



RE/ASSEMBLING
THE
PREGNANT
AND
PARENTING
TEENAGER

Narratives from the field(s)

Edited by

Annelies Kamp / Majella McSharry

Peter Lang

In 2003, Wendy Luttrell posed an important question: what might result if we were able to turn questions of judgement about pregnant and parenting teenagers into questions of interest about their sense of self and identity-making? This book takes up the challenge, offering a re/assemblage of what is, can be and perhaps should be known about teenage pregnancy and parenting in the context of the twenty-first century. The collection presents original contributions from leading commentators in four key contexts: the United States of America, the United Kingdom, Aotearoa New Zealand and the Republic of Ireland, all sites of elevated incidence of and/or concern around what is commonly articulated as the 'problem' of teenage pregnancy and parenting. In offering a multi-disciplinary reading of the narratives of young men and women, this volume engages with the ambiguity shared by all of us in confronting the life transition that is pregnancy and parenting.

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This publication has been peer reviewed.

Annelies
for my parents and my sisters, with gratitude

Majella
for Órán, Elora and the one who kicks inside!

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WENDY LUTTRELL

Foreword

Annelies Kamp and Majella McSharry have compiled a set of stunning articles about teenage pregnancy and parenting across four countries – the United States of America, the United Kingdom, the Republic of Ireland and Aotearoa New Zealand. The volume offers passionate and personal tales embroidered with empirical and critical theoretical insights to cement our understanding that pregnant and parenting teenagers are a far more diverse group than stereotypes, media images and policy frameworks suggest, and that decades of research have established.

This volume is bold; it calls for two paradigm shifts. The first is a shift in how to study individual lives as they intersect with social, cultural and political forces. The second is a shift in how we imagine the purpose of education, not simply for pregnant and parenting teenagers, but for all young people. The purpose of education that is suggested by this volume goes beyond individual outcomes and attainment to encompass a collectivist/community ethos of belonging, care, well-being, justice and possibility.

Kamp and McSharry succeed in the first paradigm-shifting because they make creative use of the concept of re/assemblage. I appreciate and applaud the way the volume brings to life and makes accessible assemblage thinking. In the most general way, the book itself is an assemblage of different elements in the study of teenage pregnancy and parenting and how these can come together to create an understanding of issues larger than itself, including insights into the sprawling structures, unattainable expectations and human consequences of neoliberalism.

The breadth of approaches gathered into one place will inform and inspire readers both familiar and unfamiliar with a topic that for decades has thrived on what Eve Tuck would call ‘damage-based research.’ She writes:

Much of social science and educational research seeks to document pain, loss, brokenness or damage in order to establish the grounds to informally or formally petition

for reparations composed of political, material, or sovereign gains (Tuck 2009). Examples are easy to locate – they are studies that depict entire schools, tribes, and communities as flattened, ruined, devastated. (2010: 638)

Damage-based research relies on one-dimensional analyses of individuals who have been lumped together as one. For example, that all pregnant teenagers suffer harm; that all teenage mothers are unfit; that all teenage fathers are irresponsible. This volume provides an antidote; the range of multi-dimensional tools of analysis and angles of vision are impressive. The volume includes articles that utilize discourse analysis, examining how girls and women remain caught within an array of discursive demands about how to be ‘good’ women, daughters, sexual beings, mothers, partners, students, community members – all amidst competing expectations and wildly different resources. Other chapters analyse news, television and media sources, exposing the ways that teenage pregnancy, abortion and mothering are cast in deficit, stigmatizing, sensationalized and blaming ways. A further chapter provides a rigorous critique of decades and ‘generations’ of ‘alarmist’ research on teenage mothering in the United States, which will prompt readers to think about and want to scrutinize the ‘science on teenage mothering’ in other nations. An argument is made for the importance of longitudinal and multigenerational studies that are able to shed light on how lives are composed over time and in relationship to a constellation of family relationships, neighborhood resources, community contexts and national policies (SmithBattle 2017: 75–103).

While being careful not to romanticize or celebrate teen pregnancy and parenting, several articles in the volume question the ‘damage-only’ narrative, emphasizing that a pregnancy can shift the activities, priorities, and aspirations for soon-to-become young mothers (and fathers) in protective, reparative ways. The volume reveals hidden, class-based assumptions and prescriptions about the ‘normative’ life course (school, job, marriage, parenting), and how this linear trajectory works to frame alternative pathways taken in young people’s lives as abnormal, problematic, or deviant rather than adaptive or resilient. If there is a generalization to be made, it runs counter to conventional wisdom. As one source cited succinctly puts it, ‘girls who grow up in disadvantaged families and communities are not substantially harmed by a teen birth, while teens with better prospects for

advancing their education and income are harmed the most' (Diaz and Fiel 2016 cited in SmithBattle 2017: 83).

By exploring young people's context-bound and complicated decisions about sex, abortion, adoption, marriage, partnering, mothering, and schooling, the volume exposes the illusion of the neoliberal notion of 'free choice'. Choices are not 'free'; they do not exist in a vacuum. Choices are not singular, bounded entities, like consumer items that we handpick or reject as the 'rational economic man (sic)' model of human agency would have it. This notwithstanding, it is hard to speak and be heard outside the logic of choice and personal 'responsibilization' promoted by neoliberalism. But in the accounts of young people represented in this volume I hear them struggling to do just that, to present themselves and their actions outside the terms of 'choice'. Like the pregnant girls with whom I worked twenty-five years ago (Luttrell 2003), I notice the efforts to reframe choice and responsibility as *interdependent* rather than *independent*. Realizing that child-bearing gives meaning to two lives, not one, is but one example of how life choices and chances are not discrete and unhinged, but interdependent and interwoven. As one father quoted in the collection put it, 'I've got to do something with my life otherwise, yeah, my baby's not going to have a life' (Tuffin, Rouch & Frewin 2017: 276). One reformulation of choice was expressed by the then young Annelies Kamp, who when interviewed about her pregnancy at age sixteen explains her overwhelming shock and then '*coming to terms*' (my emphasis) with being halfway down 'a road of no choice' to pregnancy and parenthood, ultimately with the support of her parents and siblings (Kamp 2017: 29). 'Coming to terms' with pregnancy and motherhood suggests a more complicated model of subjectivity and agency, a model that goes beyond autonomy, self-interest and independence. Sandra who is talking about marriage in the Traveller community in the Republic of Ireland, offers another reformulation of agency and choice, embedded in her affinity with community values and traditions. She married at sixteen, and explains

I wanted to *get it over with* (my emphasis). Traveller girls are different to settled girls. They're much more mature at 16. Settled girls have childish ways. They're not used to caring for children or helping run the house. (Boland 2011 cited in McGaughey 2017: 186)

The point is that these distinctive formulations – ‘coming to terms,’ ‘getting it over with’ – express a far more textured and alternative way of understanding human agency.

I especially appreciate the articles that offer analyses of the embodied and felt experience of pregnancy and mothering; how the experience of teenage pregnancy involves bumping up against pre-given, but not fixed, notions of the categories ‘girl’ and ‘woman.’ Majella McSharry’s beautiful account braids together insights from her ‘late’ pregnancy experience into an analysis of teenage pregnancy, reminding me of the experiences and knowledge that the pregnant girls with whom I worked had communicated to me and to each other. At that time, I called their insights ‘bodysmarts.’ I chose this term to convey pain, anxiety and vulnerability (as in ‘it smarts’ or ‘hurts’) as well as wisdom, resilience and self-acceptance (as in being ‘smart’). McSharry’s account invites an exploration of bodysmarts in a culture that characterizes pregnant teenagers as ‘foolish’ in contrast to ‘advanced’ age pregnant women who are characterized as ‘selfish.’ McSharry reflects on being pregnant with her third child at age thirty-seven. Journaling about her check-up with the midwife and being weighed, McSharry notes that the midwife does not comment about her weight gain of 14 lb. despite the fact that it is ‘in excess of “normal” weight gain at sixteen weeks’ (McSharry 2017: 56–66). Given that most women can expect to gain 30 lb. during pregnancy, McSharry writes that she feels a ‘slight sense of panic’ that she has already gained more than half of what is ‘normal.’ This keen awareness about body image is one among several elements in an assemblage of the maternal body and subjectivity. She describes the ‘bittersweet taste of euphoria and fear’ that accompanies maternal ‘indulgence’ which is culturally allowed because it is understood that women are ‘eating for two.’ This indulgence comes into conflict with the cultural imperative of ‘thin-ness’ as a marker of ‘successful femininity.’ McSharry uses her ‘bodysmarts’ to explore cultural (and medical) prescriptions and preoccupations with weight management during pre- and post-maternity, and to critique the push to reclaim the pre-pregnant body shape, to get one’s ‘body back’ (a phrase used by the pregnant girls with whom I worked). I join McSharry in worrying that medicalization and cultural imperatives that surround pregnancy, childbirth, and breastfeeding can leave girls and women feeling

at odds with and/or severed from a connection to their own bodies and to their babies.

Reading this volume made me dream of bringing girls and women across geography, generation, class, race, culture, and sexual orientation to meaningfully explore their bodysmarts. What if one of the purposes of education was to broker such conversations? What would schools have to look like in order for this to happen? First, schools could no longer be sites of punishment and exclusion, but places of belonging and inclusion. The ethos of belonging that would guide schooling would be the antithesis of what prevails in this current educational era with its appeals for standards and standardization, and its requirements of accountability and evaluation that cannot begin to appreciate or honor the rich variations and differences among us. Second, schools would be sites of care and well-being, where young people feel ‘grounded’, ‘OK’, ‘accepted’ with ‘no one looking down on you’, as in the words of students who attended the Karanga Mai Young Parents’ College, a holistic school programme in Aotearoa New Zealand (Hindin Miller 2017: 258). I believe that the ethos of care and well-being that would guide schooling would go beyond what is typically envisioned, where teachers care equally about all students’ lives and learning and schools provide the resources, services and curriculum that nourish social bonds, not only individual attainment. The ethos I have in mind is broader; it attends to a ‘thick’ rather than ‘thin’ version of students’ needs, of the kind the editors in this volume call for. In my mind, it hinges on what Shawn Ginwright (2016) calls ‘healing justice’. In his words:

Rather than viewing well-being as an individual act of self care, healing justice advocates view healing as political action. Healing is political because those that focus on healing in urban communities recognize how structural oppression threatens the well-being of individuals and communities, and understands well-being as a collective necessity rather than an individual choice. (2016: 8)

I write steeped in and sobered by a political crisis within the United States and abroad. I crave reading collections like this one to remind us of alternatives. I thank the editors for re/assembling insights about teenage lives – their bodies, minds, life trajectories, hopes, and aspirations – at this fragile and factious political moment. It is crucial that we don’t lose sight of what

is possible for the next generation and for schools. The lives and learning experiences of pregnant and parenting teenagers will be, as they have been before, the result of social movements (like the civil rights and feminist movements), political action and national policy struggles and reforms of the kind mentioned in this book. An imagination of what is possible is also rooted in liberation movements that have pushed back against state-sponsored harm and violence. Whether this state harm and violence is against women, women like Savita Halappanavar whose tragic death in the Republic of Ireland in 2012 – the result of laws forbidding termination of pregnancy – opens this volume or whether it is against the poor, the young, indigenous communities and/or communities of color, it is through political protest that change is made.

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ANNELIES KAMP AND MAJELLA MCSHARRY

I Conceiving a Re/Assemblage of Teenage Pregnancy and Parenting

ABSTRACT

The chapters in this collection aim to trouble simplistic notions of teenage pregnancy and parenting. Each chapter, in its own way, contributes to a nuanced, yet critical, reading of the ‘problem’ of teenage pregnancy and parenting. If we achieve our objective, the collection will contribute to a ‘re/assemblage’ of the multiplicity that forms at the intersection of being a teenager, of being pregnant and, for some, of parenting, all in the gaze of a questioning/concerned/judging/sometimes voyeuristic public. The teenage parent ‘problem’ is, in itself, a result of processes of assemblage; it is a consequence of diverse discourses, cultural constructions, social structures, economic projections and emotive entanglements that coalesce in concerns for young people, for their children, for their futures and our own. By drawing together narratives of teenage pregnancy and parenting – from the United States of America, the United Kingdom, Aotearoa New Zealand and the Republic of Ireland – we foreground processes of assemblage and re/assemblage that occur within lives that are reconfigured to greater or lesser degree by the multiplicity that is teenager + student + mother/father + daughter/son + pregnant woman/partner. In this chapter, the conception of this book and its theoretical and empirical genesis are gathered, tinkered with and acknowledged. This is followed by an introduction to the chapters to come.

Re/Assemblage

As you read this, where are you? Are you sitting at a desk or on a sofa, in an aircraft, perhaps, or on a train? Or perhaps you are lying in the bath? Another question: how many versions did this text go through? What was added and deleted along the way?

The answers to these questions are among the many complexities that don’t concern us here. We leave them out not because they are irrelevant to intellectual work in general; no doubt they are relevant in various ways,

but a single text cannot be everywhere at once. It cannot do everything all at the same time nor tell all.

— LAW & MOL (2006: 6), original emphasis

In the book from which this quote is taken, John Law and Anne-Marie Mol were concerned to engage with complexity and, in particular, complexity in the context of knowledge practices. In opening their book in this way – and in our own choice of this opening quote – they aimed to trouble ‘simple’ responses to the widely acknowledged dangers of reductive simplification. As the chapters in this book evidence, there are many shifting trajectories involved in being pregnant, and in being pregnant at an age that does not confirm with the norms of a given population, whatever those norms might be. Similarly, as any parent will confirm, there are many, shifting, trajectories involved in parenting. For those young people who contend with pregnancy, and perhaps parenting, whilst also engaged with cultural norms of completion of secondary- and, increasingly, tertiary-level education and/or employment, there are even more trajectories to contend with. For Law and Mol, this kind of multi-dimensional fluidity in a given life, and in our attempts as social scientists to understand that life, to gather knowledge that can inform policies that better support that life, go beyond a critique that one must not be reductive. Rather, they imply multi-dimensional approaches that include theoretical, empirical and methodological inquiry. It is this task that we have set ourselves in this collection.

Whatever the context, the dominant assumption – particularly from the medical disciplines – around teenage pregnancy and parenting is that it is undesirable (Cherrington & Breheny 2005); even when it is acknowledged that a pregnancy may follow from a conscious decision, that decision is in itself deemed foolish. The dominance of an expert, medical, negative discourse on teenage pregnancy has been associated with the rise of the biomedical model in the eighteenth and nineteenth centuries and, subsequently, increasing prescription concerning issues of sexuality and fertility (Foucault 1980). Pregnancy became aligned with illness and was, therefore, established as a legitimate object of scientific intervention (Cherrington & Breheny 2005). Lawlor and Shaw (2002) note that while the management of teenage pregnancy as a problem has had more to do with social, cultural

and economic imperatives, medical and public health discourse frames the logic of how the problem of the pregnant teenager has been both amplified and redefined.

In this process of redefinition, Macvarish (2010) demonstrates shifts in how the teenage parent has already been re/assembled: a process of 'de-moralising' in which – in some contexts at least – diminishing concerns around the morality, or otherwise, of pre-marital sexuality have been replaced by expanding concerns of harm to any child of a teenage parent and cost to the taxpayer; the re-construction of the individual teenage mother as lacking in rational agency; the teenage father as being in need of responsabilization; and constituting both parents and their children as social threat and economic burden. In part, this process of redefinition has its roots in longer run processes of biopolitics (Foucault 1997) – active since the nineteenth century – through which individuals have come to be 'known', rationalized within certain discourses about life and governed by way of inducement to particular forms of subjectivity.

In the developed world at least, 'normal' development is now portrayed as involving a slow yet steady movement toward normatively defined adulthood. This portrayal derives from a discourse of panoptical time, a time framework that compels parents, young people, medical experts, social workers, educators, teachers, academics and policymakers 'to attend to progress, precocity, arrest, or decline' (Lesko 2001: 41). In *Discipline and Punish* (1977), Foucault had introduced the notion of the panopticon to explore a mode of total surveillance in prisons which affected the subjectivities of both the prisoner and the guard. The notion drew on Jeremy Bentham's architectural panopticon, a model for eighteenth-century institutions:

At the periphery, an annular building; at the centre, a tower; this tower is pierced with wide windows that open onto the inner side of the ring; the peripheric building is divided into cells, each of which extends the whole width of the building; they have two windows, one on the inside, corresponding to the windows of the tower; the other, on the outside, allows the light to cross the cell from one end to the other. All that is needed, then, is to place a supervisor in a central tower and to shut up in each cell a madman, a patient, a condemned man, a worker or a schoolboy. By the effect of backlighting, one can observe from the tower, standing out precisely against the light, the small captive shadows in the cells of the periphery. They are like so many cages, so many small theatres, in which each actor is alone, perfectly individualized

and constantly visible. [...] Full lighting and the eye of a supervisor capture better than darkness, which ultimately protected. Visibility is a trap. (Foucault 1977: 200)

As a concept, the idea of ‘panoptical time’ illustrates the ways discourses of ‘normal’ development privilege certain ways of being and problematize those ways of being that – through choice or circumstance – do not conform to what is deemed to be normal development. The development of physical and psychological stages of ‘normal’ development such as those proposed by Piaget and Erikson are both, for Nancy Lesko (2001), examples of panoptical time, as is progressive implementation of age-graded schools where the concentration of young people of the same age together in ‘stage-based’ schools resulted in decreased tolerance of variation from the standards of ‘normal’ development (Chudacoff 1989). In the context of the twenty-first century, the new normal is no longer just completion of second-level school and securing of an initial qualification. Rather, young people, and particularly young women, are deemed to be at risk if they lack a tertiary qualification.

The pregnant young woman and parenting teenager vividly and visibly speak a counter-narrative to a discourse that sees young people as childlike until they have completed university. However, that counter-narrative will, with time, vanish. Sooner or later, for one reason or another, pregnant teenagers are no longer pregnant; and teenage parents grow into non-teenage parents, being rendered ‘decent’ by the passage of time and leaving the mantle of stigmatization to rest on the next generation of pregnant and parenting teenagers. What was at once articulated as a future-threat – teenage parents, and particularly teenage mothers, routinely being told they have ruined their lives and created a future burden for others – cannot be countered in the present and is carried into the future, no matter what happens afterwards. As we write this first chapter of the collection, one of us is engaged in a Twitter discussion with a commentator who assures the world that there is no hope for children of teenage mothers and disengaged fathers. He states his focus is not about people like one of us, but, rather, the ‘early teen unwed mother compromising her independence and self-fulfilment’. We don’t want to engage in this discussion which plays out so frequently in the comments section of newspapers; but we do want to ask how that clarification makes any difference whatsoever? One of us was an

early teen when she became a parent. She was unwed. She now has four degrees, a career as an academic that has allowed her to work around the world, a daughter and son (both successful in their own fields) and four grandchildren. She doesn't feel compromised in either independence or self-fulfilment, even if she did not follow a 'normal' path in getting to here. We want to ask: how much does a teenage parent have to achieve before he or she is able to extinguish this prophecy of a life ruined once and forever? Yet, all around us, teenage-parents-now-normal get on with the joys and challenges of parenting, working, learning, struggling at times, thriving at times and constructing a life in much the same way as does any other parent.

In this, the notion of re/assemblage offers potential. In acknowledging that discourses are not 'truths' (even if they masquerade as such), and that they are assembled in particular ways, at particular times, in particular places by particular people, with particular interests, the possibility of assembling new 'truths' becomes apparent. The narratives in this book – no less than other life narratives that do not appear in this book – demonstrate lines of flight that do not travel resolutely on one predetermined trajectory. In opening spaces for narratives of the ways and means by which young people construct 'a life' that is then re-constructed – re/assembled – through the inclusion of pregnancy and parenting, we become more attentive to how diverse these new 'truths' of teenage pregnancy and parenting can be. This is not simply a case of 'add pregnancy = lose potential': sometimes loss of existing potential, existing problematic potential, is a productive trajectory. At other times, adding pregnancy without any possibility of productive re/assemblage can be devastating. It is to this possibility that we now turn.

Compelling consequences

In December 2016 the *New Yorker's* 'Photo Booth' columnist Moira Donegan (Donegan 2016) reviewed the photo series *On Abortion*, photographed by Laia Abril. This series of photographs is the first component

of a larger project which catalogues abortion across the ages. The article makes compelling, somewhat horrifying, reading of the range of responses to pregnancies that – for whatever reason – are unsafely terminated: soap syringes, long reeds and thorns, rat poison, a forty-pound rock, a grapevine stalk, herbs, clothes hangers, steaming-hot baths, stairs, abortive pills. It also includes close-up images of some of the women who have died as a result of abortion being illegal or so ‘legally ambiguous’ that it became prohibited by effect.

One of those photos is of Savita Halappanavar, a thirty-one-year-old dentist, who died in the Republic of Ireland in 2012 and whose story raged across the front pages of the media following her death four days after she delivered a stillborn daughter. Her death was due to medical mismanagement and complications of a septic miscarriage that occurred after she was denied an abortion (Holland 2012). Sixteen weeks into her pregnancy and suffering back pain, Savita had been taken to hospital by her husband, Praveen. The following day, her waters broke. On 23 October, having been advised that miscarriage was inevitable, Savita and Praveen asked for a termination; they were advised that termination of pregnancy was not legally possible in Ireland while there was a foetal heartbeat.

Media reported that in the days that followed, midwife Ann Burke had explained to the couple that a termination was not possible because Ireland is ‘a Catholic country’; subsequently, medical staff were reported as being ‘keen to dismiss’ suggestions that a Catholic ethos ever influenced treatment decisions (Humphreys 2012). However, it was the case that under the law at the time – the Offences against the Person Act 1861 – the act of abortion was a criminal offence punishable by imprisonment. Termination of pregnancy in Ireland was allowable only under certain circumstances, a result of the *X* case ruling of the Supreme Court of Ireland in 1992. ‘*X*’ was a fourteen-year-old girl who had been raped and impregnated by a neighbour. The rape was reported to Gardaí¹ and in the following weeks *X* and her parents made the decision to abort the pregnancy. Given the law in the Republic, the termination would take place in the United Kingdom. The family advised the Gardaí of this decision as they wanted

1 The police force of the Republic of Ireland.

to establish whether DNA collected during the procedure might aid in a prosecution. Through a chain of connections, the then Attorney General Harry Whelehan became aware of events surrounding X and, on the day the family arrived in London, he obtained an interim injunction stopping the family leaving the country or arranging a termination.

The family duly returned to Ireland, with X still carrying the child of her rapist. The action was heard on 10 and 11 February, the rape having occurred in December. After reserving his judgement for a week, Justice Costello ordered that the right to life of the unborn child should not be interfered with and restrained X from leaving Ireland for a period of nine months. Despite accepting evidence that X was suicidal, Justice Costello argued that the risk to her life was not sufficient to override the right to life of the unborn.

The evidence also establishes that if the court grants the injunction sought there is a risk that the defendant may take her own life. But the risk that the defendant may take her own life, if an order is made, is much less and of a different order of magnitude than the certainty that the life of the unborn will be terminated if the order is not made.

I am strengthened in this view by the knowledge that the young girl has the benefit of the love and care and support of devoted parents who will help her through the difficult months ahead. It seems to me, therefore, that having had regard to the rights of the mother in this case, the court's duty to protect the life of the unborn requires it to make the order sought. (Cited in O'Carroll 2012)

The following week, X's parents lodged a Supreme Court appeal of the decision on behalf of their daughter. The appeal argued that the risk to the life of X was not less than that of her unborn child given her overt intention to end her life rather than continue the pregnancy. The appeal was heard in March and resulted in a majority decision of four to one to set aside the High Court ruling. X and her parents were permitted to travel and immediately returned to the United Kingdom. At this point, X miscarried before the termination was performed.² In the years following the

2 Of note, the neighbour who raped X was found guilty of unlawful carnal knowledge and sentenced to four years' imprisonment, which was reduced on appeal. In 2002

X case a number of referendums concerning the Irish Constitution were passed, including the freedom to travel outside the state for an abortion and the freedom to obtain or make available information on abortion services. However, unless a pregnancy endangered the life of the mother, it remained against the law in both the Republic of Ireland and Northern Ireland. In the Republic this was despite the lack of any legislation to give guidelines as to when, and under what circumstances, a pregnancy could be terminated – a situation that Savita and Praveen would be brought face to face with some twenty years later.

This chapter, and this book, is not solely concerned with the profound consequences of unwanted pregnancy or with pregnancy that endangers the life of a mother, whatever her age, in the Republic of Ireland. The story of X and Savita (and the untold stories of the thousands of Irish women who travel outside of Ireland every year to terminate a pregnancy³) acts as a both an entry point – a profoundly human entry point – to this collection and an imperative for our work given the profound consequences of the discourses that shut down our ability to productively engage with young people who are pregnant and parenting.

Rather, in this chapter we want to place these points of reference from the Republic of Ireland in comparative perspective, in the process establishing a basis for the chapters that follow – chapters that offer narratives and counter-narratives of the experience, incidence, construction and trajectory of teenage pregnancy and parenting in the Republic of Ireland, the United Kingdom, the United States of America and Aotearoa New Zealand. Access to abortion, or lack of it, is irrevocably connected to the

he would be found guilty of the kidnap and sexual assault of a thirteen-year-old girl whom he also impregnated.

- 3 Of the women who terminated a pregnancy in England or Wales in 2015, 3,451 gave their address as one of the twenty-six counties of the Republic of Ireland; of these 263 (7 per cent) were aged under twenty. In the same period, 833 women gave their address as Northern Ireland; of these, ninety-nine (12 per cent) were aged under twenty (Department of Health 2016). Terminations undertaken in Scotland in 2015 for women who gave an address in the Republic are unclear, being categorized as Other/Not Known for address. Of the potential sixteen who may have been from the island of Ireland, one was aged under twenty (National Services Scotland 2016).

experience of pregnancy at whatever age it occurs: unintended pregnancy is the ‘root’ of abortion (Guttmacher Institute 2012). Just as the socio-political context of the Republic of Ireland results from a particular assemblage of religious, medical, historical and cultural discourses, so does the socio-political assemblage of the other contexts on which we focus. While we openly declare our partiality here – with Aotearoa New Zealand and the Republic of Ireland being our respective birthplaces – there is also a non-partisan rationale for these four countries featuring in this book. That rationale lies in the incidence of the topic of concern: that our countries, and the United States and United Kingdom are, in developed countries, noteworthy in their high rates of teenage pregnancy and parenting. We will sketch the nature of this noteworthiness in the following section.

Context and constructions

The contributors to this book trouble discourses that fix the ‘problem’ of teenage pregnancy and parenting, as one issue (age), one reading (medical) and one likely long-term outcome (ruination). Teenage pregnancy and parenting is not one thing, even within the experience of one teenager. It is always the case that, to some greater or lesser degree, pregnancy and parenting are full of tensions and ambivalences; young people are no different to older people in that regard. Yet young people *are* different in terms of managing the physical, economic, social and emotional changes associated with pregnancy and parenting whilst simultaneously managing culturally appropriate normalized expectations of transition to adulthood: finishing formal education, securing a foothold in some form of sustainable employment, forming enduring personal relationships, setting up an independent household or family unit and so on. Within this shifting assemblage, continuation of a pregnancy and, eventually, parenting, may well be beyond the capacity of the individuals; abortion may be the right choice (provided, of course, that choice is available). Postponed or part-time education may also be the right choice, or not. Teenage pregnancy

and parenting is unquestionably complex and our engagement with it should be equally complex.

