Teen pregnancy rates in the United States dropped steadily from 1990 to 2005 (Hamilton, Martin, & Ventura, 2009). According to the most recent Center for Disease Control (CDC) records 409,840 women under the age of twenty in the United States (U.S.) became pregnant in 2009. The birth rate for U.S. teenagers has increased in 2006 but has declined over the past several years. In 2009 the rate for teenagers aged 15-19 years old was 39.1 births per 1,000 (CDC, 2011). The birth rate for African American teens had a slight decrease in 2009 at 59.0 births per 1000 women (CDC, 2011).

A majority of the pregnancies were reported as unintentional and unplanned (Chandra, Martinez, Mosher, Abma & Jones, 2005). The outlook for these teens who become pregnant is often unfavorable for the following reasons. Studies that have looked at the risk factors of this population have a poor prognosis in adulthood for the teen (Geronimus, 2003; Luster & Haddow, 2005). They often enter pregnancy with poor health habits and/or assets and are unable to make the transition in lifestyle needed for the promotion of a healthy pregnancy (Grady & Bloom, 2004). In addition Bushman, Foster, & Vickers (2001) noted pregnant teens

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**Abstract**

The purpose of this qualitative study is to explore the lived experiences and perceived assets of pregnant African American teens. Thirteen pregnant African American teens between the ages of 16 and 19, receiving prenatal care at an urban clinic in the Midwestern United States, participated in the study. Human ecology and multicultural feminist theories were used as the organizing framework. Data were collected through semi-structured interviews, participant creation of an asset map, and photovoice participation. Data analysis revealed the unborn child was the most important asset. “Women caring for women” was the primary theme. The young women saw education was a way out of poverty and felt that society-at-large judged them poorly. The findings may lead to a greater understanding of the perceived assets of pregnant African American teens and assist healthcare providers to provide improved healthcare and culturally congruent care.

**Keywords**

asset maps, teen pregnancy, qualitative research
are placing an increased metabolic demand on their still developing bodies to support the needs of the fetus.

It is often the case that people pass judgment on a young pregnant woman and conclude she will not achieve expectations set by society standards (SmithBattle, 2009). The fact that the majority of pregnant teens are from minority groups is a major contributor to the problem of disparities in birth outcomes for U.S. teens (SmithBattle, 2007). Luster and Haddow (2005) reported teen parents are more likely to struggle in school or come from homes that are impoverished. However, they also stressed that teens who have a “vision of their future” that includes postsecondary education and a career, are less likely to become parents in their teen years. Conversely, several studies have noted that teen mothers reported less risk-taking behavior and substance abuse compared to non-pregnant teens (Hope, Wilder, & Watt, 2003; Hunt, Joe-Laidler, & McKenzie, 2005).

The majority of research in the area of teen pregnancy has focused on risk factors and prevention. There is a paucity of research that focused on assets as a predictor of positive outcomes for the teen parent (SmithBattle, 2009). Youth assets are conceptualized in part as the ability of the youth to make decisions that contribute to good health and identify a positive vision for the future. There is clinical work, such as that done by the Search Institute (2009) but has virtually no research that looks at an asset approach to teen pregnancy.

Furstenberg (2007) has stated that teen pregnancy and parenting need to be re-examined through a new lens. When adjusted for mothers’ prior disadvantages such as living in poor neighborhoods or having an uneducated mother, low birth weight and neonatal and infant mortality rates were reported to be better for African American teens in their mid to late teens than for older African American mothers but at not at the same level as teens of other racial/ethnic groups (Geronimus, 1996; Gilbert, Jandial, Field, Bigelow, & Danielsen, 2004; Rauh, Andrews, & Garfinkel, 2001, Rich-Edwards, Buka, Brennan & Earls, 2003).

Identification of assets that support maternal adjustments in lifestyle is needed to ensure positive outcomes of pregnancy (Holub, et al., 2007). This study examined the positive influences of the environment-- assets such as family, friends, healthcare providers, education and religion on the pregnant African American teen. The environment included the people, places, and events that influenced her decisions about herself and her baby.

