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SINGLE PARENT FAMILY

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Manuel Jensen

A DESCRIPTIVE STUDY OF A SELECTED SAMPLE OF ILLEGITIMATELY
PREGNANT WOMEN WHO DELIVERED
AT BROADLAWNS POLK COUNTY HOSPITAL AND
KEPT THEIR BABIES

by

Wesley Hoffman

Jens Jensen

Al Muir

Karon Perlowski

A project submitted in partial fulfillment of the
requirements for the degree of
Master of Social Work in the
School of Social Work in
the Graduate College
of the University
of Iowa

December 16, 1968

Advisor: Mrs. Edith Zober

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DUE!

~~APR 11 '71~~

3/28/79

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Most of all we wish to thank the mothers who co-operated with our efforts. Their involvement and enthusiasm was contagious, and we hope evident in the work which follows.

This Study is dedicated to

SOLO PARENTS OF POLK COUNTY

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CHAPTER I

INTRODUCTION

The Problem Defined

The authors' interest in the problem of illegitimacy stemmed primarily from the work done by Chan, Jaeger, and Kennedy submitted to the School of Social Work in the Graduate College, University of Iowa, on June 19, 1968. Of the thirty-four women interviewed prior to their delivery date at Broadlawns Polk County Hospital, these researchers found that all women interviewed planned to keep their children.¹ All of the writers had an interest in the problems of unmarried mothers in general through their casework experience in their practicum agencies. Our research advisor, having done research in this area previously, encouraged further exploration of this problem. Through contacts with various agencies in the community, the writers found substantial interest expressed in the problem. Three particular agencies, Public Health Nursing, Broadlawns Polk County Hospital, and the Community Planning Council of Greater Des Moines, offered their assistance in this project area.

In discussing the general area of unmarried motherhood with these three agencies, it became evident that there was little information concerning the living situations of mothers who had

¹Maria Chan, et. al., "A Descriptive Study of Illegitimacy," An unpublished study by a group of graduate students at the University of Iowa School of Social Work, (Iowa City, Iowa, 1968), p. 58.

delivered illegitimate children at Broadlawns Polk County Hospital and kept their children. We felt that a descriptive study of the physical, economic, and environmental settings in which the women now find themselves would be of value in planning community services to meet the needs of these women. Inextricable intertwined with our concerns around these issues, was an interest in the child's welfare.

As the authors explored and discussed problems these women might be facing, we found ourselves basically agreeing with the framework stated by Mignon Sauber, Director of the Research Department of the Community Council of Greater New York:

" . . .this group (i.e., of illegitimately pregnant women). . . faces many serious problems over a long period of time--the problem of basic financial support in a family without a responsible father in the home; the problem of a child growing up in a fatherless home, in a family situation not generally acceptable to American mores and in a personal situation that may tend to cause him to withdraw from the normal pursuits of childhood, etc. The mother, too, suffers many special disadvantages--she may have had to interrupt her education and she may find it difficult, if not impossible, to return to school because of the need to care for the child, or her employment possibilities may be limited, or she may suffer discrimination in housing. In general, she may be so overwhelmed by her problems that she sees no alternatives but to continue the pattern of living associated with the first out-of-wedlock pregnancy and thus she may be unable to establish a new pattern more acceptable to society."²

²Mignon Sauber, "Unmarried Mothers Who Keep the First Out-of-Wedlock Child," A Proposal submitted to the Social Security Administration, U.S. Department of Health, Education, and Welfare, Washington, D.C. (SSA Project No. 059-2-018, Approved, January 1962). Community Council of Greater New York, (N.Y., N.Y.), p. 1.

A brief persual of the available social work literature on unmarried parenthood revealed that much information was available in the following areas: casework services, psychological implications of unmarried motherhood and putative fatherhood, maternity care, and the relinquishment decision.³ We were able to find only a limited number of resources pertaining to the experiences of the unwed mother as a parent. We, therefore, became convinced that a study in this area would add some small amount to the knowledge base of social work practice. More specifically, we felt that a study of this type might better indicate how long-range services could be provided in this community for these mothers.

Purpose and Scope of the Project

Through this project it was our intention to find answers to some of the following questions:

1. Who are these women?
2. How are they meeting their current needs?
3. What would they have liked done during pregnancy that would have prepared them for helping their child?
4. What services were available during and following pregnancy and how were they used?
5. What services are needed and do they think there are gaps in services? If so, what needs are not being met and how can they be?

Though ambitious students, the writers realized such a project would have to be limited. As local agencies already cited had offered help in organizing such a project within their geographic areas of service,

³Colorado State Department of Public Welfare, "The Library Counselor," Vol. 19, No. 1. (January, 1964), Table of Contents.

the writers chose to use the Polk County boundaries as outer geographic limits. Additional factors such as, time available, man hours available, and realistic ability to locate the respondents, further narrowed the scope of the project to the questions listed above.

Agency Approval

Having set geographic boundaries, it was logical for the authors to request the co-operation of Broadlawns Polk County Hospital in obtaining the sample for several reasons: (1) Previous research already cited indicated that most of the illegitimately pregnant women at Broadlawns Polk County Hospital were keeping their children following delivery; (2) As the agencies volunteering their services were primarily concerned with services and planning for low income families, it was logical to take the sample from a hospital whose fees were based on the ability to pay; (3) The hospital had extended co-operation with previous students doing research; and (4) Though no logical connection could be made with the study done there in the past, our results might, in some fashion, better connect with results obtained using the hospital in the past. After discussing these reasons with our research advisor, the hospital was contacted, and their co-operation was granted. (see appended letter.)

Definitions

A tentative title for the project designated the proposed sample as "illegitimately pregnant women". The researchers arrived at this definition because we felt it necessary to allow within the sample a

married woman bearing the child of a man other than her husband. As the authors did not encounter this situation in our sample, the authors legitimately redefined the respondents as "unmarried mothers". The authors defined unmarried mother as meaning any woman in the sample who was not married at the time she left Broadlawns Polk County Hospital with the child.

Services: We defined services as resources created by the community in response to needs of the people in that community.

Public Assistance: Public Assistance was defined as both general relief and categorical assistance.

CHAPTER II

EXAMINATION OF THE LITERATURE

Historical Perspectives

Until the last few years, studies and research in the area of unmarried mothers have concentrated mostly on those mothers who gave up or planned to give up their baby for adoption. Factors related to the mother personally were the main source of study-- factors such as the impact of the total experience on her psychological make-up, the type of economic background with which she was most closely related, her level of education, etc. As will be more specifically delineated later, these studies also incorporated what social services were available to unmarried mothers, legal provisions for them, and health care services that were available for their use.

To illustrate more specifically what such studies included, it may be beneficial to take a closer look at several of them. George B. Mangold did a comprehensive study of illegitimate children, their mothers' background, possible causes of pregnancy, and the outcome for the child. The title of this study is "Children Born Out of Wedlock" (1921).

Another study was conducted in the area of legal provisions and care for the child and his mother. This study was done by Dorothy Frances Puttee and she also included statistical information and proposed legislation done in Illinois concerning facts and available resources of which unmarried mothers could make use. ("The Illegitimate Child in Illinois, 1937.)

In terms of personal experience in working with unmarried mothers, Leontine Young wrote a book entitled Out of Wedlock (1954) which was based on her work in this area. The book not only includes her contact with unmarried mothers, but the knowledge and contributions of a large group of social workers in both public and private agencies as well.

Departing somewhat from the norm and thus providing an interesting and resourceful piece of literature, Ruth Reed, in 1934, did a study on the illegitimate family. She incorporated her findings in a book entitled The Illegitimate Family in New York City which deals with the treatment of the illegitimate family by social and health agencies in New York City.

In the course of examining the literature available, the authors found an early study which was an exception to the general trend of research done in this area at this time. In 1928, Madorah A. Donahue did a study entitled "Children of Illegitimate Birth Whose Mothers Have Kept Their Custody." This study was based on an analysis of the histories of children of illegitimate birth who remained in the custody of their mothers. The study was initiated at the request of a number of social agencies and institutions.

From this brief sketch of the literature available on unmarried mothers during the twenties, thirties, and early fifties, it is possible to see that the emphasis in providing service as well as available literature in this area was based on the notion that the unmarried mother had either given up her child for adoption or had planned to do so. Gradually a change of focus began to take place and people started becoming concerned about the unmarried mother who made the decision to keep her child.

Not many studies and actual research was conducted in this area, but the authors found a few interesting articles relating to the gradual change in perspective of the unmarried mother and the alternatives available to her. Rose Bernstein has written two articles which illustrate this change in perspective. The first was written in 1960 and entitled, "Are We Stereotyping the Unmarried Mother?" In this article, Bernstein suggests that social workers and all those who may have any extensive contact with unmarried mothers should divest themselves of some of the stereotyped images of mothers who find themselves in this situation. She expresses her opinion that the unmarried mother may be more "normal" and healthy mentally than some theories suggest.

In her second article, entitled "Gaps in Service to Unmarried Mothers", Bernstein is concerned about the services available to unmarried mothers according to their individual needs. She writes about prenatal care, follow-up care, which usually ends with treatment, psychological treatment that should be available if a mother wants it, and social care for her depending on what the mother decides to do or if she may have difficulty in making any decision at all. Bernstein's main concern in this article is how to coordinate adequately all of these services so that the best possible and most comprehensible care is available for any unmarried mother.

In this same general area, Ursula M. Gallagher, a specialist on adoption and services to unmarried mothers, delivered a speech to the American Protestant Hospital Association at the Salvation Army Program in Dallas, Texas, in which she stated her opinion that there is a definite demand for a more comprehensive program of services to be available to unmarried mothers and their children.

The title of her speech is "Changing Concepts in Comprehensive Service to Unmarried Mothers and Their Children." Concerning those unmarried mothers who keep their children, she states, "Although each year more children are being placed for adoption, the number of children kept by their mothers is increasing. And, social agencies are not meeting their responsibility unless they include--as an important part of their function--services to help the unmarried mother who wants to keep her baby. . . .

As an example of one service being offered to unmarried mothers who have decided to keep their child, Gallagher cites the Berean Institute in Philadelphia is cooperating with the State Department of Public Welfare which has been offering vocational training for the past seven years to a group of unmarried mothers who have kept their babies. Casework service is available to the girls and their parents, and day care is provided for their children while the mothers are in classes. This project is supported by funds made available by the Children's Bureau to the State of Pennsylvania."⁴

After examining these articles and studies which reflect the trends and emphases of the literature available in earlier years, the authors began reviewing more extensively what was currently written on the subject of those unmarried mothers who kept their children.