Despite steady declines across all countries over the latter decades of the twentieth century (The World Bank 2016), the World Health Organization reported that in 2014, 11 per cent of all births worldwide were to young women aged fifteen to nineteen. In human terms, some sixteen million young women aged fifteen to nineteen and a further one million girls aged under fifteen gave birth, mostly in low or middle income countries. Complications associated with pregnancy and childbirth were, globally, the second highest cause of death for fifteen- to nineteen-year-old girls (World Health Organization 2014), mostly occurring in the developing world. Yet in these contexts cultural norms often include young marriage and childbearing, and pregnancies are more often intended (Sedgh, Finer, Bankole, Eilers & Singh 2015). These facts offer a necessary and sombre insight into our relatively privileged position in thinking about, speaking to and experiencing teenage pregnancy and parenting within our four countries. In terms of geographical focus, the United States offers fertile ground for examining prevailing conceptions, misconceptions and assemblages of the teenage parent. In spite of a declining teenage birth rate, the rate itself remains the highest among developed countries, and the United States' share of teenage births worldwide is substantial. On either side of the US, we focus on two geographically remote contexts: the United Kingdom and Republic of Ireland in northern Europe, and New Zealand in the South Pacific. Similar in political orientation and geography but diverse in history and culture, they offer compelling contrasts of the incidence, experience and management of teenage parenting in advanced liberal democracies.

Using the most recent UNICEF Report Card (UNICEF 2001) to allow comparability at point in time, the United States, the United Kingdom and New Zealand reported the highest global number of births to young women aged fifteen to nineteen at 52.1, 30.8 and 29.8 births per 1,000 respectively (see also Sedgh et al. 2015). The Republic of Ireland stood at 18.8 births per 1,000. Of interest here is how, in a global context where teenage birth rates have decreased, the rates in Ireland had resisted the global trend. For example, in New Zealand in 1970 the rate of births for fifteen- to nineteen-year-olds was 64.3 births per 1,000 women; in 1998

the rate had dropped to 29.8 per 1,000 women. In the United States the rate for the same group had dropped from 69.2 births per 1,000 women to 52.1 births, while in the United Kingdom the drop was from 49.4 births to 30.8. In Ireland the rate had increased from 16.9 births per 1,000 women to 18.7 births, no doubt demonstrating a context in which the pregnant teenager has been forcibly rendered invisible.⁴

In 2015 Gilda Sedgh and colleagues examined trends since the mid-1990s for all countries with available information on pregnancy rates and outcomes among teenagers; the pregnancy rate was found to have declined since the mid-1990s in the majority of the sixteen countries where trends could be assessed (Sedgh et al. 2015). Of the twenty-one countries with complete data, the United States continued to demonstrate the highest rate (57 pregnancies per 1,000 females), followed by New Zealand (51 pregnancies per 1,000 females) and England and Wales (47 pregnancies per 1,000 females). Switzerland had the lowest rate (8 pregnancies per 1,000 females). Of those countries with reliable evidence, the proportion of teenage pregnancies that ended in abortion was highest in Sweden at 69 per cent; in the United States 26 per cent of pregnancies ended in abortion compared with 36 per cent in New Zealand. For the reasons noted earlier, data was not available for the Republic of Ireland. These point-of-time comparisons are complex and somewhat contradictory, in that they offer a dynamic picture of the diversity that is teenage pregnancy and parenting in the twenty-first century.

Moving beyond the dichotomy of ruination/salvation

Despite what you might be led to believe on the basis of media portrayals of teenage parents in the twenty-first century, there is no 'homogenous category' of teenage parents; the experience of pregnancy and parenting exhibits

4 See the chapter by Bradley in this collection for a detailed portrayal.

significant variation by gender, class, race and ethnicity (Johansson & Hammarén 2014; Luker 1996) and by location. Similarly, there is no 'bounded discourse' used by those who theorize these topics: 'discursive activities [...] (their talk, practices, and institutions) are but one aspect of cultures' myriad active and ongoing social *processes* of meaning production' (Cherrington & Breheny 2005: 92). As Johansson and Hammarén note in their research, which focused on teenage fathers' processes of constructing fatherhood in online spaces and in counterpoint to community discourses, most studies focus on/construct teenage parents as vulnerable, immature and socially disadvantaged – those who are parenting at the 'margins of society' (Johansson & Hammarén 2014: 366–7). Alternative discourses – those we might think of as quietly spectacular stories of young parents who, no more nor less than any other person, assemble a trajectory through education, employment and all the other markers of what is currently deemed as 'success' in their life world – remain less evident. Education as a field – as acknowledged in the sub-title to this book – is a central concern given the normative trajectory that expects young men and women to have, as their dominant concern, engagement in full-time education during their teenage years.⁵ As Wendy Luttrell (2003: 3) noted in the opening lines of her book on the education of pregnant teenagers in North Carolina in the United States, drawing on a quote from W. E. B. Du Bois: it is indeed a 'strange experience' to be a problem.

Deirdre Kelly offers one reading of the framing of this problem in work that grew from her discourse analysis of articles printed in the Canadian media between 1980 and 1992. In working with over 700 articles, Kelly was able to demonstrate how stereotypical discourses of teenage pregnancy and parenting allowed structural dynamics to be rendered invisible

- 5 In this we acknowledge, but are not restrained by, the work of Bourdieu. For Bourdieu, the field is multiple, and defined categorically in terms such as 'education'. While a field is self-determining, it is nonetheless subsumed within 'the social', which is in turn framed by various forms of power. The concept allows analysis of how agents – human agents – are positioned relationally. While this clearly speaks to notice of the symbolic positioning of teenage parents in the field of education, it is overly structured and focuses insufficient attention on non-human agents as argued by O'Hara (2000).

(Kelly 2000b), replaced by a 'stigma contest' that cohered in four forms and through which pregnant and parenting teenagers 'must walk as they make decisions and take actions in their lives' (Luttrell 2003: 25). In *Pregnant with Meaning* Deirdre Kelly (2000a) captured some of the pervasive stereotypes and their counter-narratives. For Kelly, discursive frameworks concerning the problem of teenage pregnancy and parenting offered four frames that co-exist, only two of which, at that time, found favour with media and policymakers. As a consequence, teenage pregnancy and parenting are the focus of 'stigma wars'. The first discourse stems from bureaucratic experts who create teenage pregnancy and parenting as a certain kind of problem. It is this frame that has been and remains dominant; it is a frame that feeds off a more generalized youth-at-risk discourse, where experts are brought in to manage the risk associated with youth (Kelly 2003). This 'wrong-girl' frame pathologizes the individual as psychologically flawed and, as evidenced by her childbearing, incapable of making 'good' choices that align with normative trajectories for young people in the context of the twenty-first century. The second discourse which speaks to media and policy flows from conservative forces – economic, religious and social. Here, a 'wrong-family' frame looks to the immediate social context of the teenager, viewing teenage parenting as an issue of welfare dependency. In this discourse, abortion should be rejected as being out of line with conservative values, but adoption is framed as a 'good' choice, offering as it does a chance for the child to be raised in what is perceived as a better family, a family that is not-wrong, a family that will fit in with the dismantling of the welfare state (Lesko 1995). The third and fourth discursive frameworks stand on the opposing side of the stigma wars. The third discursive framework is articulated only in alternative media, if at all, and is identified as a 'wrong-society' framework. Taken up by feminists and others, this discursive framework sought to correct the blindness to structural factors such as class inequality, gender relations and diverse forms of capital (Bourdieu 1986) as central to decision-making processes around pregnancy and parenting. The fourth and final framework articulated by Kelly was that of the teenager: a young person with forms of agency. Many of the chapters in this collection provide further support for the presence of

this second counter-framework: a 'stigma-is-wrong' discursive framework that is evoked by young parents, that is informed by their own knowledge of their lived world and the aspirations that they gather to themselves.

More recently, Breheny and Stephens (2010) adopted a similar approach to explore the discursive frameworks in regard to teenage parents within medical journals. An initial 'public health' discourse constructed teenage parenting as a disease that, by necessity, required a public health response. This was followed by an 'economic' discourse – familiar in other disciplines – where the teenage parent is presented as a financial drain on society and a compromise to the future-economic-self. An 'ethnicity discourse' presents next, where teenage parents are categorized by ethnicity, which of necessity and always brings with it different levels of resistance to the use of contraception. Finally, there is a somewhat disturbing 'eugenics discourse', which positions young parents as unsuitable parents in and of themselves by virtue of their immaturity and the consequent risk they pose for future generations. This analysis suggested that despite age being used as a blanket measure of concern, the concern – at least in this discursive space – is as much about the particular sort of young woman who is or will be a teenage parent, rather than any individual teenage parent. In a review of the quantitative research published between 1981 and 2000 in the US and the UK, Chris Bonell (2004) found a slant in the way the research clustered: in the UK teenage pregnancy was considered as a health problem, whereas in the US the issue of welfare expenditure was foregrounded, including positioning teenage pregnancy and parenting as a mediator in the intergenerational transmission of poverty. In this, Bonell highlights the powerful role of political, religious and research design factors, a point to which we will return.

However, not all accept this view of the 'catastrophic' consequences of teenage pregnancy and parenting. In his consideration of the evidence on the causes and consequences of teenage parenting, Simon Duncan (2007: 308) noted that there was a 'severe problem with this official view of teenage parenting – the research evidence does not support it.' Duncan suggests that:

Age at which pregnancy occurs seems to have little effect on future social outcomes, and many young mothers themselves express positive attitudes to motherhood, and describe how motherhood has made them feel stronger, more competent, more

connected, and more responsible. Many fathers seek to remain connected to their children. For many young mothers and fathers, parenting seems to provide the impetus to change direction, or build on existing resources, so as to take up education, training and employment.

From this perspective, the age of the parents at the time of their child's birth does not, on its own, predict either negative or positive outcomes, either for them and their children at that point in time or as some guarantee-before-the-event of future failure. At the most basic level, this is apparent as age appropriate roles – such as the appropriate age for becoming a parent – become troubled when considered from a cross-cultural perspective. While in the United States it is estimated that 82 per cent of teenage pregnancies are unplanned, in other contexts where cultural norms support youthful marriage, much lower levels of unplanned pregnancy are reported (Finer & Zolna 2014). While evidence indicates that teenage pregnancy can have an effect on patterns of engagement in higher education and early earnings, recent research indicates these effects are actually most pronounced for those *least* likely to become teenage parents, given they are least prepared for a transition to parenthood (Diaz & Fiel 2016). Even when a pregnancy and subsequent parenthood are unplanned, becoming a parent can equally act as a positive force, particularly for those young women who might have already disengaged from education (Hosie 2007). The extent to which this also holds true for teenage fathers is, to some degree at least, moderated by how much involvement can be sustained if the primary relationship with the mother ends (Bunting & McAuley 2004b). However, for at least some of the young women interviewed by Hanna (2001), their pregnancy was the beginning of a metamorphosis.

Thus, debates around the causes and consequences – personal, societal and economic – of teenage pregnancy and parenting tend towards something of a dichotomy. On one side of the dichotomy is a dominant discourse that ranges from disgust and opprobrium to disappointment and fear. Media, academic and policy portrayals continue to associate teenage pregnancy and parenting with a range of behaviours and consequential disadvantages for the teenage parent (usually a teenage mother), for the child, 'for society in general and taxpayers in particular' (UNICEF 2001: 3). On the other side, a narrative angle has increasingly demonstrated the mediating

effect of economic, cultural and social factors on decisions taken by pregnant teenagers and the longer-term joys and consequences of those decisions (see, for example, Bell, Glover & Alexander 2013; Minnis, Marchi, Ralph, Biggs, Combellick, Arons, Brindis & Braveman 2013; Brand, Morrison & Down 2015).⁶ However, the assemblage of the life of a teenage parent and his or her child is not undertaken in a void. Rather, it happens in contexts shaped by history and divisions of gender, class, geography, race, ethnic, cultural and religious diversity. These divisions matter more, or less, at different junctures in the journey towards, into and beyond parenting. They are mediated by greater, or lesser, support that also changes in its genesis and form (Bunting & McAuley 2004a, b; de Jonge 2001).

For Gilles Deleuze (cited in Rabinow 2009: 27), historical contextualization, while always critically limited, is a 'necessary preliminary' for understanding the collection of conditions in which a given event will, or can, unfold. For Deleuze, to understand the signification, explanation, effect and affect of any event, including events such as teenage pregnancy and parenting, one has to 'take up' that event; 'to seize an event in its becoming' (ibid. 28). Contextualization graphically demonstrates the paradox of teenage parenting: despite the normalizing of sexual activity and child-rearing outside of the constraints of marriage and significant declines in teenage birth rates across the developed world, the issue of teenage parenting has continued to be 'amplified' as a social problem (Macvarish 2010). The phrase 'teenage parent' has come to be invested with symbolic power through the gathering of dominant (deficit) discourses, stereotypical thinking, societal concerns of child welfare, economic debates on the sustainability of social protection systems, an undervaluing of domestic labour, risk thinking and ignorance of the lifeworld of the individual. In this book we intend rather to take up Luttrell's (2003) question of what might be possible if one could turn questions of 'judgement' about teenage parents into questions of interest about their sense of self and identity-making; into explorations of the ways they assemble and re/assemble themselves at one and the same time as they are pre-assembled by others; into considerations of what support

6 See SmithBattle in this collection for a detailed overview of generations of research into the consequences of teenage parenting.

really looks like when the pregnant and parenting teenager considers themselves as a lifelong learner.

While emerging counter-narratives to deficit discourses have been necessary, it is our position that they are, on its own, also insufficient. From the perspective of the subject – the teenage parent – there are ambiguities in gender divisions, sexual relations, fluid identities, the kinds of ‘careers’ that are assembled and reassembled in late modern times, the available forms of education and training with which to prepare for them, and the longer term consequences all of these have for the generation of individual and familial well-being (McDermott & Graham 2005; Stokes & Wyn 2007). Processes of individualization that are argued to be central to the construction of life since the latter decades of the twentieth century have challenged dominant notions of adulthood, community, family. Yet, while adult intimacy might be fragile in a context of liquid love (Bauman 2003), the mother/child relationship is ‘the last remaining, irrevocable, unexchangeable primary relationship’ (Beck 1992: 118), one that teenage mothers – no less than any mother – can at times embrace completely (McDermott & Graham 2005), at other times, less completely (Kamp & Kelly 2014). As Bauman (2003: 42) notes, the enormity of the parenting ‘decision’ is not one to be taken lightly:

Children are among the most expensive purchases that average consumers are likely to make in the course of their entire lives. In pure monetary terms, children cost more than a luxurious state-of-the-art car, a round-the-world cruise, even a mansion to be proud of. Worse still, the total cost is likely to grow over the years and its volume cannot be fixed in advance nor estimated with any degree of certainty. In a world that no longer offers reliable career tracks and stable jobs [...] signing a mortgage contract with undisclosed and indefinitely long repayments means exposure to an uncharacteristically high level of risk and a prolific source of anxiety and fear. [...] Moreover, not all the costs are monetary, and those that are not cannot be measured and calculated at all.

In this quote, Bauman is reflecting on the experience of parenting in general. However, his commentary on the high level of risk and prolific source of anxiety and fear associated with the parenting decision cannot but be compounded when combined with the generalized disdain directed at teenage parenting and the manufactured anxiety borne by young people in

transition from school to work in the complex context of the twenty-first century. Here, we are leaving aside any sustained consideration of global uncertainties such as intercultural and interreligious relations subsequent to a decade of a so-called ‘War on Terror’, the election of Donald Trump and the tensions associated with the mass movements of refugees, asylum seekers and economic migrants. These contextual factors are, unquestionably, acting in the shaping of life assemblages by teenage parents and their children in no less a fashion than they contribute to the shaping of the life assemblages of any of us. However, our intent is for a more modest engagement with the global; for reflection on the pre/dis/re/assemblage of the pregnant and parenting teenager in the context of processes of neo-vocationalization (Tennant & Yates 2003; Grubb & Lazerson 2005), increasing credentialism (Bernardi & Ballarino 2014) and individualization (Beck 1999), the emergence of a global precariat (Standing 2011) and a globalized, technological and cultural environment increasingly marked by a hyper-commodified, hyper-real sexuality (Renold & Ringrose 2016). We respond in the negative to Lesko’s (2001: 147) question: ‘shall we continue to make school-aged [parents] visible only as disordered chronologies and sexual deviants?’

The gathering that follows

Chapter 2 engages with the pivotal conflict for pregnant and parenting teenagers: the tension between their new status and their anticipated role in education. In this, Annelies Kamp offers an autobiographical narrative, and gathers other narratives published in memoir and captured in research to explore the diverse assemblages of parent-student that have occurred in Aotearoa New Zealand over time. The chapter adopts a critical perspective to read across the grain of the dominant policy discourse in Aotearoa New Zealand considering the extent to which specialist educational support for teenage parents has the potential to nurture, incubate and isolate.

Majella McSharry’s work is concerned with the embodied experience of teenage pregnancy and beyond. Representations of female beauty, DIY

biographies and in-control bodies abound in popular culture, and target, in particular, teenage girls. Whether a teenage pregnancy emerges by design or by accident, the impact of the growing foetus presents an array of corporeal challenges including nausea, dizziness, fatigue, breast tenderness, frequent urination, mood swings and in most cases unprecedented weight gain. In a Western context obsessed with healthful slenderness and the intolerability (yet prevalence) of obesity, Chapter 3 explores how a teenage mother might negotiate the space that is her own body during pregnancy.

In Chapter 4, Lee SmithBattle reflects on her extensive longitudinal work in the United States to discuss teenage mothering as a 'fertile ground' for efforts to trouble the dominant paradigms of teenage pregnancy and parenting. When pre-pregnancy factors are controlled for, teenage mothers in the United States do about as well as other mothers from similar backgrounds; this suggests that avoiding pregnancy would make little difference in improving the lives of many teenage mothers (and their children) without addressing the structural inequalities that precede teenage births. While these studies suggest that becoming a parent can be 'protective' and that teenage mothers are often resilient in facing adversities, studies also document the many constraints that curtail young parents' aspirations, including the lack of family and partner support, ongoing material hardships and poorly resourced and understaffed programmes that become an additional burden and source of stigma and trauma.

Using in-depth interviews with twenty-six teenage fathers in the United States, in Chapter 5 Jennifer Beggs Weber gathers together narratives and literature to consider how these young men negotiate the stigmas and expectations of teenage pregnancy, responsibility and fatherhood within the bounds of masculinity, social class and youth that are deemed culturally appropriate. Jennifer's research illustrates that a dichotomous approach to teenage pregnancy and parenting is insufficient to capture the complexity of the assemblage. Teenage fathers occupy/perform multiple subject positions which are further complicated by class structures. The chapter suggests that understanding adolescent fatherhood as an assemblage – one that combines notions of cultural expectations and definitions of traditional fatherhood with the resources and experiences of social class – is a more productive way to take interest in, and support, the lives of teenage fathers and their children.

Irish television and the assemblage of personal narratives of teenage pregnancy and abortion are the focus of Chapter 6. Drawing on work originally undertaken by Áine Ryan and Debbie Ging, the chapter draws on research which examined the presence and absence of personal narratives of crisis pregnancy from specific texts which aired on Ireland's Public Service Broadcaster, Raidió Teilifís Éireann (RTÉ), including *The Teens' Midwife* (2013) and *The Abortion Debate* (1994). These texts reveal if, and how, societal attitudes towards teenage pregnancy and abortion in Ireland have evolved over a twenty-two-year period.

In Chapter 7 Ciara Bradley establishes the socio-historical construction of teenage pregnancy and single parenting in the Republic of Ireland. Despite decades of economic progress and development that have culminated in a more secular and inclusive Ireland, the stigmatization and social exclusion of teenage parents persists. Bradley focuses solely on mothers and uses a retrospective lens to chart how Ireland's religious and political history has socially constructed teenage motherhood in ways that predetermine how it continues to be conceptualized and responded to today, not least in terms of social and economic policy.

The counter discourses of young Irish Traveller parents frames the contribution by Fiona McGaughey. In Chapter 8, Fiona takes up the narratives of a particular community within the Republic of Ireland to trouble normative discussions of teenage pregnancy and parenting. In the context of contemporary Ireland, Traveller culture is changing, but adherence to patriarchy and pro-natalism remains strong. There is an abiding emphasis on chastity for Traveller girls, young marriage and childbearing: in this community within Ireland there has not been a diminishing concern with pre-marital sexuality. Adopting a feminist cultural relativist approach, Fiona argues that the role of Traveller women and girls could be re/assembled, but the impetus for that must come from Traveller women and girls.

In Chapter 9 Kyla Ellis-Sloan draws on research from the south-east of the United Kingdom to engage with issues of decision-making of young women post-pregnancy. Two decisions frame the focus of the work: the decision by teenage mothers to return (or not) to education and the decision to remain in, or leave, their relationship with the baby's father. As a stark portrayal of the lived experience of the stigma struggles, the chapter

highlights the implications for teenage mothers given the risk – perhaps even the likelihood – of being further defined as a problem in the persistently neoliberal context of developed Western democracies which value certain attributes, decisions and behaviours over others.

The United Kingdom remains the focus in Chapter 10, where Pam Alldred and Nick J. Fox explore teenage pregnancy, sexualities education and sexual citizenship using a new materialist toolkit of assemblages, affects and micropolitics. The chapter draws together empirical data and diverse literatures to consider the process of sex education in the UK. Alldred and Fox conclude by assessing the wider implications of these assemblages for sexual citizenship – in the context of the continuing emphasis upon educational approaches to address issues of non-normative sexualities including teenage pregnancy and parenting, and the opportunities for an alternative nomadic citizenship of becoming and lines of flight.

In Aotearoa New Zealand, parenting students are supported through three main mechanisms in remaining in, or re-engaging in, formal structures of education. Students can study with the Te Kura – the Correspondence School. They can also look to remain in mainstream second-level schools. Alternatively, they can enrol in one of twenty-three Teen Parent Units attached to mainstream schools across the country. In Chapter 11, Jenny Hindin Miller presents a finely woven story of the emergence over time of Teen Parent Units into the educational landscape. Jenny's *korero* (narrative) shares the philosophies – feminist, spiritual and Indigenous – that underpinned the concept of funded, purpose-built schools which adopted a holistic approach and supported parenting students in their journeys to re/assemble their lives as student-parent-whanau-citizen.

In Chapter 12, Keith Tuffin, Gareth Rouch and Karen Frewin revisit earlier research with teenage fathers in Aotearoa New Zealand to consider whether more recent research has challenged their exploratory findings. The authors note that the lack of social science research into the experience of teenage fatherhood has encouraged myths and negative stereotypes as much in Aotearoa as it has elsewhere. The chapter draws on extended interviews with teenage fathers in Aotearoa, taking a psychological lens to illustrate the challenges and pressures for these young fathers engaging with contemporary articulations of masculinity. The chapter also illuminates

the psychologically positive aspects of fatherhood as transformative, an opportunity for intergenerational repair and the construction of a 'better future' for their children. In closing, the collection we offer a Coda in which we read across the preceding chapters to consider the possibilities of a new sociology of teenage pregnancy and parenting, one that makes room not only for the trials, but also the triumphs, and the fluid movement between the two.

Conclusion

Our intention in this book is to contribute to an important current of work that has, since the latter decades of the twentieth century, sought to speak back to dominant (usually medicalized) discourses concerning the fate of the pregnant and parenting teenager. While pregnant teenagers in the developed world do not face the appalling odds faced by young women in the developing world that we acknowledged at the opening of this chapter, they do nonetheless commonly face appalling realities. These realities include the enduring stigma as 'stupid sluts' or 'deadbeat boys'; unnecessary psychological distress in the face of ambiguous access to safe, local abortion where their choice (either free or forced by circumstances) is to terminate an unwanted pregnancy; avoidable complexities in accessing education, health and seeking employment and, perhaps most damaging of all, a frequent silencing of voice as others – experts, statisticians, policy-makers, moralists, tabloid media – speak for and about who they are and who they and their children might become. Who is a teenager – particularly one who is pregnant, has impregnated, or is parenting – to be able to say anything of worth about anything at all? The chapters that follow respond to this challenge.

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2 Within and Apart: Re/Positioning the Education of Teenage Parents in Aotearoa New Zealand

ABSTRACT

Given the significance that is accorded to the education of the teenage mother in the future wellbeing of her child, this chapter focuses on educational provision for pregnant and parenting students in the context of Aotearoa New Zealand. The chapter is empirical, narrative and autobiographical: it draws on published research, a small-scale survey, memoir, and textual analysis of documentary in which the author, then aged sixteen, was interviewed at the beginning of her journey as a student-parent. The chapter adopts a critical perspective to read across the grain of the dominant policy discourse in Aotearoa New Zealand considering the extent to which specialist educational support for teenage parents has the potential to nurture, incubate and isolate.

Introduction

In 2017 as I write this chapter, young people in New Zealand who become parents before completing their second-level school qualifications and who wish to progress with their studies have three pathways available to them: Te Aho o Te Kura Pounamu – the Correspondence School (Te Kura), one of the twenty-three Teenage Parents Units (TPU) attached to mainstream schools, or to continue at a mainstream school. In my own case – as a teenage parent forty-one years ago – the only option my family and I identified was Te Kura and that was the path I took to complete my secondary school education. At that time, Teen Parents Units did not exist and it never occurred to me, or to my family, that I might remain at my ‘normal’ college. I cannot say how they would have responded to such a situation: we never gave them the opportunity to respond.

In the chapter I am taking something of a journey through time to explore the educational provision for young people in Aotearoa who are combining parenting and formal education. I draw on a number of data sources: published research, non-fiction memoir, a small-scale survey and documentary analysis, including a documentary extract which screened in New Zealand on the 28 June 1976 during the current affairs programme, *Today at One*. In a segment entitled *School Girl Pregnancies* I meet myself, my then nearly four-month-old daughter, and my own mother who I had made a grandmother at age thirty-six.

Ultimately, I reach back to the work of Nancy Fraser (1989) to consider the means by which neoliberal discourses concerning education and parenting might be taken apart and reassembled in more productive ways. In this, the chapter adopts an embodied, critical perspective in considering the limits and possibilities of the various forms of educational provision for teenage parents who, by compulsion¹ or desire, are engaged with formal structures of education in contemporary Aotearoa New Zealand.

A 1970s' narrative

I was fifteen when I became pregnant; sixteen when my baby daughter was born. My baby's father was my first boyfriend; he was one year older than me and we had originally met, at secondary school, when I was only thirteen. Our relationship would sustain until I was nineteen and he twenty by which time we were engaged to be married in the magnificent building that is Old St Paul's (once Wellington's Anglican cathedral and the venue of my parents' own marriage some twenty years earlier). However, our wedding day didn't eventuate: we had been together all our teenage years; we had been parents for three years; we had never lived together and, we came to

1 Children in New Zealand aged six to sixteen years old must be enrolled in school; education and training is funded for young people up to and including nineteen years old (<<https://education.govt.nz/>>).

believe, we didn't really know ourselves as individuals. At some point – a point I can no longer recall – we deferred our marriage, and ultimately our relationship as a couple ended.

The words in the prior paragraph cannot do justice to the experience we shared in our teenage years of confronting and navigating an unplanned pregnancy, and in moving into parenthood. The experience of unplanned pregnancy for someone as naïve as we were at age fifteen is difficult to convey. Angela Patrick, in her 2012 book *The Baby Laundry for Unmarried Mothers* captures some of my own feelings when I missed one period, and then another, before finally confirming my pregnancy (at an anonymous clinic in Wellington city, with both me and my baby's father in school uniform). Patrick writes, in the moment of handing her baby over for adoption, 'I felt as I had during the latter stages of my pregnancy: unable to focus on the reality of what was happening, and drifting off and creating ridiculous scenarios in which my fate would be different' (Patrick 2012: 121). I recall that same inability to focus on the reality of what was happening, what would of necessity eventually happen. I do recall the doctor who confirmed my pregnancy mentioning termination; I also recall being unable to comprehend a decision. This was not related to any moral objection to termination, I had no opinion at that time in my life. It was to do with an inability to grasp the situation. So we went home – him to his parents' house, and me to mine – as if by saying nothing and doing nothing, my pregnancy would not be real. It was not until three months later, when my mother returned from a visit to her own family in England, that I told her of my pregnancy and she, in turn, told my father. I am tall, so my pregnancy didn't show, but by the time I told my parents I was already 'halfway down a road I had no choice but to go down now' (Patrick 2012: 28).

