

She Will Thrive: Single Mothers Nonprofit Program Development

by

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Abstract

Parenting, especially as a single mother, presents challenges beyond financial strain and relational tensions. It has implications regarding health, familial well-being, and socioeconomic status. With an increasing number of single-parent households led by mothers, the need for targeted intervention is becoming rampant. This paper explores the realities of single motherhood, focusing on health disparities and economic struggles. Drawing on qualitative data from *When She Thrives (WST)*, a nonprofit organization dedicated to supporting single mothers. This study aims to develop a program tailored to address their specific needs. Through qualitative analysis of survey responses and recorded discussions, key themes surrounding judgment, time constraints, and poverty emerged as pressing issues for mothers. Based on insights from the literature review and recommendations, a pilot program called *Strong Moms* will be created. *Strong Moms* aims to mitigate factors such as stress and loneliness that lead to persistent disparities regarding health and income. This program has the potential to address systemic barriers impacting the public health sector by providing opportunities to decrease social isolation, supplying pathways for healthier quality of life, and empowering single mothers.

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Preface

I want to thank my advisors, Dr. Fapohunda & Dr. Flick, for dedicating their time to be my readers and supporting me on this journey. They offered me patience, advice, and guidance that I will never be able to repay. I want to thank my family for providing me with unwavering support. Without them, I don't know where I would be. I also wish to thank my friends for all the late-night study sessions, words of encouragement, and holding my hand during this process.

Finally, I would like to thank *When She Thrives* for being a safe place this summer and the women who shared their personal experiences with me. I also thank the moms who joined our sessions and for being vulnerable in that space; they inspired me. I dedicate this paper to them and all the other moms worldwide who are hoping to be seen.

1.0 Introduction

Parenting is one of the most challenging jobs one can decide to take on. It has been known to create rifts in romantic and platonic relationships, reduce sleep, increase stress, and weigh on finances for the parents (Christine, 2023). Unlike two-parent homes, single parents must carry these burdens independently. One in four American homes are single-parent households, and 80% of those homes are headed by moms (Johnson 2024). Single moms are defined by *When She Thrives* as women with children aged 0-24 who are unmarried. In 1960, five percent of births were to unmarried women compared to 50% in 2019 (Gogoi, 2023). This steady increase in single motherhood challenges both the mom and the children. Single mom-headed households were five times more likely than their married counterparts to experience poverty (Kearny, 2023) and more likely to suffer from depression and other psychological disorders (Cairney & Wade, 2001). Alongside the health and financial implications for the mother, there are also negative consequences for the child. Children of single moms have a higher risk of teen births, worse educational outcomes, and poor social/emotional development (Waldfogel 2010). Notably, this neglect isn't attributed to being raised by a single mother but rather to the systemic hurdles mothers have to face.

Considering the challenges single mothers and their children endure, organizations such as *When She Thrives (WST)* have emerged to provide vital support and assistance for single mothers in Pittsburgh. *WST* is a nonprofit organization based in Pittsburgh, Pennsylvania created in 2011 by Tiffany Huff. *WST* started as a blog for single moms to talk, discover who they were outside of motherhood, and break the stigma of being a “baby mother.” After the blog's success, the version of *WST* today was formed in 2016 based on the success of the spontaneous coffee shop meetups

for moms. *WST* has since been “dedicated to equipping single mothers to move their families from poverty to prosperity through advocacy, education, personal + professional development” (*WST* 2016). For the past five years, they have served almost 580 families, reached across forty neighborhoods/communities, and produced a five-day turnaround crisis management for families (*When She Thrives* 2024). During the summer of 2023, I witnessed their outreach efforts produce tangible benefits for the women they served. They provided women with an opportunity to become published authors by contributing to a book titled *Tales of a Single Mom*, pursuing entrepreneurship ventures with financial backing, and accessing emergency financial support.

Throughout my summer with *WST*, I was surrounded by inspirational Black women who chose to share their life experiences with me. My main task for the summer was to help facilitate focus group sessions for the organization to meet grant compliance. As these women shared their experiences, I realized they had a continuous trend of choosing strength in circumstances when giving up would have been warranted. We conducted eight focus group sessions with women guided by insights from the 2019 *Gender Equity Report* (GER). GER is a report created by Pittsburgh’s Gender Equity Commission to address systematic gender barriers and strategize methods to eliminate the barriers disproportionately affecting Black women (GEC 2019). Those obstacles encompass disparities in health, poverty, income, and employment between gender and race in Pittsburgh. In response to this report, *WST* created focus group sessions to delve deeper into the specific experiences of single mothers about these topics in the Mon Valley region. Sessions covered health, poverty/income, employment, and education. As I listened to these women, I was motivated to write this paper and shed light onto a demographic that I believe is often forgotten.

The objective of this paper is to utilize the results from focus group sessions conducted by *When She Thrives (WST)* to inform the development of a program centered around establishing a secure environment, acquiring strategies to manage challenges effectively, and engaging in mentorship opportunities to support single mothers. This paper will focus on disadvantages that single moms face across the world in the areas of health, race, poverty, and income/employment. The paper will specifically report the work done during my summer internship, both benefits and limitations of a potential program, and why the organization needs a program like *Strong Moms*.

2.0 Literature Review

2.1 Increase in Single Motherhood

As society has advanced in technology, acceptance, and tolerance there has been a shift in the American Dream surrounding marriage, family, and economic achievement. The effects of this shift are seen in the rise of single-parent homes, particularly ones headed by mothers. About twenty-four million American households are headed by a single parent, and 81% are headed by single mothers (Allan, 2023). This increase can be attributed to a decline in shotgun marriages (Alkerof et al. 1996), “a rise in divorce rates, and an increase in single by-choice moms” (Hayden 2023). However, with the rise in rates of single motherhood, there is still hostility and shame towards them. Forty-two percent of Americans say that single mothers are harming society, and 24% say that couples who are unwed but live together are also a detriment to society (Hurst 2022). These negative beliefs are highlighted in the portrayal of single mothers who are lazy, inadequate, and abusing the systems in place, particularly the welfare system (Brooks 2018). These stigmas lead to racial disparities in health outcomes, specifically for Black mothers (Njoku, 2023).