⁴Ursula M. Gallagher, "Changing Concepts in Comprehensive Service to Unmarried Mothers and Their Children." A speech given at the American Protestant Hospital Assn., February 16, 1966, (Dallas, Texas). Reprinted for publication by the U.S. Department of Health, Education, and Welfare, Children's Bureau, (1966), pp. 3-5.

Current Emphasis

The first of those most recent studies and articles which pertain to unmarried mothers who kept their child, and which the authors felt related to this project was done by Elisabeth Tuttle, entitled, "Serving the Unmarried Mother Who Keeps Her Child." (1962). She is concerned with the most efficient service to be given to mothers in this situation and suggests that a sound and accurate diagnosis of cultural and economic factors of the girl be taken into consideration when working and planning with her. Tuttle also feels that unmarried mothers who keep their children remain too removed and keep themselves isolated from involvement in the community. In light of this, it is her opinion that the community and agencies within the community should see to it that these women are made aware of and are insured of having services available to them to meet whatever needs they may have.

A somewhat different but nevertheless important area of concentration was taken upon by Patricia Garland in 1963. She was the author of an article entitled "The Community's Part in Preventing Illegitimacy." The feeling she expressed in this article was that the community as a whole has an obligation to not only provide services for those unmarried women who keep their babies, but to take any measures which may be necessary to prevent or at least reduce the possibility of recidivism and new occurrence in this area.

Sanford Kanz wrote an article also in 1963 entitled "Legal Protections for the Unmarried Mother and Her Child." This article appears in the March-April edition of Children and deals with the legal rights of unmarried mothers in keeping their children, how those rights can be challenged, and how laws affect minors who become unmarried mothers. In relation to this general topic, the authors were of the opinion

that not enough is written about the legal rights of the unmarried mother. Furthermore, that what is written and established is, more than not, unknown and dangerously unfamiliar to the mothers this project and others like it are concerned with.

In that same issue of Children, an article entitled "The School and Unmarried Mothers", by Jerry L. Kelley can be found. Kelley discusses one area of service being tried in Pennsylvania and Oregon which has to do with furthering the education of unmarried mothers who so desire it. He describes the unmarried mother as a good achiever and states that schools have witnessed these mothers finding satisfaction in accepting the student role as part of being a "mature mother".⁵ Kelley also suggests that more states should invest in providing educational programs for unmarried mothers who have kept their children, and she feels that Pennsylvania and Oregon are good examples of what has been done in this area.

One author who was concerned with the limited amount of expressed concern for the unmarried mother who keeps her child which exists today took it upon herself to suggest some "priorities in social action" which should be concentrated upon by social agencies and communities. Ruth Chaskel discusses these priorities in her article, "The Unmarried Mother--Is She Different?", and she is of the opinion that this task should begin by attempting to create a more favorable community climate for acceptance and availability of services for the unmarried mother who keeps her baby. Her article also connotes a deep concern for the deep, intimate feelings mothers have about themselves. . .

⁵Jerry L. Kelley, "The School and Unmarried Mothers," Children, Vol. 10, March-April, (1963), p. 62+.

"The vast number of unmarried mothers who keep their babies need sustained assistance in being good, joyful mothers. . .with shored-up ego strenght. This includes tangible services to make it possible for them to remain or become whole persons in their own right. Housing, school, homemaker teaching, employment opportunity, day care, and financial assistance all fall into this category."⁶

In this area of actual research and findings, the authors found the following studies: In May 1965, Ellery Reed conducted a study and make a summary of 118 unmarried mothers in Cincinnati who kept their children. In his study, he discusses the mothers' health, the psychological testing of their children, asks why they kept their babies, and spends some time on the resulting marriages of the mothers.

In another study done in New York City and in California, the living arrangements, how the mothers were supported and general physical descriptions of the women's living circumstances were examined. The results and findings of this study were written in a column entitled "Here and There", and published in the January, 1966, edition of Children.

In May of 1965, Helen Wright did a study entitled, "80 Unmarried Mothers Who Kept Their Babies." In this study the following factors pertaining to the circumstances of the unmarried mother are examined: Characteristics of the mothers, the life of the mother--marriage and her financial situation, other aspects of the mother's life, the adjustment of the mother, the welfare of the child, the total situation, and the matter of services. In her introduction, Wright states, "The lack of knowledge about this large number of mothers and children must be a matter of concern to all who are interested in the welfare of children. . . It is, therefore,

⁶Ruth Chaskel, "The Unmarried Mother--Is She Different?", Child Welfare, Vol. 42, (1967), pp. 65-74.

with the hope of making some contribution to this area that knowledge about one group of these mothers and their children is presented in this report."⁷

One study which was of significant value to the authors of this project was done by Mignon Sauber. The title of her proposed study is "Unmarried Mothers Who Keep the First Out-Of-Wedlock Child." In this study, Sauber proposed to study "unwed mothers who have had one out-of-wedlock child and who did not plan to place the child for adoption. The purpose of his study was to discover the characteristics of these women and their needs in order to find possible ways for the community to assist them and protect them and their children from excessive hardships, thereby helping them to build new lives for themselves, lives that would reduce the likelihood of their continuing to bear children out-of-wedlock."⁸

Another more recent study in the area of unmarried motherhood was conducted by the Community Planning Council, United Community Services, Des Moines, Iowa. This study made several recommendations pertaining to the beginning of planning and social action to direct living adjustment needs of unmarried parents and their children.

Limitations of the Literature

After reviewing the available literature on the subject of unmarried mothers who kept their babies, the authors of this project came to the conclusion that, in certain respects, there were some limitations on the literature available in this area. To begin with, the definition of the unmarried mother more often than not includes

⁷Helen R. Wright, Ph.D., "80 Unmarried Mothers Who Kept Their Babies," State of California Department of Social Welfare, Children's Home Society of California, Los Angeles County Bureau of Adoptions, (May, 1965), Table of Contents, and pp. 1-2.

⁸Sauber, Op. Cit., p. 1.

only those mothers who are younger and who usually do not plan to keep their child. Also, the assumption is too often made that the unmarried mother does not marry.

In terms of the role of the unmarried mother in family life, the approach is too often taken that her part in the family is somehow different from those mothers who are not in her same situation.

The authors also found that there are too few descriptive studies done in the area of unmarried mothers who kept their children. The majority of studies and research projects that are undertaken are done in a theoretical, value-oriented framework. In relation to this limitation, the authors were unable to find studies covering any time-span relating to unmarried mothers who kept their children. That is, what differences there may have been in the needs of these mothers immediately following delivery as opposed to those five or even ten years after the child was born were not considered in any of the studies cited.

CHAPTER III

DETERMINATION OF SAMPLE AND METHODS

The Setting

As already mentioned, the geographic area of the sample was confined to Polk County, Iowa, and the sample was obtained from records from Broadlawns Polk County Hospital.

The Sample

At the time of this study, the children of the respondents ranged in age from approximately four to six years of age. It was the thinking of the authors that the greater the period of time the unmarried mother had had her child, the more prepared she would be to participate adequately in our project and respond meaningfully to questions about services needed in the child-rearing function. Secondly, we thought that the longer the period of time since the child's birth, the less likely would be the possibility of locating the mothers in the sample. Thus, the two biases--experience is a teacher and unmarried mothers are a mobile group--led to the sample's time-span: November 1, 1962 to November 1, 1964. In short, the sample consisted of unmarried mothers who delivered children during that time-span.

During that time, three-hundred-eight illegitimate births were recorded at Broadlawns Polk County Hospital. Of these three-hundred-eight births, the writers arbitrarily chose to set the size of the sample at eighty. We hope that this sample would yield a significant number of respondents. The three-hundred-eight illegitimate births were then consecutively numbered in their chronological order and

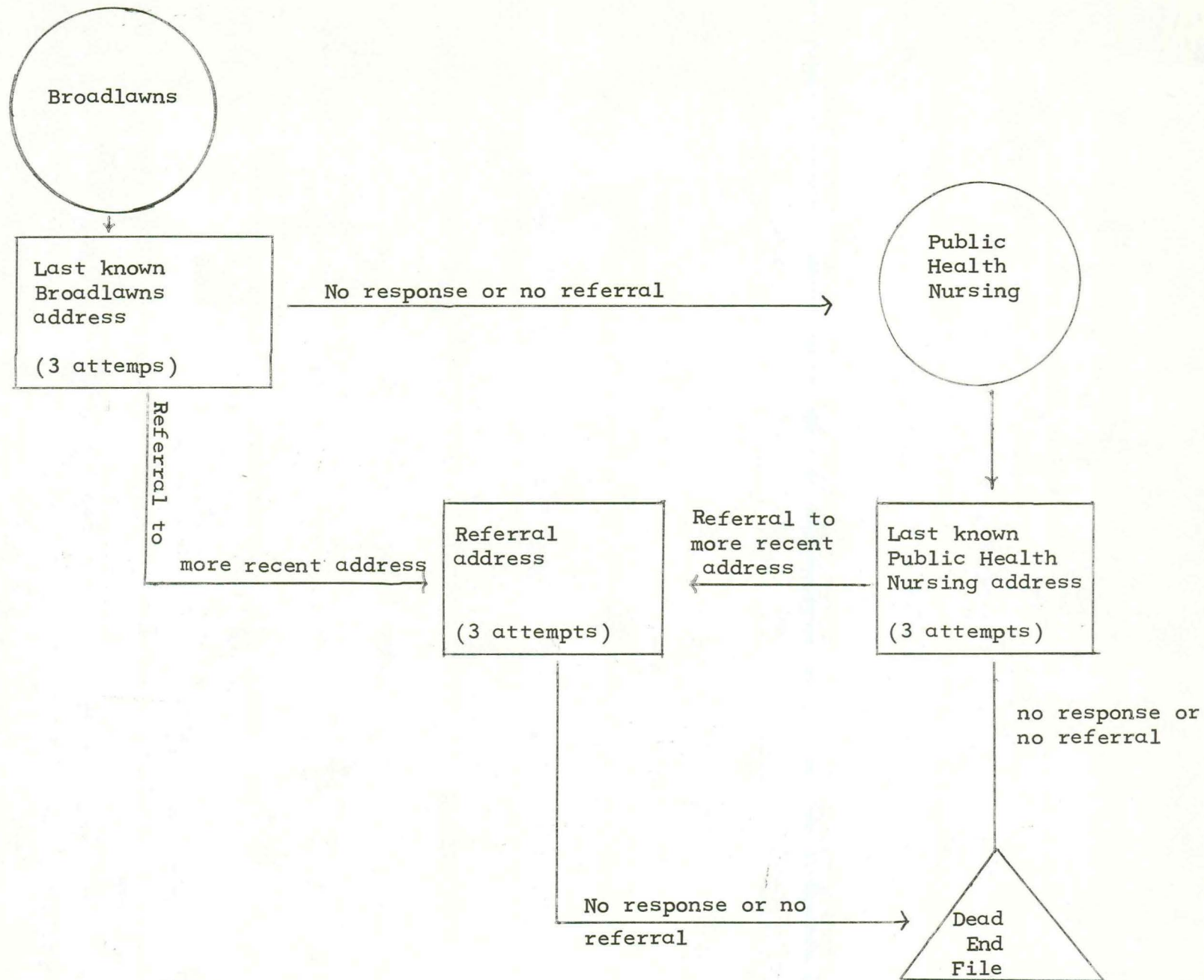
eighty were selected through the use of the table of random numbers.