As I write these words, I cannot help but be struck by the enormity of that moment in my life. I had no choice to go down the road towards the birth of a child; my family had no choice but to go down that road with me: my parents, my sisters, my baby's father and his family, our respective extended families and friends. However, on another level our families *did* have a choice – as did the families of girls I knew who became pregnant around that time. In some of the cases of which I became aware, the girl did not remain at home. While earlier generations may have been sent to

homes such as St Mary's Home for Unwed Mothers,² young women of my generation often went to one of seven Bethany homes. Originally set up by the Salvation Army as 'rescue homes for girls', over time Bethany became associated with meeting the needs of single pregnant women and those with newborn babies. Most babies were adopted; the mother would leave Bethany within two weeks of the birth. In other cases, young women remained at home, on the understanding that the baby would be adopted. For me, after taking those agonizing steps of overcoming my fear and getting the words out that I was pregnant, very pregnant, the response of my parents was that 'we will get through this together'. Throughout my pregnancy – hidden from friends and teachers under a school jersey with a very loose selvage my mother procured for me, until I had completed my end-of-year examinations – the unarticulated default was that my baby, too, would be adopted. But, after her birth – me being sent home within hours, leaving her behind to be cared for by nurses – I could not reconcile myself to the questions, so similar to those articulated by Angela Patrick (2012: 122): a 'desperate' need to be reassured about who would parent this tiny baby: 'what would [the mother] look like? Would she be gentle? Would she be warm and responsive?'³ Despite all my naivety – my utter lack of comprehension of parenthood – I eventually found myself confronted with a conviction that the only way to assure my daughter's future comfort and safety was to attend to it myself, with the support of my family. And in that moment, I was not only a daughter, sister, student and mother, I also became a teenage parent.

- 2 St Mary's hospital was run by the Anglican Church. Its 1904 dedication describes its aim to achieve 'national purity' through 'fallen women' being put to work (Shadwell 2016). The women were forced to labour, suffered abuse, and often were not allowed to see their children after childbirth. In 2005, the Anglican Church apologised to the women who had suffered at St Mary's; the hospital was closed in 1972.
- 3 I feel compelled to note that Andrea Patrick's confinement was in the care of 'The Crusade of Rescue and Homes for Destitute Catholic Children'. As she notes, the name of the home 'said it all, really' (Patrick 2012: 120).

Re/Assembling the teenage parent as student⁴

(Opening image of Annelies, kneeling on the floor in her parent's lounge in Wellington, New Zealand. She is smiling and baby-talking as she changes her four-month-old daughter's nappy.)

Narrator: Annelies was one of several hundred fifteen-year-old school girls who became pregnant last year.

ANNELIES: When I first found out um I was shocked of course and I was horrified and I thought, oh gosh, it's the end of the world and I don't know what I am going to do and actually um the baby's father and I, we even considered we were going to run away to Australia and the whole lot, you know (laughs).

Annelies found out she was pregnant the day before her mother was to leave on a three month trip overseas. She didn't have the heart to spoil her mother's trip so she and her boyfriend kept the news to themselves until she was six months pregnant.

I didn't tell any of my friends (pause). It is really horrible, you know, you don't know what to do. It's just, you just panic, you think, you know, you just can't cope with it at first. You think everything is wrong, you know. But when I finally came to terms with it I thought, well, you know, I would tell Mum when she gets back and I knew Mum and Dad would accept it because they are really super.

When Annelies finally told her parents, they were wonderfully supportive. Annelies made the difficult decision to keep her baby girl and to continue her education by correspondence.

(Images of the Correspondence School) *The Correspondence School has enrolled pregnant school girls for many years but until recently the number was small. Now the number averages between 350 and 400 pregnant school girls a year. This is around a quarter of the school's full-time secondary school*

4 What follows is the transcript of Today at One (n.d. 1976)

enrolments. The Correspondence School has carried out several surveys on pregnant school girls, one of which recently appeared in the New Zealand Medical Journal. This report expressed concern at the number of pregnant schoolgirls who don't continue full time education. The report says that for every girl who enrolls, there must be seven to eight who drop out of the school system. A significant proportion of these are under fifteen.

(Principal) I think it is a pity. One of the reasons for the survey, or one of the reasons why we distributed the survey widely was to let people know what's available. And when I say people, I mean people who are interested in this problem: school principals, the guidance officers, doctors, social workers were given a copy of the survey so they could at the right time advise girls what they ought to be doing with their education.

One of the important things to come out of the survey is that most of the girls do very well, some of them extraordinarily well, sometimes much better than they did at school. Just what are the advantages of Correspondence School over ordinary schools?

(Principal) I think there are very real advantages. In the first place, I don't think in the sort of climate of opinion you could have a pregnant school-girl remaining full-term anyway at school. There must be a time when it will be embarrassing for her and for her family to remain there and there are medical reasons as well too of course: they would have to have rests and doctor's appointments. I don't think they could go for full-term. And there are advantages of being, I think, of working in a one-to-one relationship with an absent teacher, somehow they do form a close bond and they do seem I think willing and able to express themselves much more readily to a person who is not actually physically present all the time with them.

(Cut back to Annelies, filmed at home) When I first thought of doing correspondence, I thought oh gosh you know it is just going to be a whole load of papers and they're going to come through the post and I will do all this work and then I will send them back. But it is not anything like that. You know, each work I get back there is a letter in it from my teacher saying you know how I am doing and that and they always put a personal remark in you know about the baby or about how things are going. It is really super. They don't care for just your work, they mark it and that and they also care about how you are managing in your mind.

[...]

(Cut to my mother, filmed at home) Well, I feel when a girl finds herself in this situation her first thought is to give up. Well she just doesn't want to continue; she

doesn't know what to do. When it was put to us that she could do this course by correspondence we were thrilled because Annelies is quite a bright girl and we felt she should be given the opportunity. She has worked tremendously well under correspondence, she finds she enjoys it herself because she hasn't got the distractions of the school classroom. We're finding her marks are excellent and she is really enjoying it. And she is able to look after her babe too which is a thing she wanted to do and continue her education so that when she does finally decide to go back to work when she is older then she has the qualifications to do that.

(Cut to Mrs Barton, my teacher, who is asked how 'typical' I am as a teenage parent)
Well that is rather hard to say. I feel she is probably typical of a particular group. She is a motivated girl. She is keen to get on. She is very sensitive to her situation. Ah, she belongs to the group who elect to keep their babies. I am sure she thought about this very long and hard and she has made her decision and I think that she is very happy that she has made the decision the way that she has.
[...]

(Principal) I think the most important thing is that these girls do very well in their education. They are slightly better if you take examination results, slightly better than the average. Also, I think that it is quite revealing how they adjust afterwards, and I think the education that we offer them and the chance they have of proving themselves, is an important thing perhaps in their self-esteem and perhaps in their ability to readjust to life.

This narrative betrays the context of its time. In the present time, the 'climate of opinion' that would not allow a full-term pregnant body to be present at 'normal' school has shifted to some degree. The medical discourse – the discourse surrounding management of the pregnant body and its need to have rests – has also changed. However, other aspects of this narrative have not changed; they remain highly relevant now and seem, to me, quite visionary in the context of their time. In this forty-year-old transcript, the posture of the teachers at Te Kura – one of interest and concern for both my baby and for how I was 'managing in my mind' – is noteworthy. The suggestion of the Principal that having a trusted, but slightly distant, confidant has been noted in other research with teenage parents (Allred and David 2010). Equally noteworthy is the focus on fostering discussions with young women during their pregnancy concerning the future form their education ought to now take. This use of the word 'ought' implies a rightness, a lack of questioning that education of some

form would occur, and would contribute not only to future work but as a mechanism to ‘readjust to life’.

As the protagonist in this particular narrative, I am reminded of myself as a school student. I am not dissimilar to others whose narratives appear in this collection. I am not from a family that had an expectation of higher education. In the transcript, my mother references my ongoing education as necessary for going ‘back to work’. While I had been a successful student at primary school, I did not gain the same sense of belonging in secondary school. However, if not for my pregnancy, I would have remained at school, unlike others whose school lives seem full of pain (Allred and David 2010). Yet my move to Te Kura was highly effective. Not only did I thrive studying alone, the experience also prepared me with the discipline to complete my initial degree by distance education over a period of eleven years. In short, I was provided access to education that fit both my needs, and the needs of my baby who – regardless of whether she ‘should’ be a part of my life at this time – was a part of my life. In fact, she was the very centre of my life.

The advent of Teenage Parents Unit

In New Zealand, for young women who did not accept that pregnancy would curtail their education, the option to enrol in the Teen Parent Units became available in 1994. At that time, the first school for teenage parents was opened in Porirua, in the province of Wellington, just fourteen kilometres from where I had lived as a teenage parent nearly twenty years earlier. Porirua is ranked in the highest band of the index of deprivation in New Zealand⁵ (University of Otago 2013); in keeping with trends elsewhere, a high proportion of teenage parents came from impoverished backgrounds and experienced ‘ongoing challenges connected to family violence, drugs, alcohol’ (Education Review Office 2013). Porirua College had faced this

5 The index of deprivation gives a weighted score for a Statistics NZ defined boundary. The score is based on nine indicators taken from the 2013 New Zealand Census.

reality 'head-on' and was committed to meeting the needs of teenage parents in the community (Baragwanath n.d.). The founder of the school, Susan Baragwanath, had been the recipient of a New Zealand Eisenhower Fellowship and spent three months in the US researching what could be done to meet the ongoing educational needs of young parents. In keeping with the deficit discourse of teenage parenting, these first schools were funded by the Ministry of Justice as part of a drive for crime prevention.

Two years later, Baragwanath undertook research on the possibilities for teenage parents aged sixteen or under to continue their education across Aotearoa New Zealand. This latter research (Baragwanath 1996) confirmed that schools in the lowest socio-economic areas had 86 per cent of teenage mothers enrolled. Only 9 per cent of the mothers aged under sixteen had return to their home school after their baby was born. For the schools that responded (ninety-nine in total), there was no consensus as to who was responsible for the ongoing education of young people who were parents and who were legally entitled to access free, quality education. The results suggested that childcare was available for only 17 per cent of the schools, with only 10 per cent offering on-site childcare; only two of ninety-nine schools had a written policy regarding how the school would respond to the needs of teenage parents.

In 2017, there are twenty-three TPU across Aotearoa New Zealand. It is apposite to provide a brief synopsis of the findings of a 2013 evaluation of the Units, undertaken by New Zealand's Education Review Office – Te Tari Arotake Matauranga. At the time of the review, there were twenty-one TPU. Education Review Office reviewers visited each TPU, observed classes, reviewed documents and spoke with a range of stakeholders including young parents, teachers, school leaders and Board Trustees (Education Review Office 2013). Five questions focused the evaluation: first, how effective were TPU in promoting and supporting positive outcomes for students? Second, how well did processes for induction, individual planning, support and transition promote student engagement and success at TPU? Third, what was the quality of teaching and learning at TPU? Fourth, how well did TPU work with their educational and community contexts to promote student outcomes? Finally, how effective was the leadership, management and organization of the TPU?

The evaluation report indicates that fifteen TPU were performing ‘well’, their programmes were leading to ‘better educational, social and health outcomes for students’. The evaluation report suggests, in keeping with the findings reported in other chapters of this collection, that many of the young parents had previously been disengaged in/from mainstream education and would not have returned to their home school following the birth of their children. Five TPU were rated as ‘innovative and cohesive’, featuring ‘coordinated systems, teaching and support. They responded well to student needs and aspirations’ (Education Review Office 2013: 1–2). These features of innovation and cohesion were also evident in the ten rated as ‘mostly effective’. However, here room for improvement was identified. Of the six units that were not rated as performing well, areas of concern were their less engaging teaching and learning programmes. Three TPU were identified as causing concern on a range of dimensions. Here, young parents were not significantly improving their educational, social and health outcomes. With the exception of these three units, the reviewers spoke with students who had ‘transformed from being relatively unsuccessful students to having good or very good school-leaving qualifications’ (Education Review Office 2013: 2). Students also benefitted from ‘easy access’ for them, and their children, to a range of health professionals (Education Review Office 2013: 5).

For all TPU, even the most successful, attendance was an issue – success in education, wherever the education occurs, depends on sustained engagement; at the same time, small staff numbers in the Units that were apart from their host schools made it difficult to offer broad, engaging curriculum for all students. The culture⁶ of the fifteen TPU that were most effective was

orientated towards values of respect, care and acceptance. Leaders, teachers and students interacted positively, in an adult-to-adult way that was caring and mutually trusting. [...] the strong relationships staff had with students made these units

6 See Hindin-Miller in this collection for an overview of the holistic model of one of the most effective TPU.

a safe place for students to find support and solve problems associated with living independently as a teenage parent. (Education Review Office 2013: 6)

In earlier research, undertaken in Australia, I have attempted to portray the impact that a place of belonging, an educational place of belonging, can have on forging the relationship of a young parent to education, a relationship that is capable of sustaining an educational journey:

I invite you to imagine a scene: it is 11.30am on a sunny Tuesday morning in the first Term of the 2005 school year at a secondary school in Corio, one of the ‘problem’ neighbourhoods in the northern suburbs of Geelong. Behind a closed door in the hall that opens into the gymnasium two young women relax in a small common room that is packed full of ‘things-that-might-come-in-useful-one-day’. The young women, both aged seventeen, are doing what senior students do with their free periods: one sits on the desk, leaning back against the window to enjoy the sun beating on her back. She is swinging her legs and sipping from a water bottle. The other relaxes in an armchair, studiously working her way through a pack of crisps as they chat about the events of the morning. It is only when you cast your eyes down a little that you notice, curled in the arm of the second young woman, a newborn infant. Nicholas⁷ is a mere nine days old and is already at his community school; his mother is an enrolled student completing her senior school certificate. She is on leave from classes at present as Nicholas can’t go into the on-site childcare centre until he is six weeks old. However you are struck by the wonderful realisation that his mum, a young woman who walked away from her first experience of secondary school years ago, now chooses to be at school even when she doesn’t have to be. (Kamp 2006: 124)

The context of this narrative was the Young Parents’ Access Project (YPAP) that was established from 2002 within the grounds of a senior secondary school⁸ in the northern suburbs of the city of Geelong (see Angwin, Harrison et al. 2004, Harrison, Angwin et al. 2010, Harrison and Shacklock 2007, Kamp 2014, Shacklock, Harrison et al. 2006). At the YPAP, the project included a modified curriculum and timeline for attainment of a senior school certificate (either the Victorian Certificate of Education or the Victorian Certificate of Applied Learning), a Parent Support Worker, and

7 Pseudonym.

8 A school that only offers Years 11 and 12 – the two senior years of second-level school in Victoria.

the provision of a purpose-build, licenced childcare centre in the grounds of the school for the children of students. The provision of the childcare centre was central to a shift beyond conceptual support to provide an holistic educational context that acknowledged and responded to the needs of young people who are not only grappling with the acknowledged pressures of completing their senior school qualifications, but also wish to actively parent their baby and are coping with early parenting and the logistics of that, in and of itself. The evaluation by the ERO reported a similar example:

One student told ERO how she had become pregnant at fifteen and had hidden her condition from her parents right up until she was going into labour. She started at the TPU a few weeks after the birth of her child. Her regular routine involves walking to the station each morning with her child and catching a train just before 6.30. They then catch a bus a walk to the TPU. At the end of the day this journey is reversed to get back home. The staff report that she is never late or absent and is seen as a student leader at the unit. At the time of the review the student was on track to complete NCEA⁹ Level 3 in 2013 and begin a tertiary training course in 2014. (Education Review Office 2013: 2–3)

Literature from the contexts referenced in the two prior quotes – the YPAP and TPU as a group – highlights the importance of an education context that is designed to acknowledged and flex with the complexity that inheres in the student-parent assemblage and the ways this, in turn, coheres with teaching that allows ‘maximum potential and connection to the [pedagogic] situation (Mulcahy 2012: 24). My own continued study to achieve what was then School Certificate by way of Te Kura did not require me to disturb a baby and then travel on a bus early in the morning before commencing a full day of study; my trajectory allowed me to be with my baby at home and to study at a pace that acknowledged both my own, and my familial needs. There was no issue of attendance, or small staff numbers, in the school that was the dining room in Newlands Road. Meanwhile, for those students whose trajectory is to remain in, or return to, ‘normal’

9 National Certificate of Education Achievement: Level 3 being the highest level of New Zealand’s second-level school qualification.

school the expectation will, for now, be that they, as individuals, resolve the 'dilemma of difference' (Kelly 2000).¹⁰

Within, apart and beyond: Extending the fields of education

To expand on my own perceptions and observations on current approaches to identifying and responding to the needs of teenage parents in Aotearoa New Zealand a survey of eight schools was undertaken. The survey of fifteen questions was approved by the Education Research Ethics Committee of the University of Canterbury; the survey was activated using the Qualtrix online survey platform. The respondents were based in diverse school settings: five mainstream schools (one single sex boys, one single sex girls and three co-educational colleges) and three TPU, all of which accept enrolments from teenage mothers and teenage fathers who meet the eligibility criteria (although most enrolments are from teenage mothers). Three schools were located in the South Island, five were located in the North Island (with the provinces of Canterbury and Auckland both having two respondents).

Enrolment of parent students ranged from those with none enrolled (two schools) to more than fifteen enrolled (three TPU). Respondents indicated that most of the young parents they worked with were young women; none indicated that the respondents they worked with were couples and two respondents weren't sure (I have taken this to be indicative of them not currently having parenting students enrolled at the school). Only two respondents had a formal, documented process for identifying the needs of teenage parents when they begin, or returned to, their studies after childbirth. For one school, this involved a structured enrolment interview that was

10 The Ministry of Education is currently completing a report on their pilot support for teenage parents in mainstream schools.

informal and chatty and designed to put potential students and accompanying parents or partners at ease. It gives them a chance to ask questions, have a look around and get feel (sic) for the environment. An (sic) more detailed academic interview takes place after the student formally enrolls and begins to study.

For the other school

We have an induction process that identifies the gaps if any in their education and discusses how she will proceed. She also meets with the careers teacher. She is assigned to a hapu¹¹ group and two teachers who deal with her Hauora (wellbeing) she is able to meet with a nurse at any time and has access to a social worker. Enrolling her child/ren into childcare is at her discretion but she is encouraged by teachers and students to become familiar with the centre which is situated thirty metres from our classrooms.

For those schools that did not have a formal, documented process one respondent indicated that the school had a social worker on staff and a visiting Plunket¹² nurse both of whom channelled information on any student needs; this respondent indicated a commitment to strong relationships with students which would allow students to articulate any needs. A second respondent indicated that tutors, school Deans, or other school staff would ensure the student could talk to a school counsellor. Two respondents indicated they would contact a TPU, or a mainstream school with broad experience in meeting the needs of parenting students, for guidance as well as just listening to the student.

Respondents indicated a range of staff were involved in identifying the needs of teenage parents: TPU head teachers, school nurse, social workers (including specialist new parent social workers connected to the birth hospital), teachers, Plunket nurses, pastoral staff, counsellors. No respondent indicated involvement of non-professionals, such as family members despite families being central to decision-making and support in pregnancy and parenting (Macvarish and Billings 2010). Two schools indicated that the initial identification of needs would be revisited at a

11 In Maori, a familial community.

12 Plunket is a long-standing New Zealand institution and the country's largest provider of support services for the development, health and wellbeing of children under five.

scheduled later date: one indicated this was 'regular'; the other indicated that this occurred on a fortnightly basis.

Respondents were given a list of options as to the areas that a school should consider in identifying the needs of parenting students, regardless of the school's ability to meet the needs they identified. The most common needs were personalized curriculum, health care, contraception, career advice and mentoring, involvement in decision-making, work experience, parenting skills, critical thinking, whanau support and early-childhood education for their children (75 per cent of respondents). The second most common needs were part-time enrolment, advocacy, subsidized learning resources, free childcare onsite, involvement in mainstream school activities, breast-feeding facilities (62 per cent of respondents). Provision of uniforms, or exemption of the requirement to wear a uniform was identified as a need by 50 per cent of respondents while social events were identified as a need by 37 per cent of respondents. The areas of need that respondents were uncertain of were part-time enrolment, advocacy, free childcare, involvement in mainstream school activities, the wearing of uniforms, provision of breastfeeding facilities and social events. Of the needs identified, only three schools reported their current provision was closely aligned with what they believed the needs might be. Two respondents added to the list, noting the need for financial support, free medical care for parents,¹³ transport and appropriate housing, 'the only homes they can afford are often a low standard'.

While it is notable that only two respondents had a formal approach to identifying the needs of teenage parents at the point that they reconnect with education, the extracts are positive in the ethics of care (Gilligan 1982) that informs them: in extract one, this initial contact is one of 'ease'; in extract two, the initial contact includes 'wellbeing' and the self-defined needs of both the parent and the child. The position of TPU as expert advisors to other schools has potential, but only if all TPU reach the level of 'innovative and cohesive' as witnessed by the ERO in 2013. The range of responses on the identification of needs indicates 'thick' interpretations that

13 Children under thirteen can access zero-fees medical care in New Zealand.

recognize the complexity of the parent-student assemblage. At the same time, the responses indicate uncertainty, particularly in regard to those options that cross the boundaries and trouble the signifier 'student': part-time enrolment, being involved in (and potentially troubling) the broader life of the school, having flexibility in regard to wearing school uniforms. On another level, there is an acknowledgement of the distance to be travelled, even when there is in-principle support of thickly interpreted needs. Finally, the addition by respondents of social welfare provisions illustrates a broader policy concern, to which I now turn.

Constructing particular policy problems

In 2017, as this chapter took form the New Zealand parliament debated a motion to remove abortion from the Crimes Act 1961. The Hon Paula Bennett – Acting Prime Minister at the time and Deputy Leader of the conservative National Party – was asked by Jan Logie, a Member of Parliament for the Green Party, whether the Prime Minister has asked the Minister for Women whether it was time women and their doctors were trusted to make the right decision about unplanned pregnancies. In response, the Acting Prime Minister said:

I have spoken with the Minister for Women on issues around this. One thing that she has spoken about is how pleased she is about both the reduction in teen births to teenagers and, actually, abortions as well. [...]. The other great news though, more importantly, I think, is that we have got 57 per cent fewer teen mums on welfare, and I think that they and their children will be doing much better. (Parliament 2017)

This statement reflects a long policy narrative around teenage pregnancy and parenting in New Zealand. In 2017, with a General Election scheduled for later this year, ACT continues its campaign against those who do not accord with their perception of the 'correct' time to parent. Beth Houlbrooke – ACT's new Deputy Leader – is reported as saying 'The fact is, parents who cannot afford to have children should not be having

them. ACT believes in personal responsibility, meaning we stand with the majority of parents who wait and save before having children'. Her comments were in response to the Labour Party's election manifesto proposal to introduce of a NZD 60-a-week Best Start payment for each child in the first year after Paid Parental Leave ends, and for low to middle income families up to age three (Labour 2017). For Houlbrooke, and others in ACT, 'Labour's baby bonus could extend the misery of child poverty and even child abuse' as 'paying people to have babies encourages them to grow their families when they're not properly mature or financially prepared'.

As Georg Menz (2006) illustrates in his overview of New Zealand's welfare responses to teenage pregnancy, paradoxes abound. Rates of teenage pregnancy decline, but policy concern about them increases; out-of-wedlock births increase across all age-groups, yet for teenage parents this is taken as evidence of their 'irresponsible behaviour'; teenage pregnancy is correlated strongly to poverty, but this does not result in the provision of welfare or the protection of employment that offers a living wage but, rather, to the stigmatization of poor people. This situation sits in sharp contrast to former eras: prior to the 1980s New Zealand's expanding welfare state generated living standards that were among the highest in the world. The advent of neoliberalism implemented waves of reform to the welfare state; in this teenage pregnancy is reconceptualized as a policy problem to the extent that it impedes labour market participation. Whereas once the management of the pregnant teenager focused on concerns manifest in agendas such as St Mary's achievement of 'national purity' through 'fallen women' being made to do unpaid, domestic labour, now the focus is on 'employability'. Thus, early motherhood is now socially constructed as deviant economic behaviour (Alldred and David 2010, Cherrington and Breheny 2005):

The rhetorical attacks against teenage mothers 'sponging off' the welfare state closely resembled the mythical Cadillac driving US welfare queen, an image designed with no verifiable empirical basis by the Reagan government, and bore close resemblance to the campaign against single mothers by the Conservative governments of the 1980s in the UK. This line of reasoning is still regularly deployed by associates of the ultra neoliberal far-right Association of Consumers and Taxpayers (ACT) Party, who argue that the [Domestic Purposes Benefit] has created a persistent welfare dependent underclass. (New Zealand Herald cited in Menz 2006: 55-6)

Ten years later, ACT's position clearly remains: while they argue for individualism that keeps government out of the private realm and 'private' problems, they retain the right to interfere in the most personal of decisions concerning the right time and financial circumstance in which to become a parent. As Menz notes, welfare support is portrayed in such arguments as creating a 'moral hazard that previously did not exist' (Menz 2006: 57). The risks to the life journey of the teenage parent, and her child, are presented as beginning at the moment of welfare being provided; in this 'mythical' world there is no risk from prior life circumstances, whatever those circumstances and experiences might be. As in the UK, individuals and their families now meet needs that were previously 'framed by the Left as societal or community responsibilities' (Alldred and David 2010: 25). For the current government, the 'important' news is 'fewer teen mums on welfare' (Parliament 2017).

For feminist theorist Nancy Fraser (1989: 163) social policy debates begin with the definition of the needs of a particular group: 'needs claims have a relational structure; implicitly or explicitly, they have the form 'A needs x in order to y'. As I have argued previously (Kamp 2014) provision for the parent–student assemblage can quickly become impoverished at the same time as doing all that is required of it within the dominant policy discourse. Needs can be interpreted 'thinly' (not being on welfare) or 'thickly'; thickly interpreted needs result in fuller policy recommendations or, in Fraser's language, in 'elaborated chains of in-order-to relations'. For Fraser, 'thin' interpretations stop needs 'leaking', overflowing the accepted boundaries in ways that would, for instance, force a critical debate about the legitimate needs of teenage parents as students, needs that are 'contoured by their status as parents' (Alldred and David 2010: 40). In New Zealand, the major welfare reform of 1998 which speedily introduced 'employability' as the prime intent of welfare through a discourse of 'workfarism' did so without any form of critical debate, without any public hearings or even any scrutiny by Parliamentary Select Committee (Menz 2006).