This study focused on the assets of the pregnant African American teen and has given the pregnant African American teen an avenue to describe assets or positive influences as they pertained to her specific, individual circumstances. The research explored the intersection of being young, pregnant, and African American guided by the use of human ecological theory and through feminist multicultural lens. This provided a reference for providing these women to talk about positive influences within their environment.

**Significance of the Study**

This research provided a way for these women to talk about their environment and identify people, places, and events, which influenced positive and healthy decisions during the pregnancy. Looking at the lived experience of the pregnant, African American teen in relationship to her environment allowed the researcher to view positive influences on the young woman. The findings of this study identified the people, places and events, which the teen identified as positive influences/assets for her.

Human ecology and multicultural feminist theories provided the theoretical framework for this study. Human ecology theory provided a framework for the consideration of broad environmental influences on pregnant African American teens, whereas multicultural feminism provided a framework for recognizing the
impact of the intersection of culture, class, age, and gender for this group.

The intersection of being a teen, being African American and being pregnant provides an individual that is not like other people. This represents a distinct population. She brings family values with her as she passes from childhood to adulthood. The pregnant African American teen brings cultural norms with her.

Multicultural feminism (Baca Zinn, 2000; Few, Stephens, & Rouse-Arnett, 2003; McDowell & Fang, 2007) has allowed the researcher to look at the intersection of the lived experience of what it is to be young, pregnant, and African American. Research on this population must include consideration of gender-based oppression, discrimination, or inequality (Berman, 2003).

**Methodology**

This phenomenological study used multiple sources of data to explore the lived experiences of pregnant African American teens. Little work has been done that has found the beliefs and views of what pregnant adolescent women themselves believe about their pregnancies (Rosengard et al, 2006). The purpose of this study was to grasp the essence of pregnant African American teen’s perceptions regarding ecological and multicultural influences on assets and their importance. To obtain the essence of lived experiences, phenomenological research methods are often conducted using in-depth interviews and other forms of qualitative data (Creswell, 2007). This study used in-depth interviews and photos using photovoice (Wang and Burris, 1997) to obtain pregnant African American teens’ perception of their assets. The triangulation of data strengthened the findings and interpretations made from analysis of data from multiple sources (Marshall & Rossman, 1995).

The study consisted of two interviews with each participant in order to deepen the researcher’s understanding of the participants’ experiences. At the conclusion of the first interview, participants were given a camera, consent forms for people who were photographed and a self-addressed stamped envelope. During the second interview the developed photographs were viewed by the researcher and participants to guide the conversation and open-ended questions (Wang & Burris, 1997). After the interview, the researcher wrote extensive field notes and later confirmed these notes with each participant. The data was collected over a period of six months. During the time the researcher was at the clinic, 26 pregnant African American teens between the ages of 15 and 19 years of age were enrolled in prenatal care and met the inclusion criteria for the study. Thirteen agreed to participate in the study. Ten completed the study.

**Asset Maps**

Asset mapping created an in-depth understanding of the community through the eyes of the teens by identifying local resources, networks, places of importance, and prevalent issues. Included on the maps was how these were already connected, and where potential connections might exist (Kretzmann & McKnight, 1993). Such an understanding creates numerous possibilities for new and innovative approaches to community empowerment that are compatible with the maintenance of healthy environments. Asset maps also serve as a tool to engage youth in participatory action research and affects social change by educating participants, encouraging communities to view themselves, and set up a plan for successful changes (Aberley, 1993). Each young woman was asked to determine which people, places, and things had a positive influence on her life and place them on the board. The placement allowed her to determine “stronger” influences by placing these closer to the post-it note with her name and “lesser” influences farther away from her.
Photovoice Methodology

Photovoice is a methodology that was based on Freire’s (1973) philosophy that people share and speak from their own experience; they see connections amid their own lives, create a personal analytical perspective and grow their own solutions and strategies for change (Wallerstein & Bernstein, 1988). This philosophy is congruent with this project’s purpose of providing a comprehensive and inclusive means of sharing the experiences and perceptions of the African American pregnant teen.

Major Research Findings

Demographics

The ages of the 13 women interviewed ranged from 16 to 19 years with the mean age of 18. All of the young women identified themselves, their mothers, fathers and the father of the baby as African American. All of the pregnant teens described themselves as single but five stated that they lived with the father of the baby. Six stated they lived with their mother, one lived with her maternal grandmother and one lived with her sister. One participant stated that her father also lived in the household.