2.2 Racial Disparity

In the United States, 73.7 million children under eighteen live in two-parent households (Prine 2016). However, when broken down by demographic, 74.3% of these children are White, and only 38.7% of them are African American (Prince 2016). According to this statistic, thirty-

three out of one hundred African American children will be raised by a single mom compared to six out of one hundred for White families. These disproportionate rates of single motherhood can be attributed to the history of enslaved people in America. During slavery, African American children were forced to follow the status of their mother and take on their last names allowing many children to go unclaimed by their fathers. Free fathers were not allowed in slave cabins, forcing mothers to assume the head of house role while fathers were working to buy back the family. African Americans were legally not allowed to marry each other creating a systematic breakage in the family lineage. In the absence of spouses and mates, the Black single mother and her children were the only family structure, perpetuating the continued absence of fathers in families (Omolade, 1987).

While discussing racial inequities in single motherhood, it is important to note that mass incarceration plays a significant role in why many Black families are female led. Although Black men are less than 8% of the U.S. population, they make up almost 40% of the United States prison population (Lewis & Hong 2020). Over one million African American men are incarcerated today and roughly half of them identify as being a father (Galoustian, 2023). More than half of these fathers reported being the financial breadwinner in the household resulting in mothers having to fill in the gap once they are incarcerated. The removal of the father forced many women into roles they didn't plan for and deprived many African American children of a two-parent household. As we begin to understand the historical context of African American family dynamics, I would like to broaden the perspective and explore the health disparities that single mothers face.

2.3 Health Disparities

Throughout this section, health will be defined as “the absence of any disease or impairment, a state that allows the individual to adequately cope with all demands of daily life, and a state of balance, that an individual has established within himself and between himself and his social and physical environment” (Sartorius 2006). This definition encompasses all medical aspects of physical health, mental health, and one’s personal belief about their health experiences. Research has shown being a single mother has been associated with being a risk factor for psychological and physical distress (Avison,1997). Single mothers endure a heightened level of psychological stress from caregiving responsibilities, financial management, and other daily unaccounted-for experiences (Avison 1997). Compared to married mothers, single moms are more likely to exhibit depression, anxiety, low self-esteem, alcohol dependency, social isolation, and have an overall poorer quality of life (Kim & Kim 2020) (Daryani et al 2016). They also experience higher levels of chronic stress and low social support influencing the disparity in health management.

Psychological health manifests in the physical body which broadens the health inequities between mothers. Single mothers have been found to have increased blood sugars, more hypertension, increased cholesterol, decreased breathing ability, and elevated C-reactive protein levels than married and partnered mothers (Daryani et al 2016). Due to the chronic stress of parenting and lack of time, they are also less likely to practice preventative health behaviors and self-care beliefs. The impact of single motherhood is also seen in clinical trials surrounding cardiovascular health. Dr. Natalie Stokes orchestrated one of these trials and found that single parents were 1.31 times more likely to have lower optimal cardiovascular health than their married counterparts (Stokes et al 2020). Dr. Young Le found comparable findings in her study indicating

that lone mothers were more likely to experience a heart attack, stroke, or congestive heart failure compared to married counterparts (Young, et.al. 2005). While researchers have confirmed that being a single mother increases your chance of negative health outcomes (Rousou, 2013). Other injustices in income and employment can't be overlooked.

2.4 Income Poverty and Employment

Despite most single mothers being a part of the workforce, they are at a socioeconomic disadvantage due to being the sole earner of the household (Avison 1997). In 2019 25% of single mothers lived below the federal poverty line, and 24% lived below the 200% poverty line (Radey 2023). Single moms are less likely to hold a flexible job with good benefits and a livable wage (Son & Bauer 2010). Many employers view moms as having less education, less work experience, and overall being less beneficial to the labor market (Damaske et al 2017).

Considering these challenges, Dr. Marilyn Bruckman of Tennessee Tech University conducted a study to explore the impact of childcare responsibilities and the financial strain on single mothers. Many of the mothers she spoke to expressed the “complexity of juggling limited housing options, lack of reliable transportation, constrained economic resources, and nonstandard working hours” (Bruckman 2018). BYU Marriott conducted a study revealing that 75% of single mothers in Utah could maintain their families' current standard of living for less than a month if they had an interruption in their income. Additionally, 35% of Utah single mothers could not maintain their families for one week if they lost their income (Humberstone 2007). These findings resonate universally, as single mothers have been sharing their struggles surrounding poverty and the impact it has had on their day-to-day lives. Focus group interviews conducted by BYU Marriott

revealed that the biggest everyday challenge is having enough money to survive or spending time with their kids (Humberstone 2007). Qualitative researchers have highlighted how the “stricter welfare regulations that focus on work requirements, in addition to unmet childcare needs and unpredictable schedules at low-wage jobs have contributed to work-family conflicts for low-income single mothers” (Marti-Castaner et al 2022).

