

Effects of Social-Economic Empowerment of Teenage Mothers and Nurture Care. A Case of Kimbilio Hope Centre, Machakos, Kenya.

Elizabeth Kithuka

Department of Child Development, Daystar University.

DOI: <https://doi.org/10.51244/IJRSI.2025.120800363>

Received: 03 September 2025; Accepted: 09 September 2025; Published: 15 October 2025

ABSTRACT

For young children to attain their full potential, they need the five inter-related and indivisible components of nurturing care: adequate nutrition, good health, safety and security, responsive caregiving and opportunities for learning. Provision for nurture care in the early years of life of the child is enhanced by close family members. This explains why secure environments are important for young children and this begins at conception. Teenage mothers undergo a lot of stressful moments during pregnancy periods due to societal norms and community attitude towards them. This has led to family and social rejection thus affecting the unborn child and the development of the child even before birth. This study will investigate ways of enhancing early intervention for the children who belong to teenage mothers to ensure a safe environment before and after birth. This calls for a multidisciplinary approach by all stakeholders to approach the issue of handling teenage mothers during pregnancy and after to ensure that they are social economically empowered. Social empowerment includes creating awareness of the risk of increasing number of young children from teenagers, majority of them come from poor backgrounds. Sensitization is important to all community members and the affected girls for acceptance and support to secure the life of the young children. A secure environment can enhance good nutrition, antenatal care, less rejection and avoidance of forced abortion, early marriages will result in better child growth and development before and after. The stakeholders should assess best practices to enhance social economic empowerment of teenage mothers for them to be well empowered and to bring up their children holistically. The study will be based on ecological models and data will be collected through meta-analysis from literature review and successful stories from the teenage mothers.