The highest grade completed ranged from 10th grade to one year of college. Two participants stated they were attending high school, three were not attending any school, five were attending alternative high schools to earn a General Education Development (GED), and three stated they had attended some college and would return but did not have a definite plan in place for a time to return to school. Seven of the pregnant teens stated this was the first pregnancy; it was the second pregnancy for three women and the third pregnancy for three women. Two of the participants indicated they had one living child. One participant indicated she had two children. Three participants indicated they had prior pregnancies: one had two spontaneous abortions (miscarriages) and one had a spontaneous abortion and a voluntary interruption of pregnancy; one woman had one voluntary interruption of pregnancy. The gestational age of the women at intake of the study ranged from 16 weeks to 36 weeks with a mean gestation of 26 weeks.

Themes

Major Theme I: Mothers Caring for Their Unborn Children

Subtheme IA: Responsibility for Unborn Child

A theme identified during this interview was the importance of her unborn child to the pregnant teen. When asked how the pregnancy influenced the young women, most placed the sticky note with the name of the baby either next to or directly over her name. A theme identified during this interview was the importance of the fetus to the pregnant teen.

Subtheme IB: Responsibility for Self

The majority of informants shared how having a child would require taking care of herself to accept responsibility for one’s actions. The following photos support this theme.
**Figure 1.2**
“It (unborn baby) makes me want to mature more. That is the only way that I can explain it. I see this as my life. I see myself as this role model now. Now I have to be somebody positive so she can look up to me.”

**Figure 1.3**
“Because I want to make sure that I stay on the right track for him.”

**Figure 1.4**
Participant smiling to show her pregnant abdomen

**Figure 1.5**
This participant shows her pregnant belly as a positive influence in her life.
Major Theme II: Women Caring for Women

Subtheme II A: Mothers Caring for their Pregnant Teen Daughters

Many of the participants discussed their relationship with their mothers. Most of the teens viewed their mothers as a positive influence in their lives. This photo of a participant’s mother supports this theme.

**Figure 1.6**
This shows how another mother supported her pregnant daughter, “Other family members judge her as being a bad mom, but I think she is the best mom that I could have because God only gave me one mother. She has been positive to me by trying to keep me on the right path and says that I decided to be grown up at times and go my own different ways, but she did teach me the right way.”

Subtheme II B: Grandmothers Caring for Their Pregnant Granddaughters

Many of the young women described their grandmother as being a positive influence. Grandmothers were often the family care provider for many of the teens. Many teens saw their grandmother as a source of care for a successful future. Others taught the teens about their African American culture. One teen described her grandmother as woman who gave directions for life.

**Figure 1.7**
This participant described the importance of living with her grandmother, “When I moved, Grandma Mary took me in. She bought me clothes and gave me money and made sure I had food.”
Sisters were very important to the participants. They gave each other words of encouragement, watched each other’s children, and looked out for each other’s wellbeing.

**Figure 1.8**
Another young woman fondly remembered her grandmother, “Basically if it wasn’t for her, I wouldn’t be here because everybody was telling me that nobody wanted me. I was a premature baby, so if she didn’t take me in, I probably wouldn’t be here. That is her obituary picture because she is deceased and I didn’t have a lot of pictures of her.”

**Figure 1.9**
This young woman talked about her sister, “She influenced me because she is the only one who got married and graduated from high school and went to college. I try to follow her in a lot of things she does.”

**Figure 1.10**
Another described her sister, “That is my best friend.”

**Subtheme II C: Sisters Caring for Pregnant Sisters**
Sisters were very important to the participants. They gave each other words of encouragement, watched each other’s children, and looked out for each other’s wellbeing.
When the young women talked about aunt and aunties, they did not distinguish between blood relatives and close friends of the family. The term aunt and auntie were used to describe women who influence the young women’s lives. One teen viewed her aunt as a support for obtaining baby clothes. Aunts talked about the future. Another auntie talked about the importance of family.

Subtheme II E: Girlfriends Caring for Pregnant Girlfriends

Many of the pregnant teens perceived their girlfriends as a positive support during the pregnancy. This teen told the researcher about her friends, “They talk to you... she helps me out a lot.”