It speaks to me that, in 1976 when I was interviewed, teenage pregnancy and parenting was identified as a policy problem. However, the problem identification was not premised on the 'moral hazards' of welfare, or on whether the rates of teenage parents were going up or down. The problem

was ‘the number of pregnant school girls who don’t continue full-time education’ (n.d. 1976). That one quarter of the students enrolled in Te Kura at that time were related to teenage pregnancy signals, for me, a recognition of the policy problem that TPU would seek to respond to in a far more visible manner some twenty years later. Yet, the position of TPU within, but apart from, their host schools remains a work in progress. Yes, many students had disengaged from ‘normal’ school. Accordingly, TPU’s separation might, in some way, appeal. Yet the price to be paid in terms of access to the full range of experience and expertise that resides within ‘normal’ must be weighed. While the evaluation of TPU (Education Review Office 2013) reported high levels of ‘communication and collaboration’ between Units and host schools and access to ‘resources such as the careers adviser, the school nurse and guidance counsellor’ this is a ‘thin version’ of the richness of what is on offer within schools, particularly for those TPU with low levels of staffing and lacking professional support. The report noted that one host school would not celebrate the successes of students at the TPU as this could be ‘misinterpreted as condoning their circumstances’; students from one Unit also reported ‘host school students were not so welcoming’. The report also called for a national policy framework on teen pregnancy and guidelines for ‘effective TPU practice’ (Education Review Office 2013); the national policy framework remains elusive and, while the guidelines for TPU did eventuate in 2016, they focus on operational issues and give little (no) guidance on the embodied concerns surveyed in this chapter (Ministry of Education 2016). In this, being within, but apart, evidences both opportunities and obstacles in sustaining meaningful educational opportunities for teenage parents.

Concluding thoughts

Education does not float in a void: this chapter illustrates the clear leaning in the current context of Aotearoa New Zealand for particular, stubborn discourses that translate the legal right to education in particular ways.

As a teenage parent, I remain struck by the persistence of the connection between abortion, provision for teenage parents in Aotearoa New Zealand and anticipated criminality. This occurs not only through particular forms of research (see SmithBattle in this collection) but also through legislature. In Aotearoa New Zealand, provision of abortion is legislated by way of the Crimes Act 1961;¹⁴ at the same time, initial provision for teenage parents as students was funded by way of initiatives aim to decrease criminality (see Hindin-Miller in this collection). As I write this chapter, and survey other chapters, this assemblage of teenage parent–child of teenage parent–criminal–intervention feels much like that other ‘feeling’, that of being ‘a problem’ (Luttrell 2003). I recognize and celebrate that funding, of some kind, has been made available from respective governments to ensure the young people who also happen to be parents can access educational provision that acknowledges their particular needs. All students are entitled to this recognition of and accommodation of their particular needs – be they gifted, living with a disability, parenting, or something else again. Yet teenage parents, as Pillow (2015) notes, remain ‘caught’ between discursive demands: to be a good parent and bond with their child, to be a good student with sustained attendance and to perform results, to be a productive consumer whilst completing their education, to be a good citizen and pay their own way, to be a good member of their community, notwithstanding that its norms around childbearing and rearing may be hopelessly in tension with current policy discourses.

In this chapter I have touched – and felt – a number of educational contexts which have been touched – felt by – me in the course of my own educational journey. Te Kura – the Correspondence School – and its teachers: my experience with Mrs Barton’s letters tucked inside my sets of work

14 That the forty-year-old abortion law remains within the Crimes Act is intensely problematic for many New Zealand citizens. Yet it is one that then Conservative Prime Minister – Hon Bill English – had ‘no interest in rectifying’. Given this, the complex stories of the more than 13,000 women per year who terminate pregnancies are often ‘hidden’. For example, the story of A Mother (<<https://thespinoff.co.nz/parenting/13-03-2017/to-the-staff-of-wellington-hospitals-te-mahoe-clinic-this-is-what-you-did-for-me-when-you-gave-me-an-abortion/>>>).

exemplified the stance called for by Luttrell (2003: 176) – a stance of interest and curiosity rather than discipline and punishment in regard to the education, health and well-being of both me and of my infant daughter. Many years later, as I commenced my doctoral journey, the opportunity to engage with the Young Parents Access Project in Corio was something of an encounter with myself, a finding of myself in the literature concerning the apparently inevitable trajectories of teenage parents, a witnessing of schools that would not accept the inevitability of that narrative (Kamp and Kelly 2014). More recently, in visiting Karanga Mai – the Teen Parents Unit just north of Christchurch¹⁵ – I talk with young parents who are beginning their own journeys of learning. My host introduces me to the students, ‘this is Annelies; she is a teenage parent too’. We talk about their aspirations, for themselves, for their study and their children. We visit the children, playing in the childcare centre that is co-located with the TPU. I imagine what it might have been like if I had completed my education in such company rather than alone at my parents’ dining room table. I don’t know that it would have been better for me; for me, solitude within the care of my family worked. And yet, the ‘how’ of continuing one’s education really doesn’t matter; what matters is that a trajectory of learning is taken, one that allows access to high-quality, supportive education that meets the changing needs of a given student-parent-child multiplicity as they journey through life.

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15 The story of the genesis of Karanga Mai is the focus of Chapter 11 of this collection.

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MAJELLA MCSHARRY

3 What's Happening to My Body?: The Growing, Glowing and Grotesque Teenage Belly

ABSTRACT

As I write, I am thirty-seven years old and pregnant with my third child. I have taken the 'right' girl path – degree, PhD, career, marriage and babies. My path professes the victories of post-feminism and neoliberalism. It also screams of the mainstreaming of social ideals for women. My path is virtuous only because I suppressed, ignored and optimized my own fertility at the appropriate moments. For women of my age our bodies often become time bombs we frantically race against. Just as the mother under twenty is thought to be foolish, the mother over forty is frequently thought to be selfish.

My personal pregnancy journey will demarcate this chapter. I will use my story of pregnant embodiment to explore and question the possible experiences of teen mothers. I will discuss the corporeal assemblage of mother and baby during pregnancy to problematize how this might be experienced for teenage girls whose bodies are merely evolving to maturity. The physical expansion of the body during maternity undoubtedly presents challenges for all women, but this must be particularly acute for teenagers living in Western contexts obsessed with healthful slenderness. Equally, the bulging belly implies a symbolic weight as much as a physical one, loudly proclaiming 'the sexually active girl'. Teen mothers make unique decisions around 'corporeal generosity' (Diprose 2002; Hird 2007) where they negotiate giving to their growing babies while also giving to their own developmental and aesthetic needs as teenagers. Although research and policy have focused on controlling the behaviour of the teenage girls' body, they have remained silent about the changes and needs of the female body (Pillow 1997). In this chapter I question how a teen mother might negotiate the space that is her own body when presented with the unpredictable corporeal challenges of maternity, combined with the normal

maturation of the body during puberty. At moments, I will reference the Irish context I am writing from, but much of the discussion is applicable to other Western contexts and beyond.

The body inside

January 1st 2017

Today is New Year's Day and some family members came over for dinner. I am six weeks pregnant but they are not aware of this. Who would have thought cooking one meal could be so utterly exhausting and nauseating? I began to feel physically weak at the smell of cooking meat and had to go outside for air. I held a mint flavoured sweet in my mouth to keep the imagined taste at bay. I have felt continually nauseous this past few days but with an insatiable appetite for white bread and Bakewell tarts! I feel guilty about this. Surely this type of food can't give the baby all the nutrients it needs. I don't seem to have any control over this constant nauseous feeling.

The giving of one body to another is one of the unique markers of the period of maternity. Hird (2007) draws on Diprose's (2002) 'corporeal generosity' to explain maternity as a debt one body owes to another through the process of 'gifting'. This parallels with Crossley's (2005) concept of 'reflexive body techniques' in some respects in so far as they involve one body working back upon itself or one body working upon another body in order to maintain it. However, while reflexive body techniques are 'for the body' (ibid. 10), with a focus on tangible returns, corporeal generosity is not driven by outcomes. Rather, the cyclical process of giving and returning that is 'gifting' is its own rewarding purpose. In terms of pregnancy, 'gifting' suggests a commitment to the idea of mother and baby as a connected assemblage. Luttrell notes that each individual woman will experience this 'bodily tandem' or 'two-in-one-ness' in unique and personal ways (2011: 298). It is arguable that the physical challenges of early pregnancy,

such as fatigue, nausea, breast tenderness, dizziness and frequent urination, may mitigate connectedness, particularly for mothers who did not seek to become pregnant and where feelings of shock, resentment, confusion, denial and/or devastation abound. Yet research on teenage pregnancy has avidly avoided mentioning girls' bodies and 'the leaky needs' (Lesko 1995) of pregnant teen girls (cited in Pillow 1997: 352).

Bodily changes are more dramatic and rapid during adolescence than at any other point in the lifecycle. Biological growth significantly alters pubescent bodies, with the emergence of new outer contours and inner sensations and new physical pains and privileges, making bodily awareness unavoidable during adolescence (McSharry 2009). Budgeon (2003) describes the body as central to identity, and control of the body, its cultivation and regulation, seen as the responsibility of the individual. In contemporary times individuals are increasingly held responsible and accountable for control of their own bodies and construction of their own identities. Bodily control, in fact, becomes a key signifier of successful identity construction. For McRobbie (2009), carefully staged bodily control is particularly imperative for feminine identity, where, within a post-feminist masquerade, the young woman is viewed as 'a highly efficient assemblage of productivity' (ibid. 59). The field of work known as 'corporeal feminism' has become diverse and immense (Frost 2005: 65), seeking to understand how girls and women take up positions within the physical and social assemblage that is their bodies.

Physical, emotional and cognitive changes in pregnancy amplify and are amplified by the developmental pressures of adolescence (Zaltzman, Falcon & Harrison 2015). Indeed, pregnant teenagers may be particularly focused on maintaining body control during pregnancy because they see this as a way of retaining some degree of normal 'teenage life' (ibid. 104). Pregnancy complicates and disrupts bodily changes that are already unpredictable and unfathomable for many teenagers. Therefore, as the teenage girl attempts to assert control over her embodied identity, the pregnant, labouring and lactating body can feel inexplicably out of control (Fox & Neiterman 2015). The surge of unfamiliar hormones arising from the growing baby may result in a series of unpleasant and painful symptoms for the mother, causing her to feel like a stranger in her own body. The body

can feel alien, unfamiliar and volatile. Women frequently experience the pregnant body as fragmented, distinguishing between 'my pregnancy' (the bump) and 'me' (the rest of my body) (Padmanabhan, Summerbell & Heslehurst 2015). De Beauvoir (1949) describes the pregnant woman as a victim of the foetus, characterizing the foetus as a parasite that feeds on the mother as prey (cited in Hird 2007). This implies a giving over of one's body to the foetus, whether this is desired by the mother or not. Yet even mothers who experience detachment from the foetus will be aware that through their bodies they sustain the foetus, deliver the baby, feed the baby and provide for its care, and that doing mothering in other ways is deemed inferior (Fox & Neiterman 2015: 671).

Interrogating the body

February 22nd 2017

Today I went to the hospital to register my pregnancy. I was advised to attend alone due to the sensitive nature of the questions. I was asked a long series of personal and medical questions. They included:

What age am I? What is my occupation? What is my partner's occupation? What is my religion? Am I a member of the Traveller Community? Is the baby's father my cousin? Am I in an abusive relationship? Is there any history of disability in my family or in the baby's father's family? Have I or the baby's father ever had a sexually transmitted disease? Have I ever had an eating disorder? Do I drink alcohol, smoke or take recreational drugs? Was I taking folic acid prior to becoming pregnant and if so, for how long?

A large number of questions revolved around my medical history, my husband's medical history and that of our respective families. I sometimes wondered if I was giving an accurate answer.

The pregnant body is the subject of continual medical interrogation and inspection. The baby's body is scanned, assessed, photographed and

measured while the mother's body is scrutinized, questioned, patrolled and regulated. The mother's body becomes the Panopticon – the central watch-tower through which the baby can be observed. Intrusive interrogation of the pregnant mother and routine surveillance of her body have emerged from a pathologizing and medicalization of pregnancy, which have been normalized to such an extent that we speak of pregnant bodies almost solely through the language of medicine (Lee & Jackson 2002). Invasive questions such as those cited above are sure to give rise to concern amongst mothers who are related to the baby's father, who have had a sexually transmitted disease, who have consumed alcohol while pregnant or have not taken folic acid prior to becoming pregnant. They will also be of concern for mothers who simply do not know the answers to many of these questions. 'Good' mothers with planned pregnancies are likely to have commenced taking folic acid prior to becoming pregnant to reduce the likelihood of neural tube defects. By contrast, mothers who may have never heard of folic acid are placed in a maternal deficit position. They are reprimanded for making choices that potentially clash with the welfare of their baby (Nash 2015) and infantilized for not knowing the difference. The bodies of mothers of unplanned babies are deemed to require a particular type of medical and moral surveillance, while they act as 'incubators' for the 'tiny and vulnerable patient' inside (Lee and Jackson 2002: 122).

Most teen mothers will know that risk-taking behaviours potentially threaten the foetus. This knowledge comes through a process of 'normalization', the identification and scrutinizing of 'abnormal' behaviour such as smoking during pregnancy and the celebration of acceptable behaviours that serves as a powerful socializing force in defining normality (Lee & Jackson 2002). As pregnant women internalize prenatal nutritional norms and implement these in their daily lives, they construct a particular type of 'self-as-mother' (Copelton 2007: 470). The wide availability and public visibility of health promotion information means that pregnant women are 'continually encouraged to act responsibly in order to promote normal fetal development' (Lee & Jackson 2002: 124). Pregnant women often feel consumed by lists of dangerous food and drinks and by the rules and regulations of pregnancy (Nash 2015). The pregnant teen will be aware, therefore, that corporeal generosity is a risky exchange. The choices she

makes to try to control and/or satisfy her body and what she consumes may impact on the development of her baby in favourable or unfavourable ways. Hird (2007) warns, therefore, that the process of embodied 'gifting' brings with it as much likelihood of threatening the integrity of bodies as of opening up new possibilities. This takes up Ringrose's (2011) description of 'affective assemblages', which she derives from Deleuze and Guattari's (1987) suggestion that bodies affect other bodies to damage them or to be damaged by them or to exchange passions with them and join together in composing a more powerful body.

Weighing the body

March 16th 2017

I am currently sixteen weeks pregnant and I returned to the midwives' clinic for a check-up. The attending midwife checked a urine sample, took a blood pressure reading and weighed me! She didn't comment on my weight but I could see I have gained 14 lb since becoming pregnant. This is in excess of 'normal' weight gain at sixteen weeks. The information leaflet given to me at registration suggested that it is common for women not to gain any weight in their first trimester and in fact some can even lose weight. Most women should expect to gain 30 lb during the course of their pregnancy but I have already gained almost half of this. I felt a slight sense of panic.

Visual and social media habitually target body regulation regimen at teenage girls and pregnant women, leaving the pregnant teenager in a particularly complex position. Thinness depicting and promoting (TDP) media showcases slenderness, and in doing so promotes body distortion amongst teenage girls (Malachowski & Myers 2013). The power of images to manipulate logical thought lies largely in the fact that the images are themselves manipulated. Harrison and Hefner (2014) suggest that even though young people are developmentally capable of distinguishing between fantasy

and reality, image-editing technologies have come to be so advanced that even competent adults cannot accurately identify retouching. Essentially, 'developmental gains cannot compensate for technology that is capable of outsmarting human perception' (ibid. 136). Harrison and Hefner (2014) go on to draw on Social Comparison Theory to describe how teenage girls make upward self-comparisons to slender media images, decreasing their self-esteem and increasing appearance related self-consciousness. Kleemans, Daalmans, Carbaat and Anschütz (2016) use Negative Contrast Theory to arrive at a similar conclusion, explaining that the contrast girls feel between themselves and the thin ideal leads to lower body satisfaction. However, while media images are particularly powerful and influential, body validation amongst teenagers is often more meaningfully negotiated and assigned at the level of interaction with peers (McSharry 2009). Teens see the peers they encounter in their physical and digital circles as more comparable, real and relevant. That said, the level to which photos of the self are manipulated amongst ordinary social media users cannot be underestimated either, meaning that the appearance of peers may be as unrealistic as that of celebrities (Kleemans et al. 2016). The hegemonic status of the thin body ideal inevitably impacts on teenage girls' embodied sense of self, in both pregnancy and non-pregnancy, whether they strive to obtain it or not. Yet there is a paucity of research examining teenagers' embodied experiences of weight gain in antenatal and post-natal periods.

It has been suggested that younger women find the emergence of a larger, expanding body during pregnancy more upsetting than older women in secure relational and material circumstances (Fox & Neiterman 2015). The extent to which teenage mothers are able to adapt to the physically expanding body is significant. Teenage girls' fear of being perceived as fat is widely recognized, and this fear of fat is hardly surprising given its cultural association with laziness, unnaturalness and a lack of discipline (McSharry 2009). The fat body is not only viewed as 'unattractive', but fat individuals are accused of moral failings due to their perceived inability to control their own body and for generally letting themselves go (Gill, Henwood & McLean 2005). Even from early childhood, children prefer not to play with overweight peers and assign negative adjectives to drawings featuring overweight individuals (Connor & Armitage 2000). According

to Monaghan (2005), while fat may not be a four-letter word, it carries implicit negative connotations. There appears to be a general social 'fat-titude' amongst all age groups that condemns loose and fleshy bodies. The fear of fat and associated labels may be particularly problematic for teenage girls, whose femininity is intrinsically linked, not just to controlling their bodies as discussed earlier, but specifically to the thin body ideal. For the participants in Nash's study, 'to be "fat" was to fail at being a contemporary woman' (2012: 311). Bell and McNaughton (2007) draw on the work of Nichter (2000) and Ambjörnsson (2005) to describe how teenage girls position themselves on a continuum of fatness as a way of establishing peer connectedness and successful femininity. Nichter (2000) describes how girls participate in 'fat talk' which involves self-declarations of fatness, only to be met with strong protestations from the rest of their peer group. In doing so a girl uses her body insecurities to maintain her position within the group and to confirm that she is no more self-assured than any other member of the group. Similarly, Ambjörnsson (2005) suggests that worrying about fat is normalized within girls' peer groups and expressing body dissatisfaction is a key strategy for performing girl identity. Defeating fat has become an important aspect of girls' verbal and visual narratives. This is endorsed by rhetoric in popular media which confirms the need for bulges to be attacked, fat to be burned and stomachs to be busted and eliminated (Bordo 1993). Stomachs, buttocks and breasts are identified as the areas of greatest concern for girls (ibid.). As these are the areas that expand most dramatically during pregnancy, it is little wonder that body dissatisfaction can become more pronounced during the maternity period and anxiety over the permanency of weight gain more acute.

The cultural expectation of body dissatisfaction that exists amongst teenage girls in the West is particularly problematic when combined with the corporeal transformations that occur during pregnancy. However, there is little research exploring the impact of negative body image in teenage pregnancy on eating and dietary behaviours during the maternity period and the possible impact these might have on mother and baby (Zaltzman et al. 2015). In 2003 Luttrell found only two articles examining pregnant girls' perceptions of body image, and by 2015 Zaltzman et al. found only six, claiming no relevant research had been conducted in almost ten years.

Of the articles reviewed by Zaltzman et al. (2015), two studies found positive attitudes amongst pregnant teenagers towards maternity weight gain (Matsuhashi & Felice (1991) and Simon et al. (1993)). The remaining four articles reviewed (Hellerstedt & Story (1998); Birkeland et al. (2005); Stenberg & Blinn (1993) & Benton-Hardy & Lock (1998)) found the physical changes of pregnancy, especially weight gain, caused body shape disturbance amongst the teenage participants. Given that women of all ages often report body dissatisfaction during pregnancy regardless of how satisfied they were pre-pregnancy, this indicates that teenagers who are generally noted for having heightened body concerns will probably feel particularly body conscious during pregnancy. According to Zaltzman et al., 'pregnancy adds further stress to a possibly already vulnerable adolescent and may have serious repercussions on how pregnant teenagers view themselves and their bodies' (2015: 141). Transformation of body shape has been reported as one of the biggest stressors of pregnancy, especially in the early stages of pregnancy (Hopper & Aubrey 2011). Indeed, where Zaltzman et al. (2015) found a positive correlation between pregnancy weight gain and body image, it was in studies focused on the third trimester. In early pregnancy women continue to compare their bodies to those of non-pregnant women (Duncombe, Wertheim, Skouteris, Paxton & Kelly 2008) and are conscious that weight gain is perceived to be as a result of getting fat rather than being pregnant. Although 'bump' related weight gain is acceptable during pregnancy, weight gain elsewhere on the body implies a lack of self-control (Padmanabhan et al. 2015). The implications of the distinction between being 'fat' and being 'pregnant' are significant, since adjectives such as 'gorgeous' and 'glowing' are associated with the pregnant belly, whereas the fat belly attracts adjectives such as 'gross' and 'grotesque'. Nash suggests, therefore, that 'looking' pregnant is critical for women as they emerge from the 'in-betweenness' of early pregnancy, and establish themselves as visibly pregnant (2012: 313). However, it is questionable as to whether teen mothers are so keen to be visibly pregnant at any stage in pregnancy (a point I will return to later).

In light of the discussion to date, it is slightly ironic that food cravings, even for 'deviant' non-food items (Copelton 2007), have been typically associated with maternity. Cravings are described as natural and

often linked to happy moments during pregnancy (Bojorquez-Chapela, Unikel, Mendoza & de Lachica 2014). In many ways, pregnancy represents a unique time for women where succumbing to cravings is acceptable (Clark, Skouteris, Wertheim, Paxton & Milgrom 2009). In fact, pregnancy could be viewed as the only period in a woman's life where indulgence is sanctioned and relinquish of body control is permitted. Zaltzman et al. (2015) suggest that both pregnant adults and adolescents acknowledge the importance of pregnancy weight gain and consider it to be a necessary and acceptable consequence of motherhood. The large pregnant body can be viewed as a sign of a successful pregnancy (Duncombe et al. 2008), while 'thinness' during pregnancy can be seen as foetal neglect (Nash 2015: 489). The large body symbolizes corporeal generosity in abundance where a mother has allowed her body to be re-shaped and re-formed in order to satisfy the needs of her growing child. However, despite an expectation that women's bodies will expand during pregnancy, there is an equal expectation that weight gain should remain within accepted parameters. The participants in Padmanabhan et al.'s (2015) study believed that pregnancy was a time to relax around the rigid rules of dieting and exercise for themselves, yet they were aware that consuming healthy foods was necessary for the creation of an ideal gestational environment. Essentially they 'faced emotional conflicts between limiting weight gain for "me", and being perceived as acting morally by gaining enough weight for "the baby"' (ibid. 1). Medical advice continually warns women of the need to practise self-discipline to minimize weight gain and to maximize the health of the foetus (Nash 2015). The notion of 'eating for two' often referenced as permission for indulgence during pregnancy has been emphatically corrected within medical discourse. Enormous pressure is placed on women not to exceed recommended guidelines for pregnancy weight gain (Nash 2012). The medicalization of maternity weight gain has resulted in a clear distinction between 'weight' and 'fat', where the former is permitted to the extent that it does not result in an unhealthy or permanent manifestation of the latter. Fat is portrayed as a medical evil that poses dangers to the mother and body in the pre- and post-natal periods. This, combined with the social damning of fat described earlier, means indulgence during pregnancy has the bittersweet taste of euphoria and fear. The prevalence of celebrity bodies

that have quickly reclaimed their pre-pregnancy shape reminds women that only temporary weight gain is permissible. It is unsurprising that the association between depression and body dissatisfaction is stronger in the post-pregnancy period than during pregnancy, because women believe they no longer have an excuse to be large and have internalized unrealistic expectations of the speed at which they can return to a pre-pregnant shape and size (Clark et al. 2009). Women for whom it is their first pregnancy, the group to which teen mothers are most likely to belong, express most concern that the body will not return to its pre-pregnant state (Hopper & Aubrey 2011). The general obsession with weight management that surrounds maternity in the West ultimately displaces any meaningful exploration of the internal experiences of pregnancy (ibid.). Narratives depicting the lived uniqueness of pregnant embodiment are continually neglected in favour of a preoccupation with external physical aesthetics.

The public pregnant body

May 5th 2017

I am now twenty-four weeks into my pregnancy. Today I visited a student teacher on school placement as part of my work. As I took up a place at the back of the classroom I was struck by the uncomfortable tension between my growing belly and the restricted confinements of the school desk and seat. I wondered how pregnant students experience this rigid workspace on a daily basis as their bellies continue to expand during the maternity period. By now I am visibly pregnant. There is no hiding the bump anymore. I try to conceal my pregnancies for as long as possible, not because I want to deny being pregnant but because I lose my private body in pregnancy and it becomes a public spectacle. When I am not pregnant people do not reference or question my body, but now, acquaintances and strangers, stare at my stomach before making eye contact and some even think they have an uninvited right to touch my growing body.

In early March 2017 investigators made a shocking discovery at a former mother and baby home in Galway in the Republic of Ireland. The particular institution functioned between 1925 and 1961, but was just one of many such homes in operation at the time to cater for the growing numbers of teenage and unmarried mothers and the need of church and state to hide them away. In March large quantities of human remains were discovered, said to range in age from pre-term babies to three-year-old children. They were found concealed in two large underground structures, one said to be a sewage containment system and the other said to be a long passageway containing twenty separate chambers. Irish history and literature are awash with descriptions of rural and urban women surrounded by their large families; their female bodies seemingly unrestrained by adherence to discourses of contraception or constriction. In contrast, teenage and unmarried mothers are largely absent from such depictions, their pregnant and parenting bodies hidden from public view in enclosed institutions. The young pregnant mother stood in opposition to one of the most valued aspects of Irish society at the time, namely, sexuality as prescribed by the Catholic Church. The teenage and unmarried mother represented a decline in religious observance and her body threatened the very teaching and credibility of the church.

The increased secularization of Irish society in the latter part of the twentieth century allowed the teenage mother to be recognized in policy and legislation. However, the tension between the pregnant teenage body and church values was again highlighted more recently when a Catholic school in the south of Ireland refused enrolment to a sixteen-year-old girl on the basis that she was pregnant and, following the birth of her child, on the basis that she was a single mother. The girl and her mother complained to the office of the Ombudsman for Children, which proceeded to investigate the claim. The school management unapologetically responded, stating that it was 'not a haven for young pregnant people or for young mothers' and added that 'the school has an uncompromising ethos and will not become a dumping ground' (cited in McLysaght 2012). There was a clear sense from school management that pregnant students should not be visible within the school, as the publicly pregnant body compromises the moral standing of a church-run school. The notion of the righteous

learner being inconsistent with a bulging stomach was also highlighted in research carried out by Nkani and Bhana (2010) with school principals in Durban, South Africa. One principal explained that while chasing pregnant students away would be in violation of policy, students must be aware that 'a learner in a school uniform with a bulging stomach' is unacceptable, as it sends a message that 'it is alright to get pregnant at school' (ibid. 110). There is an inherent understanding here that the learner in a school uniform is incongruent with the bulging stomach and the sexuality it implies (ibid.). There is no doubt that teenage girls in a post-feminist age enjoy more liberated sexual experiences than previous generations. New feminism endorses individual free choice. However, if these sexual choices are only free in so far as they do not result in pregnancy or stagnate educational attainment, then they are not so free at all.