Dr. Bruckman emphasizes these challenges by highlighting the lack of resources in impoverished neighborhoods that many single moms live in. A mom from the focus groups discussed living in the “hood” and wanting to move out due to the traumatic events she and her kids have seen daily. She talks about a lack of financial stability and due to being dependent on government assistance, she doesn’t see herself affording to move out or ensure her child's safety. Although government assistance has been a help to many single moms across the country, it has created a double-edged sword for others. The complexity of using assistance is when Bruckman discusses her inability to relocate due to depending on government assistance. (Bruckman, 2018). Researchers have stated that the safety net may “unintentionally force recipients to find low-paid jobs and forfeit opportunities that may bring them out of long-term poverty (Marti-Castaner et al 2022) The burden that single low-income mothers experience trying to balance work, parenting, and welfare requirements can be known as a triple role overload (Marti-Castaner et al 2022). The demand of triple role overload, “combined with a culture of distrust, consumes energy, emotion, and time. This diminishes the likelihood these working mothers will join efforts to change work, family, and social welfare policies (Freeman & Dodson 2020).” In response to the significant challenges encountered by many single mothers, there has been increased research in identifying ways to lessen the burden.

2.5 Intervention

Research has shown that social support and maternal education positively influence “maternal–child relations, child psychosocial functioning, and family functioning (Lipman 2007).” Educational opportunities for mothers have also led to an improvement in child competence and school performance (Lipman 2007).” Lipman held ten, 90-minute sessions to investigate how much social support and maternal-centered conversation helped moms. Three months after the intervention ended, she found that mothers had shown significantly improved mood and self-esteem. Eighteen months later at the second follow-up she found that when compared to the control groups there was no long-term significant difference. She concluded that “focused, time-limited, group-based support programs, on their own, have limited potential to improve the quality of life of low-income single mothers over the longer term” (Lipman 2007). Dr. Jane Barlow found similar results as Lipman in her psychosocial health study concluding that “the use of parenting programs to improve the short-term psychosocial wellbeing of parents. However, she believed there needed to be more follow-up studies to ensure the intervention was successful in the long term. (Barlow 2014). Overall, the literature emphasizes interventions aimed at alleviating stressors such as insufficient support and emotional instability, with the aim of fostering positive health behaviors and economic advancement rather than directly addressing those disparities. Thus, while social support has proven to be a great short-term intervention for the disparities that single moms face, there should be consideration when creating the program for *WST*. Although informed by the qualitative study conducted, further research needs to be done to ensure long-term success. The methodology of the qualitative study conducted will be presented in the section following goal and objectives.

2.6 Goal and Objectives

The goal of this pilot program is to foster peer support, promote long term coping skills and mitigate the factors such as stress/loneliness that led to the larger disparities in health and income that were mentioned throughout this paper. The objectives are:

- establishing a supportive community through 65% retention of attendees
- facilitating group sessions by at least 2 *WST* peer mentors
- completing feedback survey by 95% of participants
- utilizing Cognitive Behavioral Therapy (CBT) strategies after program completion by 50% of participants

3.0 Methods

3.1 Participants

3.1.1 Recruitment

Due to grant funding requirements stating that participants need to currently reside in the Mon Valley area, potential participants outside of Mon Valley were excluded. The Mon Valley area consists of these fourteen neighborhoods: West Homestead, Homestead, Munhall, Rankin, Whittaker, Braddock, Duquesne, McKeesport, Port Vue, Liberty, Dravosburg, Glassport, and Clairton. Recruiting was prioritized in the West Mifflin, Whitaker, Munhall, and Homestead communities due to *WST* neighborhood target goals. Additionally, participants were required to be at least 18 years of age and a single mother aligning with *WST*'s mission. The sample consisted of 22 Black single mothers from the Mon-Valley region of Pittsburgh, Pennsylvania. Initially 27 participants were registered to attend but five of the women never showed up. Out of the 22 mothers, eighteen of them attended at least four out of the eight sessions.

The program coordinator and I collaborated on creating and distributing flyers (Figure 1) to local deli markets, human services departments, and childcare offices. A QR code linked to a survey with the purpose of getting to know potential participants was attached to the flyer. The survey asked those who scanned about their neighborhood information, childcare needs and contact information.

DO YOU WANT TO GET PAID TO CREATE CHANGE IN YOUR COMMUNITY?

WHEN SHE THRIVES

WE WANT TO HEAR YOUR VOICE

When She Thrives is asking you to join our Single Moms Said initiative. A once-a-week, two-hour round table discussion on health, poverty, income, employment, and education.
Space is limited!

Benefits :

- Paid Opportunity
- Food Provided
- Childcare Available
- Community Impact

Participants must :

- Be 18+
- Be a single mom
- Live in West Mifflin, Homestead, Munhall or Whitaker

SCAN ME

Figure 1

3.2 Data Collection

WST received a grant from the Jefferson Regional Foundation Community Voice Fund project to address important barriers to healthy living through convenings. The focus group sessions was proposed, titled *Single Moms Said*, and were conducted at the *beSocial Resource Center* located in the Monview Heights Apartment complex. There was a total of ten, two-hour

sessions conducted from June 2023 to August 2023. The program began with an introduction session providing an overview of the organization's mission and summer activities. There was a final wrap up session for the ladies to reflect on their experiences during the program. The remaining eight sessions were focused on a segment from the 2019 Gender Equity report and broken down in Table 1 below.

The program coordinator took attendance during each session to compare QR signups and attendance. At the end of each session, all attendees were given \$50 compensation in cash. During (A) sessions, the program coordinator presented the findings of the 2019 Gender Equity report to the group. She informed the women that that across all four categories (Health, Income/Poverty, Education & Employment) Black women were trailing behind all other demographic groups in Pittsburgh. Concluding that Pittsburgh was the worst place for a Black woman to live based on their low rankings. Based on this information they discussed the relevance in their daily lives and their agreement by category.

During the workshop sessions, ladies were divided into groups of 4-6 members depending on attendance and given questions/scenarios to create interventions based on what they learned from (A) sessions All workshop (B) sessions are based on what was discussed in the week prior (A sessions) . A total of 20 hours of childcare was provided; two hours per session.