Figure 1.11
One of the pregnant teens described the relationship with her sister, “That is my best friend. When I need somebody to talk to, I just go in her room and hug her and wake her up and say, ‘hey, I have something to ask you or I have something to tell you.’ She does the same thing for me.”

Figure 1.12
Another participant described the importance of her relationship with her sisters, “[Sisters] are positive by letting me know that my whole pregnancy is going to be okay and I don’t have to worry about anything like finding a baby sitter or having a hard time trying to raise [my baby] on my own and they are there to help me.”
Figure 1.13
“She is like a big sister to me.”

Theme III: Family Members Caring the Pregnant Teen

Subtheme III A: Women Caring for Nieces and nephews
Many of the pregnant teens had cared for their nieces and nephews as well as godchildren (children of special friends). One informant talked about the positive influence from her family.

Subtheme III B: Fathers Caring for their Pregnant Daughters
Only one participant took a photo of her father. She described him as a positive support for her.

Figure 1.14
One woman took this photo of her father

Theme IV: Relationship with the Father of Baby

Subtheme IV A: Father of the Baby Caring for the Pregnant Girlfriend
Many of the teens felt the father of their unborn child was a positive influence in her life. Some believed the father of the baby would not be a continuous support for the young woman or her child.

Figure 1.15
This informant shows herself with boyfriend/father of her baby
Another talked about how the father of her unborn child is a positive influence in her life, “He is church going and he got me in church. He has been with me the whole pregnancy. He tells me how we are supposed to get married and how he is going to be there for the baby. He spends all his money on buying the baby stuff and help out with bills and stuff. He is showing me that he will be there.”

**Figure 1.16**
Shows how strong the participant felt about the father of her child, “That is my number one best friend. This is my best friend, lover and all that other stuff. He is positive to me by just everything. We share a lot and we have a lot in common. What I go through, he goes through. He is real positive.”

**Subtheme IV B: Long-term Expectation of Caring from the Father of the Baby**
Many participants did not expect long-term relationships with the father of the unborn child. They discussed the present support. When asked about life two years in the future, only one informant included the father of the child.

**Major Theme V: Community Members Caring for the Pregnant Teen**

**Subtheme V A: Members of the Church Caring for their Pregnant Teens**

**Figure 1.17**
The young pregnant women talked about the importance of religion in their lives and one took this photo of a cross in her home.

**Figure 1.18**
This teen talked about the importance of religion in her life, “It influences me because there is a lot of stuff in there that is pertaining to what is going on in my life. Like being pregnant, there was a girl in here that was pregnant at my age and she was doubted and stuff like that, but at the end of the day, everything turned around and she is the author of that book.”
Another informant talked about the influence of her church family. One woman shared how the minister taught her lessons about life.

Subtheme V B: Teachers and Principals
Caring for Pregnant Teens
The young women talked about teachers and principals who helped them along life’s way. Two teens shared experiences with the principals of their schools. One woman shared how her school principal helped her and her siblings escape the abusive life with her mother, “My mom used to beat on us and stuff and I used to go to school. I was probably like nine and my brothers and sisters were younger than me, so by me having a mind, I used to always listen to my principal and show her all the scars that my mom used to do. She basically broke that and instead of us living with my mom and becoming a bad girl and disrespectful, she broke that and she took us away from my momma. If it wasn’t for that, I would probably not finish school and not even be close and would probably still be in the ninth grade or something like that and would probably have more babies who were dead or something like that because raising us and she was also a drug addict (her mother). The principal was there for us and I believe she is the one and main reason, besides my grandma, who I am today.”

Subtheme V C: Healthcare Providers
Caring for Pregnant African American Teens
Only a few of the teens thought her health care providers were a positive influence. None of them took photos of anyone in the clinic. However, they did put doctors and nurses on their asset map. A few of the teens talked about support services they received. Only one young woman saw her doctor as a positive influence.

Subtheme V D: Career Planning as a Way to Care for their Unborn Child
Each of the teens was asked about their education. Much of the data was collected in the summer and the young women were not in school. Most of them put school on hold during the pregnancy. They did believe that education was a path out of poverty. One recognized the importance of education as a parent, “My kids are mainly what I do it for. If I didn’t have any kids, I probably would just give up [school].” Another agreed with this, “After I have this baby, I see myself finishing school...I have to finish my GED.”