Keywords: Teenage Mothers, Social economic empowerment, Nurture Care

INTRODUCTION

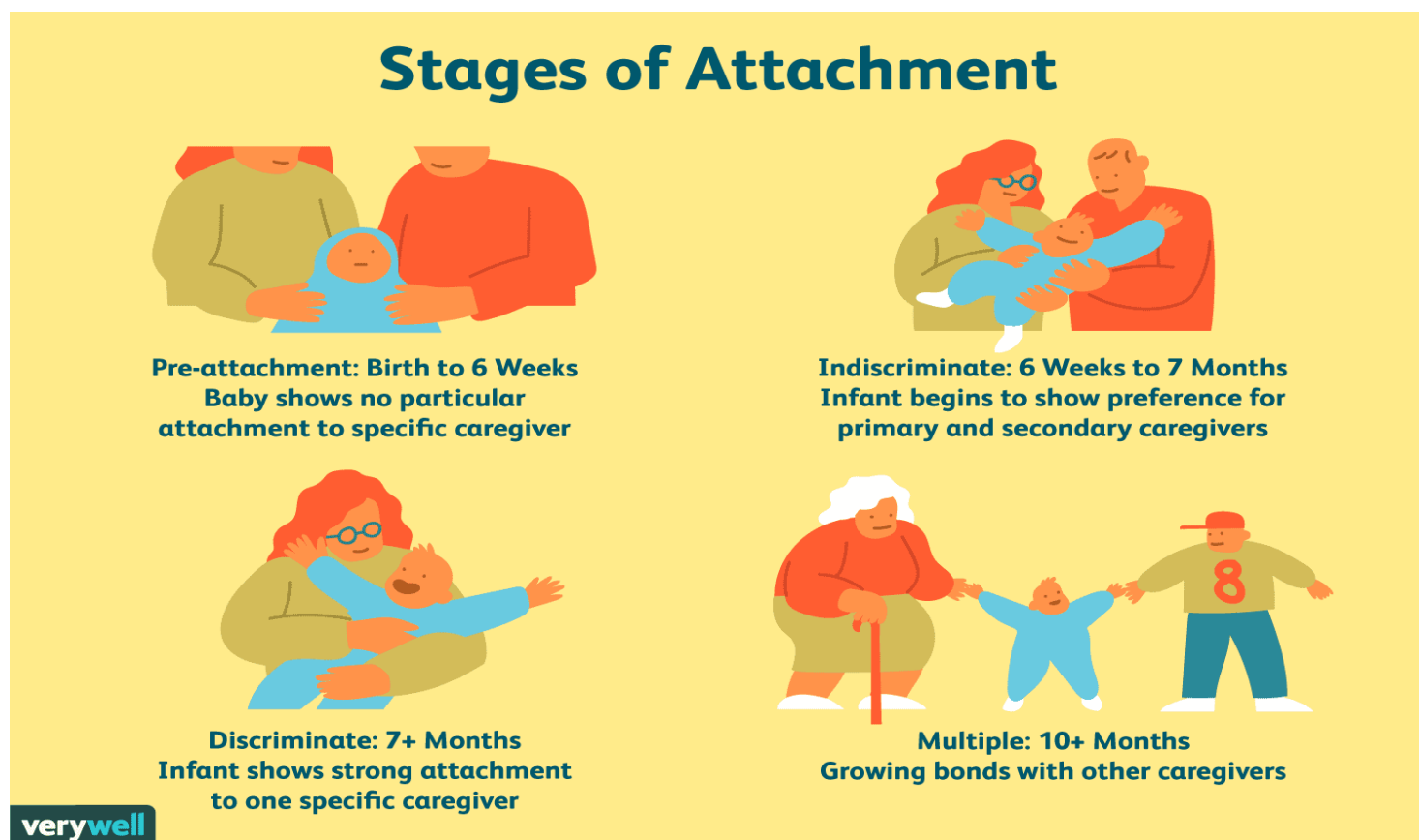
Teenage pregnancy is defined as the pregnancy on women aged between 10-19 years according to World Health Organization (2018) and it is becoming a major challenge for teenage girls and attainment of Sustainable Development (SDGs) globally. In most rural developing countries teenage mothers account for 95% and about 2million girls give birth and become mothers before reaching the age of (CLADHO, 2018; Vaz el al., 2016 Kokhekaya 2019; Wito,2018). The global rate of teenage pregnancy is a significant public health issue, with approximately 21 million girls aged 15-19 in lower and middle-income countries experiencing pregnancies annually, and about 12 million of these resulting in births. While the global adolescent birth rate has declined from 60 births per 1,000 girls aged 15-19 in the past 25 years to 44 in 2024, Sub-Saharan Africa continues to have the highest regional rate at 103 births per 1,000. In 2023, the global adolescent birth rate for those aged 15-19 was 39 per 1,000, and for those aged 10-14, it was 1 per 1,000. Africa has the prevalence of 18.8% of teenage pregnancy and in the E.A region where Kenya has -20.5% (Kassa el al.,2018).

Over one million babies born to teenage girls die before their first birthday, and each year 70,000 teenage girls die during pregnancy and childbirth. Teenage pregnancy is one of the leading causes of newborn and maternal mortality in developing countries and it has a major social and economic impact on the mothers and the born babies, and this calls for multisectoral approach in addressing the causal factors. Most children from such teenage mothers lack proper nurture care hence impediment to overall holistic development.

METHODS

Economic empowerment theories believe that teenage girls need economic support to attend to their basic

needs as well as proper skills through education. Studies reveals low Social-economic status as linked to adolescents first childbirth where risked sex behaviours were linked to poverty (CLADHO, 2016). Commonly empowerment theories have revealed that the community encompasses peers, relatives, neighbors, parents (Enricho et al,2020). The ways adolescents interact with the community greatly affect their education and reproductive health (Biney and Nyarko, 2017). Patino and Gordon (2019) found that communities react to these teenage pregnancy challenges in a manner that castigates them as failures rather than responding to their needs. This again affects children's nurture care. The study was also grounded on Attachment Theory by Bowlby and Ainsworth (1991) and Sociocultural theory, review of literature review and qualitative analysis from primary sources. This theory by Bowby and Ainsworth 1991 states that early emotional and physical support from caregivers is essential for healthy emotional adjustment and secure sense of self and responsive caregiving provides secure attachment. This again provides an environment which allows children to feel secure enough to build strong relationships. The sociocultural theory suggests that caregivers, parents, peers and culture at large are responsible for developing higher-order functions as illustrated below.