In the event that any mother in the sample had two children within the time-span of the sample, it was decided that the older of the children was to be the focal point of the interview. In one instance, a mother gave birth to twins, and, for the purposes of our study, we assumed that her experience was not significantly different from other mothers in the sample who had single births.

Uniform standards were set to contact each mother in the sample. The authors used the most current address listed at Boardlawns as our first attempt at contacting the women. In those cases in which we found the mother at that address, the interview schedule was administered. If there was no answer at that address at the time of the first contact, we made two follow-up attempts. If there was no answer in those three attempts, we contacted Public Health Nursing to obtain a more recent address. Public Health Nursing was seen as an ideal back-up source because they routinely contact all obstetric cases from Broadlawns Polk County Hospital. If a person other than the mother answered the door at the original address, we asked if the resident had knowledge of a forwarding address for the woman. The forwarding address was then handled as the original address. In the event that there was no response at the door or no forwarding address, the name was then given to Public Health Nursing. Forwarding addresses furnished by Public Health Nursing were, in turn, handled as the original address. Should three attempts on these forwarding addresses have produced no results, the name was then put into the "dead-end" category. (See diagram of process on following page.)

Stratification of Sample as Indicative of Representativeness

The authors thought it might be helpful to evaluate the representa-

DIAGRAM OF PROCESS FOLLOWED IN CONTACTING RESPONDENTS

tiveness of the original sample. This was carried out through the process of plotting the most recent addresses on a map of the city of Des Moines which was stratified according to the system of stratification developed by the U.S. Public Health Service. This system used by the U.S. Public Health Service to institute community disease control, evaluates census tract areas according to units of dwelling, number of occupants per dwelling, extend of deterioration, and number of toilet and health facilities. Each census tract is then classified as upper, middle, or lower socio-economic class.⁹ Plotting our sample on such a stratified map revealed the picture illustrated on the map on page 19.¹⁰

According to statistics based upon a United Community Services survey of the use of clinical medical facilities by residents of each strata, it is known that the clientele of clinical facilities is composed of eleven per cent (11%) upper, thirty-one per cent (31%) middle, and fifty-eight per cent (58%) lower socio-economic strata.¹¹ Calculation of our sample of eighty (80) unmarried mothers that kept their children reveals that 9.6% upper, forty per cent (40%) middle, and 50.4 per cent lower socio-economic class women are involved. This is based

⁹For details and further reference, see "Action to Control Diseases in Health Deprived Neighborhoods," Department of Health, Education, and Welfare, Atlanta, Georgia, July, 1968.

¹⁰Map stratification done by Robert Williamson, Communicable Disease Control Officer, Polk County Health Department, Des Moines, Iowa.

¹¹Unpublished data from the Polk County Department of Public Health based upon "Transportation and Patient Origin Survey for Ambulatory Patients Attending Outpatient Clinics at Broadlawn Hospital and Des Moines Health Center and Planned Parenthood." United Community Services, Mimeographed, August 1, 1968.

upon seventy-three (73) rather than eighty (80) women since seven fell outside the area of the Des Moines map. Recalculating on the basis of eighty (80) women, our figures then become ten per cent (10%), 37.5% and 52.5% in the upper, middle, and lower classes respectively. This, of course, cannot be shown on the map since West Des Moines, Altoona, and Norwalk are not included in this map.

Compared to the criteria delineated above by the Polk County Health Department, our sample appears to be fairly representative of the clientele of Broadlawns Polk County Hospital.

Interview Methodology

The writers initially considered two methods of obtaining data. The first possibility consisted of a process recording to be made within a loosely structured format which each interviewer would administer. The second possibility was a questionnaire to be filled out by the women. There were advantages and limitations to each method.

Advantages to the process recording approach included informality, flexibility to follow the course of developments within the interview, and an opportunity to encourage creative thinking on the part of the respondent. Limitations of this method would include difficulty in codification of responses, tabulation of data, and maintaining consistency in interview structure.

Advantages to a self-administered questionnaire were seen as, simplicity of tabulation, less time-consuming administration, and uniformity in structure for each respondent. Disadvantages of this method included the possibility of misinterpretation, no provision for unanticipated responses, and there was no opportunity for personal contact with each respondent.

It was thought that advantages of both could be maximized and disadvantages of both could be minimized by combining aspects of the two methods. We therefore constructed a questionnaire that we thought included a definite structure, encouraged creative thinking on the part of the respondents, allowed for personal contact with each respondent, was easily coded and tabulated, and could be administered with relative objectivity.

The first draft of the interview schedule was reviewed and revised with the help of our research advisor. Copies of this revised interview schedule was sent to all agencies in the greater Des Moines area working with unmarried parents. Their reactions, responses, criticisms, and suggestions were solicited. (See appended letter.) While awaiting their responses, we pre-tested the proposed interview schedule on unmarried mothers from our practicum agency caseload. Further revisions, warranted by these interview experiences and afore mentioned agency responses, were made.

Uniformity of interpretation of the interview schedule to respondents was assured by the active participation of all four authors in the construction of the instrument. To assure continued uniformity, interviews were conducted by the authors in pairs. Each author conducted interviews in the company of all other authors in the course of the study. Interviewing was done in pairs so that one person could record responses of the women and the other could be used as a resource person. In retrospect, it was felt that the presence of two interviewers added a sense of legitimacy in the eyes of the mothers.

Interviewing Technique

The writers were of the of the opinion that the success or failure in

obtaining cooperation from the mothers would depend largely upon our opening statements of explanation and introduction. For this reason, we formulated a standardized introductory speech. (See appendix.) The statement made it clear to the respondents that their participation was voluntary. If the mother's response was favorable, she was then informed that any information she chose to divulge would be considered confidential. In this regard, respondents were also informed of their right to refuse to answer any question and to ask for clarification of any question.

Interview Schedule Limitations

Limitations that other research groups in this area might consider include several factors. The method of attempting to contact respondents could be more detailed through the use of such sources as social service exchange, the city directory, marriage records, and the Polk County Department of Social Services. It was our feeling that the use of any of these agencies would destroy the uniform possibility of contacting each member of the sample.

The apparent mobility of the women in the sample since the time of delivery obviously affected the number of successful interviews completed. Urban renewal and freeway construction compounded the mobility factor of a significant portion of our sample.

In the course of our interviewing, we also found the interview schedule to be somewhat biased in that we had not anticipated subsequent marriage after delivery and the affect this would have on attitudes and responses of the participants.

The number of interviewers and the time available limited the size of the sample and hence the number of potential respondents, as mentioned earlier. The writers felt it appropriate to note here that

the results of this study are descriptive only of the sample involved and, at best, can be used as a bases for speculation concerning similar women in this community.

Before the findings of the study are discussed, some general observations about our interviewing success should be noted. Of eighty (80) women in the sample, we managed to locate and enlist the co-operation of twenty-seven (27) in participating. Twenty-five (25) of the twenty-seven (27) completed the schedule, and two had not kept the child a significant lenght of time (one woman's child died shortly after birth, and the other was placed for adoption before the child was three months old) to complete the interview schedule. The structure of the schedule dictated that these two respondents would not complete the instrument beyond question twenty-eight (28). Five (5) women exercised their right not to participate in the project, and one woman's mother did not wish to give a forwarding address. In introducing ourselves to the husband of one of the women, we perceived that he had no knowledge of his wife's illegitimate pregnancy. Realizing this, we felt it best not to press for an interview. We received definite indications that ten (10) of the women had moved out of the state. Therefore, we accounted for forty-four (44)--(55%)--of the sample. Mobility, time-span since the birth of the child, subsequent marriages, and, we assume, that deaths account for the uncontacted portion of the sample--thirty-six (36), or 45%.

CHAPTER IV

DISCUSSION OF THE FINDINGS*

Picture of the Respondents

Most of the women contacted had been born in Polk County. Table I indicates that 85.2 per cent of the respondents (twenty-two women) were born in the county, with the remaining 14.8 per cent (five women) being born elsewhere.

TABLE I
BIRTHPLACE OF RESPONDENTS

Birthplace	Respondents	
	Number	Per cent
TOTAL	27	100
Polk County	22	81.5
Other	5	18.5

The results of a question concerning the residency of respondents' parents were quite similar. Twenty-three of the respondents with a living parent said their parents were in Polk County (85.2 per cent),

*As mentioned earlier, twenty-five of the twenty-seven respondents completed only the first twenty-eight questions of the questionnaire. For this reason, totals of respondents will vary between twenty-five and twenty-seven in the discussion of the findings.

and four stated that their living parents were residing elsewhere (14.8 per cent).

Only two racial groups were evidenced in the sample--Caucasion and Negroid. Of the Negro respondents, 59.3 per cent were represented in the sample with the remaining 40.7 per cent being Caucasoid.

TABLE II
RACE OF WOMEN IN THE SAMPLE

Race	Respondents	
	Number	Per cent
TOTAL	27	100
Negro	16	59.3
Caucasian	11	40.7

TABLE III
RESPONDENTS AGE CATEGORIES

Age Category	Respondents	
	Number	Per cent
TOTAL	27	100
19-25	11	40.7
26-33	10	37.0
34-38	4	14.8
39-43	2	7.5

Table III indicates that the greatest share of the respondents were under age thirty-four. It should be remembered that these ages are for women with children between four and six years of age, making the majority of the women (70.4 per cent) under age twenty-five at the time the child was born.

TABLE IV
 MARITAL STATUS OF WOMEN IN THE SAMPLE

Marital Status	Respondents	
	Number	Per cent
TOTAL	25	100
Married	15	60.0
Not Married	10	40.0

As Table IV indicates, a significant number of the respondents (fifteen of twenty-five) had married since the birth of the child. All fifteen indicated they were still married to that same man, and that this had been their only marriage since the birth of the child. Of the ten women who had not married following the birth of the child, six had never been married and four had been married some time before the birth of the child (but were not married at the time of the child's birth).