The emblematic weight of pregnancy is undoubtedly as challenging for teen mothers as somatic weight. The school context can be particularly confronting for pregnant teens in this regard. In Pillow's study nowhere were 'girls' voices stronger, more independent, and more resistant than when they were talking about their school experiences' (1997: 354). As noted previously, the assemblage of a bulging stomach and the sexual activeness it symbolizes, with innocent uniform-clad girls, is irreconcilable. Uniforms symbolize 'a school's cohesiveness, levels of discipline, respect for authority, and high achievement' (Happel 2013: 94). Versions of school uniforms will not be found in the maternity sections of department stores. The school uniform imposes a type of deportment and way of being on its wearer that makes it impossible for young girls to forget the restricted nature of their embodied state (McSharry & Walsh 2014), and this may be particularly heightened for the pregnant uniform wearer. Tight waistbands are unquestionably uncomfortable for expanding stomachs, and skirts are decidedly revealing of swollen legs and ankles. Wearing alternative clothing may be an option for pregnant students in some schools, but while this may be more physically comfortable for the growing body, it serves to further differentiate the pregnant student from her peers and to further invite the focus of their gaze. Vincent (2009) points to the dilemma faced by pregnant students as they want their schools to acknowledge and respond to the physical challenges of pregnancy, for example, soreness,

exhaustion, frequent urination, heightened emotion. However, they do not want the measures put in place to further differentiate them from the rest of the student population. In the midst of uniformed student bodies and corporeal sameness, the pregnant body confronts school life in a most direct and questioning way, and pregnant students fear the stigmatization this might lead to.

Whether in school, socializing or simply going about daily life, the pregnant teenage body is continually subjected to moral judgement and scrutiny. The thought of teens being sexually active can be uncomfortable for adults and sometimes for other teens. Of course babies are conceived through sexual passivity as well as sexual assertiveness, but there is a tendency to view the pregnant teenage girl as sexually experienced. In pornographic imagery this portrayal is extreme, where the pregnant schoolgirl with her pigtails and Catholic uniform is fetishized for her mischievous horny behaviour (Musial 2014). The schoolgirl with a mature body is frequently the target of catcalls and wolf-whistles and even more worrying forms of harassment from older male onlookers, yet she is viewed as a dangerous pariah for boys her own age. If maternity is to be perceived as a type of corporeal gifting, then teen mothers undoubtedly gift their sexual identity in an unparalleled and often misinterpreted way.

Sax, in her work with teenage girls in a Brazilian shantytown, describes how teenage girls with mature breasts and fleshy bottoms were viewed as dangerous to 'inexperienced' boys (2010: 326). Within the community, whether a girl was deemed sexually active, or indeed pregnant, was negotiated by the size of her breasts, bottom and belly (ibid.). Through its very being, the pregnant body proclaims a sexual maturity often considered inappropriate and threatening to other teenagers, giving the pregnant teenager a socially contaminated status. It is little surprise that in a study carried out by Conlon (2006) on behalf of the Irish Crisis Pregnancy Agency, teenage parents were amongst those most likely to attempt to conceal a pregnancy. The participants noted that they wished to conceal their pregnancy out of fear of rejection by the biological father and fear of disappointment from parents, as well as trying to conceal sexual activity and to avoid pregnancy related stigma (ibid.). In research recently conducted by some of my own Masters students, similar reasons were given by

teen mothers for concealing their pregnancies for as long as possible. They described wanting to hold back whispers and judgements. One participant explained how her uniform concealed her bump from school management and peers for seven-and-a-half months. Interestingly, she contrasted the self-consciousness she felt around her pregnant body and lack of pride in her bump with the absolute pride she felt when her baby was born. Another participant described how she kept her pregnancy secret for eight months, wearing baggy tops to conceal her bump. However, she regrets that the embarrassment she felt prevented her from announcing her pregnancy earlier and enjoying the excitement that usually accompanies the maternity journey. Finding ways to challenge and/or avoid the 'looks' from adults and other teenagers takes lots of emotional energy and self-protective strategies (Luttrell 2011: 304). So long as pregnancy is viewed as an age related event, teen mothers (and older mothers) will likely experience a tension around how to conceal and reveal the pregnant body.

The breastfeeding body

June 14th 2017

The two questions I am most frequently asked at antenatal appointments are: did I have 'normal' deliveries with my first two children and did I breast-feed them? When I can answer both questions in the affirmative, I am told that I am in a low risk category and should be able to avail of early release from hospital if I so wish. The engagement becomes pleasant and relaxed and, in spite of myself, I feel like I have just received a gold star for my schoolwork. I wonder if I would feel a sense of failure if I had had Caesarean sections or if I had bottle-fed my children. I was not breastfed and neither was my husband. We were born into a generation and country of formula feeding. Breastfeeding was an uncertain and confusing experience for me, with family unable and, often unwilling, to offer support. In the early days of motherhood I would wince with pain as the baby latched on. I persisted because of the moments of

oneness I felt with my children and the sense of absolute empowerment that came from knowing my body could nurture their tiny bodies.

If pregnant bodies are subjected to medical and social scrutiny, then so too are breastfeeding bodies. Within medical discourse, breastfeeding has obtained a status of moral imperative that is inextricably linked to the conception of 'good mothering' (Marshall, Godfrey & Renfrew 2007: 2147). Hird describes breast milk as 'white blood' where the breast and mouth act as portals for the mobile exchange of immunizing agents, imprinting one body on the other (2007: 13). Breastfeeding implies abundant corporeal generosity such are the nutritional and emotional benefits suggested in medical discourse. Teenage mothers are unlikely to be able to ignore the prevalence of posters and pamphlets on breastfeeding to be found in medical waiting areas and antenatal information packs. These detail the benefits of breast milk for babies' development, such as counteracting infection, bacteria and allergies. According to Sipsma, Jones and Cole-Lewis (2015), there are benefits to be derived for the teenage mother also, such as economic affordability, weight loss, maternal-infant bonding and reduced risk of post-natal depression. However, breastfeeding is not an inconsequential exchange for teenage mothers. Through breastfeeding, teenage mothers utilize protein and other nutrients, normally reserved for their own physical development, in order to provide for their baby (Stadtlander 2015). Hird's (2007) interpretation of breastfeeding as an ongoing process of gifting without calculable returns fails to incorporate the very specific tensions faced by teen mothers, who must share nutrients reserved for their own development with their baby. Breastfeeding can prolong a mother's feeling of her body not quite being her own (Fox & Neiterman 2015). Through breastfeeding, a mother continues to gift her body to her baby, but for some, they may simply need to get their body back.

Cultural and familial support for breastfeeding is much more evident in some parts of the world than in others. Despite breastfeeding promotional campaigns, encounters with actual women breastfeeding are rare in some Western countries (Marshall et al. 2007). In these contexts teenage mothers are much less likely to initiate breastfeeding than older mothers, and when they do they are less likely to sustain breastfeeding (Hunter,

Magill-Cuerden & McCourt 2015; Sipsma et al. 2007). In Ireland breastfeeding rates in general are amongst the lowest in the developed world. At 46.3 per cent, breastfeeding initiation in Ireland lags far behind other developed countries, where initiation rates are 90 per cent in Australia, 81 per cent in the UK and 79 per cent in the US (HSE 2016). Breastfeeding rates in Ireland have improved over the last two decades, but rather than being nationally representative, figures are most likely skewed by higher breastfeeding initiation rates amongst immigrant mothers (84.2 per cent) (Nolan & Layte 2014). Young mothers with a low socio-economic status and without a third-level qualification continue to be the group least likely to initiate or continue breastfeeding in the Irish context (Gallagher, Begley & Clarke 2016; McGorrian, Shortt, Doyle, Kilroe & Kelleher 2010). This raises questions about the social and personal factors that impact on breastfeeding rates in Ireland, particularly amongst teen mothers.

Breastfeeding as the default feeding strategy is very publicly endorsed, yet practical support for breastfeeding is more problematic. Stadlander (2015) suggests that teenage mothers want to do what is best for their babies but often lack specific knowledge and confidence to initiate and continue breastfeeding. As noted previously, the medicalization of pregnancy can leave a mother feeling detached from her growing body, with little sense of ownership over her own physical being or that of her baby. Arguably, the methodical medical management of birthing can reinforce this lack of ownership. The young women in Hunter et al.'s study (2015) labelled the labour ward as a disempowering space. They described feeling tired, dazed, scared, in pain, overwhelmed and utterly incapacitated as they passively lay while medical staff delivered the baby, stitched vaginal tears and dressed the baby. Many described the initiation of breastfeeding as 'something that was done to them, rather than something they were helped to do themselves' (Hunter et al. 2015: 51). Routinized medical procedures left the teenage mothers feeling like physical objects rather than self-determining individuals (*ibid.*). If mothers are to engage confidently in the bodily exchange that is breastfeeding, then surely this requires a process of empowerment. It is easy to problematize teenage mothers as reluctant breastfeeders, yet to allow the medical and social contradictions around breastfeeding to remain uncritiqued. On the one hand, expectant mothers are bombarded by the

alignment of breastfeeding with good mothering, but on the other hand, post-natal narratives frequently depict unsupportive and disempowering hospital environments. The young mothers in Noble-Carr and Bell's (2012) work described the invasive and unhelpful contributions they had received from hospital staff. One participant explained how 'they were pushing and hurting my breasts and I was like "for the love of God, just stop!"' (ibid. 35). Another explained how they were 'pulling and tugging on me, trying to get the milk out, and I'm like "There is no milk. Just let me have a bottle"' (ibid.). The teen mothers discussed how they just wanted the midwives to get their hand off their breasts. Most women would probably feel some level of discomfort with their breasts being handled and manipulated, but for teenagers, who are already acutely body conscious, this experience is all the more intrusive and disconcerting. In general, discomfort with breast exposure and associated embarrassment are critical factors in teen mothers' feeding decisions (Stadtlander 2015; Ineichen, Pierce & Lawrenson 1997). Embarrassment is compounded in contexts such as Ireland where breastfeeding women are invisible, implying that exposing breasts is shameful, except for private sexual encounters. For Hickey-Moody, 'the mouth-sucking-infant-nipple machine deterritorializes capitalist economies of the body in which the woman's breast is a sexual commodity' (2013: 279). Therefore, breastfeeding potentially symbolizes a conflictual assemblage of self for the teen mother where the corporeal generosity of giving physically to one's baby is interrupted by corporeal consciousness that threatens to take socially from oneself.

Conclusion

Pregnancy as a transformative embodied event is undisputed. It transforms both the outer surface and inner materiality of the female body. Therefore the lack of empirical research on teenage girls' lived experiences of the embodied transformations of pregnancy is quite puzzling. Teenage pregnancy symbolizes an unexpected collapse of the developmental categories

of 'girl' and 'woman', and for some this sudden transformation from girl to woman is most problematic. However, Hickey-Moody's (2013) analysis of the Deleuzian girl proposes that one does not make a defined transition from girl to woman, but zigzags backwards and forwards across time, forming experiential assemblages of 'girl' and 'woman'. Through pregnancy, one does not leave girlhood to become a woman because, for Deleuze, these are not distinct categories. Sax (2010) also suggests that an overemphasis on pregnancy as an age bound experience rather than a body bound experience has neglected detailed explorations of how all women be and become through pregnancy. Coleman (2008) uses the notion of 'becoming' as her point of departure for explaining how bodies come to be within particular circumstances. Coleman's work is useful for helping us to understand how teenage mothers might come to experience the physical, cognitive and emotional demands of both pregnancy and adolescence. She draws on Deleuze to suggest that bodies are not bounded subjects that are separate from the circumstances they encounter. A body in this instance is a relational becoming. The relations between bodies and their situations and surroundings result in specific positive or negative effects and this can limit or enhance the becoming of bodies, but it does not stall it. For Coleman, 'a body does not stop becoming because it is unhappy, depressed or angry' (2008: 175). Therefore the pregnant body becomes through a process of engagement between the body and numerous other forces (Coffey 2013). Even if the teenage girl struggles with the demands of providing for her growing child and concerns over weight management, self-consciousness or pregnancy concealment, her body continues to become in the midst of these struggles. Here the pregnant teenage body is essentially an assemblage of contradictions and opportunities.

Note

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4 Teen Mothering in the United States: Fertile Ground for Shifting the Paradigm

ABSTRACT

Teen mothering was identified as a social and public health problem in the United States (US) beginning in the late 1970s, as advocacy groups, policymakers and researchers responded with alarm to the rise in ‘unwed’ teen pregnancies and births. Alarm intensified as study after study suggested that an early birth stunts or derails the future of mother and child. Although this characterization was problematic from the start, an alarmist paradigm remains entrenched in professional and policy discourse. The cumulative evidence from third generation studies and qualitative research calls for a paradigm shift that recognizes teen mothers’ strengths and resilience and ties their vulnerabilities to childhood adversities and longstanding disadvantage.

Introducing teen mothering as a problem in the United States

Teen mothering became a contentious issue in the US in the late 1970s. Female sexuality, single parenting, poverty and race converged to produce a combustible mix in a country distinguished by its wealth and power, and the highest teen birth rate in the developed world (Sedgh, Finer, Bankole, Eilers & Singh 2015; Ventura, Hamilton & Matthews 2014; Vinson 2012). With close to 250,000 teen births in 2014 (Hamilton, Martin, Osterman, Curtin & Mathews 2015), the US contribution to global numbers is substantial (Sedgh et al. 2015). High rates and numbers encouraged advocacy groups, policymakers and researchers to characterize teen mothering as the beginning of a downward spiral that derails the lives of mother and child. Although this characterization was problematic from the start (Furstenberg 2007), it continues to be accepted as ‘gospel’ despite solid evidence to the

contrary. Unfortunately, the (mis)characterization of teen mothering in the United States exerts worldwide influence (Béhague, Gonçalves, Gigante & Kirkwood 2012).

The purpose of this chapter is to review and critique how teen mothering in the US has been assembled from the late 1970s and why an alarmist paradigm remains so pervasive in social and health policy. After presenting US teen birth rates from a historical perspective, I briefly describe how scientific research on teen mothers has evolved over the last half-century. Growing evidence argues for shifting from an alarmist paradigm that emphasizes teen mothers' deviance and poor outcomes to greater recognition of their strengths, resilience and vulnerabilities in the context of social inequities and health disparities. Because different terms have been in vogue over the last half-century, I use the term 'teen mother' to refer to those who give birth before age twenty. The 'discovery' of teen fathering is a more recent development and is not addressed in this chapter.

An alarmist paradigm emerges

Teen birth rates have been tracked in the US since the 1940s. The rate peaked in 1957 at 96.3 per thousand women aged fifteen to nineteen (Ventura et al. 2014), and gradually declined to 24.2 per thousand females aged fifteen to nineteen in 2014 (Hamilton et al. 2015). While the decline in teen births has occurred across all racial/ethnic groups, rates remain substantially higher among African American, Latina and Native American teens (Hamilton et al. 2015). States with larger populations of racial/ethnic groups, higher rates of poverty and wider income inequality have the highest rates of teen births (Kearney & Levine 2012; Ventura et al. 2014). Despite the downward trend in teen births, the US rate remains the highest in the post-industrial world. To put the US rate into an international perspective, fourteen of thirty-one developed countries have rates less than ten per thousand, and only seven of thirty-one countries have rates of twenty or more per thousand (Ventura et al. 2014).

Teen mothering was identified as a social and public health problem in the US beginning in the late 1970s as advocacy groups, policymakers and researchers responded with alarm to the rise in 'unwed' teen pregnancies and births. Paradoxically, high teen birth rates of the 1950s and 1960s did not raise public concern or generate scientific interest, since these births typically occurred in the context of marriage, concealing the sexual activity of young couples who were dating or engaged to marry (Furstenberg 2007). As 'shotgun' marriages declined, pregnant white teens resorted to illegal abortions or were sent to maternity homes where they relinquished their babies for adoption and returned home with an unsullied reputation (Solinger 2000). Because black pregnant teens were often excluded from maternity homes due to race-based admission criteria or the families' lack of financial resources, they gave birth and typically raised their babies with the help of their families (Ladner 1971; Stack 1974). Their growing numbers defined single mothering as a black urban problem of 'tangled pathologies' (Furstenberg 2009). The initial surge in births to single black teens was soon mirrored by white teens, with pictures of their protruding bellies appearing in media reports (Arney & Bergen 1984).

The decline in teen marriage and the rise in single mothering signalled a new social landscape. The close ties between sex and marriage were unravelling as the sexual revolution and new family structures challenged traditional norms regarding sex, gender roles and family life. Broad upheavals in the social and economic lives of families began to alter the pathway into young adulthood for teens of different class backgrounds, with more affluent youth facing a lengthy adolescence (Furstenberg 2008). As middle-class girls gained access to family planning, legal abortion, college education and careers, their life-course options expanded. Knowing that a baby would derail college education and careers, these girls were highly motivated to contracept or abort in the event of an unintended pregnancy (Smith, Skinner & Fenwick 2012; Ventura et al. 2014). Options were more limited for girls growing up in low-income communities. With college and careers mostly out of reach, these girls often had few reasons to avoid or terminate a pregnancy (Bell, Glover & Alexander 2014; Driscoll, Sugland, Manlove & Papillo 2005; Smith et al. 2012). In fact, sex and pregnancy were typically viewed by the girls as inevitable (Gabriel & McAnarney 1983; Gubrium,

Barcelona, Buchanan & Gubrium 2013; Jones, Frohwirth & Blades 2016) and something to get over with (Secor-Turner, Sieving & Garwick 2011).

Compared with their more affluent peers, low-income girls continue to have lower expectations for a long life (Chipman & Morrison 2015); are less hopeful about their futures (Fedorowicz, Hellerstedt, Schreiner & Bolland 2014); are more likely to be positive or pleased about pregnancy (Cavazos-Rehg, Krauss, Spitznagel, Schootman, Cottler and Bierut 2013; Lau, Lin & Flores 2014); and are more likely to find identity in family life than in the job market (Edin & Kefalas 2005). The limited opportunities for low-income girls have continued to erode as blue collar jobs have moved overseas; low-income wages have stagnated; labour unions have lost power and influence; and high incarceration rates among men of colour reduce the pool of marriageable partners and increase the economic plight of families. With less faith in a promising future, disadvantaged teens 'drift' into pregnancy as part of an accelerated life course (Burton 1990). While such pregnancies are rarely 'planned', they are an accepted route for becoming an adult woman (Sisson 2012).

The science of teen mothering

Even though teen birth rates steadily declined from 1957 (Ventura et al. 2014), an influential report from the Alan Guttmacher Institute (1976) declared an epidemic of teen pregnancies. The so-called epidemic fuelled public concerns and generated scientific interest in the causes and consequences of teen mothering. Alarm intensified as study after study suggested that giving birth as a teen 'stunts' or derails the future of mother and child and burdens taxpayers (Hayes 1987; Hoffman 2006). Results from this early research were consistent and compelling: teen mothers fared poorly on multiple outcomes. Compared with later childbearers, teen mothers were more likely to drop out of school, rely on welfare and become impoverished. They also tended to be single and have unstable relationships with partners. They were less competent parents, and more neglectful and harsh

with their children (Hofferth 1987b; Westman 2009). Their children also fared worse than the offspring of older mothers (Hofferth 1987a; Ventura et al. 2014; Westman 2009). These early findings implied that poor outcomes, including poverty, welfare dependence and poor parenting, were caused by young maternal age. Following this logic, poor outcomes were avoidable if teens would postpone having children.

Drawing on Fletcher and Wolfe (2009), Weed, Nicholson and Farris (2015) provided a succinct overview of how the research on teen mothering evolved after teen mothering was 'discovered'. First generation studies, as described above, contributed to an alarmist paradigm by attributing unfavourable maternal-child outcomes to young maternal age (Hayes 1987; Weed et al. 2015). If a comparison group had been used at all in early studies, teens were compared with older mothers without controlling for important differences between them. Although some researchers recognized the limitations of their studies, the limitations were often downplayed or disregarded by policymakers, advocacy groups and the media (Furstenberg 2007; Luker 1996).

The limitations of first generation studies were clearly identified in early critiques and included inadequate comparison groups, unmeasured background factors, the preponderance of cross-sectional studies and the use of theories and instruments consistent with middle-class norms (Geronimus 1991; Luker 1996; Phoenix 1991). These factors exaggerated the negative effects of young maternal age by obscuring the differences between young mothers and later childbearers. Hotz, McElroy and Sanders (2008) explain why these background differences matter:

The assertion that adolescent childbearing *causes* the poor socioeconomic outcomes [...] implies that a teen mother was on the same upwardly mobile life course as her counterpart who did not have a child as a teenager but, *by having her first birth as a teenager*, altered the remainder of her life detrimentally. For these two groups of women to be *comparable*, teen mothers and the women with whom they are being compared would have to have virtually identical socioeconomic and background characteristics before the age at which teen mothers had their first child. In fact, this is not the case. (2008: 59, emphasis in original)

Second generation studies used simple regression analyses to statistically control for other influences on the outcomes; these studies found that

poor outcomes were reduced relative to findings from first generation studies (Weed et al. 2015). Third generation studies represented a significant advance, since they used experimental designs and statistical methods to address the following important question: how much of the effect of teen mothering is due to differences that precede the pregnancy and how much to young maternal age? Studies in this vein used innovative comparison groups to more effectively control for unmeasured background factors. In one approach, teen mothers were compared with teens who miscarried or had an abortion (Fletcher & Wolfe 2009; Hotz, McElroy & Sanders 2005; Patel & Sen 2012). These teens were considered similar to teen mothers, since they would have had a baby if they hadn't miscarried or had an abortion. In another approach, teen mothers were compared with their sisters or cousins who shared family and community characteristics but avoided a teen birth, thereby controlling for subtle and unmeasured differences (Corcoran & Kunz 1997; Coyne, Fontaine, Långström, Lichtenstein & D'Onofrio 2013; Geronimus & Korenman 1992; Webbink, Martin & Visscher 2011). A third approach, referred to as propensity score matching, matched teen mothers to teens who avoided early childbearing but had a statistical probability of becoming teen mothers (Assini-Meytin & Green 2015; Levine & Painter 2003). These three approaches allowed researchers to examine whether differences in outcomes were due to the timing of the birth or to mothers' pre-existing characteristics.

These approaches have consistently reduced, and in a few cases eliminated, the poor outcomes attributed to young maternal age, suggesting that pre-existing differences account for most of the adverse effects of teen mothering (Weed et al. 2015). As Hotz, McElroy and Sanders (2008) explained above, the life-course trajectories of teen mothers diverge markedly from those of their more affluent peers, beginning in childhood, and these childhood differences are primarily responsible for poor outcomes (Amato & Kane 2011; Levine & Painter 2003). As Luker (1996) asserted two decades ago, young maternal age is not the primary factor leading to poverty and other poor outcomes; rather, poverty threatens child and family health and development in insidious ways that predispose disadvantaged youth to engage in unprotected sex. Young maternal age may worsen disadvantaged girls' future prospects slightly, but their prospects

are seriously eroded well before conceiving a pregnancy. Based on this evidence, deferring parenthood would not greatly improve the life course of disadvantaged girls.

Early third generation studies sparked a lively debate in the US literature (Furstenberg 1991, 1992; Geronimus 1991, 1992). Two camps emerged around the interpretation of the newer findings. The 'revisionist' camp was led by Geronimus, whose groundbreaking research paired teen mothers with their sisters or cousins (Geronimus & Korenman 1993; Geronimus, Korenman & Hillemeier 1994). Because the timing of the birth had little effect on outcomes for the disadvantaged African Americans studied by Geronimus, she argued that teen mothering was best conceptualized as an adaptive response to perverse social conditions, which contribute to chronic illness, premature aging and early death (Geronimus 2003; Geronimus, Hicken, Keene & Bound 2006; Geronimus, Pearson, Linnenbringer, Schulz, Reyes, Epel & Blackburn 2015). Furstenberg was not convinced by her argument or research design. His initial scepticism subsided as additional third generation studies documented a sizable reduction in the magnitude of the effect of teen mothering on poor maternal-child outcomes (Furstenberg 2007).

More recent quantitative studies have taken advantage of the advances made by third generation researchers to determine if the choice of comparison group or statistical approach makes a difference in outcomes. For example, Webbink et al. (2011) compared teen mothers with sibling sisters and twin sisters with an Australian sample and reported about a half year reduction in education for teen mothers when matched to sibling sisters. This gap, however, was eliminated when matching was based on identical twin sisters. Another example is provided by Patel and Sen (2012), who compared teen mothers with two groups on long-term physical and mental health outcomes. One comparison group included women who became pregnant as teens but had a miscarriage, abortion or stillbirth (teen pregnancy only), and the other group consisted of women who reported having unprotected sex as teens but did not become pregnant (teen unprotected sex only). Consistent with prior research, poor physical health among the teen mothers was reduced but not eliminated when background characteristics were adjusted statistically. These differences were eliminated when teen

mothers were compared with both groups. As for mental health, the teen pregnancy only group and the teen mothering group had similarly negative outcomes, suggesting that unmeasured factors leading to pregnancy contribute to poor outcomes regardless of how the pregnancy ended (in miscarriage, stillbirth, abortion or a live birth).

Kane, Morgan, Harris and Guilkey (2013) also demonstrated that the choice of statistical approach makes a difference in the magnitude of reduction on teen mothers' educational attainment. When no adjustments were made, teen mothers had two to three fewer years of education compared with later childbearers. When four statistical approaches were compared, the educational gap between teen mothers and later childbearers was further reduced (from 0.70 to 1.9 fewer years). In evaluating the strengths and limitations of the four approaches, the researchers preferred the approach based on semi-parametric maximum likelihood estimation, which yielded the estimate of about three-quarters of a year less schooling for teen mothers. Based on their results, Kane et al. suggested that 'the wide-ranging estimates in past research are related more to the choice of statistical strategy than to the use of different data sets (focused on different cohorts)' (2013: 2145).

Although we can have much stronger confidence in the findings of third generation studies, they also have limitations. While comparing teen mothers with their sisters or cousins who avoid early parenting adjusts for many pre-existing family and community characteristics, this approach does not adjust for differences between teen mothers and their sisters or cousins. These differences may include cognitive ability, school performance or childhood adversities, to name a few. To my knowledge, no known studies have adjusted for these differences, perhaps because obtaining an adequate sample of sister or cousin pairs is difficult, even with a national data base.

The science is clear: teen mothers differ in important and substantial ways from mothers who defer parenting. Equally important, teen mothers are a more diverse group than our stereotypes and media images suggest. Not all teen mothers are black or brown or grow up in disadvantaged families (Taylor 2009; Williams, Sessler, Addo & Frech 2015). In the event of pregnancy, some white middle-class girls reject abortion and become mothers (SmithBattle 2010). Many teen mothers are alienated from school

as children and drop out prior to pregnancy (Levine & Painter 2003; Pillow 2004), but others have strong academic records before and after giving birth (SmithBattle 2006b, 2007a). Researchers have taken advantage of this naturally occurring heterogeneity among teen mothers to examine variations in outcomes (Borkowski, Farris, Whitman, Carothers, Weed and Keogh 2007; Hillis, Anda, Dube, Felitti, Marchbanks and Marks 2004; Kennedy & Adams 2016). An elegant example of this type of study is provided by Diaz and Fiel (2016). Using data from the National Longitudinal Survey of Youth (NLSY), they examined the long-term consequences of teen fertility on earnings and educational attainment for pregnant teens who differed based on their level of disadvantage. Poor educational attainment (as measured by high school completion and college completion) and reductions in long-term earnings were more clear-cut among the more affluent teens and less pronounced among the more disadvantaged teens. Diaz and Fiel concluded that girls who grow up in disadvantaged families and communities are not substantially harmed by a teen birth, while teens with better prospects for advancing their education and income are harmed the most. Other variations in teen mothers' backgrounds have also been shown to affect short and long-term outcomes. For example, teen mothers who are exposed to more childhood adversities (Hillis et al. 2004) and violence (Kennedy & Adams 2016) face greater difficulties and worse health and educational outcomes than teen mothers with less exposure to traumatizing experiences. Teen mothers who were white or who remained single reported better self-reported health at mid-life than their African American or married counterparts (Williams, Sassler, Addo & Frech 2015). The authors conjecture that young single mothers, who are disproportionately low income, may have avoided the stress associated with marriages to partners whose economic prospects are limited.