Sociocultural theory suggests that parents, caregivers, peers, and culture at large are responsible for developing higher-order functions.

For children aged 0–3, a supportive and positive home nurturing environment is believed to facilitate the maturation of the hippocampus, thus promoting neurodevelopment in children's sensory systems, language acquisition, and motor coordination (Meaney el at., (2016). Other factors like socioeconomic status, the home nurturing environment are more effective in shaping young children's neurodevelopment (Jiang elat.,2024).

STUDY FINDINGS AND DISCUSSION

Teenage girls face challenges such as social rejection, stigma, psychological stress, social isolation, low self-efficacy, and difficulties of self-care problems. This can lead to early marriages, hence exposing them to more vulnerability, hence poor nurture care and development of the children. This affects the child and the mother emotionally, psychologically and physically. It is therefore important to empower the teenage mothers emotionally, socially and economically for better nurture care. These calls for good collaboration and application of good approaches with different stakeholders, community, Institutions of higher family and Educators of County Government.

The study reveals a high need to promote socio economic empowerment for teenage mothers for proper nurture care for them and their children. This can be achieved by creating a safe environment for nurture care and equipping the teenage mothers with skills that can become a source of income for sustainable upkeep of their children and their lives. This calls for a multidimensional approach from all stakeholders to rethink new ways of dealing with teenage motherhood because its effect is deeper on the growing child as well as on the mother. Children from such mothers need proper nurture care and enabling environment for their growth and development to avoid related disorders that can be contributed by lack of proper nutrition, caregiver love and support). Another study based on randomized controlled trials demonstrated the benefits of a good home nurturing environment, cultivated by parents' positive parenting skills and emotional support, on children's social adaptability and emotional functioning (Wangy el at., (2023). Conversely, exposure to maltreatment and neglect can increase stress levels, leading to a higher risk of neurodevelopmental disorders (NDDs) or suspected developmental delay (SDD) in children (Kalipeni el at., 2017). Another study by Britto et al., (2017) noted that children living in families with lower socio-economic status (SES) and living in rural areas are more likely to suffer from SDD, which is closely associated with malnutrition. Parental involvement of teenage mothers, the immediate family and the community. One of the approaches being used by the Kimbilio Centre is vocational training as an alternative way to empower teenage mothers. This is because despite government directive for the teenage pregnant girls to go back to school, most of them cannot continue with education. That is why we need more rescue centres like Kimbilio to provide an enabling environment for vulnerable teenage mothers to enable them deliver well and gain skills of empowerment, which includes also counselling us to accept what has happened for self-esteem and confidence.

Kimbilio Hope Centre

Kimbilio centre is a non-profit, self-sufficient, refuge and training centre for girls affected by gender-based violent and sexual abuse. It serves Machakos county Kenya and its environs. The vision of kimbilio centre is to transform the lives of vulnerable children, by proving a safe and nurturing environment, to enable them to realize their potential. The centre aims to empower the children through education, skill development, emotional support and help them build a sustainable and hopeful future and this enables them to ho then become independent, self-reliant and sufficient individuals. Their mission is to provide a haven for vulnerable, orphans, and mistreated children. The centre is dedicated to rescuing these children from dire circumstances, offering them a safe space to live and thrive. It focuses on meeting their basic needs like shelter food and clothing and prioritizing education, psychological support and skill building for brighter future.

Kimbilio Hope centre for teenage mothers is located at Athi river, Machakos county Kenya, opposite daystar main campus. The centre started in 1979 after Barbra potter, noted that there was a need in Kenya to set up a rescue centre. The idea came after several girls visited her office when they were pregnant and didn't have an option. They were either sent away by their guardians or parents after they discovered they were pregnant. She wanted to create a shelter for the girls to rescue them. She began the journey by praying for one and in 2022, she got a piece of land she could put a shelter at Athi river, which started in May the same year. The main office is at westlands. Since the centre started, it has served 48 girls and 46 babies by the year 2024.