TABLE V
RELIGIOUS PREFERENCE OF THE WOMEN

Preference	Respondents	
	Number	Per cent
TOTAL	27	100
Protestant	22	81.5
Catholic	4	14.8
No Preference	1	3.7

With one exception, all the respondents showed a specific religious preference as shown in the above Table.

Of the twenty-five women who completed the interview schedule, a majority did not consider themselves active in church activities, fourteen of the twenty-five felt they were inactive in church activities, and ten stated they were fairly active while one indicated she was active. None of the women considered themselves as being very active in church activities. It may be added the only one of the women stated she had contacted her church's social service agency in regard to plans concerning her child (concerning the decision to keep or release for adoption).

TABLE VI
 FORMAL EDUCATION COMPLETED BY THE WOMEN

Grade	Respondents	
	Number	Per cent
TOTAL	27	100
7th Grade	1	3.7
8th Grade	1	3.7
9th Grade	2	7.4
10th Grade	7	25.9
11th Grade	10	37.0
12th Grade	5	18.5
2 years of College	1	3.7

Table VI indicates that a significant percentage of the respondents had attained some high school education. The mean grade completed was 10.6 years, with the mean and mode being eleven years completed. With the exception of two cases, this educational level had been attained before the birth of the child around whom this project centers. Though six of the respondents terminated their educational training with high school diplomas, only one of these received her diploma following the birth of the child. Times at which other women discontinued education are shown in Table VII.

TABLE VII
 TERMINATION OF FORMAL EDUCATION

When Formal Education Terminated	Respondents	
	Number	Per cent
TOTAL	27	100
Before or during previous pregnancy	16	59.3
Completed high school	6	22.2
During the referred-to pregnancy	3	11.1
After referred-to pregnancy	1	3.7
After previous pregnancy	1	3.7

As is evidenced by the above Table, a majority of the women had discontinued education some time prior to the referred-to pregnancy.

Of the respondents, 72 per cent expressed a desire to take further educational training, but were not specific as to what kind of education they felt they needed or desired. One might wonder what conditions caused the women to discontinue their educational training. Ninety-two per cent (92%) of the girls did not feel that they had encountered any specific problems prior to dropping out of, or since re-entering, school. The Graph (I) on the following page shows that nearly one-half felt that they were kept from returning to school for reasons other than those related to pregnancy.

GRAPH I

WHY MOTHERS DID NOT CONTINUE FORMAL EDUCATION

Reasons	Respondents	
	Number	Per cent
TOTAL	25	100

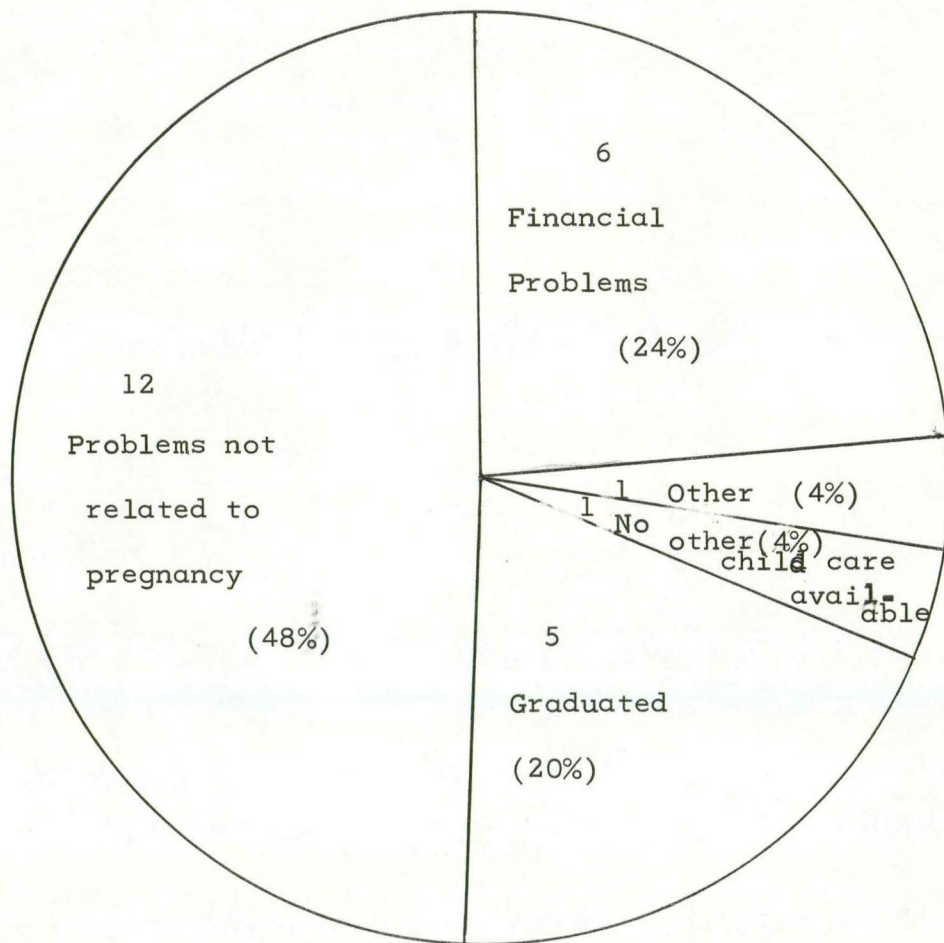


TABLE VIII
EDUCATION OF RESPONDENTS' PARENTS

Education Completed	Father		Mother	
	Number	Per cent	Number	Per cent
TOTAL	27	100	27	100
Grade school (less than 7th)	6	22.2	3	11.1
High school (7th-12th)	7	25.9	14	51.4
High school graduate	3	11.1	8	29.6
College	2	7.4	0	0
Trade school	0	0	1	3.7
Don't know	9	33.3	1	3.7

In addition to educational background, the authors asked several questions relating to the women's past family history. Respondents indicated that 55.6 per cent of their fathers had a semi-skilled source of income, and 22.2 per cent of the fathers worked at skilled jobs. The women indicated that 59.3 per cent of their mothers worked. Of the sixteen working mothers of the respondents, eight were considered unskilled (usually doing light housekeeping or other forms of house-cleaning jobs), three were considered semi-skilled, two were considered skilled, and the respondents were unable to sufficiently describe the employment of the other three.

Twenty-two of the respondents had three or more siblings, many of these came from large families of eight children or more. More than 85 per cent of the respondents parents had only been married one time, with the fathers of the respondents having more second marriages than the mothers.

TABLE IX
PRESENT CUSTODY OF THE CHILDREN

Location	Respondents	
	Number	Per cent
TOTAL	27	100
In home	24	88.9
Dead	1	3.7
Legally separated by court	1	3.7
Placed for adoption	1	3.7

Table IX shows the current placement of the children of the twenty-seven mothers who participated in our project. The reader may have already noticed that the above notes only twenty-four women with the child in their home, and yet many of our percentage tabulations show twenty-five of twenty-seven respondents. Earlier reference has been made to the variances of twenty-five and twenty-seven, but no explanation was given for justifying the inclusion of one mother whose child is not currently in the home. One mother lost physical custody only recently through a temporary court order, and we felt she had retained custody long enough (nearly five years) to make adequate assessments about her child rearing patterns. It was also felt that including her information would add to the value of the study by giving us some insight into the problems of one woman in the sample who, in the eyes of the court, had not met the communities standards of child rearing.

TABLE X

MOTHER'S SOURCE OF INCOME SINCE THE BIRTH OF THE CHILD

Source	Respondents	
	Number	Per cent
TOTAL	25	100
Public Welfare	14	56
Father of the baby	4	16
Husband other than the baby's father	4	16
Self	3	12

The women were asked to indicate their most important source of income since the birth of the child. Table X indicates that slightly over half had seen Public Welfare (including both categorical programs and county relief) as their primary source of income. It must be remembered that a time-span of four to six years is involved in determining an answer to this question. For example, a mother whose child is six years old had to consider the entire income used for raising the child over that length of time. Remarried women may now be relying on a husband's income, but had used public assistance for several years prior to this development and considered it as a primary income for the six years as a whole.

TABLE XI
REASONS FOR DIFFICULTIES IN JOB FINDING

Reason	Respondents	
	Number	Per cent
Felt it better to stay home and care for child	8	32
Lacked experience, education or training	6	24
Could not get child care arrangements	5	20
Poor health	1	4
No difficulties or never looked	12	48

Table XI indicates the women's responses to the question concerning difficulties they may have had in seeking or accepting employment. Of the women interviewed, eighteen were not employed. Of these eighteen, six were seeking work (three were seeking full-time work, and three were seeking part-time work), and one other woman, employed in a work-training program, was seeking full-time employment. The seven women who stated they were employed at the time of the study were all working at or in full-time jobs.

Twelve of the women stated that they had been employed before delivery of the child and had terminated employment since delivery. Some women gave multiple reasons for terminating employment, hence the total of responses in Table XII exceeds twelve.

TABLE XII

REASONS FOR TERMINATING EMPLOYMENT FOLLOWING DELIVERY

=====

Subsequent pregnancy.....	4
Inability to get child care...	4
Wish to stay home with child..	3
Poor health.....	2
Subsequent marriage.....	2
Lack of necessary job skills..	1
Public assistance.....	1
Health problem of child.....	1
Too old to get another job....	1
No incentive to get a job.....	1

In regard to the last response given in the preceding table, one woman on public assistance said that too much of her job earnings would be deducted from her grant, and that "It just didn't make sense to work for nothing."

TABLE XIII
MONTHLY INCOME

Average Monthly Income	Respondents	
	Number	Per cent
TOTAL	25	100
\$ 0-\$100	0	0
\$101-\$200	1	4
\$201-\$300	11	44
\$301-\$400	4	16
\$401-\$500	6	24
\$501 or above	3	12

Table XIII shows the monthly cash income the women and their families were receiving at the time the study was done.