Table 1 Breakdown of Sessions

Group Session Number	Topic
1 (A)	Health
1 (B)	Health Workshop
2(A)	Poverty and Income
2(B)	Poverty and Income Workshop
3(A)	Employment
3(B)	Employment Workshop
4(A)	Education
4(B)	Education Workshop

3.3 Survey

At the end of each (A) session participants were given a three-question survey asking them to reflect on what they heard during the session. The questions included:

1. What is your greatest challenge regarding (specific topics)?
2. What can YOU do to create change for your family and community regarding this (topic)?
3. What resources do YOU need to be able to do what is identified in #1?

3.4 Data Analysis

Participants wrote down responses to questions on survey paper distributed at the end of each session. Once all papers were received data was transferred into a google document by me. Data was reviewed and themes were created based on categories of word choice used by participants in their responses. An example would be if most participants used the word happy in their response, then happy would be collated from all the responses as the themes emerge. For the survey (Table 2), three themes emerged from question #1, two emerged for question #2 and two for question # 3. Two major themes emerged from the focus group sessions (Table 2). Focus group sessions were recorded on the company iPad by the program's coordinator. Out of the eight content sessions, there were only four recordings available that ranged from 50 seconds to 5 minutes with an average of about two minutes long. Due to the lack of content, it was hard to decipher the full message from each clip. All data analyzed and the results collected will be used to inform *WST* in designing a program. Under IRB purview this study is not human subjects research that would be intended for generalizable knowledge and did not need approval.

Table 2 Themes

Survey Questions	Theme	Quotes
<p>1. What is your greatest challenge regarding (specific topics)?</p>	<p>Judgement, Poverty, Time Constraints</p>	<p>“My greatest challenge is profiling the poor and not giving us a chance. When they do give us a chance, we must go through so many hoops because we want a better life.”</p> <p>“ I don’t have enough money to do anything. I am unable to do the simplest things for my children. I can’t even move. I still live in the same neighborhood my son was murdered in 5 years ago.”</p> <p>“My mental is as a mom is like I always must set my feelings aside and never no time to think about how things affect me. I always get to keep going and have no time to help myself out because I have no time for myself....”</p>
<p>2. What can YOU do to create change for your family and community regarding this (topic)</p>	<p>Sharing Information, Income</p>	<p>“Advocate more, find resources, and share x6.”</p> <p>“Get a better job to make more money and move to a safer environment for my kids and me.”</p>
<p>3. 3.What resources do YOU need to be able to do what is identified in #1?</p>	<p>Support Groups, Helping Hand Organization</p>	<p>“I feel like we need more support spaces, more people I can communicate with about my mental health.”</p> <p>“More helping hands or organizations are needed because there are people that suffer every day. There aren't enough resources and programs that become more supportive and open for things/people with great ideas.”</p>

Table 2 (cont.)

Focus Group Sessions	Theme	Quotes
	Neglect in Healthcare Poverty	“I felt as though I had died when giving birth to a male doctor because I felt so ignored.” “There is so much hidden information resources that exist are hard to come by, and when the resources are found out by some people, they keep them to themselves like secrets.”

4.0 Results

Demographic information regarding income, education level, and age, wasn't collected. All the women who participated in this study identified as Black women and resided in West Mifflin, Whitaker, Munhall, and Homestead communities.

4.1 Survey

4.1.1 Greatest Challenge

When we asked the women “ What is your greatest challenge regarding (topic)?” Three themes became clear in their responses: judgment, poverty, and time constraints. These themes encapsulated the challenges that mothers believed they faced when discussing health, income & education in their daily lives.

Our goal was to find what moms viewed as a barrier to their day-to-day success in these areas. Based on the responses, three dominant themes surfaced: judgment, poverty, and a lack of time to address their children's needs and personal needs. These themes encapsulated the challenges that mothers believed they faced when discussing health, income & education in their daily lives.

The first theme that came from responses for question #1 was the sense of **Judgment**. The women expressed feelings of judgment for not taking care of their health, during the job application process, living in poverty, and not being able to further their education. One participant

stated, “My greatest challenge is profiling the poor and not giving us a chance. When they do give us a chance, we must go through so many hoops because we want a better life.” Another woman talked about “Being profiled as a black woman” making job-seeking harder. Furthermore, the participants discussed the detrimental effects of being judged based on past criminal backgrounds, which limited their opportunities. Their collective experiences emphasized the impact of societal biases on the lives of these mothers.

Poverty is the second theme that arose from responses for question #1. This theme appeared to be the most salient in the women's answers. One mom talked about the struggle of simply not having enough “ I don’t have enough money to do anything. I am unable to do the simplest things for my children. I can’t even move. I still live in the same neighborhood my son was murdered in 5 years ago.” Echoing this sentiment, another woman shared her disdain for her community but the inability to afford to move. She stated, “ I live in the community I live in because I can’t afford to move somewhere else. I must make more money to be better. I can’t find healthy food options at the grocery store to even offer my kids. The ‘hood’ isn’t a safe place to raise kids. I lost a lot of my childhood friends to shootings that seem to only happen in Black communities. My daughter saw someone get shot at a young age & everyday it's hard trying to assure her it's safe to still want to play but I don’t know what life is going to bring.” One woman hopes to receive income-based housing so she can move on. “My greatest challenge is getting out the projects for a better living and safe environment for my kids. I wish I didn't have to live paycheck to paycheck and there was more income-based housing.” Alongside the discomfort of living paycheck to paycheck, some moms mentioned not earning enough to progress in their lives.