The centre admits the most vulnerable girls who are admitted and must be within age bracket 13 and 22 years. Girls below the age of 18 years come with a letter from the children's officer while those above 18 years always get a letter from the chief or an identification of the parent or guardian. The centre has liaised with Machakos children's office, Kiota rescue centre at Muranga, Maisha girls where they get their referrals from as well with other well-wishers. The department of psychology and Institute of Child development (Daystar University) have also been collaborating through student placement for their attachments, research and charity services. The centre also receives other donations like foodstuffs, firewood and clothing from the university. The students have supported a lot of girls through donations, counselling and regular visits for moral support. The university has supported some of the girls through education and some are almost completing their first degrees in the university. Daystar University has collaborated with the centre where the girls have benefited socially, physically and psychologically. Daystar students take time to visit the centre and empower the girls by building their self-esteem and confidence, support them through economic empowerment by paying for their upkeep, as well as their education. During their stay at the center, the mothers do the household chore by themselves like cooking, doing laundry, and taking care of their babies. Every teen mum is allocated her day to do the chores as they alternate. They are also trained holistically, emotionally, physically, socially etc. They start their day with a

morning devotion then embark on their daily chores. Teen mothers are trained in basic skills like tailoring, making mats, beadmaking and work as well as making necklaces. They are also trained in how to do household chores like cooking, doing laundry and taking care of their babies. The skills enable the girls to be productive, have a livelihood and be able to feed their babies after they live in the center.

Kimbilio Center is run by women, they only have two male workers who are the guards and assist in casual work like cutting of firewood as well as cooking for the teen mothers. The rationale for having women staff only is because of the safety of the girls and the girls need to feel safe while staying at the Centre. Very few visitors are allowed in the area as a policy in the organization to ensure the safety of the girls and their children. As a result, the environment is not very conducive for nurture care as the young children miss the presence of a male/ father figure, and this can impact negatively to the child as noted by Wangy el at., (2023).

Effects of socio-economic empowerment on nurture care

Teenage pregnancy is contributed by many factors such as poverty, lack of education and sexual health education, early sexual initiation, sexual abuse cultural practices like child marriage, and barriers to accessing reproductive health services. Adolescent mothers also face healthy challenges such as systemic infections, endometritis and higher rates of high blood pressure. Their babies may encounter preterm birth, severe neonatal conditions, and low birth weight.

Social and Economic isolation

Teenage motherhood can lead to social and family rejection, stigma, violence and also forced child marriages. Many teenage mothers prioritize their children's needs over their own, hence affecting their emotional and financial well-being as their source of income is limited.

Education and Employment.

Most teenage mothers drop out of school due to stigma and may face challenges in returning to school for education after childbirth. These makes them more vulnerable, leading to working in low paid jobs, early marriages and tend to rely on social assistance programs for longer periods. This is why it is important for society to look for different ways of empowering them to support them financially and economically. Social-economic empowerment is the process of enhancing both the social and economic well-being and capabilities of individuals and communities, enabling them to gain greater control over their lives and participate fully in society. It involves equipping people with resources, skills, and opportunities to improve their economic status, achieve social justice, and actively engage in decision-making processes that affect their lives and communities. This includes opportunities for income generation, employment, financial inclusion, entrepreneurship, and access to assets. Economic empowerment is crucial for individuals and communities to move out of poverty and make decisions about their investments in health and education. Empowering individuals with the necessary skills and knowledge to improve their economic well-being and navigate social systems is fundamental. Community interventions will also lead to maternal deaths which is one of the targets by sustainable development goals (SDGs 3.1). The target is to reduce maternal death rates to less than 70 deaths for every 100,000 live births. Globally, by the year 2030 and preventing teenage pregnancy globally by the year 2030 can help to achieve this goal which is associated with poor maternal and child health outcomes and increased risks of dying during pregnancy and childbirth of teens (Kassa el at.,2021). Patino and Gordon (2019) found that communities react to these teenage pregnancy challenges in a manner that castigates them as failures rather than responding to their needs and this again affects children's nurture care. The study reveals a high need to promote vocational training as an alternative way to empower the girls. This is because despite government directive for the teenage pregnant girls to go back to school, most of them cannot continue with education.