TABLE XIV

MEDIAN INCOME RELATED TO MARRIAGE AND ADC RECIPIENCY

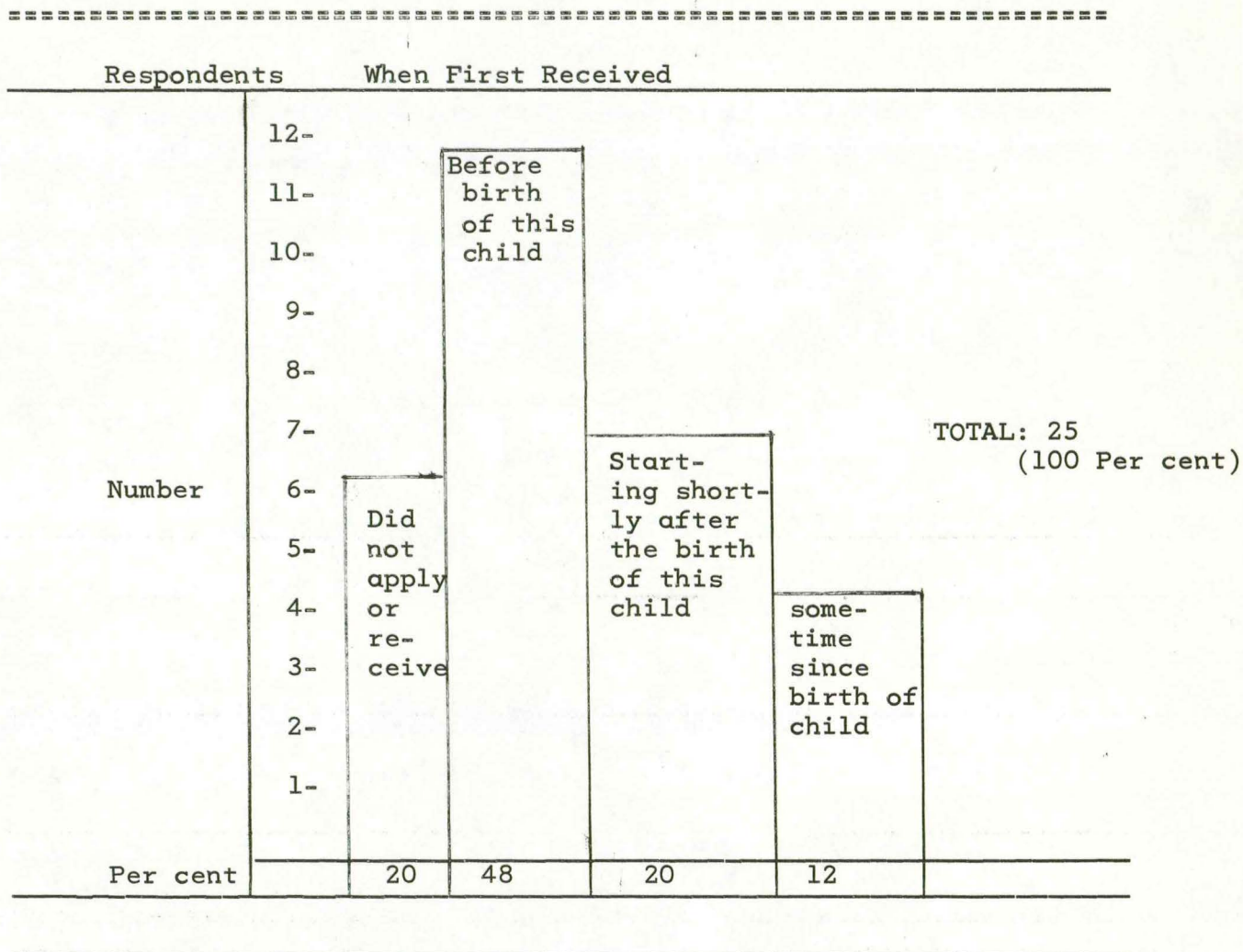
Position in Relation to Median Income	MARITAL STATUS			Respondents ADC Status				
	Mar- ried	Sin- gle	Mar- riage sub- total	Now on ADC	Never on ADC	Volun- tarily with- drawn	Termi- nated	ADC sub- total
Above Median Income	12	0	12	2	4	6	0	12
Below Median Income	3	0	3	3	0	0	0	3
	0	10	10	8	1	0	1	10
TOTAL	15	10	25	13	5	6	1	25

The above Table contains information pertaining to the modal income of twenty-five respondents, which was \$250.00 per month. All the women whose family's cash income exceeded the mean income figures were those women who had married since the birth of the child and were living with their husbands. Of these twelve women, two were receiving public assistance for other children in the home (not the legal responsibility of their husband). Six of these twelve women had withdrawn from A.D.C. after getting married, and four had never received public assistance. Of the thirteen women at or below the median, and mean income, eleven were receiving A.D.C., one was working full time,

and one was receiving job training through a federal government program. Of the eleven women below the median incomes on A.D.C., eight were not married, and three were married. Increments of income on our interview schedule were broad, thus limiting our ability to define precisely the financial circumstance of the women. However, it was quite obvious that the financial condition of the married women was considerably better than the financial condition of the unmarried women. With data available, we were able to state with certainty that the unmarried women were definitely in sub-standard financial circumstance as compared to the total of our sample.

TABLE XV

WHEN THE MOTHERS FIRST RECEIVED PUBLIC ASSISTANCE



Further questions concerning the use of public assistance revealed that 88 per cent or twenty-two of the mothers had applied for public assistance, and only one had withdrawn before receiving some financial assistance. Times when the mother first received public assistance are shown in Table 15 above.

TABLE XVI

TOTAL LENGTH OF PUBLIC ASSISTANCE RECIPIENCY SINCE BIRTH OF CHILD

=====

Length of Time	Respondents	
	Number	Per cent
TOTAL	25	100
5 to 6 years	8	32
4 to 5 years	3	12
3 to 4 years	2	8
2 to 3 years	1	4
1 to 2 years	1	4
0 to 1 year	3	12
Refused to answer	2	8
Did not receive	5	20

The above Table indicates the total length of reciprocity in one year increments over the time the child has been in the mother's care. In approaching the length of time the mothers had received public assistance, the researchers were faced with a maze of possible approaches. Should the writers include total length of reciprocity over the respondent's life span? Only the length of reciprocity since the child's birth? What about repeated application and withdrawals or terminations? As the study revolved around the women's relationships concerning one child, we decided to ask for the total length of time each woman had received public assistance since the birth of the child to the date of the interview.

Of the twelve women not on public assistance at the time of the study, six had voluntarily withdrawn at an earlier date, one had been terminated by action of the welfare department, and five had never applied for/or received public assistance. It is therefore obvious

that of the twenty-five respondents, twenty had received public assistance at some time prior to the study, since the birth of the child, or were receiving it at the time of the study.

In examining the women's future orientation with the amount of cash income and/or length of time on public assistance, no significant relationships were noted. The researchers found that determining criteria to establish "future orientation" was indeed difficult, and this may account for the lack of significant relationship. Many women expressed "hope" and "desire" for the future, but these may have not been realistically based. Imagine the difficulty of coding this answer to "What will you be doing five years from now?" Answer: "Raising a ten-year old kid."

Each respondent was asked how they would spend an extra fifty dollars at the time of the interview. Most of the respondents' said the money would be used for monthly living expenses: clothing for the children, groceries, utility bills, and medical expenses. Based on the women's responses, it was the subjective opinion of the authors that many of the respondents were worried about meeting current financial obligations. It may be noted that none of the women felt that our generous theoretical fifty-dollar gift would go very far in solving their financial problems.

TABLE XVII
LIVING ARRANGEMENTS OF THE MOTHERS

Living Arrangements	Respondents	
	Number	Per cent
TOTAL	25	100
Self	10	40
Husband (Not father of the child)	6	24
Husband (Father of the child)	6	24
With parents	3	12

The above Table indicates the living arrangements the women interviewed had made at the time of the study. Ten of the twenty-five women were living independently, six were living with husbands who were fathers of the children in the study, six were living with husbands who were not the fathers of the children, and three single girls were living with their parents. Twelve of the women had lived at their present residences for less than three years, and thirteen had lived at their present residences three years or over.

The responses of the women indicated that the mean length of residency at their address at the time of the study was 2.9 years (computed from six month increments). The corresponding median residency was 3.0 years. And the distribution of years in residency was bi-modal with the peaks being six months and six years. The twenty-five women had moved a total of thirty-five times in the three years preceeding the study; which would indicate a mean move of 1.4 moves per respondent in the last three years.

The distribution is highly skewed to the right due to the fact that two of the women accounted for nineteen of the thirty-five moves. On the basis of this distribution, the median and modal numbers of moves would be zero. In regard to mobility, it must be remembered that these twenty-five respondents represent less than one-third of the sample; thus, no strong conclusions could be drawn about the supposed stability of residency. Our statistics indicated that the twenty-five respondents were well-settled in their current homes with the two notable exceptions cited above.

When asked what they would look for if they were to move into a different residence, nearly all the women wanted larger homes or apartments than they were living in at the time of the study. More bedroom and closet space were mentioned frequently as desirable features, and likewise, many mentioned a desire to live in "nicer" neighborhoods. It is interesting in this regard, that only one woman expressed a desire to move to a different section of the city. All other respondents gave the interviewers the impression that they preferred to remain in the general area of the city in which they resided, but would like to move to a "nicer" housing within that area.

TABLE XVIII
SOCIAL INVOLVEMENT

Amt. of Activity	Type of Activity							
	Church		School		Neighborhood		Social Org.	
	No.	Per cent	No.	Per cent	No.	Per cent	No.	Per cent
TOTAL	25	100	25	100	25	100	25	100
Inactive	14	54	11	44	12	48	20	80
Fairly active	10	40	6	24	4	16	1	4
Active	1	4	6	24	4	16	3	12
Very active	0	0	2	7.4	5	20	1	4

Table 18 indicates neighborhood and other social involvements. Of the twenty-five respondents, twelve (48 per cent) indicated they were "inactive" in neighborhood activities (which the interviewers defined as visiting with neighbors, attending neighborhood functions, having coffee with nearby residents, etc.). Five (20 per cent) of the women defined themselves as being "very active" in the neighborhood in each of two categories: "active" and "fairly active" there were four respondents. The women were then asked if their social life was satisfying to them, and if the birth of the child had impaired their social life. Twenty-three (92 per cent) felt their social life was satisfying, seventeen felt that the birth of the child had not affected their social life, eight felt that the child's birth had affected their social life. Of the two women who were not satisfied with their social life, one felt the birth of the child had affected her social life, the other did not.

In addition to the six women who had married the fathers of the child in the study, four other women were still seeing the father of the child. The other fifteen stated they were not having any social contact with the father of the child.