Time Constraints is the third theme from the first question. One woman chose to share the importance of her mental health by saying “If my mind is not right, it's very hard to stay

motivated; can't work to move, can't keep a job, can't focus!" Another woman agreed with this and said "My mental [health] as a mom is like I always must set my feelings aside and [there's] never no time to think about how things affect me. I always get to keep going and have no time to help myself out because I have no time for myself. My mental is important, but I don't talk about anything cause I'm always the one people vent to and everyone leans on me. (No one checks on the strong friend)." Someone else talks about choosing herself and focusing on the things she can change, "...Finding time to myself to reflect on myself. Getting more rest and not stressing about what I can't change." A couple of moms mention the hardship in finding opportunities that align with their children's lives. For example, a mom indicated that, "Finding employment that fits my children's school schedule" and another said, "I can't go back to school because I won't have support with my children." Overall, these narratives reflect a fear and struggle among mothers to achieve a balance that prioritizes themselves and their children simultaneously.

4.1.2 Creating Change

Question #2 asked how moms felt they could take ownership of their communities and influence the change they yearn to see in their lives. Two major themes materialized: sharing information and income.

Sharing Information was the most popular response among moms in terms of how best they feel to create change. One mom stated, "Advocate more, find resources, and share x6." Another woman said, "Spread the word on eating healthy for all ages because it starts when you're young." Thinking more about longevity, one mom stated "One thing that can be done to create change is to get involved and find out where you can help. Creating or starting an organization and researching how to get funding to help communities." Other moms believed in "Staying

positive/trying to work out more, having families talk more, and communicate with more people in the community.” Although some agreed that sharing was the backbone of creating change, some believed finances need to be in order first.

Income across the board was equated with a better way of living. One mom said she would want to “get a better job to make more money and move to a safer environment for my kids and me.” Other moms agreed and the majority said, “finding a higher paying job” and “training to create their own business that eventually employed others.” Despite most women being hopeful of creating change, one mom clearly stated “Truthfully, I don’t know what I could do to create change. When you think you are doing something right there is something that goes wrong.” Her statement highlights the complexity and ongoing battle of moms trying to be optimistic about improving their circumstances.

4.1.3 Resources

The last question posed to the ladies was “What resources do YOU need to be able to do what is identified in #1?” Throughout our time with the women, our goal was to empower them to identify their challenges and the resources needed to alleviate them. The two themes that came from the women’s responses were support groups and helping hand organizations.

Support Groups and places to talk were the women's most requested resources. One participant stated, “I feel like we need more support spaces, more people I can communicate with about my mental health.” Most of the women discussed wanting support groups to talk more about their mental health, however there was one who expressed a desire for more than just a conversation. She expressed “Wanting support groups that will help spread word on funding. Groups that will help with money donations, teach people skills, alongside listening to them. Come

up with different ideas to put things into place to help people....” Her desire for more than just a conversational support group was the bridge between those who wanted conversational support and those advocating for more organizational involvement.

Helping Hand Organizations was the second most requested resource of service from the moms. One woman shared that she would like “More nonprofits like ‘*When She Thrives*’ to help put us in the right direction and give us a chance to reflect on our life and family.” Others spoke about wanting more organizations to host job fairs, and programs that will invest in them, and overall help them with things such as housing & transportation. One woman summarized the group's desire eloquently stating “ More helping hands or organizations are needed because there are people that suffer every day. There aren't enough resources and programs that become more supportive and open for things or people with great ideas.”

4.2 Focus Groups

The two themes from the data collected during the focus group sessions were neglect in healthcare and living in poverty.

The women discussed feeling neglected and as though their rights were violated. One woman stated, “I felt as though I had died when giving birth to a male doctor because I felt so ignored.” Another reiterated the feeling of being ignored when she shared her story of requesting to have her placenta saved. She told her healthcare team before delivering her child and during labor, she wanted to take it back home with her. However, after delivering her child the nurses rushed out with her placenta and she was too tired from labor to fight it. During this session all the women spoke about having a traumatic birth and how they believed being Black played a role in

their experience. The discussion about health experiences transitioned to the women's account of navigating living in poverty.

Living in Poverty as a single mother feels like “putting out fires” the women shared. The metaphor highlights the consistent juggling of bills, appointments, kids, and familial tensions. Eventually, the conversation shifted to a more resource-focused and how everything is hidden. One mom stated, “There are so many hidden resources that exist that are hard to come by, and when the resources are found out by some people, they keep them to themselves like secrets.” When women were able to learn more about resources and call “they were often bounced around from person to person and eventually are hung up on.” There was overall agreement and gratefulness for this group expressed. Many of the women expressed that before this group, they felt like they were on an island putting out the fires alone. Now they had a team of firefighters to call on and assist them in “moving up” in life.

5.0 Discussion

In this study, we explored the results of the 2019 *Gender Equity Report* (GER) and related it to the lives of single moms in the Mon Valley region. Five themes surfaced from our study (survey questions) highlighting the women's experiences: Judgment, Poverty, Time Constraints, Neglect & Support. Our results indicate that the women can relate to the results of the GER occurring in their lives i.e., "putting out fires" but lacked the language to articulate what was occurring until our sessions.

There was an overwhelming sense of agreement in our sessions that the women felt judged for being single mothers. This sentiment corroborated what a 2020 survey conducted by Single Parents Rights found that "96% of respondents reported witnessing or experiencing discrimination based on being a single parent (Frankpitt, 2023)". Despite the acknowledgment of discrimination between single moms, academic research in the area is limited. This study hopes to create a push for more quantitative research on the discrimination that single mothers go through.

Participants also articulated feelings of poverty and struggling to support their families. This aligns with the findings of the National Women's Law Center's study that reported 31.3% of single mothers live in poverty compared to 5.4% of married mothers (NWLC2022).