Empowerment includes opportunities for income generation, employment, financial inclusion, entrepreneurship, and access to assets. Economic empowerment is crucial for individuals and communities to move out of poverty and make decisions about their investments in health and education as noted in Zhang el at., (2020).

Empowering individuals with the necessary skills and knowledge to improve their economic well-being and navigate social systems is fundamental. Economic empowerment is crucial for individuals and communities to move out of poverty and make decisions about their investments in health and education. Empowering

individuals with the necessary skills and knowledge to improve their economic well-being and navigate social systems is fundamental.

Lived experiences from Kimbilio Centre.

N* delivered her baby Nzuri at Machakos level 5 after being referred to Kimbilio Centre, she reports that much learning has taken place as she has learned beadwork, mat making hairdressing and beauty. She can now get some income and support her child. She goes with her baby daily to the training centre.

J* is a form four leaver and got pregnant after completing her examination. She kept her pregnancy secret and at some time she wanted to have an abortion, but it failed. She was rescued by her aunt who connected with Kimbilio hope centre where she delivered a baby girl one month after being admitted. She stayed in the centre for four months and after was sponsored to do beauty and hairdressing courses.

CONCLUSION AND RECOMMENDATIONS.

Economic empowerment is crucial for individuals and communities to move out of poverty and make decisions about their investments in health and education.

Empowering teenage mothers with the necessary skills and knowledge to improve their socio-economic well-being and navigate social systems is fundamental. Sustainable development goals (SDGs 3.1), ending preventable maternal deaths is one of the targets. The target is to reduce maternal death rates to less than 70 deaths for every 100,000 live births.

Preventing teenage pregnancy can help to achieve this goal since it is associated with poor maternal and child health outcomes and increased risks of dying during pregnancy and childbirth. This can be achieved by empowering teenage mothers to care for their children to achieve holistic development.

Kimbilio Centre leadership is composed mainly of women, and the centre lacks any male figure except the security guard at night. Lack of a male person can affect children negatively in terms of attachment and role modelling. I recommend that the government implements another policy to have vocational training for the teenage mothers aiming at skills that can help them begin Income Generating Activities to cater for the needs of the children as well.

The government and other stakeholders should aim at providing comprehensive sexual and reproductive health education and empower the girls with life skills and socio-economic empowerment skills.

Government and other organizations should work to support teenage mothers by supporting them to return to school, provide the necessary resources for childcare as well as give guidance and counselling. The government should also put proper policies and intervention measures to tackle poverty, harmful cultural practices and improve access to reproductive health services.

REFERENCES

1. Aita, M., De Clifford Faugère, G., Lavallée, A., Feeley, N., Stremmer, R., Rioux, É., & Proulx, M. H. (2021). Effectiveness of interventions on early neurodevelopment of preterm infants: a systematic review and meta-analysis. *BMC pediatrics*, 21(1), 210. <https://doi.org/10.1186/s12887-021-02559-6>
2. Aragão, K., Sacomboio, E., Teixeira, C., Van-Dúnem, J., & Campos, P. (2025). Determinants of Adolescent Pregnancy in the Municipality of Malanje, Angola: A Case-Control Study. *Acta Médica Portuguesa*, 38(2), 88–98. <https://doi.org/10.20344/amp.22407>
3. Biney A, Nyarko P (2017). Is a woman's first pregnancy outcome related to her years of schooling? An assessment of women's adolescent pregnancy outcomes and subsequent educational attainment in Ghana. *Reproductive Health* 14 (1):1-15.
4. Britto, P. R., Lye, S. J., Proulx, K., Yousafzai, A. K., Matthews, S. G., Vaivada, T., Perez-Escamilla, R., Rao, N., Ip, P., Fernald, L. C. H., MacMillan, H., Hanson, M., Wachs, T. D., Yao, H., Yoshikawa, H., Cerezo, A., Leckman, J. F., Bhutta, Z. A., & Early Childhood Development Interventions Review Group, for the Lancet Early Childhood Development Series Steering Committee (2017). Nurturing care: promoting early childhood