Other young women had aspirations for their educational future. One pregnant teen commented about the logistics of going to school and being a parent, “I could go to school in the morning and then by the time I get out of school I could go to work and get a paycheck so that I can have something for me and the baby to live off of so we can be on our own.”

Figure 1.19
One teen showed her aspirations with this photo of poster advertising medical classes.
Major Theme VI: Community-at-large as a Non-caring Asset of Pregnant African American Teens

As the interview process proceeded, the researcher asked the pregnant African American teens how they perceived what other people thought about the situation of being a young, pregnant African American girl. The young women perceived that people outside of their inner circle of family and friends judged them poorly. One teen explained, “Some people judge us a lot...Being young and pregnant...just a lot of things like they call us names and stuff.” Another participant supported this perception, “Well, with me being African American, people seem to put us down a lot and that we can never accomplish anything. A lot of people think it (being young and pregnant) is bad, but I don’t know.” One young woman thought that people in general thought less of her for being young and pregnant.

Other participants had a different view, “African American females having babies don’t have to be by themselves necessarily. You just have to try and make it work.” “It is a generation thing where all the women in my family have had children at an early age and none of them had abortions and everybody has gotten married and have families and I would prefer that to not be alone and when I do turn at least 20 to be married to my baby’s father and start a family just like my aunt, my grandma, and my mother. Everybody has made that decision and I will be doing the same.”

Structural Description of the Teens’ Environment

The structural description highlights the context or setting that influenced how the young women experienced the studied phenomena (Creswell, 2007). The use of the photos gave a rich meaning to the teen’s environment as it influenced her during her pregnancy.

The Church Environment

Figure 1.20
One participant took a photo of her mother who was the pastor at the church

The Home Environment

Figure 1.21
One young woman who lived with her grandmother took photos of the house
Discussion

The results of this study provided multiple key findings. First, pregnant African American teens perceive their children—born and unborn to be the most positive influence in their environment. The young women shared they would be engaging in risky behaviors if they were not pregnant and/or preparing for parenthood. They conveyed their feelings that being a parent made them aware of being responsible for their current and unborn children. Consequently, these young women viewed their pregnancies as a life-changing event that moved them from a risk-taking youth to being a responsible adult.

Secondly, women caring for women was an important theme noted in this study. This major theme was supported by several subthemes. The strong bonds among women occurred within families, and among friends, educators, church leaders, healthcare providers and social support agencies within the community.

All of the teens discussed perceived assets associated with the women in their families. Grandmothers were cited as a strong positive influence for child rearing as well as maintaining a household. Mothers were also noted as being a positive influence for many of the teens. Grandmothers and mothers provided food and shelter for the teens as well as transportation to prenatal appointments. Aunts were also discussed as a positive influence on the pregnant teens. Aunts were considered part of the microsystem.

Women caring for women was also present among siblings for the pregnant African American teen. The teens with sisters who had children gave the young women advice about child rearing and the sisters who did not have children often were baby sitters for the young mothers. Sisters provided comfort and emotional support when the teen needed someone to make them laugh or listen when they needed a friendly support network.

Women caring for women was also discussed within the context of girlfriends providing support for the pregnant teens. Girlfriends
were there to have conversations, encourage healthy life-styles, and watch children. Female members of the church were also discussed as being a positive influence for the pregnant African American teens. Often these church members were referred to as godmothers and aunts, who provided advice for healthy lifestyle changes and God’s lessons for parenting.

The theme non-supportive male relationships for the pregnant teens is also noted within the data. Only one teen took a photo of her father. Many stated they received no positive support from their fathers. A few of the young women talked about the positive support from the father of their baby but were prepared to be single parents if the relationship was not long-term. Most of the pregnant teens hoped for relationships with the father of their infant.

Some young women noted the father of the infant as a positive influence and others as not being a positive influence for the young woman. All of the girls related they would be single parents and did not have an expectation of maintaining a long-term relationship with the father of the baby.