Social scientists and health researchers have also explored outcomes for teen mothers' children. Early studies portrayed teens as inept parents who jeopardized their children's development. This depiction is increasingly challenged by studies that mirror the trajectory of research on teen mothers; that is, early studies exaggerated children's adverse outcomes (for example, in schooling, behavioural problems, delinquency/incarceration, early parenting and earnings/employment). Consistent with the research

on teen mothers, unfavourable child outcomes are largely reduced when researchers control for mothers' pre-existing characteristics. The reader is referred to recent reviews of this research (Coyne & D'Onofrio 2012; Weed et al. 2015).

While teen mothering has always been a marker of social disadvantage, several birth cohort studies suggest that disadvantage is rising among recent cohorts of teen mothers relative to earlier cohorts in the United States (Driscoll 2014; Woodward, Friesen, Raudino, Fergusson & Horwood 2013); the United Kingdom (McCall, Bhattacharya, Okpo & Macfarlane 2015); New Zealand (Donelan-McCall, Eckenrode & Olds 2009); Finland (Väisänen & Murphy 2014); and Sweden (Coyne et al. 2013). In the Swedish study, there was no difference in criminal convictions between teen and adult mothers in an early cohort, but differences emerged in later cohorts as disadvantage became more pronounced among teen mothers. The growing disadvantage of teen mothers is worrisome, but not unexpected given the growing income inequality in the US and elsewhere (Marmot 2015) and the collapse of the welfare system in the United States (Edin & Shaefer 2015). It remains to be seen if contemporary teen mothers, who face greater levels of disadvantage (Driscoll 2014; Mollborn & Jacobs 2012), will 'catch up' over time like their predecessors (Furstenberg 2007).

In summary, the first generation of quantitative research exaggerated the poor outcomes associated with young maternal age. Unfavourable outcomes were used to shine a national spotlight on teen pregnancy and births to advance socio-political agendas, even though rates were declining (Furstenberg 2007; Luker 1996). Early critiques identified the limitations of these studies (Geronimus 1991; Luker 1996; Phoenix 1991). With stronger research designs, studies confirmed that teen mothers' pre-existing characteristics (which 'select' or predispose youth into parenting) are largely responsible for poor outcomes. These selection factors are substantial, since teen mothers are disproportionately of colour and tend to grow up in low-income families and segregated neighbourhoods where they are exposed during childhood to many social and environmental threats (Coyne & D'Onofrio 2012; Driscoll 2014; Farber 2014). The broad conclusion from third generation studies is strikingly at odds with the prevailing paradigm: waiting to have a child does not greatly improve the lives of teens who are

already disadvantaged. Another unexpected finding also challenges conventional wisdom; the anticipation of mothering motivates some teens to improve their lives and reduce drug use, binge drinking or illegal activity (Amato & Kane 2011; Fletcher 2011; Walker & Holtfreter 2016). A tsunami of qualitative research corroborates and extends these findings.

Qualitative studies of teen mothering

Teen mothers' perspectives on their lives were excluded in the early scientific literature (SmithBattle 1995). As qualitative methods gained acceptance in the academy, social scientists and health researchers began filling this void with studies that exemplify the strengths and rigour of qualitative scholarship. Rather than bracketing out human meanings and reasserting the cultural biases, concepts and methodological screens of the prevailing paradigm, qualitative researchers interrogate participants' narratives with openness and humility to recover the world as lived. Detailed descriptions of experiences are collected, analysed and presented to provide the contextual backdrop for participants' meanings, concerns and actions. When the study is done well, the reader is led by the researcher's interpretation to go beyond his or her vantage point as an outsider to grasp what participants take as self-evident and 'natural'. As described below, findings bring visibility to mothers' experiential understanding of their realities, demonstrating how their possibilities and constraints for being and acting as a mother are tied to family and cultural worlds (SmithBattle 2010).

Qualitative findings challenge the alarmist paradigm by showing that teen mothering is an intelligible response to life-worlds and cultural and sub-cultural traditions (Connolly, Heifetz & Bohr 2012; Smith et al. 2012; SmithBattle 2009b). According to teen mothers, mothering may not represent misfortune but provides a pathway into adulthood in the context of adverse childhood experiences, violent neighbourhoods, inferior schools and limited opportunities (Burton 1990; Cherry, Chumbler, Bute & Huff 2015; Dalton 2015). In spite of significant hardships, mothering is often

experienced as a transformative experience that fosters maturity, responsibility and the development of new priorities (Brand, Morrison & Down 2015; Seamark & Lings 2004; Smith et al. 2012), such as leaving harmful relationships (Lesser, Ocoso-Sanchez & Davis 2010), reinvesting in school (Anwar & Stanistreet 2014; Rolfe 2008; SmithBattle 2007a), and curbing drug use (Dalton 2015; Quinlivan 2004). The new purpose and meaning that arises from being a mother may lead to narrative repair, a more positive identity, a new horizon for how one should live or an enlarged future (Anwar & Stanistreet 2014; Dornig, Koniak-Griffin, Lesser, Gonzales-Figueroa, Luna, Anderson & Corea-London 2009; Romagnoli & Wall 2012). The demands of mothering may also exacerbate distress and interpersonal conflicts (Mollborn & Jacobs 2012; SmithBattle 1996), and lead some teens to regret the timing of the pregnancy (Warnes & Daiches 2011). Qualitative researchers further suggest that material hardships, social isolation and stigma can overwhelm the best of intentions (Kennedy, Agbenyiga, Kasiborski & Gladden 2010; Mollborn & Jacobs 2012).

The full range of qualitative methods (for example, ethnography, grounded theory, phenomenology, content analysis, qualitative description) is represented in the above research. In the vast majority of studies, data collection is limited to a one-time, face-to-face interview during the teen's pregnancy or within the first two postpartum years. Samples are often restricted to low-income teens. Longitudinal studies are rare, with two exceptions. Dalla and colleagues (Dalla, Bailey, Cunningham, Green & Vyhlidal 2013; Dalla & Gamble 2000; Dalla & Kennedy 2015) interviewed teen mothers on a Navaho reservation twice over twelve to fifteen years. Mothering remained their central identity at the second wave of the study (with two exceptions); their concerns as mothers had motivated them to improve their education and employment, and in some cases, to leave abusive relationships. Nearly half of the participants had earned a college degree or higher by Time 2, and 76 per cent were married or in a committed relationship. Many of these intimate relationships had ended or were strained by infidelity, alcohol abuse, years of unemployment and interpersonal violence, all of which were common on the reservation. The vulnerability of these mothers was apparent in high levels of interpersonal violence and negative life events and moderate levels of distress and depression scores.

I have followed teen mothers and family members over six waves and twenty-one years (SmithBattle 2010). The seventh wave is under way. The original study was inspired by my public health nursing practice in the late 1970s and early 1980s, where I had the great fortune to visit teen and older low-income women in their homes during pregnancy and early mothering. The teen mothers on my caseload did not describe their lives as restricted or derailed; their perspectives therefore diverged considerably from the alarmist paradigm that was emerging in the clinical and scientific literature. In contrast with the scientific paradigm that pathologized teen mothers, I entered the field with the broad purpose of understanding the everyday worlds of teen mothers from a non-pathologic lens. This purpose necessarily involved articulating teen mothers' practical understanding of their lives, including their priorities, struggles, aspirations and contradictions, as organized by family and cultural worlds.

Teen mothers' partners, parents (referred to as grandparents) and children (beginning at age twelve) continue to be interviewed at each wave. The sample is diverse in terms of family income, education and race/ethnicity, with the African American families tending to be of lower income than the Caucasian participants (SmithBattle 1995). This diversity has proved invaluable in describing how mothers and families negotiate transitions and setbacks, and how these are often shaped by social disadvantage (or advantage), stigma, racism and flawed social policies.

In the first wave of the study, the majority of teen mother participants – sixteen in number – described the transformative potential of mothering; the few teens who were not transformed described their aspirations to be good parents but lacked the agency and resources to act in accord with the mother they wanted to be (SmithBattle 1993, 1995). Their childhoods were marked by traumatic experiences and adversarial family relationships. Patterns of grandparent caregiving played a crucial role in undermining (or promoting) the teen's care of her child (SmithBattle 1996). Subsequent waves have elaborated on how early patterns of grandparent caregiving shaped long-term outcomes and how teen mothers revised or rejected family caregiving legacies over two decades (SmithBattle 2006a, 2008; SmithBattle & Leonard 2014). The multigenerational data made it possible to describe how individual lives unfold within family legacies,

neighbourhood contexts and larger social structures. Findings highlight the cumulative impact of social disadvantage (or advantage) on the lives of teen mothers and their children and the reciprocity of teen mothers' and children's lives (SmithBattle 2007b; SmithBattle & Leonard 2012). For example, the few women who had little maternal agency in the first postpartum year continued to drift into their thirties. Their 'rudderlessness' reflected a precarious world that set their first-born children adrift as teenagers and young adults (SmithBattle & Leonard 2012). In contrast, the children of mothers who were transformed by mothering in the first wave experienced a smoother transition into adulthood as they drew on positive family legacies and the emotional and material resources of their families and communities (SmithBattle 2006a, 2008). Like other qualitative research, findings from this longitudinal study problematized the assumptions and stereotypes of teen mothers that are associated with the alarmist paradigm.

In summary, qualitative research has enriched our understanding of teen mothers by adding their experiential realities to the literature. Findings from cross-sectional and longitudinal research corroborate that early child-bearing is an intelligible response to family and cultural worlds that are largely invisible to middle-class professionals. For teens who inherit a shabby future at birth, teen mothering is not a tragedy per se or the beginning of a downward spiral. When a future is foreclosed during childhood, mothering cultivates meaning, responsibility and new aspirations. These aspirations may be strengthened (or undermined) as mothers face the demands and challenges of parenting with (or without) the help and support of partners, families and institutions (such as schools; reproductive health and health care agencies; and childcare, justice and welfare systems (Mollborn & Jacobs 2012; Silver 2015; SmithBattle & Leonard 2014)). These nuanced findings complement third generation quantitative studies by documenting the situated nature of teen mothers' lives and the legacy of childhood disadvantage in shaping the life-course and parenting.

Intervention research

The early findings of poor outcomes and high costs related to early child-bearing stimulated the development of programmes that aimed to reverse teen mothers' downward trajectory (Chrisler & Moore 2012; Ruedinger & Cox 2012; Seitz & Apfel 1999). Many programmes that were developed for teen mothers embraced a scientific–clinical gaze and practices of surveillance to monitor, motivate and educate teen mothers to bring them in line with middle-class norms of the life course and parenting (Horowitz 1995; Kelly 1998; SmithBattle 2009a). In this research, an alarmist paradigm is often implied, and citations of third generation studies and qualitative research are rare. As government and private funders have mandated rigorous evaluations to determine programme effectiveness, experimental and quasi-experimental designs and fidelity to protocols have been emphasized.

Since this large body of research has been summarized in narrative and systematic reviews (Hofferth 1987b; Hoyer 1998; Ruedinger & Cox 2012), only a cursory description of these programmes is provided here. First, programmes are remarkably diverse in their objectives and approaches. Because programmes target a wide array of maternal-child outcomes (for example improved birth outcomes, mental health, parenting behaviour, reduction of repeat births, educational attainment, child health and development), they vary considerably in terms of when services are provided (during pregnancy or postpartum); where they are sited (schools, health settings, homes, community agencies); their length and intensity (one session versus many sessions provided over months or years); staffing patterns (staffed by volunteers, para-professionals or professionals); and programme components (for example, case management, parent support and training, access to services, health education, life-skills training). Although a few interventions produced worse outcomes relative to controls, the majority yielded minimal to small effects (Hofferth 1987b; Hoyer 1998; Lachance, Burrus & Scott 2012; Ruedinger & Cox 2012). A number of issues limit intervention effectiveness, including poor study design, small sample sizes, high attrition and heterogeneity of the sample, to name a few.

As experimental and quasi-experimental studies have proliferated, meta-analytic techniques have been used to calculate effect sizes for interventions that examine similar outcomes. An umbrella review of twenty-one meta-analyses of these interventions reported that most effect sizes were negligible to small (SmithBattle, Loman, Schneider & Chantamit-o-pas, in review). These results are hardly surprising, since behavioural interventions are too weak to undo the structural inequalities and childhood adversities that contribute to poor outcomes for teen mothers. Because programmes privilege the normative assumptions of the life-course and parenting, and train staff to follow highly structured protocols, staff have little room (or training) for cultivating teen mothers' strengths and resilience and the transformative potential of mothering. Childhood adversities and the experiences of discrimination also appear to receive little attention, even though these experiences are known to shape long-term outcomes (Hillis et al. 2004) and may undermine teen mothers' engagement in programmes (O'Brien, Moritz, Luckey, McClatchey, Ingoldsby & Olds 2012).

Paradigm shift or retrenchment?

The construction of adolescence, the timing of childbearing and the meaning of mothering are historically and culturally situated. Before adolescence emerged historically as a distinct phase in the life cycle, childbearing typically occurred in the late teens. Social and economic upheavals of the last half-century have extended adolescence into the late twenties; this lengthened time period prepares (middle-class) youth to participate in a highly competitive, globalized economy (Furstenberg 2015; Geronimus 2003). The alarmist paradigm suggests that teen mothers violate this normative pathway at their peril, as exemplified by the recent remarks of Retta Ward, the Secretary of Health for the State of New Mexico (quoted in Krisberg 2016): 'Teen births are a primary driver of generational poverty, and reducing teen births will improve high school graduation rates and lead to a better trained workforce, which will ultimately help our economy and improve

our health status'. Similar assertions are routinely made without qualification by epidemiologists (Ventura et al. 2014), advocacy organizations (see <<http://thenationalcampaign.org/>>) and professionals (Westman 2009). Why does an alarmist paradigm persist?

Thomas Kuhn (1970), in his landmark book, *The Structure of Scientific Revolutions*, described how researchers resist paradigm shifts until sufficient anomalies perturb the biases embedded in 'normal science'. In the science on teen mothering, scientific practices and normative theories of parenting and the life course reflect neoliberal assumptions that pervade US political culture. After studying teen mothers for three decades, Furstenberg (2007: 3) came to appreciate these hidden assumptions: 'The causes and consequences of early childbearing [...] have been misunderstood, distorted, and exaggerated because they are refracted through a peculiarly American lens tinted by our distinctive political culture'. This peculiar American lens attributes social problems to the character flaws and deviance of individuals, ignoring the larger social inequities that are woven into educational, economic and justice systems. This distortion has been exacerbated by the illusion that scientific procedures control for theoretical, methodological and cultural biases.

Science, like all human endeavours, is conditioned by historical and cultural forces, and can therefore never be completely purged of prejudice. Claiming otherwise reflects the ultimate scientific bias (Guignon 1983). Crossley (2001: 93) asserts this very point when he writes: 'all agents, including social scientists, must see the world from "somewhere". Nobody enjoys a God's eye view or epistemological privilege'. Kuhn (1970) effectively discredits a God's eye view of science by describing how researchers absorb hidden assumptions and biases during their training and reinforce them over their careers. The very questions that scientists learn to ask reflect disciplinary assumptions about acceptable and fundable topics and appropriate ways of framing them based on available methods. Early research on teen mothering was primed by neoliberal assumptions and theories of deviance (and more recently by problem behaviour theory (Coyne and D'Onofrio 2012)) to reject teen mothers' perspectives and to identify objectively defined outcomes (Furstenberg 2007; SmithBattle 1994). By comparing teen mothers with older childbearers, dire outcomes were readily

identified while the assumptions grounding the research remained hidden. Adverse outcomes prodded other researchers to pursue similar questions, and stakeholders (funders, journal editors, policymakers, academic departments) to fund and publish similar studies. By judging and studying teen mothers' lives and parenting only in terms of their differences from cultural norms, early studies painted an incoherent and stigmatizing picture of teen mothers (SmithBattle 1994, 2013). It would have been heretical for early researchers to pose questions related to teen mothers' strengths or resilience, to examine how discriminatory educational policies contributed to unfavourable outcomes, or to ask how young mothering coheres with lived experience. Since qualitative research was deemed 'unscientific', teen mothers' perspectives were ignored as a legitimate source of knowledge. Even if a researcher had considered questions that went beyond the 'normal' science of the time, it is unlikely that such studies would have been funded or published (Weed et al. 2015). As a case in point, I'm aware of an instance where a case study of a teen mother who was doing well in her late twenties was rejected by a journal editor in the 1980s because positive outcomes were considered anomalous and therefore unworthy of publication. Stakeholders have also exaggerated the negative outcomes of early childbearing for their own purposes. For example, a representative of a US advocacy group informed me that the exaggeration of poor outcomes helped the organization to secure funding. Politicians and policymakers likewise selectively attend to findings that are consistent with their biases and purposes (Furstenberg 2007).

According to Kuhn (1970), science enters a 'revolutionary' period when a sufficient number of anomalous findings accumulate to challenge established assumptions and procedures. As researchers have taken advantage of additional computing power, sophisticated software packages, innovative research designs and national data sets, and have recognized the value of qualitative methods, new insights and lines of inquiry have emerged to reveal our cultural and scientific blind spots. Evidence from qualitative and third generation quantitative studies illuminates life-worlds that tend to differ from our own. For the low-income teen mother who is most often studied, becoming a mother can be a tacit recognition of the limited educational and vocational possibilities available to disadvantaged, discouraged

girls (Luker 1996; Sisson 2012; SmithBattle 2000). The alarmist paradigm disregards how the life-worlds of teen mothers are largely discrepant with the middle-class pathway into adulthood and parenting. When teen mothers' experiences are distorted by cultural biases and scientific theories, we fail to appreciate how girls' experiences and actions are holistic and pragmatic expressions of the life-worlds they inhabit. The social inequities and childhood adversities that course through the majority of teen mothers' lives create unrelenting challenges and perverse hardships, but no matter how fraught parenting is on the economic margins, many teen mothers gain purpose and meaning (Clemmens 2003; SmithBattle 2009b). Middle-class teen mothers may also gain purpose and meaning from mothering, even though they may experience worse educational outcomes relative to their peers (Diaz & Fiel 2016).

The view that teen mothering begins a downward spiral leads to misunderstanding and marginalization of young families via punitive social policies and behavioural interventions of surveillance (Sisson 2012; SmithBattle 2012). Reframing programmes and policies so they address teen mothers' concerns and challenges and capitalize on their aspirations and strengths would be an important step in the right direction (Brand, Morrison, Down & Westbrook 2014; SmithBattle 1994, 2006b; SmithBattle, Lorenz & Leander 2013), but this step should co-occur with US policies that reduce social inequities and restore a safety net for vulnerable families. Reducing social inequities upstream is crucial in light of the grim reality that inequalities in income, wealth and opportunity grow ever wider in the US (Marmot 2015); disadvantage is rising among recent cohorts of teen mothers (Driscoll 2014; Farber 2014); the welfare system has collapsed (Edin & Shafer 2015; Mollborn & Jacobs 2012); and low-income youth are sequestered into low-paying positions with little assistance for advancing their education or gaining a toe-hold in an increasingly competitive globalized economy (Furstenberg 2008, 2015).

Reimagining the journeys of pregnant and parenting teens

Teenagers gave birth to babies long before teen mothering was discovered by social scientists and health researchers. The discovery of teen mothering as a social problem focused a national spotlight on young maternal age as a problem of high risk, deviant girls who were partly responsible for family breakdown, crime and welfare dependence. Early findings supported an alarmist paradigm with little regard for the contexts and upstream conditions that contributed to high but declining teen birth rates. The characterization that teens' lives are derailed by having a child remains pervasive in spite of solid evidence suggesting that the negative effects of teen mothering are negligible-to-small for disadvantaged teens but perhaps greater for teens with more family and community resources. While understanding the magnitude of the effect of teen mothering will remain an important question, there is little question that teen mothers' vulnerability over the life course is not tied to young maternal age per se but to an unlevel playing field that is saturated with health and social disparities. Precisely because a promising future is derailed for disadvantaged girls (Sisson 2012), mothering offers a 'lifeline' into adulthood (Smith et al. 2012) that is imbued with meaning (SmithBattle 2007a, 2009c). Teen mothers' perspectives invite us to reflect on the ways that power and privilege lead us to misunderstand teen mothers as deviant and irrational actors rather than as youth whose perceptions, skills and resilience are shaped by a world marked by the 'inequitable institutionalization of life-cycle transitions' (Béhague et al. 2012: 434). Making this shift calls for bringing into sharp relief the childhood adversities and disadvantage that often precede teen pregnancy, and the structures of power and privilege that conspire against more inclusive policies (Sisson 2012). Given the scientific evidence, a paradigm shift is well overdue.

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JENNIFER BEGGS WEBER

5 'It changed my life': Rethinking the Consequences of Teenage Fatherhood

ABSTRACT

Using in-depth interviews with twenty-six teenage fathers, I explore how these young men negotiate the stigmas and expectations of teen pregnancy, responsibility and fatherhood within the culturally deemed appropriate bounds of masculinity, social class and youth. While debates surrounding teen pregnancy centre on the question of whether or not early childbearing ruins lives, the following analysis demonstrates that the answer is more complex than yes or no. Teen fathers' respective locations in the middle-class, working-class or lower-class strata further complicate the ways in which they negotiate cultural expectations of fatherhood. Understanding adolescent fatherhood as an assemblage – one that combines notions of cultural expectations and definitions of traditional fatherhood with the resources and experiences of social class – allows us to better understand how teen dads experience and make sense of adolescent fatherhood.

Introduction

'Yeah, it changed my life,' said Daniel. 'I had to grow up, be a man. I have to provide for my family.' Daniel's story was a sad one. He was a transient for most of his teen years, moving from couch to couch, always careful to never overstay his welcome. His father 'walked out' when he was 'just a kid' and his mom's addiction to painkiller pills left him to fend for himself for much of his childhood. He speaks confidently of his ability to survive: 'I actually lived in a[n] abandoned house longer than I did anywhere else,' he says. At eighteen, Daniel is the father of a six-month-old girl and his girlfriend is pregnant with their second child. The first six months of his daughter's life haven't fared much better than Daniel's. Daniel, his girlfriend

and their daughter are still moving from apartment to apartment, staying wherever they can: with his sister, her grandmother, his friend, even the kind neighbour across the street.

Men like Daniel typify current discussions about teen parenthood. The main argument surrounding teen pregnancy, especially from those on the side of policy and social welfare, has been that early childbearing essentially ‘ruins lives’, resulting in overwhelmingly negative consequences for teen mothers, teen fathers, their children and society at large. But existing research on teen pregnancy suggests that these inevitable outcomes are subject to debate (Furstenberg 2007; Geronimus 2003; Luker 1996; Mollborn 2012). The fact that teenagers that face early parenthood are more likely to come from lower classes and poorer backgrounds indicates that those who become teen mothers and fathers differ from the larger population in ways that could also result in poor outcomes, regardless of age and parental status (Edin & Kefalas 2005; Furstenberg 2007; Geronimus 2003). Furstenberg (2007) and Luker (1996) provide extensive reviews of the research conducted on both sides, generally coming to the conclusion that the ‘consequences of early childbearing are far from devastating’ (Furstenberg 2007: 47).

The label of ‘teen pregnancy’ is frequently applied in blanket fashion to anything and everything that has to do with not only teen pregnancy, but also teen parenthood (Weber 2012). The consequence is that women become the centre of the discussion, with teen fathers being all but ignored. Drawing on in-depth interviews with twenty-six teenage fathers in the US, the project on which this chapter is based addresses this gap, examining how young dads experience and make sense of becoming a father at an early age – specifically how they talk about the shifts and transformations their lives have taken. All of the young men spoke openly about the fact that having kids changed their life: it altered their relationships with girlfriends, friends and family; it forced them to ‘grow up’. For some, it eliminated opportunities and made their lives harder; for others, it made everything better – it gave them a reason to live. Current debates about whether or not teen parenthood ‘ruins lives’ often takes the form of a dichotomy, but as I demonstrate below, the lived realities of teen fathers are much more complex. The ways in which these young men conceptualized ‘change’ was

dynamic and fluid. But, when I asked them to expound on these changes, patterns emerged that suggest that the paths their lives have taken, and perhaps will take, were inherently different.

At some point during each interview I asked the men in my study if/how teen fatherhood altered their lives. Interestingly, their answers often crystallized around traditional notions of fathers as the primary providers. Just as Daniel suggested, his life has changed – now he has to be a provider. Similar to previous studies, all of the men I interviewed saw the primary role of fathers, and/or men generally, as the providers (see Allen & Doherty 1996; Barret & Robinson 1982; Dallas & Chen 1998; Danziger & Radin 1990; Glikman 2004; Kiselica 2008; Marsiglio 1994; Miller 1997; Paschal 2006; Roy 2004). In recent decades an increasing number of studies have sought to complicate this seemingly one-dimensional role of the father, focusing their analyses on aspects of father involvement (for example, availability and day-to-day caregiving) (Edin & Nelson 2013; Fuligni & Brooks-Gunn 2004; Tamis-LeMonda & Cabrera 2002); exploring, comparing and contrasting the role of the father with the role of the mother (Walzer 1998). Others have examined fatherhood as a social construction, exploring the ways in which cultural practices of fatherhood have changed over time and continue to vary across race and class lines (for a more detailed discussion, see Marsiglio, Day & Lamb 2000; Morman & Floyd 2006). Even with these attempts to conceptualize the role of the father as being about more than just financially providing, for the men I interviewed employment and breadwinning are still 'materially and symbolically central to fatherhood' (Roy 2004: 255). In other words, the ways that these teen fathers' definitions of what it means to be a 'good dad' centring on breadwinning suggests that while modern discussions may argue that fatherhood is changing, it is not changing for all men.

This chapter offers an analysis that challenges dominant discourses of teen parenthood, bridging two strains of literature – research on teen pregnancy (that which focuses largely on teen mothers) and studies that examine fatherhood (that which focuses primarily on adult men). Exploring how these men talk about life changes through a lens of assemblage and complexity offers a more nuanced perspective into the ways in which teen dads negotiate the challenges and expectations of young fatherhood.

Constructing teen fatherhood

Research on teen fathers is scant, largely due to the difficulty in accessing them. According to a recent report from the National Center for Health Statistics, the US birth rate for men aged fifteen to nineteen was 12.3 per 1,000 (Martin, Hamilton, Osterman, Driscoll & Mathews 2017). However, as the report also states, information and figures about fathers are often inaccurate. Birth certificates serve as the primary source of data, but details on fathers (including age) are frequently missing – this is especially true for the children of unmarried mothers and/or mothers under the age of twenty-five (Abma, Martinez & Copen 2010; Kimball 2004; Martin et al. 2017; Thornberry, Smith & Howard 1997). Despite this difficulty, researchers have still managed to garner important social/demographic information about teen fathers. For example, we know that men who come from low socioeconomic backgrounds and men of colour are more likely to father a child in their teens (Bunting & McAuley 2004; Klein 2005; Martin, et al. 2017; Thornberry et al. 1997). We also know that teen fathers tend to complete fewer grades in school and are more likely to participate in a variety of deviant/risky behaviours (including drug use, fighting, gang membership) (Bunting & McAuley 2004; Glikman 2004; Miller-Johnson, Winn, Coie, Malone & Lochman 2004; Pears, Pierce, Kim, Capaldi & Owen 2005; Thornberry et al. 1997).

Beyond documentation, the absence of teen fathers within academic and lay discussions of teen pregnancy is still linked to the fact that women are viewed as the central subjects. Assumptions of responsibility – for birth control or pregnancy prevention, for childcare and for financial provision among many others – run throughout our cultural portrayals and discussions of teen pregnancy (Weber 2013). And these assumptions do not exist in isolation. They are contextual – located within historical, cultural and moral boundaries. Notions of teen pregnancy as a social problem, notions of what it means to be a teen parent (and/or a parent, generally) are deeply rooted in structures of gender, social class, race and age.