When asked if they had occasion to see a lawyer for any legal problem since the birth of the child, sixteen (64 per cent) stated that they had seen a lawyer, half of them reported the reason as being concerned with the child. Reasons for engaging a lawyer are given below:

Obtain child support.....	2
Adoption of child by step-father.....	2
Establish guardianship of child.....	2
Obtain divorce.....	2
Insurance claims from auto accidents.....	2
Child neglect action initiated by county.	2
Shoplifting.....	1
Appealed welfare termination.....	1
Car sold to under-age son.....	1
Not explained.....	1

TABLE XIX

MARITAL AND RESIDENTIAL SITUATIONS COMPARED WITH SUBSEQUENT BIRTHS

Present Marital Situation	No.	Residential Situation	No.	Respondents		
				Subsequent		
				Legiti- mate births	Illegiti- mate births	Birth total
Married since birth of child and still married to the same man	15	Husband other than father of the child	6	6	3	9
		Husband who is the father of the child	6	9	0	9
		Presently separated from husband	3	3	0	3
Presently divorced Not married since birth of the child but had been married prior to birth at some time	4	Independent living arrangements	4	0	2	2
Never have been married	6	Living with parents	3	0	6	6
		Independent living arrangements	3	0	3	3
TOTAL	25	TOTALS	25	18	14	32

Table 19, which is on the preceding page, shows the births that the women interviewed have experienced since the birth of the child in the study.

All the respondents were asked if they were still spending time with the father of the child in the study. Ten women answered affirmatively. Six were married to, and living with, the father of the child in the study. Two women were single, had never been married, and were seeing the father of the child, one woman was married to the father of the child, separated from him, and living independently, and one woman who had been married and divorced prior to the birth of the child in the study. Only one of these ten women reported subsequent illegitimate births.

TABLE XX
 USE OF CHILD CARE SERVICES, BY INCOME OF MOTHERS

Respondents	Incomes						Total
	\$0-100	\$101-200	\$201-300	\$301-400	\$401-500	\$501+	
Would use services	0	1	6	2	3	3	15
Would not use services	0	0	4	2	3	1	10
TOTAL	0	1	10	4	6	4	25

Table 20 above indicates the desire of the women to use other child care services in relation to the income of the women. Nine of the fifteen women expressed a preference for pre-school arrangements, the remaining six were split equally between preferences for baby-sitting service and day care services.

Twenty-three of the twenty-five respondents indicated themselves as being the person with primary responsibility for care of the child. The other two respondents indicated that paid independent help was primarily caring for their child. Both of these women were employed full-time, one was married to the father of the child, the other was not married and living independently.

Fifteen of the mothers indicated they would consider using other child care services. Six of the seven women who were employed full-time indicated a desire to use other child care services.

TABLE XXI
 USE OF SPECIFIC COMMUNITY SERVICES

Service the mothers use	Responses signifying a value of the service
Well-baby clinic	20
Public Health Nurses	19
Public agency	19
Public school	17
Vocational counseling	16
Private family agency	8
Would not use any	1

All respondents were asked which of a selected list of services they felt were most helpful to mothers like themselves. As many mothers listed several helpful services, totals of responses to this question exceeded the number of responses. Table 21 contains the information pertaining to this particular aspect of the study. As noted above, private family agencies were seen as least needed of those listed. Only two of the twenty-five respondents had utilized private family agencies; one woman received pre-natal counseling at her church's social service agency, and one woman had taken her child to the Des Moines Child Guidance Center for a limited time.

The authors were primarily concerned with the services used by the mothers following the child's birth; their views of which services were needed, what kinds of services they would like to see available, etc., but were also interested in finding out what help the mothers had sought or received in deciding to keep the child instead of relinquishing it for adoption or foster placement. The authors found that all twenty-five of the respondents felt they had complete freedom

to make the decision to keep their child. Twenty-two of the twenty-five women felt that they had adequately assessed the responsibility of keeping the child at the time of the child's birth. Twenty-one of the twenty-five women stated that they alone were responsible for the decision to keep their child. Four women stated they had received help in making the decision; two women were aided in their decision to keep the child by the father of the baby, one woman felt her parents had helped her in making the decision, and one woman said that her doctor had helped her think about the decision. All women were asked how much help they had been given by their doctors in making this decision; nineteen felt their doctors were of no help, and six indicated some help.

Pastor: and continue to pledge you my faithful-
ness in every duty
WIVES: AND CONTINUE TO PLEDGE YOU MY FAITHFUL-
NESS IN EVERY DUTY

Pastor: not to part from you

TABLE XXII

ADVICE THE MOTHERS WOULD GIVE AN UNWED MOTHER

Response	Respondents	
	Number	Per cent
TOTAL	25	100
Definitely keep the child	16	64
No definite advice in anyway	6	24
Keep child if circumstances allow	3	12
Give up child	0	0

The interviewers asked each woman "What advice would you give to a girl who finds herself in the same situation you were in?" (meaning at the time of pregnancy). Their responses were subjectively analyzed by the interviewers into categories which appear in the above Table 22.

The women who would advise a girl in a similar situation to keep the child all verbalized a strong moral obligation to the child and felt that "things always work out in the end", or "Where there's a will, there's a way". Similarly, all these respondents felt that "the child should not be punished..." Respondents not willing to venture any definite advice all felt that the decision was too personal and individualized to make general statements about it. Respondents suggesting that a woman in a similar situation keep the child "depending on circumstances" were quite similar to the respondents who ventured no definite advice, but attempted to qualify the conditions which would justify keeping or releasing the child. Though some of the women made a qualified statement that some mothers should give up their

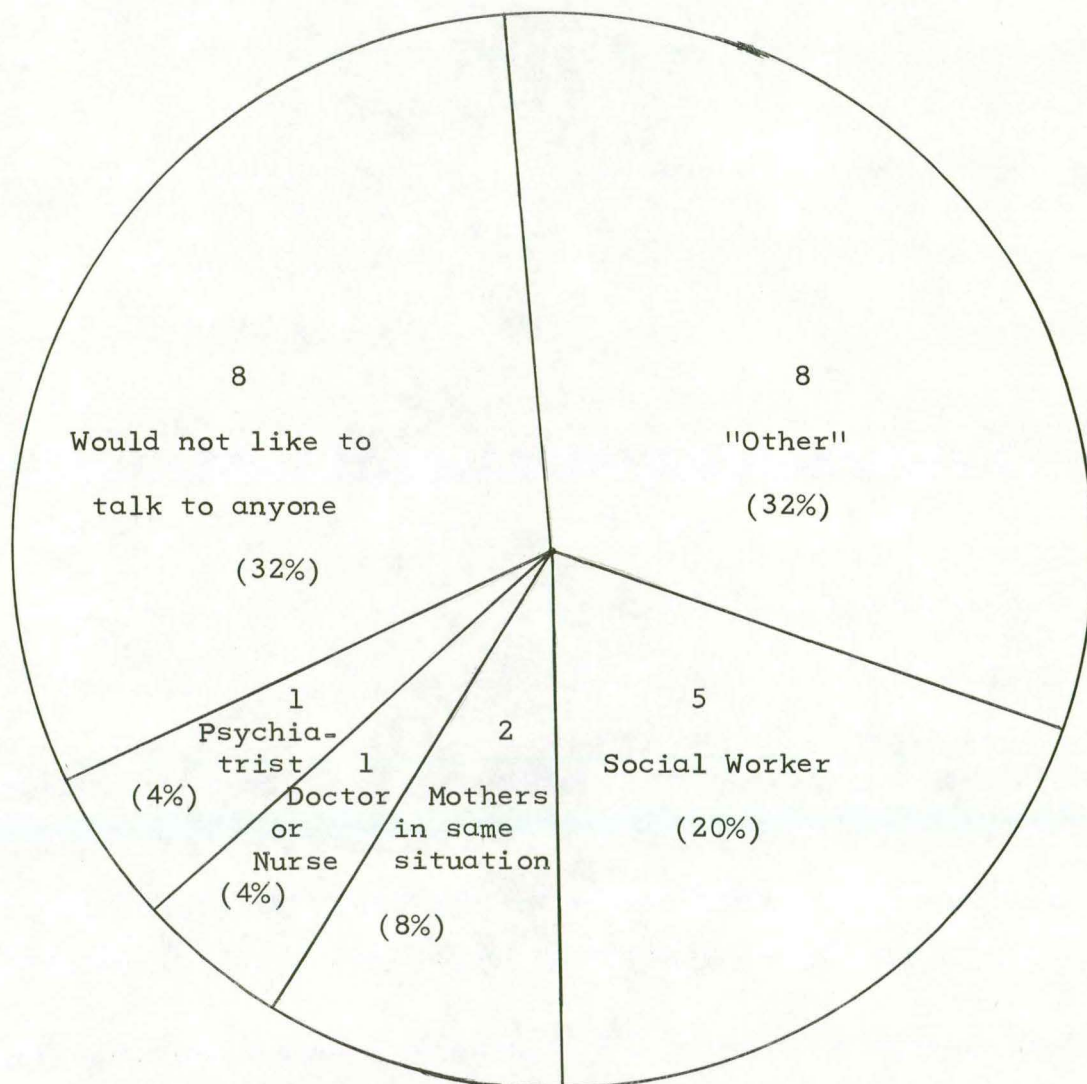
children depending on circumstances (usually "if the mother is too young"), none of the women made such a statement without qualifications. The most difficult response to categorize came from a woman who stated "Don't let no boy bother you until you are eighteen."

Three of the ten currently unwed women felt they were having more difficulty in raising their child than if they had a father figure in the home; these women were all single and had never been married. One divorced woman who felt the presence of a father figure would hinder the raising of a child was very reticent toward men and stated that "none of them are any damn good". The other six single, divorced, or separated respondents could see no appreciable differences in raising a child with or without a father figure in the home.

GRAPH II

PERSONS TO WHOM THE MOTHERS WOULD LIKE TO TALK

Person	Respondents	
	Number	Per cent
TOTAL	25	100



Graph 2 illustrates those persons to whom the respondents felt they

would like to talk. Seventeen of the twenty-five respondents stated that they would like someone available to talk with if problems arose in raising their child--problems which they may not be able to handle on their own.

Twelve of the twenty-five women indicated that they had used various resource persons to discuss problems they had encountered in raising their child. Six of these twelve indicated they had used more than one such resource person. Two women indicated they had used three resource persons, and one indicated using four (two of these three women were single, the other was married). Though more married women had used a resource person, more single women who had talked with resource persons had talked with more resource persons. Resource persons most commonly mentioned were; social worker (seven responses), mothers in the same situation, doctors and nurses (four each), psychiatrists (three responses), one each for respondent's mother, former school teacher of respondent, and the respondent's employer.

Seventeen of the women indicated they knew of some social services available in the community shortly following the birth of the child. Five of these women stated they had discovered additional child-rearing resources, and six women who had not been aware of services in the community at the time of the birth of the child had discovered some resources. Thus, twenty-three of the twenty-five women in the study were aware of some services for parents like themselves at the time of the study.