Time constraints being a prevalent theme echoed previous research in the field. Similar to experiences shared by mothers in our study, other studies on single motherhood highlight a lack of resources such as time, and money, with 96% of participants confessed that they did not get sufficient time to spend with their children. (Long et al., 2020; Nisa, 2013)."

Moreover, all participants in our study identified as Black, a marginalized group historically discriminated against in healthcare settings (Washington, 2022). Institutionalized

racism has led to the perception of Black women as having higher pain tolerance, lower quality of care, mistrust in healthcare, and overall dissatisfaction with care (Chambers et al 2022). While research on single moms feeling neglected in healthcare is scarce, our participants' experiences are rooted in the intersectionality of race and single motherhood. Future research should explore the intersectionality of race and single motherhood more closely.

Transitioning from this call for further exploration, it is essential to highlight that the women in this study expressed a desire for more places where they could find support and resources to unpack the topics these sessions called attention to. Studies by Dr. Lipman et al. & Dr. Barrow et al. found that social support-based programs provided significant positive short-term results for the mothers that participated, however, there needed to be additional intervention for long-term success. Based on her scoping review Dr. Taylor found that the “success of social support-based programs was rooted in mom’s need for emotional support, and desire to have help when needed (Taylor, 2017)”. It has been reported that using cognitive behavioral therapy tactics is effective in increasing self-esteem and self-efficacy in single moms (Taylor 2017, Atkins 2010). They proposed that “a strength-based multicomponent group intervention that provides peer support in a group environment, and that additionally combines elements of cognitive-behavioral training, would be highly effective at improving adjustment in single mothers.” Anecdotally, the results of this study are similar to other mommy blogs such as *Struggles of Single Moms: 7 Major Challenges* by Sylvia Smith. Future research should include the voices of single moms to ensure that the lived realities of the individuals involved are reflected in the studies. In doing so, this helps enhance the validity and relevance of the study findings.

5.1 Limitations

Although the data collected served the purpose of informing the organization of a future program design, some of the data collected was inaudible and missing from our analysis. Additionally, demographic information that could influence participants' perspectives was not collected, limiting our understanding of their positionality. Furthermore, this organization is open to all demographics; however, the women in these sessions identified as Black. This homogeneity may limit the generalizability of findings for single moms with different experiences and needs. The organization needs to be mindful of these biases when conducting similar studies.

5.2 Recommendations

In agreement with the information provided by the focus group sessions, survey questions, and experiences shared by the women, I recommend that *When She Thrives* create a pilot program called *Strong Moms*. *Strong Moms* will focus on providing mothers with a space to convene and discuss topics most pertinent to them while incorporating CBT strategies such as journaling and relaxed breathing for long-term effectiveness.

Considering that *WST* is a pilot program, I would recommend once-a-week meetings for 5 weeks in July/August during *WST's* slower programming season (Table 3). Recruitment for this program would be done through the *WST* social network and previous members of the focus groups. *WST* has a very active alumni base and can be called on to function as peer mentors for the women. Peer-administered interventions are found to be particularly effective for use with single-mother populations and harp on the continuous need for social support (Taylor 2017). Peer

leaders and group attendees will choose from topics to discuss throughout the 6 weeks. *WST* will provide childcare services and dinner for all attendees as part of their mission and that will continue throughout this program. The first session will be an introductory meeting, introducing the ladies to each other and outlining the organization's mission. During this session, the ladies will discuss the topics they would like to cover in the following two sessions and a sequential plan will be created. The organizational therapist will lead the fourth session to introduce the women to cognitive behavioral therapy (CBT) and the benefits it may provide to them. Session five will be held two weeks after session four to allow the mothers to provide feedback.

After the pilot program is over, *WST* can decide whether they would like to expand and offer it as a permanent program. If they choose to do that, I recommend continuing with six sessions but hosting it twice a year. This will allow moms a chance to provide feedback on the skills they learned and show long-term improvement. This pilot program aims to foster peer support, promote long-term coping skills, and mitigate the factors such as stress and loneliness that led to the larger disparities in health and income mentioned throughout this paper. This program will aid in diversifying *WST* program catalog while maximizing utilization of their alumni network, aligning with their organization's 2024-2025 program year goal.

Table 3 Sessions

Strong Mom's Session #	Session Title
1	Introduction to Program
2	Group Decision
3	Group Decision
4	Group Decision
5	Cognitive Behavioral Therapy Session (Take home Skills focus)

6.0 Conclusion

This paper sought to raise awareness of the challenges encountered by single mothers and propose an intervention to address them, amid statistics indicating a rise in single-parent households led by mothers. The challenges faced by single moms are multifaceted and deeply ingrained in society. From financial strain to health inequity, the challenges they experience not only impact them, but their children as well. Organizations like *When She Thrives* are pivotal in championing the betterment of single mothers' circumstances, actively working to mitigate these disparities and foster an environment where single moms can prosper. Their mission of moving mothers from poverty to prosperity can be endorsed by those who have participated in their programs. Drawing on research and organizational experience, the recommendation is for *WST* to create a pilot program called *Strong Moms*. This program aims to provide mothers with a supportive environment and incorporate cognitive behavioral theory to address long-term challenges. It will include weekly meetings, peer mentorship, childcare services, and dinner for those who attend. While *Strong Moms* will directly impact the women who join the program it will have a greater indirect impact on the public health space. Programs such as this can improve maternal and child health outcomes by providing resources to future expecting moms and reduce health disparities in this community that have been linked to social isolation and poor mental health. It also may help mitigate the risks associated with single-parent households that lead to adverse childhood experiences and foster a greater sense of community. Through targeted interventions such as *Strong Moms*, *WST* can continue to make a meaningful impact on the lives of single mothers and empower women to thrive.