While discussions about paternal involvement (or those that attempt to explore the increasing participation of fathers in more hands-on

caregiving) continue to evolve and develop, they still tend to take for granted the role of providing (Christiansen and Palkovitz 2001; Roy 2004). For instance, research that explores the work–family balance that fathers (as well as mothers) must negotiate presumes that there is, at the very least, a job that requires negotiation (Voydanoff 2002). And despite social, cultural and even academic movements that push for re-definitions of ‘good dads’ as more than just a provider – as someone who is ‘there’, as someone who melds traditional expectations of a good job with ‘new’ ideals of nurturing fathers – the norm of breadwinning has not been sufficiently displaced (Roy 2004; Townsend 2002). In other words, what it means to be a ‘good dad’ has certainly expanded – it can mean many things. But what it means to be a ‘bad dad’ is still largely predicated on expectations of financial provision.

For teen fathers, the expectation that they financially provide for their families is further hindered, given the limited job availability for young fathers, stemming from factors such as age, lower educational attainment and decreased skill sets (Allen & Doherty 1996; Glikman 2004; Kiselica 2008; Marsiglio 1994; Paschal 2006). Teen fathers are also unique in that, beyond the challenges of being successful breadwinners, they must also negotiate cultural stereotypes that assume that teen fathers are absent, uninvolved, or at the very least, non-contributing. In addition to cultural norms that dictate that fathers provide financially, teen fathers also face negative stereotypes that take for granted the idea that they won’t provide (Weber and Schatz 2013).

The teen fathers I interviewed were clearly aware of this. Take Josh, for instance, a twenty-one-year-old father of two: ‘You gotta support your kids,’ he says. ‘If not, you’re gonna be a deadbeat.’ Michael, seventeen and new father of a two-week-old son, gave a similar account:

‘No matter how many kids you got, you have to take care of your kids regardless, you know. I don’t want everybody lookin’ at me like I’m a deadbeat dad or nothing like that.’

The metaphorical ‘deadbeat’ serves as a straw man that many of the fathers compared themselves to – and, to be sure, it was an identity they work hard to avoid. All of the fathers I interviewed wanted to be seen as good dads.

But more than just a metaphor or an identity, the ‘deadbeat’ also represents the power and the hegemony of the breadwinner norm.

Participating (or at the very least, paying lip service to) the breadwinner norm allows them to portray themselves as good dads, even if only discursively. But this language also creates additional dilemmas. To put it simply: very few of the teen fathers I interviewed are able to accomplish breadwinning successfully. Many of them struggled to find regular and stable work, let alone work that paid enough that would allow them to take care of their children/families. Despite the apparent unavailability of this expectation, *all* of the men in my study maintained the notion that as fathers/fathers-to-be their new role was defined primarily by their need to financially provide for their children and families. We need to recognize, though, that their choices are few: on the one hand, failure to participate, to deny the importance of financially providing for their children, makes them deadbeats from the start. On the other hand, the expectation that they be breadwinners (and their acknowledgement of it) creates additional dilemmas by drawing attention to their current or potential failure. It is this negotiation that I focus on in this chapter. Specifically, I examine the ways in which teen fathers negotiate and attempt to resolve the dilemma of financially providing. For the teen fathers here, the breadwinner discourse is a resource, but it is also a problem to be managed (see Wilkins 2012b).

In this study I explore how teen fathers negotiate the stigmas and expectations of teen pregnancy, responsibility and fatherhood within the culturally deemed appropriate bounds of masculinity, social class and youth. As I explore below, teen fathers’ respective locations in the middle-class, working-class or lower-class strata further complicate the ways in which they negotiate cultural expectations of fatherhood. While debates surrounding teen pregnancy centre on the question of whether or not teen pregnancy ruins lives, the following analysis demonstrates that the answer is more complex than yes or no.

Studying teen fathers

This chapter draws on qualitative interviews with twenty-six teenage fathers. Again, teen dads are a difficult population to access. For this reason, I relied on convenience sampling, drawing on a variety of gatekeepers (teachers, principals and other members of the community, and the fathers themselves). All of the men were between the ages of sixteen and twenty-one at the time of the interview; nineteen were between the ages of sixteen and nineteen. Each of them were immediately expecting a child or had fathered a child (or children) within their teens (nineteen or younger). Importantly, all of the men in this study identify as fathers, openly claiming and/or parenting their children.

The respondents in this study came from a variety of race and class locations. Fifteen of the men identified as white, while eleven identified as black or biracial. Six of the men hailed from middle-/upper-class backgrounds, twelve from the working class and eight from poor/low-income backgrounds. Determining social class was done in more interpretive ways. While class categories are often defined in terms of income or occupation, among other variables, class belonging is also symbolic – signified by factors that extend beyond money and jobs (Kefalas 2003; Lareau 2011; Stuber 2006). For these young men, an awareness of the exact nature of their parents' occupations and/or income was often limited. Hence, my understanding of their class location (self-identified or otherwise) stems from other symbolic notions of class: where they live, the schools they attend, whether their family rents or owns their dwelling, jobs their parents hold (or don't), level of parents' education, as well as language and self-made descriptions.

This project was conducted in an American rustbelt town I call 'Greenlawn.' Similar to other industrial cities of the mid-west and north-east US, Greenlawn experienced the typical boom and bust during the twentieth century. Despite an increase in service industry positions over the last two decades, including health care and education, Greenlawn's economy is still strongly linked to industry and manufacturing, and as such, its market fluctuates quite predictably with the national recessions.

Greenlawn has a population of about 38,000; however, when the areas immediately surrounding Greenlawn are taken into account (since most Greenlawn residents actually live outside of the city limits), the population jumps to nearly 85,000. Demographically, the city is about 85 per cent white and 12 per cent black, with the remaining 3 per cent being composed of Hispanic or Latino, Asian and American Indian. The median household income in 2010 was nearly \$26,000, with approximately 14 per cent of persons living below the poverty line. Eighty-two per cent of residents are high school graduates, but only 13 per cent have a bachelor's degree or higher. The teen birth rates for the Greenlawn metro area are significantly higher than state and national averages. In 2010, the teen birth rates for Greenlawn and the surrounding area were 33.6 per 1,000 for women fifteen to seventeen years of age (compared with 19.7 for the entire state and 20.1 nationally), and 95.5 per 1,000 for women eighteen to nineteen years of age (75.7 for the state, 66.2 nationally).

The stories of the men in this chapter are stubbornly tied to their existence and location in Greenlawn. Although many talked of their hopes to 'get out' someday, they were also largely aware of the ways that a place like Greenlawn prevents you from leaving. The reality of 'hard living' is not only visible, it's palpable (see Bettie 2003; Howell 1973). Unlike 'settled living', which is characterized by secure employment, better pay, health benefits, home ownership and a general sense of predictability, 'hard living' is characterized by less stable/low-paying jobs, a lack of health care benefits, lack of home-ownership and an overall pattern of chaos (Bettie 2003; Howell 1973). Frequently, these young men talked about the contagiousness of instability (my words, not theirs) – the ways in which job loss, for example, might lead to drug use and further family instability. This volatility in a town like Greenlawn works as a type of social adhesive, cementing their reliance on the support of family and friends, thereby preventing any real 'escape'.

I conducted the interviews during the summer and autumn of 2010. Each interview lasted between one and two hours and took place in homes, restaurants, coffee shops and offices. Interviews were taped and transcribed, and field notes were taken immediately before and after meetings. Each of the men received a \$20 gift card to a local discount store in exchange for

his time. An interview guide provided loose topical direction, but each conversation took a different form as constructed by the participants.

Understanding that meaning is contextual, arising out of interaction between people, and that stories serve different functions within those contexts (Holstein and Gubrium 1995; Linde 1993), I utilized an inductive analytic strategy. Coding proceeded in two phases: the first focused on emergent themes; the second employed a more focused coding strategy that involved detailed rereading of transcripts and field notes, paying special attention to the themes discovered during initial coding. Importantly, the stories in this project are their stories as they were told to me; they might have taken a different form if someone else were the listener (see Riessman 1993; Pascoe 2007).

My use of qualitative analysis is rooted in a larger understanding that the stories these men tell are strategic (Holstein and Gubrium 2000; Linde 1993). Analysing the ways in which they tell these stories, how they draw upon cultural resources and discourses to stake claims of authenticity – as good fathers, as boys, as men – allows us to see their stories as tools for making sense of their lives and their experiences (Holstein and Gubrium 2000; Linde 1993).

'It changed my life'

At some point during every interview I asked each man if/how becoming a father at an early age changed their lives. Indeed, all of the men said that teen fatherhood had changed their lives. However, as I encouraged them to expound on the specific ways they understood/experienced those changes, it became quite clear that those changes were tempered, patterned in predictable ways – specifically, they were structured by their social class.

These differences become most visible in their talk about their responsibility as fathers to financially provide for their children/families. That is, many of the men invoked the breadwinner discourse as a resource for making sense of how adolescent fatherhood changed their lives. However,

their acknowledgement and support of this norm leads to a questioning of whether or not they were successfully accomplishing it. The majority of them were not, as many were either unemployed or working part-time minimum wage jobs. To maintain the notion that they are good dads in the face of this contradiction, these young men negotiate the provider discourse in different ways. But again, the differences were not random, but structured by their social class. To demonstrate this, I discuss each class in turn.

Middle-class teen fathers: 'I'm tryin' to make my life better to make hers better too'

Levi was eighteen, a senior in high school, a 'star' football player and the father of a four-month-old baby girl. When I asked how his life was different following the birth of his daughter, he said 'A lot. Well, actually, not that much, really.' Levi and the other middle-class teen fathers frequently stated that having children changed their lives. But after greater thought or further discussion, they often concluded that their opportunities and life paths hadn't changed all that much. Levi was a well-known football player in the local community and was being actively recruited by colleges/universities around the country. As he talked, it became clear that his opportunities had not diminished. His original goal to play football for a university on the west coast was replaced by the option of attending a college closer to home (that is, in the same state.) Still, there was a high probability that he would leave his hometown and his daughter to attend college. The importance of Levi's narrative surrounding his continued plan to 'go away to college' rests within the ways in which he draws on the discourse of breadwinning to justify his choices. In his discussion of 'the future', he says the following: 'I just wanna play football. And go to college. That way I can have a good job so I can support her later on down the road.'

Travis, a twenty-one-year-old with a two-year-old daughter and another one on the way, talks similarly about his decision to move to Greenlawn to attend the local college (regionally known for its mechanical engineering programme). Travis lives seven hours away from his hometown, his family and his daughter. Similar to Levi, Travis also claims that 'babies change

everything', but again, his plans and goals haven't been significantly altered. When I asked him if he thought his life would have been much different had he not become a dad at nineteen, he says this: 'Maybe a little different. But, I don't know [...] not really because, you know, even if I didn't have my kid I'd probably still be doing the same thing now.' Coming from a solid middle-class family, Travis spoke openly about his family's expectation that he go to college. When I asked him if it was hard balancing school and fatherhood, he responded: '[It's not really hard] being a dad, just being away. But, I'm trying to make my life better to make hers better too, so I can take better care of her later on.'

Luke, a senior in high school and the father of a seventeen-month-old son, tells a similar story. Luke wasn't sure what college he would go to, but he was certain he would go. His description, while lengthy, is indicative:

Being a man, being a father [...] means being able to take care of your family and having a job, being able to support them. That's what I want most [...] to be able to support him when he gets older. [Having a kid] makes me realize what I need to do for the future so that I can provide for him and, you know, live in a house, have a house of my own, pay my bills and pay for my kid's education. So, I gotta make sacrifices now, so I can take care of him later on down the road.

Levi, Travis and Luke all subscribe to the gendered notion that the main responsibility of fathers, of men, is to provide for their children. Importantly, none of these fathers were currently financially supporting their children. They overcome this by pointing out that they *will* provide – in the *future*.

When we examine more closely the resources that these men are able to draw on, their success seems much more likely, relative to the other teen fathers I interviewed. For example, Levi's position as an honour roll student and a 'star' athlete gained him added privileges in school in the aftermath of the pregnancy. His coaches, teachers and principal agreed to give him access to an extra study hall during the day so that he could 'get [his] homework mostly done at school and then go home and help with [the baby].' As the sons of nurses, teachers, successful business owners and skilled labourers in larger manufacturing plants, these middle-class teen fathers had access to various resources that not only encouraged college and other middle-class accoutrements, but also ensured their likelihood.

They defined their roles as fathers primarily in terms of breadwinning, but the ways in which they rely on this discourse is largely indicative of their ability to participate effectively in achieving it – if not now, then in the future. For Levi and Travis, the breadwinning discourse serves as a powerful justification for continuing on their chosen paths, allowing them to frame college as a responsibility rather than an opportunity.

This responsibility, though, takes for granted the fact that their parents have the resources to assist them in providing for their children in the present, so that they can do it on their own in the future. Indeed, teen pregnancy carries the potential to derail opportunities and shift the life course of young parents. But claims that teen pregnancy ruins lives take multiple things for granted – one of which is that socio-economically advantaged parents are able to draw upon social and economic resources in order to ensure the success of their children (Geronimus 2003; see also Lareau 2011).

Working-class teen fathers: ‘Right now, I just gotta keep workin’”

The stories working-class teen fathers tell about fatherhood also rely heavily on a discourse of breadwinning to make sense of the changes in their lives. However, unlike the middle-class teen fathers, this doesn’t justify opportunities; it rationalizes constraints. Tony, nineteen years old with a one-and-a-half-year-old son, had a story very similar to Levi’s. Tony was a senior when his son was born and also a ‘star’ football player with a scholarship to a state school that would have taken him five hours away from his baby boy. ‘I had a full-ride scholarship to [a university]. But I quit the team,’ he says. When I asked him why, he responded quite simply, ‘Because I had to get a job.’

Mitch was also a football player with hopes of going away to college. When his daughter was born shortly before his seventeenth birthday, he too had to make different choices. He explains:

My plan was to go to college and play football. I never planned to go to [the vocational school] then. I wanted to stay at [my high school] and go to college and have some kind of career, not like welding, what I’m in right now. My plan was to play football in college. I was going to be an engineer. But, it’s done now. I just, I hate it.

I can't play football and work. But, if I don't work, I can't [...] I can hardly afford my gas, my insurance, food, diapers. I wanna go to college and play football, but it's just not going to happen both ways.

The working-class teen fathers spoke positively about the support of their parents, but as their stories unfolded, it became clear that the familial support they were able to rely on looked very different than the middle-class fathers discussed above. Tony and Mitch talked frequently about their parents' strong ties to their (grand-) children, babysitting and spending time with them when they can. But their support was much more tempered by time and money. Their parents worked full-time; with Mitch's mom working two jobs just to take care of his siblings. Given the limited space available in their homes, both Tony and Mitch moved out on their own after their kids were born, because as Tony said, 'there just wasn't room for all of us'.

The general expectation that characterized the accounts of working-class teen fathers was that they had to work to support their children; their parents could offer little in the way of monetary assistance. The consequences of this reality are profound, however. While the middle-class teen fathers viewed college, for example, as a responsibility to providing a good life for their children 'down the road', the working-class teen fathers viewed school as an opportunity that may or may not happen. Joel was seventeen when his daughter was born. While his employment history is splotchy, at best, his attempts to find stable work were a constant. He, too, talked about wanting to go to college. Perhaps most sobering is his acceptance of its improbability. 'There ain't much I can do now,' he says. 'I want to go to school, but it's kind of hard to pay for her and pay for my place and food for her and me. I can't pay for college and do all that, too. I'd like to do college, but I can probably never go back. I know that now.'

Josh was eighteen and a senior in high school when his first son was born. Just after he turned twenty, his girlfriend gave birth to their second son. Not yet twenty-one, Josh had been working 'on the line' for two years. He spoke humbly about the ways that fatherhood had altered the path he saw his life taking:

I was always wanting to go into the army. And then I was thinkin' about going to [the local university]. But, I gotta have a job. It's just a lot of responsibility. When I

get paid, I gotta spend my money on them – diapers, you name it. So, I just try to do my best. I just try to do my part. But, everything just costs so much, you know. I don't know what's gonna happen. Right now, I just gotta keep workin'. Maybe later on down the road.

Josh's story demonstrates the materiality that all of the working-class dads verbalized. Again, while the middle-class fathers framed education as a responsibility, the working-class fathers saw it as an opportunity – and one that their early parenthood most likely compromised. For middle-class fathers, the breadwinner discourse enabled their continued success. Men like Josh and Joel tell a different story, one that highlights the constraints that being a breadwinner entails. For both groups, the discourse is the same, but the meanings and the realities that go along with it are very different.

The precariousness that characterized the lives of the working-class fathers – before and after their children were born – contributed to aspirations of social mobility, as well as realities of sacrifice and hardship. Marcus was twenty with an eight-month-old son. Marcus was the son of a 'furniture delivery guy' and a nurse's aide, and his family had hoped that he would do better. '[My family], they were all surprised. They were disappointed,' he says. 'They thought I was gettin' out of this life.' As families and individuals on the verge of 'something better' (e.g. a college education, greater socioeconomic stability), working-class fathers talked about lost careers or other opportunities missed. Given the instability of their families, the parents of the working-class teen fathers are unable to offer resources that could serve as a buffer against their 'mistake'. For these young men, their lives had definitely changed.

Teen fathers in poverty: 'It's only hard if you make it hard'

When I met Quinton he was sixteen and 'doing time' in the Juvenile Detention Center for 'fighting'. His daughter was due any day. He spoke in abstract, idealistic terms about what he thought fatherhood would be like for him: 'I wanna get a good job, you know, provide for my daughter.' At the time, I thought that his generic descriptions stemmed from his age, or perhaps from the fact that he hadn't yet experienced the day-to-day reality

of fatherhood. But the abstractness that characterized Quinton's story was, I came to realize, about more than just age or inexperience. There were distinct differences between all three groups of fathers, but the differences that separated low-income teen fathers from those previously discussed were about more than just framing. For the middle- and working-class teen dads discussed above, their narratives about the impact that fatherhood had on their lives was in most ways real and tangible. Whether their lives took significant turns or not, their stories circled around specific careers, specific colleges, specific goals, specific paths. The stories of poor and low-income teen fathers often relied on dream-like versions of cultural expectations that they were clearly aware of, but had no apparent idea of how to actually achieve. They still invoked the cultural norm that men and fathers are the breadwinners; however, as they told their stories, it became clear that cultural expectations and their materiality (for example, how to go about achieving them), are two different things.

All of the lower-class fathers I interviewed shared this ambiguity in their talk. Dakota, eighteen with a two-week-old daughter, said his goals were still the same: he wanted to 'be somebody'. Beau was twenty years old with a seven-month-old daughter and a son due in three months. He initially said that his life changed dramatically when his child was born, but then backtracked as he attempted to describe those changes. After some thought, he says: 'You know, my life really hasn't changed all that much. The kids just came a little quicker than I expected. But other than that, my goals are still the same. Get a good job, nice house, you know, big yard, good school, nice family, kids growin' up good, retire someday.'

Quinton, Dakota and Beau talked generically about where they saw their lives going. Despite all of these men originally claiming that fatherhood had changed their lives, as their stories unfolded, it became clear that the poor and low-income teen fathers saw their lives changing very little, if at all. Similar to the middle-class teen fathers I interviewed, when I asked them to expound on the ways they actually saw their lives changing, their general response was 'not that much'. Unlike their middle-class counterparts, though, who were mostly shielded from the potentially hazardous consequences of their 'mistake', poor/low-income teen fathers had little protection from the penalties of early parenthood. Their families had little,

if any, resources to offer in attempts to keep them from struggling. But the disheartening reality is that these young men had little to lose, fewer opportunities to protect.

Edin and Kefalas (2005) witnessed similar storylines play out in the narratives of low-income mothers. Much like the mothers in their study, the teen fathers I interviewed spoke largely of their children as changing their lives for the better. As Edin and Kefalas (2005: 172) suggest: 'Children provide motivation and purpose in a life stalled by uncertainty and failure'. This quote echoes the refrains made by many of the lower-class fathers I spoke with. Recall Daniel, the homeless young man introduced at the beginning of the chapter. As someone who spent most of his life homeless, without 'any family to speak of', his child(ren) represent more than just responsibility. 'I was happy,' he says. 'After I got it in my head that I was gonna be a dad, I was happy. I wanted somebody to have my last name, somebody that's family, that's my blood, to have around. I never had that before.' Stereotypes that teen parents (especially mothers) selfishly have babies in order to have someone to love is often troubling for many outside observers (see Edin & Kefalas 2005 for a similar discussion). But for young parents like Daniel, children don't represent the derailment that critics of teen pregnancy so often espouse (see Edin & Kefalas 2005; Furstenberg 2007; Geronimus 2003; Luker 1996). Instead, I heard responses like that of Dallas, an eighteen-year-old high school dropout with a two-week-old daughter: 'If it weren't for [my daughter], I'd still be doin' all the stupid stuff I was before. Fightin', getting' drunk, smokin'. Yeah, I probably would've been a lot worse.' Or, Jon, a seventeen-year-old with two boys and another baby on the way, whose refrain speaks volumes about the directions in which he saw his life going: 'It could be worse,' he says. 'I could be in jail, I could be dead.' Marquis, eighteen, with a baby on the way and a long history of parental neglect and shuffling between his natal home and various foster homes, explains that before he found out he was going to be a father: 'I was just pretty much, like, just forget life. I mean, there's not a place in it for me, so I might as well just do what I do. But, now, I have something to look forward to, somebody that's going to look up to me.'

Considering the hard living that men like Daniel and Marquis have done, it should come as no surprise that a child would be viewed in such

a positive light. Conventional wisdom that posits that teen parenthood results in a complete derailment of social, academic and class mobility assumes that that derailment hasn't already happened.

Even in the face of poverty and the constant struggle to 'make it', low-income fathers still clung to the notion that their primary responsibility was to financially provide for their children. Similar to middle-class fathers, very few of the low-income fathers were actively providing for their children. But the ways in which they negotiated their inability to provide looked altogether different: whereas middle-class fathers talked about providing in the *future*, lower-class fathers worked to downplay the significance of providing altogether.

For example, shortly after Daniel talks about the pressures of providing, he says this: 'But, you know, I think that havin' a job may make me a better dad. But, just being there makes me a good dad.' Dakota makes a similar statement: 'It's hard when you're not workin'. But, the hardest part is to be there for your kid.' And Jon, a seventeen-year-old father of two, says:

The dad makes sure that he has what he needs, you know, there's clothes on its back, food on the table. [I] gotta make sure I have everything it needs. There's heat on. There's an air conditioner if it's hot. Everything like that. But, a good dad [...] basically it's just being there, you know. That's the important part. You know, knowing that if it calls you and just like an emergency [...] Drop everything and I'll be there for my kid.

Daniel, Dakota and Jon draw on cultural norms that define a good dad as one who provides. But to acknowledge this expectation also requires them to address the reality that they aren't able to accomplish it (none of these men were working at the time of our interview). Interestingly, the way they negotiate this dilemma is to reframe fatherhood as being about 'more than' providing; the hard part, the important part, according to these fathers, is 'being there'. According to Quinton:

[To be a good dad is] to be there for it, to support it, to love it and to know that material things doesn't matter, that your child would rather for you to be there than to have all this, all type of material things to remember you by because those material things, sooner or later, they gonna go away. The clothes, the shoes, sooner or later she gone grow out of it, she not gone have it no more.

So, while the middle- and working-class fathers negotiated the problem of being breadwinners by weaving stories of sacrifice and being breadwinners 'later on', the lower-class teen fathers talked around it in ways that reframed fatherhood as about 'being there', not just financially providing (see Edin and Nelson 2013). For men whose opportunities are few, adolescent fatherhood presents few consequences. Many of them watched their families struggle, socially and financially, for much of their lives – and, somehow, they still made it. As Damian, an eighteen-year-old father of a three-month-old girl, said: 'Being a father isn't hard. It's only hard if you make it hard. My baby don't want money, she just wants her daddy.'

Rethinking the consequences of teen fatherhood

The men in this study are working to assemble coherent identities as 'good dads'. Cultural norms dictate that good fathers are those that financially support their children. Indeed, this discourse serves as a useful resource. At the same time, it highlights the fact that they *are not* providing, thereby calling into question whether or not they are 'good dads'. The resources, the perspectives and the cultural capital garnered from the class locations further work to either assist/hinder them in this negotiation. For the middle-class fathers, the breadwinning discourse serves as a way to explain, or perhaps justify, the current inability to provide – all the while securing the privileges of their middle-class status. Similar to the middle-class teen dads, the working-class fathers also relied heavily on the breadwinner norm; but for the latter group, the expectation that they be providers represented a sense of constraint. For them, the consequences of adolescent fatherhood were substantial. The low-income fathers also, generally, concluded that their opportunities and life chances had not changed all that much. They, too, utilized the breadwinner discourse to talk about what changes (if any) there were, and what was expected of them. In the face of their inability to provide for their children, they downplayed the importance of breadwinning, arguing that father presence and involvement were much more important.

Understanding adolescent fatherhood as an assemblage – one that combines notions of cultural expectations and definitions of traditional fatherhood with the resources and experiences of social class – allows us to better understand the ways in which teen dads experience and make sense of adolescent fatherhood. Furthermore, it challenges the assumptions that everywhere/at once teen pregnancy is a problem. In fact, for those at either end of the class spectrum, teen fatherhood results in few (if any) dire consequences – it's the men in the precarious middle, those who are on the verge of opportunity and class mobility, who fall the farthest. Cultural claims that teen pregnancy/parenthood is problematic now beg the question: problematic for whom?

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6 Irish Television and the Assemblage of Personal Narratives of Teenage Pregnancy and Abortion

ABSTRACT

A pregnancy can be deemed a crisis for a number of different reasons. For several years in the Republic of Ireland, a pregnancy was automatically labelled a crisis if the pregnant woman wasn't married. Media coverage of scandals which centred on unplanned teenage pregnancies in the 1980s and 1990s caused some Irish people to reflect on the conservative principles of Catholicism with which they were raised and the consequences of those in the lives of others. This chapter draws on research which examined the presence, and absence, of personal narratives of crisis pregnancy from specific texts which aired on Ireland's Public Service Broadcaster, Raidió Teilifís Éireann (RTÉ). These texts are *The Teens' Midwife* (2013), *50,000 Secret Journeys* (1994) and footage from *RTÉ News* and *Prime Time* for the twelve-month period from July 2015 to June 2016. These texts are illustrative of the extent to which societal attitudes and political stances towards teenage pregnancy and abortion in Ireland have evolved over a twenty-two-year period.

Context and crisis

In this chapter we present research which examined the presence within non-fiction Irish television of personal narratives of young women who had suffered a 'crisis' pregnancy. Studying narratives such as those that surround unplanned pregnancy has the potential not only to build empathy for young people confronting a crisis situation but also to inform support communication, protection campaign efforts and intervention efforts in both clinical and non-clinical settings (Gray 2015). This form of study also acknowledges the way that identity is assembled in autobiographical

narrative (Bruner 1987) whilst simultaneously being assembled in cultural-historical narrative. In the Republic of Ireland (Ireland), Article 41.2 of the Constitution illustrates the pervasiveness of a particular cultural-historical narrative:

In particular, the State recognizes that by her life within the home, woman gives to the State a support without which the common good cannot be achieved. (Article 41.2.1)

The State shall, therefore, endeavour to ensure that mothers shall not be obliged by economic necessity to engage in labour to the neglect of their duties in the home. (Article 41.2.2)

By allowing the words ‘woman’ and ‘mother’ to be interchangeable, the Constitution implies that the role of the Irish woman is one of nurturer. Simultaneously, there is a powerful gender assumption, formally recognized by the state, that women are associated with life ‘within the home’, with that role taking priority over ‘engage[ing] in labour’.