All women were asked what changes in the community would best help unmarried mothers who keep their children. The responses given to the interviewers included:

Higher welfare grant
 Higher welfare work allowance
 More granting of emergency financial help
 More humane treatment by welfare department
 Discussion group of unwed mothers with children
 Mothers group led by an expert in child rearing
 Pre-natal counseling regarding available services
 Pre-natal counseling regarding decision to keep or release child
 Health services for mother and child
 Job training and vocational counseling
 Social activities for unmarried mothers with children
 Psychiatric consultation at reasonable fees
 Planned parenthood counseling services
 Part-time employment possibilities
 Better housing available at decent rates
 More available legal services
 Attitude changes toward unmarried mothers who keep their children

Limitations

In digesting the discussion of the findings, the authors hasten to caution the reader against misinterpretation. As mentioned early in this project, only forty-four of the eighty women in the proposed sample were accounted for, and of this number, only twenty-five completed the interview schedule. Though our sample seemed fairly representative, at least by the standards suggested in Chapter 2, the results discussed herein represent approximately one-third of that sample. The sample itself was a random sample of approximately one-fourth the number of total illegitimate births at Broadlawns Polk County Hospital during the time-span of the sample. These limiting factors must be kept in mind.

Secondly, we found the women in the sample to be a relatively mobile group, and the twenty-five completed interview schedules reflect the attitudes of the less mobile of the sample group. Mobility apparently lessens with age, and our sample reflects this fact. In the study by Chan, Jaeger and Kennedy, cited earlier, nearly 80 per cent of the women receiving pre-natal care at the same hospital one year before the writing of this study were age twenty or under. Seventy (70) per cent

of our respondents were age twenty-five or under at the time of delivery. The authors can therefore conclude that our respondents are typical in respect to age at the time of the birth of the child or that there is a trend toward delivery at younger ages over recent years.

In doing our interviewing of the women, the authors discovered we had fallen victim to the not infrequent bias of looking at the unmarried mother as a younger woman in her teens. Our interview schedule reflected this bias in (a) not dealing with total size of the woman's family, (b) not adequately anticipating a substantial number of women who had married since the birth of the child, and (c) not being structured towards the needs of older women.

Maintaining uniformity in contacting the eighty women in the sample added a bias to our study. In limiting our sources of information on their present whereabouts to (a) most recent address given by the hospital, and (b) Well-baby clinic (through public health nursing) we were unlikely to obtain some of the women who had changed their names by marriage. Secondly, we were more likely to find women with low incomes who would be using available public services. However, had we gone to the city directory or marriage records, or like sources, biases in other directions would have been as likely.

Another important limitation that affected the administration of the study was the time factor. Had more time been available, a more in-depth method of contacting women in the sample might have been devised, and a more detailed interview schedule administered. Though not mentioned earlier, the average length of time used in administering the schedule was approximately 40 minutes. In regard to the time available for the study, it should be noted that the authors spent more than 400

hours in locating respondents (driving more than 600 miles in the greater Des Moines area).

The final limitation that the authors feel should be mentioned is that the results reported in this study are representative only of the twenty-five women interviewed. The results can in no way be interpreted as representative of all unmarried mothers who kept their children, or even of all unmarried mothers in the Des Moines area who kept their children.

CHAPTER V

SUMMARY AND CONCLUSIONS

In assessing this group of women who delivered illegitimate children at Broadlawns between October 31, 1962 and November 1, 1964, the authors reached some tentative conclusions and summations through subjective analysis of our personal interviews with the mothers, as well as the data given on our questionnaires. Blending the two sources of data, the authors make the following observations.

The group as a whole is a low-income group. The authors found that immediate financial obligations played an important part in the women's lives, and that most of them lived in poorer neighborhoods. Even the married women who were working to supplement family income were only in a middle or upper-lower income group. Though only half were currently receiving some sort of public assistance, all but two had received public assistance sometime between the birth of the child and the time of the study. Sixteen of the twenty-five said that public assistance had been their primary source of income since the birth of the child.

The researchers found that many of the women, when asked "What should be available to mothers like yourselves in helping to raise your children?", mentioned services now available (planned parenthood, health services, job training, legal services, etc.). Obviously they lacked knowledge of specific services now available. It was apparent to the authors that the mothers were handicapped in getting services by the lack of a centralized "single parent" referral service. With their lack of social involvement, it would be a definite

advantage to have a centralized service of some sort that would at least have all pertinent referral material.

The authors were struck by the concern of every woman interviewed over her "being a good parent". At some point in every interview the mother sought support or advice from the interviewer around the raising of her child. Services in relation to this need that the women expressed seem to be most appropriate. We would approach this problem with two ideas in mind: 1. education, and 2. support of the mother as an adequate, well-intentioned, interested, and involved parent. Educational content would deal with parenting techniques and skills, basic knowledge of child development, and the availability of services in the community. A number of women expressed an interest in visiting with other women in similar circumstances. We felt that they were basically asking for support in raising their children, and therefore this is the second point we suggest be kept in mind. As noted in the study, these women are socially withdrawn and are isolated from supportive sources even within their neighborhood. We were most impressed with their desire to be "good parents", and felt that supporting this desire would net noticeable results. We also felt that any such outreach program should help them learn to enjoy being parents and enjoy their children.

In reviewing past literature, and through our experience with these women, we came to feel quite strongly about some of the misleading stereotypes that saturate not only the community, but the social work profession when the words "unmarried mother" are spoken. When speaking of the unmarried mother who keeps her child, one should think in terms of "solo parent", not unmarried motherhood. These women have aspirations for their children as does every parent; they are interested in their child as is every parent; and they

have a strong desire to raise their child properly and give it every benefit available. Secondly, "unmarried mother" brings to mind the picture of a teen-aged girl who is illegitimately pregnant. Though this may be the case, in six years the teen-ager is a woman in her mid-twenties with a six year-old child, and in ten years she is a woman approaching thirty with a ten-year-old child. Services to "solo parents" must be structured with this thought in mind. Thirdly, "unmarried mother" brings forth a picture of the woman just mentioned-- thirty years old, single, with a ten-year-old child. What about the women who have married? A large number of our interviews were with those women, and we found them having many of the same concerns and problems their single counterparts were experiencing. . .or, for that matter, any parent was experiencing. We feel the key to successful and meaningful services to this group of women centers around the word "parent" not "illegitimate" or "unmarried".

APPENDIX

BROADLAWNS POLK COUNTY HOSPITAL
18th and Hickman Road
Des Moines, Iowa 50314

OFFICE OF THE
ADMINISTRATOR

July 30, 1968

Mrs. Edith Zober
Assistant Professor
The University of Iowa
Iowa City, Iowa 52240

Dear Mrs. Zober:

In answer to your letter of July 18, this is to confirm that this hospital is agreeable to cooperate with your newly proposed research project studying illegitimately pregnant women who delivered at Broadlawns and kept their babies.

This year your students will be visiting the mothers at home in contrast to the practice in the project last year of seeing them at our clinics or as inpatients. It will be necessary each mother fully understand the objective of the project, the absolute privacy to her life and family which is guaranteed, and the fact that she may decline to participate if that is her wish.

I trust this new project will be as satisfying and productive to the students as was the one completed last year.

Sincerely,

Signed

Charles C. Ingersoll
Administrator

cc: Mrs. V. Andersen

INTERVIEW SCHEDULE

1. Personal Data of the Mother

5. Card number: _____

6-7 Name _____

8-9 Age _____

10. Birthplace:

10.1 Polk County

10.2 Other

11. Religious preference

11.1 Protestant

11.2 Catholic

11.3 Jew

11.4 Other

12. Race

12.1 Negro

12.2 Caucasian

12.3 Other

13. Where do your parents live? (Circle one)

13.1 Polk County

13.2 Other

14. Education of Father: (Highest grade completed)

14.1 Grade school (less than 7th)

14.2 High school (7-12)

14.3 High school graduate

14.4 College (any amount)

14.5 Trade school

14.6 Other-explain

15. Education of Mother: (Highest grade completed)

15.1 Grade school (less than 7th)

15.2 High school (7-12)

15.3 High school graduate

15.4 College (any amount)

15.5 Trade school

15.6 Other-explain

16. Father's source of income:

- 16.1 Skilled
- 16.2 Semi-skilled
- 16.3 Unskilled
- 16.4 Professional
- 16.5 Other
- 16.6 None

17. Mother's source of income:

- 17.1 Skilled
- 17.2 Semi-skilled
- 17.3 Unskilled
- 17.4 Professional
- 17.5 Other
- 17.6 None

18. Is this your father's

- 18.1 first marriage
- 18.2 second marriage
- 18.3 third marriage

19. Is this your mother's

- 19.1 first marriage
- 19.2 second marriage
- 19.3 third marriage

20. How many children do your parents have altogether?

- 20.1 one
- 20.2 two
- 20.3 three
- 20.4 four or more

21. Is the child this study concerns presently in your home?

- 21.1 yes
- 21.2 no

22. If not, why not?

- 22.1 Death
- 22.2 legal separation by court
- 22.3 Adoption
- 22.3 Voluntary placement (retaining custody)
- 22.4 Other - explain
- 22.5 In home

23. If not, how old was the child at the time of separation?

- 23.1 0-1 year (under 1)
- 23.2 1-2 years (under 2)
- 23.3 2-3 years (under 3)
- 23.4 3-4 years (under 4)
- 23.5 4-5 years (under 5)
- 23.6 5-6 years (under 6)
- 23.7 In home

II. Education of the Unwed Mother

24-25 Grade completed before delivery of this child _____

26-27 Grade completed after delivery of this child _____

28. If you didn't complete your High School education,
When did you drop out?

- 28.1 Before or during previous pregnancies
- 28.2 After previous pregnancies
- 28.3 During the referred to pregnancy
- 28.4 After the referred to pregnancy
- 28.5 Completed high school

29. If you did not continue your education, which of the
following reasons best describes why?

- 29.0 No response
- 29.1 Graduated
- 29.2 No other child care available
- 29.3 Financial necessity to work
- 29.4 Didn't choose to face former classmates
- 29.5 Parents against returning to school
- 29.6 School unwilling to allow re-admission
- 29.7 Problems not related to pregnancies
- 29.8 Did not continue
- 29.9 Other-explain

30. Would you have liked to continue your education?

- 30.0 No response
- 30.1 Yes
- 30.2 No

31. Did you encounter any specific problems prior to
dropping out or since re-entering in school, if
yes, please explain.