6.1 Search Process

The literature search was conducted using the PubMed and Ebscohost databases to search peer-reviewed journals focusing on health disparities, income disparities, and intervention. The search protocol used was curated with the help of the health science librarian Helena Venville. Table 4 will outline the search history.

Table 4 Search Inquiries

	((single OR unmarried) NEAR/2 mother*) AND ((disparity* OR equity* OR inequality* OR inequity*)) AND (poverty* AND employment AND health)
	((single+OR+unmarried)+N3+mother*)+OR+AB+((single+OR+unmarried)+N3+mother*)+)+AND+(+TI+((disparit*+OR+equit*+OR+inequalit*+OR+inequit*))+OR+AB+((disparit*+OR+equit*+OR+inequalit*+OR+inequit*)))
	Single or unmarried or lone mother
	Poverty WELFARE or government assistance
	((single+OR+unmarried)+N3+mother*)+ AND intervention
	(single OR unmarried) NEAR/2 mother*) AND ((disparity* OR equity* OR inequality* OR inequity*)) AND (employment)
	((single OR unmarried) NEAR/2 mother*) AND ((disparity* OR equity* OR inequality* OR inequity*)) AND (health)

	((single OR unmarried) NEAR/2 mother*) AND ((disparit* OR equit* OR inequalit* OR inequit*)) AND (health OR stress)
	((single OR unmarried) NEAR/2 mother*) AND ((disparit* OR equit* OR inequalit* OR inequit*)) AND (intervention)

References

- Ackerman, C. E. (2017, March 4). *CBT techniques: 25 cognitive behavioral therapy worksheets*. Positive Psychology. <https://positivepsychology.com/cbt-cognitive-behavioral-therapy-techniques-worksheets/>
- Allan, D. G. (2023, August 8). *Let us now praise single moms*. CNN. <https://www.cnn.com/2023/05/14/health/single-mom-parenting-wellness/index.html>
- Atkins, R. (2010, September). *Self-efficacy and the promotion of health for depressed single mothers*. Mental health in family medicine. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3018952/>
- Barlow, J., Smailagic, N., Huband, N., Roloff, V., & Bennett, C. (2014). *Group-based parent training programmes for improving parental psychosocial health*. Pub Med. <https://pubmed.ncbi.nlm.nih.gov/24838729/>
- Bruckman, M. E. (2018). Experiences of Low-Income Single Mothers in Selecting Early Child Care.
- BYU Marriott Alumni Magazine. (2022, August 5). *Single mothers & self-reliance*. Single Mothers & Self-Reliance . <https://marriott.byu.edu/magazine/faculty-research/single-mothers-self-reliance>
- Caroll, L. (2015, May 15). *“Drip, Drip, Drip” of Daily stress: Single parenting takes health toll*. TODAY. <https://www.today.com/health/single-parenting-takes-toll-later-life-t21306>
- Chambers, B. D., Taylor, B., Nelson, T., Harrison, J., Bell, A., O’Leary, A., Arega, H. A., Hashemi, S., McKenzie-Sampson, S., Scott, K. A., Raine-Bennett, T., Jackson, A. V., Kuppermann, M., & McLemore, M. R. (2022, May 4). *Clinicians’ perspectives on racism and Black Women’s Maternal Health*. Women’s health reports (New Rochelle, N.Y.). <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9148644/>
- Daryanani, I., Hamilton, J. L., Abramson, L. Y., & Alloy, L. B. (2016, October). *Single mother parenting and adolescent psychopathology*. Journal of abnormal child psychology. [https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5226056/#:~:text=More%20specifically%2C%20single%20mothers%20are,of%20emotional%20support%20\(Lipman%2C%20Oxford](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5226056/#:~:text=More%20specifically%2C%20single%20mothers%20are,of%20emotional%20support%20(Lipman%2C%20Oxford)
- DePaulo, B. (2022, June 19). *Why have Americans become more hostile toward single mothers?*. Medium. <https://medium.com/fourth-wave/why-have-americans-become-more-hostile-toward-single-mothers-ab1825e59b75>

- Frankpitt, S. (2023, February 20). *“heroes in a Broken Home”*: How we talk about single mothers. Medium. <https://medium.com/@shfrankpitt/heroes-in-a-broken-home-how-we-talk-about-single-mothers-d55fcb7dbce4#:~:text=Single%20mothers%20face%20a%20wealth,is%20a%20very%20quiet%20discrimination>
- Freeman, A., & Dodson, L. (2021). Triple Role Overload: Working, Parenting, and Navigating Public Benefits. *Journal of Family Issues*, 42(8), 1737-1761. <https://doi.org/10.1177/0192513X20949599>
- Fry, R. (2023, June 28). *A record-high share of 40-year-olds in the U.S. have never been married*. Pew Research Center. <https://www.pewresearch.org/short-reads/2023/06/28/a-record-high-share-of-40-year-olds-in-the-us-have-never-been-married/>
- Gogoi, P. (2023, October 22). *Why children of married parents do better, but America is moving the other way*. NPR. <https://www.npr.org/2023/10/22/1207322878/single-parent-married-good-for-children-inequality#:~:text=Almost%20half%20of%20all%20babies%20born%20in%20the%20U.S.%20were,to%20have%20never%20been%20married>
- Hayden, C. (2023, November 21). *What are the 4 types of single parents?*. Hello Divorce. <https://hellodivorce.com/already-divorced/what-are-the-four-types-of-single-parents#choice>
- Huff, T. (n.d.). *Our mission*. When She Thrives. <https://www.whenshethrives.org/our-mission.html>
- Hurst, K. (2022b, March 11). *Rising share of Americans see women raising children on their own, cohabitation as bad for Society*. Pew Research Center. [https://www.pewresearch.org/short-reads/2022/03/11/rising-share-of-americans-see-women-raising-children-on-their-own-cohabitation-as-bad-for-society/#:~:text=A%20majority%20of%20men%20\(59,34%25%20of%20men\)](https://www.pewresearch.org/short-reads/2022/03/11/rising-share-of-americans-see-women-raising-children-on-their-own-cohabitation-as-bad-for-society/#:~:text=A%20majority%20of%20men%20(59,34%25%20of%20men))
- Johnson, E. (2024, January 5). *Single Mother Statistics for 2024: Surprising facts about single moms*. Wealthysinglemommy . <https://www.wealthysinglemommy.com/single-mom-statistics/>
- Lipman, E. L., & Boyle, M. H. (2005, December 6). *Social Support and education groups for single mothers: A randomized controlled trial of a community-based program*. Social support and education groups for single mothers: a randomized controlled trial of a community-based program. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1316160/>
- Livingston, G. (2018a, April 25). *The changing profile of unmarried parents*. Pew Research Center’s Social & Demographic Trends Project. <https://www.pewresearch.org/social-trends/2018/04/25/the-changing-profile-of-unmarried-parents/>