Most of the pregnant teens noted education was a positive influence, which would enable them to move out of poverty. Although all the young women had put school on hold for the pregnancy and postpartum period, most had plans to return to school. Most of the girls wanted to be a nurse. This may have been their goal since the nurses were one of the few professionals the young women had exposure throughout their lives.

Cultural competency skills in healthcare providers are essential in caring for and working with African American teens. Cultural competence includes knowledge and skills that are important to the African American family (Whaley and Davis, 2007). Cultural competency in the area of prenatal care for pregnant African American teens would include knowledge of the importance of the women in the family and other female members of the community as supportive caring individuals in the lives of pregnant teens in this cultural group. Healthcare providers could be partners with women in the African American community to provide positive support for the pregnant teen.

The technique of using asset maps provided a basis for conversation between the participant and researcher. The asset map allowed the participant to indicate the strength of the relationship by placement of the paper on the board. She was then encouraged to talk about the relationship between herself and others and discuss the importance of the relationship.

The use of photovoice provided a methodology whereby the participant could describe who was in the picture, why she took the photo, and why the people and/or things in the photo were assets for her. Each participant received a copy of the photos as a thank you for participation in the study. Through the use of photovoice, the teens took pictures of themselves, their pregnant abdomens, the father of their baby, their family, friends, home, churches, and baby supplies that were gifts. Some took multiple photos of the same people.

**Strengths/Limitations**

Limitations of this study include the mistrust African American adolescents sometimes have for healthcare providers. Teens fear that confidentiality may be breached when they seek healthcare treatment (Ford, Millstein, Halpern-Felsher, and Irwin, 1997). Due to this concern, some adolescents may delay seeking prenatal care (English and Knopf, 1999).

Reminders to return the camera and consents were done in person at the clinic, via phone, email, or text. Participants were hesitant to answer when the number of the clinic was displayed on their phone when called by the researcher. Again, this supports the notion of distrust of the healthcare system. Three of the thirteen participants did not return the cameras. Two of the three delivered their babies prior to taking the photos so this could have been a rea-
son they did not complete the study. However, neither of the two women answered phone calls or text messages from the researcher.

Another limitation of the study may have been the thank-you gift card of $50 for participation. Some of the teens may have participated to receive the appreciation gift card from the researcher. Getting a $50 gift card might be viewed as a large amount for a teen.

**Conclusion**

Teen pregnancy is often viewed as a negative consequence of high-risk behaviors. Many researchers have studied how to reduce teen pregnancies and prevent repetitive teen pregnancies and many well-intentioned healthcare providers have focused on the reduction and elimination of high-risk behaviors (Smith-Battle, 2009).

Many members of society and healthcare providers prescribe a map of expectations for all children. It is important to listen to these young women. It is only through listening that one learns their perceptions of their assets within the context of the environment. This will enable researchers and clinicians to provide quality support that meets the unique needs of pregnant African American teens. The teens who participated in this study talked about timing of pregnancy, risk behaviors during pregnancy, risk behaviors if they were not pregnant and parents, and their perceptions of people within society.

The use of photovoice provided a lens for the researcher to see what the participants saw as positive influences within the context of their environment. Photos of family, friends, and homes enhanced the statements of the teens. With the increase use of cameras in phones, many teens take pictures of important people and places in their lives. Healthcare providers can use this technology to enhance conversations with their patients. One can get to know patient assets without giving the patients a camera.

The use of asset maps allows healthcare providers to see the strength of relationships with the people who support the patient. Knowing the strength of family and friend relationships can improve provider-patient relationships. The provider can target those who are closest to the patient for support in improving healthcare outcomes.

It behooves healthcare providers to know the environment and support system of their patients. The provider can give evidence-based information to the teen but if her family does not have the same information, the pregnant patient may choose to follow her family’s advice rather than the provider. The provider needs to include those who are valued by the patient in healthcare education and planning.

This study could be replicated with other cultural groups. Future research could include Hispanic teens that comprise the largest group to become pregnant before the age of twenty (CDC, 2011). Future research could also include conducting this study should with teen fathers of multiple cultures to understand their perceptions of pregnancy and parenthood.

This study afforded a voice to pregnant African American teens to express their perception of assets within their environmental context. It is important to utilize their assets to help them with positive behaviors to ensure healthy outcomes for themselves and their children.
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