- 31.0 No response
- 31.1 Yes
- 31.2 No

III. Financial situation

32. Since the time of the birth of this child, which of the following has been your most important source of income? (Rank the top three in order of importance)

- 32.0 No response
- 32.1 Self
- 32.2 Family
- 32.3 The father of the baby
- 32.4 The father's family
- 32.5 Public welfare
- 32.6 Friends
- 32.7 Husband--other than the baby's father

33. How would you spend an extra \$50 income this month?

34. Are you presently employed?

- 34.0 No response
- 34.1 Yes
- 34.2 No

35. If you are employed, is it

- 35.0 No response
- 35.1 Full-time (30 hours a week or more)
- 35.2 Part-time (less than 30 hours a week)
- 35.3 Not employed

36. If not presently employed, are you seeking work?

- 36.0 No response
- 36.1 Yes
- 36.2 No
- 36.3 Employed

37. If yes, do you want full-time or part-time work?

- 37.0 No response
- 37.1 Full-time (30 hours a week or more)
- 37.2 Part-time (less than 30 hours a week)
- 37.3 Employed
- 37.4 Do not want employment

38. Have any of the following reasons made it hard for you to find a job?

- 38.0 No response 38.1 Yes 38.2 No Lack experience, education, or training
- 39.0 No response 39.1 Yes 39.2 No Couldn't get child-care arrangements
- 40.0 No response 40.1 Yes 40.2 No You felt it was better to care for your child yourself
- 41.0 No response 41.1 Yes 41.2 No Poor Health
- 42.0 No response 42.1 Yes 42.2 No Age

43.0 No response 43.1 Yes 43.2 No Employer discriminated because of
having this child
44.0 No response 44.1 Yes 44.2 No Other (explain)
45.0 No response 45.1 Yes 45.2 No No difficulties

46. What is your average monthly cash income? (approximately
to the nearest \$10)

46.0 No response
46.1 \$ 0-\$100
46.2 \$101 -\$200
46.3 \$201 -\$300
46.4 \$301 -\$400
46.5 \$401 -\$500
46.6 \$501 - or above

47. If you worked following delivery, but quit, which of
the following reasons best applies?

47.0 No response 47.1 Yes 47.2 No Lack experience, education or training
48.0 No response 48.1 Yes 48.2 No Couldn't get child care arrangements
49.0 No response 49.1 Yes 49.2 No You felt it was better to care for
your child yourself
50.0 No response 50.1 Yes 50.2 No Poor Health
51.0 No response 51.1 Yes 51.2 No Age
52.0 No response 52.1 Yes 52.2 No Went on public assistance
53.0 No response 53.1 Yes 53.2 No Married
54.0 No response 54.1 Yes 54.2 No Other (explain)
55.0 No response 55.1 Yes 55.2 No Did not work

56. Have you applied for public assistance?

56.0 No response
56.1 Yes
56.2 No

57. Was application for public assistance

57.0 No response
57.1 Accepted
57.2 Rejected
57.3 Did not apply

58. If you received assistance, was this:

58.0 No response
58.1 Before the birth of this child?
58.2 Starting shortly after the birth of this child?
58.3 Beginning at some time since the child was born?
58.4 Did not apply
58.5 Did not receive

59. How long have you been on public assistance (Total)

- 59.0 No response
- 59.1 0 and under 1 year
- 59.2 1 and under 2 years
- 59.3 2 and under 3 years
- 59.4 3 and under 4 years
- 59.5 4 and under 5 years
- 59.6 5 and under 6 years
- 59.6 Didn't receive
- 59.6 Refused to answer

60. If you are no longer on public assistance, which of the following reasons best applies?

- 60.0 No response
- 60.1 Voluntarily withdrew
- 60.2 Closed by Welfare Department
- 60.3 Other - explain
- 60.4 Was never on
- 60.5 Still on

IV. Environmental factors about the mother

61. What are your present living arrangements?

- 61.0 No response
- 61.1 Independent
- 61.2 With your parents
- 61.3 With the father of the baby
- 61.4 Other relatives
- 61.5 Friends
- 61.6 Husband
- 61.7 Other
- 61.8 Both .3 and .6

62-63 How long have you lived here? _____

64-65 How many times have you moved in the past three years? _____

66. If you were to begin looking for a different place to live, what things would you like different?

V. Care of the child

67. Who primarily takes care of this child?

- 67.0 No response
- 67.1 Self
- 67.2 Parents or other relatives

- 67.3 Friends
- 67.4 Paid independent help
- 67.5 Other - explain

68. Would you use other care services if possible?

- 68.0 No response
- 68.1 Yes
- 68.2 No

69. If so, which of the following would you like?

- 69.0 No response
- 69.1 Babysitter
- 69.2 Day Care
- 69.3 Preschool
- 69.4 Foster care
- 69.5 Institution
- 69.6 Would not

70. Can you imagine a girl like you using the service of any of the following? (Explain)

- | | | | |
|------------------|----------|---------|----------------------------------|
| 70.0 No response | 70.1 Yes | 70.2 No | Well-baby clinic |
| 71.0 No response | 71.1 Yes | 71.2 No | Public health nursing |
| 72.0 No response | 72.1 Yes | 72.2 No | Vocational counseling service |
| 73.0 No response | 73.1 Yes | 73.2 No | Public schools |
| 74.0 No response | 74.1 Yes | 74.2 No | Private family counseling agency |
| 75.0 No response | 75.1 Yes | 75.2 No | Public agency |
| 76.0 No response | 76.1 Yes | 76.2 No | Would not use any |

VI. Social adjustment

77. Have you been married since the birth of this child?

- 77.0 No response
- 77.1 Yes
- 77.2 No

78. If so, are you still married to that same man?

- 78.0 No response
- 78.1 Yes
- 78.2 No
- 78.3 Not married

79. Have you been pregnant since this child's birth?

- 79.0 No response
- 79.1 Yes
- 79.2 No

8-9 If so, how many have been legitimate? _____

10-11 How many have been illegitimate? _____

12. Have you had any legal problems since the birth of this child?

- 12.0 No response
- 12.1 Yes (explain)
- 12.2 No

Do you consider yourself active in any of the following:

13. Church

- 13.0 No response
- 13.1 Very active
- 13.2 active
- 13.3 Fairly active
- 13.4 Inactive

14. School

- 14.0 No response
- 14.1 Very active
- 14.2 Active
- 14.3 Fairly active
- 14.4 Inactive

15. Neighborhood activities

- 15.0 No response
- 15.1 Very active
- 15.2 Active
- 15.3 Fairly active
- 15.4 Inactive

16. Social organizations

- 16.0 No response
- 16.1 Very active
- 16.2 Active
- 16.3 Fairly active
- 16.4 Inactive

17. Other - explain

- 17.0 No response
- 17.1 Very active
- 17.2 Active
- 17.3 Fairly active
- 17.4 Inactive

18. Do you spend time with the father of this child?

- 18.0 No response
- 18.1 Yes
- 18.2 No

19. Do you feel

- 19.0 No response
- 19.1 closer to your parents since this baby was born
- 19.2 less close to your parents since this baby was born
- 19.3 equally close to your parents since this baby was born

20. Is your social life satisfying to you?

- 20.0 No response
- 20.1 Yes
- 20.2 No

21. Do you think the birth of this child affected your social life?

- 21.0 No response
- 21.1 Yes
- 21.2 No

VII. Attitudes

22. Which one of the following primarily helped you make your decision about keeping this child?
- 22.0 No response
 - 22.1 No one
 - 22.2 Parents
 - 22.3 Father of the baby
 - 22.4 Other relatives
 - 22.5 Friends
 - 22.6 Minister
 - 22.7 Social worker
 - 22.8 Doctor
23. Looking back on the decision to keep your child, do you feel that you had freedom to decide what you wanted to do?
- 23.0 No response
 - 23.1 Yes
 - 23.2 No
24. How much did your doctor help you make plans for the baby?
- 24.0 No response
 - 24.1 No help
 - 24.2 Some help
 - 24.3 Lots of help
25. Do you feel now that you understood what keeping your child meant?
- 25.0 No response
 - 25.1 Yes
 - 25.2 No
26. What advice would you give to a girl who finds herself in the same situation you were in?
- 26.0 No response
 - 26.1 Definite keep
 - 26.2 Keep if circumstances permit
 - 26.3 Give away
 - 26.4 No definite advice
27. Do you think you are having 27.1 more, 27.2 less, 27.3 the same amount, of problems in raising your child as a woman the same age as you who is living with the baby's father?
- 27.0 No response
28. What are some of the difficult things you have had to face in raising the child?

29. Who have you talked with about problems you have had raising this child?

29.0 No response	29.1 Yes	29.2 No	Mothers in the same situation
30.0 No response	30.1 Yes	30.2 No	Social Worker
31.0 No response	31.1 Yes	31.2 No	Psychiatrist
32.0 No response	32.1 Yes	32.2 No	Minister
33.0 No response	33.1 Yes	33.2 No	Doctor or nurse
34.0 No response	34.1 Yes	33.2 No	Other

35. Would you like someone to talk with about raising your child?

35.0 No response
35.1 Yes
35.2 No

36. If so, which of the following? (rank your first 3 choices)

36.0 No response
36.1 Mothers in the same situation
36.2 Social worker
36.3 Psychiatrist
36.4 Minister
36.5 Doctor or nurse
36.6 Other
36.7 Would not

37. What do you think you will be doing 5 years from now?

37.0 No response
37.1 No future orientation
37.2 Future orientation

38. What do you think your life will be like?

VIII. Services for the mother

39. When you had the child, did you know of any services in the community to help mothers like yourself?

39.0 No response
39.1 Yes
39.2 No

40. Since the baby was born, have you found any services to help mothers like yourself?

40.0 No response
40.1 Yes
40.2 No

41. What services would you like to see available to mothers like yourself?

42. Age of respondents

- 42.0 No response
- 42.1 Up to 27 years
- 42.2 27 and up

43. Grade completed before delivery

- 43.0 No response
- 43.1 Less than 11th (junior)
- 43.2 11th and up

44. Have you moved in the past 3 years?

- 44.0 No response
- 44.1 Yes
- 44.2 No

45. Have you had any subsequent legitimate births?

- 45.0 No response
- 45.1 Yes
- 45.2 No

46. Have you any subsequent illegitimate births?

- 46.0 No response
- 46.1 Yes
- 46.2 No

Are you _____ first name _____ last name _____ ?

We are _____. We represent the Community Planning Council which is an agency made up of a number of groups and agencies in Des Moines interested in people: Some of the people the Planning Council are interested in are the women who delivered at Broadlawns Polk County Hospital and kept their babies.

The Council wonders what it has been like for these mothers and their babies. Would you be interested in giving an hour of your time to talk to us. (PAUSE) We are asking if you would talk to us not telling you that you have to.

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