- development. *Lancet* (London, England), 389(10064), 91–102. [https://doi.org/10.1016/S0140-6736\(16\)31390-3](https://doi.org/10.1016/S0140-6736(16)31390-3)
5. Chajes, J. R., Stern, J. A., Kelsey, C. M., & Grossmann, T. (2022). Examining the Role of Socioeconomic Status and Maternal Sensitivity in Predicting Functional Brain Network Connectivity in 5-Month-Old Infants. *Frontiers in neuroscience*, 16, 892482. <https://doi.org/10.3389/fnins.2022.892482>
6. CLADHO (2016). Report of the rapid assessment on teenage pregnancy. Kigali.
7. Corcoran J (2016). Teenage pregnancy and mental health. *Societies* 6(3):21. Crossref
8. Coleman R (2017). Gender and Education in Guinea: Increasing Accessibility and Maintaining Girls in School. *Journal of International Women's Studies* 18(4):266-277.
9. Conlon, B. A., McGinn, A. P., Lounsbury, D. W., Diamantis, P. M., Groisman-Perelstein, A. E., Wylie-Rosett, J., & Isasi, C. R. (2015). The Role of Parenting Practices in the Home Environment among Underserved Youth. *Childhood obesity (Print)*, 11(4), 394–405. <https://doi.org/10.1089/chi.2014.0093>
10. Enricho DN, Lin C, Latumer HK, Jenya CS, Estinfort W, Wang Y, Juan S, Jian W, Iqbal U (2020). Girls' empowerment and adolescent pregnancy: A systematic review. *International Journal of Environmental Research and Public Health* 17(1664):1-14
11. Jiang, C., Li, X., Du, B. C., Huang, J., Li, Y., Zhang, Y., Wei, M., Xu, X., Yang, Y., & Jiang, H. (2024). Role of home nurturing environment on early childhood neurodevelopment: a community-based survey in Shanghai, China. *BMC pediatrics*, 24(1), 721. <https://doi.org/10.1186/s12887-024-05190-3>
12. Kalipeni, E., Iwelunmor, J. and Grigsby-Toussaint, D. (2017) Maternal and Child Health in Africa for Sustainable Development Goals beyond 2015. *Global Public Health*, 12, 643-647. <https://doi.org/10.1080/17441692.2017.1304622>
13. Kaphagawani NC, Kalipeni E (2017). Sociocultural factors contributing to teenage pregnancy in Zomba district, Malawi. *Global public health*, 12(6):694-710.
14. Kassa, B. G., Belay, H. G., Ayele, A. D. (2021). Teenage pregnancy and its associated factors among teenage females in Farta Woreda, Northwest, Ethiopia, 2020: A community-based cross-sectional study. *Population Medicine*, 3(July), 19. <https://doi.org/10.18332/popmed/139190> Meaney M. J. (2016). Mother nurture and the social definition of neurodevelopment. *Proceedings of the National Academy of Sciences of the United States of America*, 113(22), 6094–6096. <https://doi.org/10.1073/pnas.1605859113>
15. Shibeshi, A. H., Seifu, B. L., Kase, B. F., Asebe, H. A., Tebeje, T. M., Asgedom, Y. S., ... Mare, K. U. (2024). Teenage pregnancy and its associated factors in Kenya: a multilevel logistic regression analysis based on the recent 2022 Kenyan demographic and health survey. *International Journal of Adolescence and Youth*, 29(1). <https://doi.org/10.1080/02673843.2024.240>
16. Patino LV, Gordon V (2019). Status of girl's well-being in Florda. Florida: Delores bar weaver policy.
17. Wang Y. (2023). Influence of Early Family Nurturing Environment on Children's Psychological and Emotional Social Development. *Iranian journal of public health*, 52(10), 2138–2147. <https://doi.org/10.18502/ijph.v52i10.13852>
18. Zhang Y, Jin X, Chen J, Li Y, Wang S, Bian X et al. Study on correlation between family nurture environment and toddlers' social-emotional development in urban areas of Shanghai. *J Bio-education*. 2020; 8 (1): 36–42. 10.3969/j.issn.2095-4301.2020.01.007