- Livingston, G. (2018b, April 27). *About one-third of U.S. children are living with an unmarried parent*. Pew Research Center. <https://www.pewresearch.org/short-reads/2018/04/27/about-one-third-of-u-s-children-are-living-with-an-unmarried-parent/>
- Long, Susan M., et al. "The Wellness and Self-Care Experiences of Single Mothers in Poverty: Strategies for Mental Health Counselors." *Allen Press*, Allen Press, 1 Oct. 2019, meridian.allenpress.com/jmhc/article-abstract/41/4/343/435143/The-Wellness-and-Self-Care-Experiences-of-Single?redirectedFrom=fulltext
- Marti-Castaner, M., Pavlenko, T., Engel, R., Sanchez, K., Crawford, A. E., Brooks-Gunn, J., & Wimer, C. (2022, May). *Poverty after birth: How mothers experience and navigate U.S. safety net programs to address family needs*. *Journal of child and family studies*. [https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9073812/#:~:text=Using%20thematic%20analysis%2C%20we%20identified,supports%20amid%20scarcity%2C%20\(3\)](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9073812/#:~:text=Using%20thematic%20analysis%2C%20we%20identified,supports%20amid%20scarcity%2C%20(3))
- Merschel, M. (2020, December 3). *The Heart Health Risks of being a single parent*. American Heart Association News. <https://www.heart.org/en/news/2020/12/02/the-heart-health-risks-of-being-a-single-parent>
- "National Snapshot: Poverty Among Women & Families in 2022." *National Women's Law Center*, 29 Nov. 2023, nwlc.org/resource/national-snapshot-poverty-among-women-families/
- Nisa, Sham Sun. *Time Constraint of Working Mothers – a Sociological Study*, Department of Sociology, University of Kashmir Srinagar India, 2013, www.iosrjournals.org/iosr-jhss/papers/Vol15-issue6/S0156107113.pdf
- Prince, Z. (2022, January 25). *Census bureau: Higher percentage of black children live with single mothers*. AFRO American Newspapers. <https://afro.com/census-bureau-higher-percentage-black-children-live-single-mothers/>
- Reports and policy recommendations*. City of Pittsburgh. (n.d.). <https://pittsburghpa.gov/gec/reports-policy>
- "Single Mothers & Self-Reliance." *BYU Marriott Alumni Magazine*, BYU Marriott Alumni Magazine, 2 Apr. 2024, marriott.byu.edu/magazine/faculty-research/single-mothers-self-reliance#:~:text=Today%20a%20single%20mother%20heads,povetry%20than%20two%20parent%20families
- Sartorius, N. (2006, August). *The meanings of health and its promotion*. *Croatian medical journal*. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2080455/>
- Scott, J., James, K. F., Méndez, D. D., Johnson, R., & Davis, E. M. (2023, June). *The wear and tear of racism: Self-silencing from the perspective of young black women*. *SSM. Qualitative research in health*. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10421612/>
- Shrider, E., Kollar, M., Chen, F., & Smega, J. (2021, September). *Income and poverty in the United States: 2020*.

<https://www.census.gov/content/dam/Census/library/publications/2021/demo/p60-273.pdf>

Smith, Sylvia. "Struggles of Single Moms: 7 Major Challenges." *Marriage Advice - Expert Marriage Tips & Advice*, Marriage.com, 18 Aug. 2023, www.marriage.com/advice/parenting/struggles-of-single-moms/

Stokes, N., Herbert, B., Johnson, A., & Magnani, J. W. (2021, May). *The effect of the lone parent household on Cardiovascular Health (National Health and Nutrition Examination Survey, 2015-2016)*. American heart journal plus: cardiology research and practice. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8389735/#:~:text=Single%20mothers%20had%202.1%2Dtimes,1.82%2C%20p%20%3D%200.30>

Taylor, Z. E., & Congler, R. D. (2017). *Promoting Strengths and Resilience in Single-Mother Families*. JSTOR. <https://www-jstor-org.pitt.idm.oclc.org/stable/44250081?seq=5>

Waldfogel, J., Craigie, T.-A., & Brooks-Gunn, J. (2010). *Fragile Families & Child Wellbeing*. Project Muse. <https://muse-jhu-edu.pitt.idm.oclc.org/pub/31/article/404863/pdf>

Washington, A., & Randall, J. (2023, April). "we're not taken seriously": Describing the experiences of perceived discrimination in medical settings for black women. *Journal of racial and ethnic health disparities*. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8893054/>

What is the Gender Equity Commission? (n.d.). <https://pittsburghpa.gov/gec/about-gec>