negative impact on school engagement.

These findings align with SmithBattle’s (2020) work, which emphasizes that when adolescent mothers receive genuine support and understanding within school systems, they are more likely to stay enrolled, persevere, and reclaim their academic identities. Thus, addressing stigma is not only about reducing harm but also about fostering spaces where young mothers can feel seen, supported, and empowered to succeed.

Table 4. Thematic Analysis on Other Encountered Challenges by Teenage Mothers

Noteworthy Responses	Description	Basic Theme	Organizing Theme	Global Theme
“I struggle with my mental health, but I do not know where to ask for help.” “Sometimes I just want to disappear, but because of my child, I choose to keep going.” “I miss the carefree version of me... Now, my world is different.” “Sometimes I feel like a robot—wake up, do chores, take care of the baby, go to school, repeat.”	Teenage mothers suffer silently from emotional exhaustion, depression, and identity loss, often without access to mental health support or someone to confide in.	Suppressed mental distress. Loss of self-worth. Emotional invisibility		
“I just want to hear that they are proud of me.” “I lost my connection with God... I need to forgive myself first.” “I thought he was my forever... Now I struggle to trust again.” “I feel invisible, like no one listens to me.”	Many struggle with guilt, low self-esteem, spiritual disconnection, and emotional abandonment, yet fight to reclaim self-worth.	Internalized shame. Spiritual and relational disconnection	Silent Emotional Suffering and Identity Strain	The Burdened Resilience of Teenage Mothers in the Margins
“I was hospitalized once due to exhaustion.” “I gained weight due to a lack of self-care and a hormonal imbalance worsened by stress and lack of sleep.” “Even when I am sick, I keep going.” “Sometimes my body gives up, but I still push through it.”	Despite health breakdowns, teenage mothers push through physical exhaustion due to caregiving demands, prioritizing their child over personal wellness.	Physical depletion and untreated illness. Self-neglect from over-functioning		

"I cannot save a single peso... every cent goes to milk and diapers." "I rely on my parents or my partner, but sometimes they have nothing to give." "I have thought about quitting school to work." "I sacrificed my meals and school needs for my child's emergencies."	Persistent poverty forces teenage mothers to sacrifice personal needs, skip meals, and delay education-related responsibilities to care for their child.	Financial insecurity. Resource diversion to the child. Interrupted schooling	Economic Fragility and Sacrificial Living
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Teenage mothers face a convergence of emotional, physical, and economic challenges that persist silently alongside their caregiving responsibilities. The global theme, "The Burdened Resilience of Teenage Mothers in the Margins," encapsulates how these young women often endure silent suffering in their everyday lives.

Under "Silent Emotional Suffering and Identity Strain," many respondents revealed mental health challenges and loss of self, expressing sentiments such as, *"I miss the carefree version of me,"* and *"Sometimes I feel like a robot."* These experiences are consistent with Koyama et al. (2025), who found that cumulative exposure to household poverty is strongly linked to increased depressive symptoms and reduced self-esteem in adolescents. The "Internalized Shame and Disconnection" theme reflects deep emotional isolation: *"I just want to hear that they are proud of me,"* and, *"I lost my connection with God..."* are powerful expressions of guilt and relational strain—effects also reported in studies of youth in economically marginalized contexts (Fronton et al., 2022). Economically, participants described sacrificing personal needs to care for their children: *"I sacrificed my meals and school needs for my child's emergencies,"* and *"I have thought about quitting school to work."* This economic fragility mirrors findings that childhood material hardship is directly associated with higher levels of adolescent anxiety and depression (Fronton et al., 2022). In terms of physical health, mothers reported neglecting their illness—*"Even when I am sick, I keep going"*—underscoring their unmet physical needs. This behavior aligns with the Family Stress Model (Conger et al., 1994; 2020 update), which explains how economic stress undermines caregiver mental health and caregiving ability, and by extension, child and maternal well-being.

Despite these overwhelming pressures, evidence suggests that targeted interventions can enhance resilience and mitigate the effects of hardship. Koyama et al. (2025) argue that interventions addressing poverty can mitigate depressive symptoms in adolescents, underscoring the potential of economic support. Likewise, Fronton et al. (2022) link material hardship to adverse mental health outcomes, suggesting the need for holistic programs that integrate mental health support, financial aid, and school retention strategies.

4.0 Conclusion

This study shed light on the complex realities faced by adolescent mothers in Northern Samar—realities shaped by academic pressure, caregiving demands, emotional strain, and financial hardship. While teenage motherhood often unfolds in silence and sacrifice, the findings reveal a deeper narrative of persistence and resilience. Quantitative results revealed significant challenges in balancing school and parenting, which were further compounded by stigma from teachers and peers. Qualitative accounts further exposed the emotional toll, marked by isolation, exhaustion, and identity struggles.

These experiences are consistent with recent literature linking adolescent motherhood to increased risks of school dropout, mental health challenges, and poverty-related stress (Koyama et al., 2025; Fronton et al., 2022; Conger et al., 2020). However, despite these adversities, many participants demonstrated strong motivation to succeed, revealing that resilience is not simply innate but is often shaped by the presence or absence of meaningful support. To better serve adolescent mothers, stakeholders must move beyond token interventions and design systems that genuinely meet their needs. This includes practical, trauma-informed, and adolescent-friendly services such as school-based counseling, mobile or on-site childcare, flexible attendance policies, and livelihood training programs. These measures not only reduce risk but also affirm the dignity, agency, and aspirations of young mothers.

By amplifying the voices of those often silenced by shame or neglect, this study contributes to the growing movement for educational equity and reproductive justice. Supporting young mothers should not be seen as an exception, but as an essential part of creating inclusive and compassionate learning environments. Future research should build on this foundation by exploring the long-term effects of evidence-based interventions on the educational, emotional, and economic outcomes of adolescent mothers.

5.0 Contributions of Authors

Danhill C. Donoga, PhD – Conceptualization, research design, data collection, data analysis, manuscript writing, validation of results, editing, and overall supervision of the study.

6.0 Funding

None.

7.0 Conflict of Interests

No conflict of interest.

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