Crisis pregnancy has played a recurring role in public and private experiences of Irish womanhood. Historical narratives of crisis pregnancy have been muted to some extent due to the stigma associated with pregnancy outside of marriage. From the eighteenth to the late twentieth centuries in Ireland, many young women who became pregnant out of wedlock were sent to work in places such as the Magdalene Laundries as punishment, their children taken for adoption (a cultural history powerfully highlighted in the novel *The Lost Child of Philomena Lee* (Sixsmith 2010)). The passage of the Eighth Amendment to the 1937 Irish Constitution in October 1983 added a further layer of complexity in crisis pregnancy. The amendment ‘acknowledg[ed] the right to life of the unborn, with due regard to the equal right to life of the mother’ (Government of Ireland 1983). The following year, two crisis pregnancy narratives played out in both local and national Irish media, challenging traditional attitudes formed in a patriarchal society underpinned by Catholicism.

In January 1984, fifteen-year-old Ann Lovett bled to death whilst giving birth alone beside a grotto of the Virgin Mary in Granard, Co. Longford. Her baby son also died. A few months later in April 1984, the body of a baby boy was washed ashore on Caherciveen beach in Co. Kerry. The infant

had been stabbed to death. This discovery led the Gardaí¹ to Joanne Hayes, a twenty-five-year-old woman who had been having an affair with married man Jeremiah Locke and who was known to be pregnant. Hayes had given birth at her family farm near the town of Tralee; however, the baby had died, been wrapped in a plastic bag and buried on the farm. When Hayes told the Gardaí about the birth of her own baby and its death, there was an attempt to link her to the murder of the Caherciveen baby. Despite the discovery of the body of Hayes's baby on the family farm, the Gardaí maintained that Hayes was also the mother of the Caherciveen baby and thus responsible for his death.

The infanticide and stigma surrounding pregnancy outside of marriage created a discussion which was facilitated and fuelled by the media (Maguire 2001). Hayes was subjected to questions about her sexual history and menstrual cycles when being interrogated in court about the 'Kerry Babies' scandal. This demonization of Hayes occurred because – despite identifying as a Catholic woman – she did not behave in the manner of 'traditional' Catholic women. Hayes's sexuality and status as an unmarried mother constituted a challenge to Catholic patriarchy and its characteristics of male dominance, idealization of motherhood and control of female sexuality (Inglis 2002). Such events, to some extent at least, inspired 'problem-pregnancy' films in the 1980s and 1990s. These films worked to 'move beyond the individual, psychological focus of the maternal melodrama to challenge traditional Irish notions of women's sexuality' (Pramaggiore 2006: 111). However, in actual cases of crisis pregnancy, if a woman chooses to have an abortion before her pregnancy – the evidence of her sexuality – becomes public knowledge, she must either have the procedure in another jurisdiction or have it illegally in Ireland.

Whilst fictional representations of crisis pregnancy are commonly centred on the protagonist – the woman who is facing the crisis, her life and the world she inhabits – the voice of the protagonist is less clear in factual representations of teenage crisis pregnancy. Crisis pregnancy narratives with nameless protagonists such as the 'X Case' and the 'C Case' – which

1 The police force of Ireland.

occurred in 1992 and 1997 and in which teenage rape victims sought permission to travel in order to end unwanted pregnancies – marked a significant development in changing attitudes towards crisis pregnancy and abortion in Ireland at the commencement of a period of significant socio-economic change manifest in the ‘Celtic Tiger’ economy. This chapter explores the presence and absence of personal narratives in three ‘factual’ representations: *The Teens’ Midwife* (n.d. 2013), *50,000 Secret Journeys* (Dully 1994) and RTÉ News and *Prime Time* footage from July 2015 to June 2016.

Introducing the data sources

The Teens’ Midwife (n.d. 2013) was a two-part documentary which screened on RTÉ on 21 and 28 March 2013. It documented the work of ‘the teens’ midwife’, the first midwife in Ireland solely dedicated to supporting pregnant teenagers. The documentary was filmed at Our Lady of Lourdes Hospital in Co. Louth, an area where, in contrast to the national tendency, rates of teenage pregnancy had remained elevated. Two of the participants were filmed as they became mothers for the first time, whilst the third was preparing for the arrival of a second child. They were introduced at various stages of their pregnancies from eleven- to thirty-three weeks’ gestation. Intimate moments of the births of their children were filmed and screened. These recordings of the teenage mothers were punctuated by commentary from the midwife regarding her role as a midwife who works exclusively with teenagers. In this commentary, the midwife articulates that she doesn’t advocate teenage sex; however, she teaches the young women under her care about fertility in order to prevent them from having a repeat pregnancy in the near future. She emphasizes the importance of the young women attending antenatal classes so they can learn about the ‘practicalities’ of birth and to lessen their fear of the unknown. The closing moments of the second episode of *The Teens’ Midwife* show the midwife holding a meeting with some of the teenage parents she cared for during their pregnancies who have since become young parents.

50,000 Secret Journeys (Dully 1994) aired as part of *The Abortion Debate* and documented the experience of three women who opted for an abortion when they faced a crisis pregnancy. The women were reflecting on their decision months, years and decades following their abortion; the documentary also included a short film about unmarried mothers and a studio debate. The programme was significant in presenting women who had experienced abortion speaking on camera about their personal experience. In contextualizing abortion in Ireland, viewers were informed that between 1983 and 1992 50,000 Irish women had travelled abroad in order to obtain an abortion. Clarifying information on Irish legislation was intertwined with the personal narratives of the three women. Two of the women had legal abortions, one in London in 1981, the other in Liverpool in 1993. The third woman had a backstreet abortion in London in 1962. As a text in and of itself, *50,000 Secret Journeys* humanized the statistics of anonymous Irish women who had experienced abortion. However, by following the women's narratives with a film on unmarried mothers in Ireland and an in-studio debate on abortion, the narratives of the women in the documentary are somewhat diluted in a sea of voices presumably lacking personal experience of crisis pregnancy.

News and current affairs footage from *RTÉ News* from the twelve-month period are diverse in form and content and proved illuminating in examining the presence and absence of young women's personal narratives of crisis pregnancy in non-fiction Irish television. Press and Cole (1999: 3) note that when women speak about abortion 'they participate in a cultural conversation in which the media are ongoing participants as well'.

Personal narrative, disequilibrium and re/assemblage

A pregnancy, and in particular an unplanned pregnancy, can disassemble and reassemble a personal narrative given the scale of change that occurs in the life of the narrator. Equilibrium is interrupted and, according to narrative theory, the person must go through the processes of degeneration and

improvement in order to reach a new state of being (Todorov & Weinstein 1969). In her interviews with teenage mothers about their experiences of pregnancy and motherhood, Middleton (2011) found that one of the most common themes amongst her interviewees was connecting past with present through structuring narratives.

In the dominant cultural narrative of Ireland, the Catholic faith and the moral beliefs associated with it have been heavily tied with the foundation of the Irish Free State in 1922. This has led to the common gendered vision whereby Ireland is perceived as being a virgin mother, akin to the Virgin Mary. Following the Eighth Amendment, the cultural narrative of the Republic of Ireland encouraged women to exist 'as a function of their maternity' (Meaney 1991: 3). While this image was rejected by some women who engaged in Irish nationalist politics in the early twentieth century, others used it to articulate their own political spaces in a male-dominated landscape (Thapar-Björkert & Ryan 2002). Given the example of the 50,000 – the many Irish women who have not welcomed their pregnancies and who have, for whatever reason, rejected motherhood – it could be argued that the Catholic nationalist principles on which Ireland was founded bear little significance to the realities of Irish womanhood or indeed the realities of non-Irish women living in Ireland.

Gibbons notes that the traditional ideology of the Virgin Mary as the epitome for Irish women to aspire to stems from Anne Devlin, the faithful servant of Irish nationalist rebel Robert Emmet. Devlin refused to divulge confidential details surrounding Emmet's cause, and endured torture by the British authorities as a result. Irish women were thus encouraged to 'emulate' the silent, passive nature of the Virgin Mary as Anne Devlin had done (Gibbons 1986: 4). Thus, the suppression of personal narratives both historically and on non-fiction Irish television indicates that, although attitudes towards teenage pregnancy and abortion have become more accepting in Ireland, there still remains a belief that women who have faced such a 'crisis' should 'get on with it' – regardless of whether they've chosen to abort, adopt or carry the pregnancy to term and raise the baby – without dwelling on their personal feelings and emotions towards the situation in which they find themselves.

The personal experience of Amanda Mellet, who had to travel to the United Kingdom when she found out that her unborn child had a

fatal foetal abnormality, may contribute to constructions of the ‘criteria of rightness’ – a sense that abortion is acceptable in some circumstances but not in others – of those participating in and watching non-fictional debates on responses to crisis pregnancy. The United Nations Human Rights Committee found that Amanda Mellet was discriminated against by Irish legislation. The ‘criteria of rightness’ of any individual is likely to be contributed to by influential others who tend to be given prominence over ordinary citizens on public platforms such as non-fiction television. This prominence and the form of ‘binary oppositional debate’ that is televised poses the risk of excluding ‘the life world of women’ (Hillary Dully cited in Siggins 2016).

As is evident in other chapters in this collection, narrative interviews carried out with those personally affected by teenage pregnancy highlight the ways teenage mothers are stereotyped and put into one homogenous group to be judged by other members of society (Arai 2009; Middleton 2011). Young parents are commonly depicted as ‘unsupported and alone’ (Arai 2009: 159). Whilst Bell, Glover and Alexander (2013) acknowledged that teenage parenthood can evoke risk to the mother’s physical and mental health no less than parenthood for other age groups, discrimination of teenage mothers, in addition to the dominant discourse that positions teenage pregnancy as a crisis, can be just as dangerous as the early parenting (Arai 2009). ‘Spectacular’ depictions of pregnant and parenting youths on shows such as the US’s *Teen Mom* have been suggested to have a negative effect on the mental and physical health of teenage parents. These documentaries were suggested to be highly incongruent with lived experiences, including realities such as financial hardship. Young parents recognized that such representations informed public opinion to which others, including their health care providers, were not immune. This in turn resulted in teenage parents withdrawing socially, including delaying engagement with medical care. In Ireland a notion of being an ‘ideal daughter’, one in keeping with the discourse of the Virgin Mary, is evident; Department of Health researchers indicated that a common reason why some young women opted for an abortion was a desire to retain their status as a respectable daughter by preventing parental stigma. These women believed ‘if abortion is performed early and secretly’ they would spare their families and, in particular, their parents, the shame associated with premarital sex and teenage pregnancy

(Mahon, Conlon & Dillon 1998: 287). In this assemblage of media depiction, parental aspiration and individual reaction, young people's potential narratives are shaped in complex ways. It is to this complexity that the chapter now turns.

Irish television and exposure to personal narratives of pregnancy and parenting

The first episode of *The Teens' Midwife* attracted an individual audience share of 25.2 per cent and an average viewership of 336,000. The second episode, screened a week later, received an individual audience share of 21.1 per cent and an average viewership of 302,100. On average, 49.5 per cent of the audience consisted of adults aged fifty-five and older. Of the overall audience, 60.6 per cent were female and 54.3 per cent of the overall audience had a C2DE social ranking (consisting of skilled working class, working class and non-working individuals).

The teens' midwife informed the audience that she is the first point of contact for all of the young women in her care and that, following their first appointment with her, their pregnancy becomes 'official'. This implies that the women have decided to carry a pregnancy to term and, accordingly, the issue of abortion isn't discussed and is successfully managed out of the conversation in the context of the documentary. By choosing to continue with the pregnancy, the three teenage mothers who participated in the documentary maintained that they were 'taking responsibility' for their previous lack of responsibility which had led to their pregnancy. The midwife acknowledges that all three girls are in long-term relationships, commenting that at least this is better than a one-night stand. However, she also confirms that if she had her way, no teenagers would be having sex. Common themes in their narratives include shock at the news of the pregnancy within their family and dealing with parental disappointment; this was followed by a stated desire to accept responsibility by adapting their lives and accepting a role as parents at a young age. While little information

was provided about the personal circumstances of the young women, all three expressed their desire to 'better themselves'. One participant and her partner rented their own home and were both working in full-time jobs, whilst the other two lived at home with their immediate families. None of the participants were in education at the time they engaged with the documentary, but two expressed a desire to return to education in the future as both felt they had to abandon their studies when they found out they were pregnant.

One of the teenage mother's personal narratives is particularly complex. She became pregnant for the first time at age seventeen; despite being on the contraceptive patch. She discovered that she was pregnant for a second time six months after the birth of her son. These parts of her story were intercut with segments from the teens' midwife highlighting the lack of basic sex education knowledge her patients have, despite this participant clearly having sex education knowledge given her use of a contraceptive patch. Although she had the support of her parents, the documentary included a commentary by her mother following the birth of her second child, stating her wish not to be back in the same maternity ward in another fifteen months' time. Meanwhile, the new mother attempted to create her own narrative, claiming that she ignores those who judge her, as they haven't walked in her shoes, and she articulates her desire to become a midwife herself.

One of the most striking aspects of *The Teens' Midwife* is that the narratives of the teenage parents, and particularly the teenage fathers, are discursively constructed in their absence for the most part. There is a clear and observable focus on parental disappointment. The teenage mothers' parents discuss in detail the shock they felt upon finding out about their daughter's pregnancies, how they struggled with finding ways to tell family and neighbours and the sense of mourning they felt because their dreams for their daughters had been taken away from them. However, following the parents' initial disappointment, there is a sense that the pregnancy becomes their story. One participant is shown going shopping with her parents for baby related items; her mother selects the items, she generally agrees and her father pays. When another participant's baby girl is born, the baby is firstly handed to her mother who subsequently passes the baby

to her teenage daughter. Photographed moments in the post-labour ward tend to focus on the grandparents holding the baby, rather than the participants and their partners. The teen fathers' voices are disproportionately silent in both episodes. When they appear in the labour ward, they do so as passive spectators. Teenage fathers are the focus at one juncture in the documentary where the teens' midwife praises a group of young dads for taking on the responsibility and for looking after their partner. In being told 'they are great' for taking on the responsibility of fatherhood, stereotypical notions of teen dads fleeing their responsibilities are at once reinforced and dismantled. The teenage mothers and fathers are infantilized at many points in the documentary and criticized for having to be continually pursued to attend antenatal classes and to participate in the normalized medical journey of pregnancy.

At moments where the teen mothers' stories are at the fore, it was often clear that they are juxtaposed within an assemblage of what the expected social narrative around an unplanned pregnancy should be and what their actual feelings are towards their pregnancy. For instance, terms such as 'screwing up' and 'getting stung' are used by the teenage mothers to describe becoming pregnant, and this is followed by insightful warnings to other teenagers to not become pregnant. Yet the three participants are also clearly alive with anticipation and excitement as they await the arrival of their babies. This is reinforced by one participant's comment that she loves being a mother and wouldn't change it. There are glimpses of the teenage mothers as articulate and agentic, but these are not the focus of the accompanying commentary. For instance, two of the participants appear to birth their babies without the commonly used epidural anaesthesia. However, the associated commentary focuses on the unbearable nature of labour pain, rather than on the strength of their endurance and determination to birth their babies as naturally as possible.

Perhaps unsurprisingly, given its earlier screening date (27 October 1994), the impact of bearing the shame and stigma associated with teenage pregnancy in Ireland were visible to a greater extent in *50,000 Secret Journeys*. Despite contrasting circumstances and outcomes, all three women spoke of the secrecy surrounding their abortions. The first woman spoke of her decision to have an abortion at age nineteen as directly related to her age and her lack of desire for a child at that time. She narrated her experience

of attending an anonymous clinic in London, accompanied by a friend. The second woman spoke to her reflections that 'deciding to' have a baby is a joint decision whereas, when opting for an abortion, the responsibility for the decision was solely hers. The third woman disclosed how, as a young immigrant in London who lacked a support network with the exception of an extremely religious relative, she resorted to desperate measures to end her pregnancy, opting for an abortion at a time when it was illegal in the United Kingdom. These women spoke articulately of their decisions to opt for an abortion, and of their experience in and beyond the experience.

The narratives within *50,000 Secret Journeys* were followed in the documentary by a segment on unmarried mothers, and an in-studio debate on abortion. The segment on unmarried mothers in Ireland opened with scenes from a 1974 edition of *7 Days*, which highlighted the stigma unmarried mothers in Ireland faced at that time. By 1993, one in five of all births in Ireland were to unmarried mothers, a shift attributed to a number of socio-economic factors: on the one hand, Ireland's decision to join the European Community in 1973 and the 'Celtic Tiger' economy that resulted; on the other hand documentaries such as *Banished Babies* and *Suffer Little Children* in the late 1990s brought to light abuse committed by the Catholic Church towards women and children in its care, causing some challenge to the dominant discourse of the Catholic Church and some space for less traditional lifestyles (Scherz 2010). However, while the extent of stigma associated with unmarried parenting may be less aggressive than once it was, the documentary provided evidence of some degree of animosity towards the group as the audience was informed that unmarried mothers cost the Irish state £105 million annually.

The documentary then focused specifically on teenage pregnancy. Dr Valerie Richardson, an academic at University College Dublin, highlighted that pregnant teenagers no longer felt pressure to marry the fathers of their unborn children: in 1962 there were 500 unmarried pregnant teenagers; by 1992 this figure rose to 2,500. Yet this implied acceptance of unmarried parenting was somewhat undermined by statistics that were then presented, indicating that 33 per cent of children in the care of the Local Authority had parents who were not married. In this, a negative connotation of the trend towards unmarried teenage parenting was left to 'speak for itself' – no young parents were invited to offer a narrative of their experiences in

coping with the demands of parenting and with decisions surrounding marriage at an early age.

In terms of media more generally, thirty-nine videos from *RTÉ News* and *Prime Time* were analysed. Each of these aired from July 2015 to June 2016. The word ‘abortion’ was used as a keyword search on the RTÉ *Prime Time* website, and thirty-seven videos from the above twelve-month period were found. A keyword search of the words ‘teenage pregnancy’ resulted in two further videos. Of the thirty-nine news reports, twenty-four were original reports, with the remaining fifteen being repeat/partially repeated reports broadcast in different news bulletins airing on the same day. Thirty-two people (excluding newsreaders, presenters and reporters) spoke on camera. Of the thirty-two contributors who spoke to camera, ten were pro-life and ten contributors expressed pro-choice views. Out of the thirty-two contributors, four have had either direct or indirect personal experience of a crisis pregnancy; three of these were in relation to experiences of fatal foetal abnormality. Of the media generated by the ‘teenage pregnancy’ keyword, the sole report was on the case of Miss Y, with that commentary being offered from her solicitor.

The absent presence of the pregnant and parenting teenager

The commentary thus far suggests that personal narratives of crisis pregnancy tend to be silenced on non-fiction Irish television; where the topic is the subject of media the focus can often be on the cost to the state which is incurred by unmarried parents or the risk they present to ‘decent’ standards of Irish nationhood. Personal narratives that featured in *The Teens’ Midwife* and *50,000 Secret Journeys* reveal how pregnancy can affect the woman’s perception of herself as a ‘good’ daughter and a ‘good’ mother – ‘good’ being defined in terms of the particular assemblage of womanhood established in the Irish Constitution. The unmarried status of a mother may no longer establish a pregnancy as a crisis; by association, the removal of the necessity to make an unfortunate marriage because of a pregnancy is positive.

However, this small-scale research project illustrates the problematic status of the voice of the protagonist – the teenage parent – in this changing public discourse. Pregnant and parenting teenagers appear, surrounded by ‘experts’ – medical, moral, political, educational – who speak at and for them. At the same time, ‘spectacular’ teenage parents are given voice, through portrayals in programmes that appear to speak for only a certain sub-group of parenting teenagers. The personal narratives of crisis pregnancy that do feature mostly focus on fatal foetal abnormality – a tragic, but possibly more palatable, rationale for abortion than ‘choice’. The absence of other personal narratives with alternative situations and outcomes suggests a subtle stigma towards those who confront pregnancy as crisis, regardless of their choices at this point in their life. Evidence suggests that those who stand on the ambiguous middle ground in the abortion debate are under-represented in comparison with their pro-life and pro-choice counterparts.

The dominant message assembled within *The Teens’ Midwife* was that while a teenage pregnancy, particularly for an unmarried Irish woman, was no longer considered the worst hardship a young Irish woman could endure, it was a hardship nonetheless. The language used throughout the documentary upholds stereotypical discourses of teenage parents as naïve and regretful and constantly in need of direction from ‘adults’. The concluding scenes of the second episode feature a number of young mothers whom the midwife had worked with during their pregnancies. When asked if they would do things differently if they ‘had their lives back again’, they all agreed that they had not anticipated becoming teenage parents and noted that they would have waited until they were older and wiser before bearing children. The teens’ midwife then articulates her desire for the teenage pregnancy rate to go down and hopes every time a teenage mother leaves her care she will never see her back again. However, she also explains that she has upcoming appointments with a new group of young women who have just found out about their pregnancies.

Thus, the audience has learned that this cycle will continue off camera with different versions of the same story. Furthermore, the theme of parental disappointment that occurred when the three participants shared the news of their pregnancies expands the idea of traditional gendered ideologies of Ireland and of the women of Ireland. The ideal of Irish women

being positioned as desexualized mother figures extends to Irish daughters. However, rather than being desexualized, Irish daughters must learn to control their sexuality and to conceal the potential visible outcomes of exploring their sexuality, which involve both pregnancy and abortion. When a crisis pregnancy does result, the young women portrayed offer a final word which is regret: if they could have their time again they would postpone parenting until they were 'older and wiser'. Yet this leaves unspoken the number of crisis pregnancies of 'older and wiser' women; it assumes that an alternative, non-parenting pathway for these three participants would be, somehow, 'better'.

Similarly, the three interviewees in *50,000 Secret Journeys* discussed the secrecy surrounding their abortions owing to the stigma surrounding the subject in Ireland, with the third interviewee claiming that the stigma surrounding abortion stems from a patriarchal society's desire to control women's sexuality. These women shared their desires for the issue of abortion to be approached in a direct and compassionate manner by the citizens of Ireland. The first woman who featured in *50,000 Secret Journeys* noted a persistent taboo surrounding abortion, even in the 'liberal circles' of the 1990s. Despite on the one hand trying to 'ignore the fact' of her abortion, on the other hand she also notes that she makes a conscious effort to discuss her personal experience of abortion, at least at times.

While both the teenage pregnancy rate and the number of Irish women seeking abortions in the United Kingdom have dropped steadily since the latter decades of the twentieth century, the tensions around the Eighth Amendment and the ambiguous illegality of the procedure in Ireland have remained a constant point of discussion in Irish public discourse. Research suggests that the majority of residents in the Republic of Ireland are placed on the middle ground in debates around crisis pregnancy and abortion (Gleeson 2015), with a substantial minority identifying as totally pro-life or totally pro-choice. Yet this minority is catered to by *RTÉ News* and *Prime Time*; the focus of crisis pregnancy thus remains on legislation and a vocal sub-section of societal attitudes rather than the realities and experiences of those who have faced such a crisis and reassembled their identity and life in the face of it.

The news and current affairs footage analysed in the research presented in this chapter suggests that the important perspectives come from politicians and from activists from pro-life and pro-choice groups. Had

Sarah Ewart and Amanda Mellet chosen not to take legal action over the fact that they had to travel to the mainland United Kingdom in order to obtain an abortion to terminate a much-desired pregnancy, which became a crisis as a result of fatal foetal abnormality, it is questionable as to whether their narratives would have received any prominence on Irish television. Narratives of those women whose pregnancies did not have the emotive impact of fatal foetal abnormality are virtually non-existent, silent tragedies or moments of redemption, played out in private. While this clearly is a profoundly private issue, the inclusion of more varied personal narratives would serve by acknowledging the lived experience of thousands of Irish women, and by contributing to 'more sophisticated approaches that realistically accommodate the actual social experiences of pregnancy and mothering' (Porter & Porter 1996: 280).

Overall, the gendered ideology of Irish women has extended from the virginal mother figure to that of the dutiful daughter. This desire for young Irish women to conform to this ideal and to prevent parental disappointment is profoundly threatened in the face of an unplanned teenage pregnancy. Erdman (2014: 22) highlights how the issue of abortion poses a threat to the core moral beliefs of the nation state and where human rights come against democratic conflict, 'abortion carries a symbolic importance, bound to conflicts over the very identity of the nation-state'. The issue of crisis pregnancy is, thus, framed by non-fiction Irish television as being a societal crisis rather than a personal crisis for those affected. Teenage parents have become one part of a larger discourse of 'youth-at-risk', a generalized deficit category that warrants the monitoring and scrutiny of the decisions and behaviours of young parents in ways that do not necessarily align with their lived experiences (Kamp & Kelly 2014).

Concluding thoughts

This chapter has explored a number of issues in relation to the presence and absence of personal narratives of crisis pregnancy on non-fiction Irish television, paying particular attention to experiences of teenage pregnancy

and abortion. Such narratives are scarce on *RTÉ News* and on *Prime Time* based on footage contained in the sample period from July 2015 to June 2016. Whilst personal narratives of crisis pregnancy were at the core of *The Teens' Midwife* and *50,000 Secret Journeys*, such narratives played secondary roles against more authoritative voices such as the teenagers' designated midwife and the participants in the debate segment of *The Abortion Debate*. Reliance on the voices of others to tell teenage parents' stories discursively constructs young mothers and fathers in ways that reinforce stereotypical (mis)conceptions of teenagers as passive parents. It is our position that personal narratives deserve more prominence.

The subject of crisis pregnancy in Ireland has historically been a contentious one. Rattigan's (2008) research illustrates the extreme lengths that some Irish women would go to in the early twentieth century in order to conceal their pregnancies, including resorting to infanticide. These women feared being shunned by devout Catholic families and friends. Such stigma has, for the most part, faded in the context of twenty-first-century Ireland. However, as this chapter indicates, it remains the case that debate about crisis pregnancy on Irish television has continued to be dominated by opinions of politicians and those of various pro-life and pro-choice activists rather than by those who have personal experience. Pregnant teenagers, and others who experience crisis pregnancy, are positioned as the object of the debate, rather than central protagonists in the debate.

The stigma associated with teenage pregnancy and with parenting outside of marriage in Ireland is connected to the moral narratives of Catholicism and its central place in the formation of the Irish state. Whilst participants in *The Teens' Midwife* had the love and support of their parents and extended family members, an element of disappointment and regret still lingered around the upcoming transition of the young women into young mothers. Whilst Irish women had to aspire to embodying a virginal mother persona in order to avoid being hated by those in power (Meaney 1991), this ideal can also be seen to be extended to the Irish daughter. All three participants in *The Teens' Midwife* faced disappointment from their parents when they initially informed them of their pregnancies. Some of this disappointment would, undoubtedly, be for concern of the more complex pathways their daughters would walk in finding their own space

in the social and economic spaces that young people occupy in the twenty-first century. Yet some is also potentially connected to a residual discourse of Catholic morality, regardless of how close the family is to the faith. As the participants passed an array of religious iconography on their frequent visits to the teenage pregnancy unit at Our Lady of Lourdes Hospital, one couldn't but be alerted to the lasting presence of such morality.

Meanwhile, the women in *50,000 Secret Journeys* spoke of the secrecy and isolation they went through when choosing to have an abortion. None of the three participants in *50,000 Secret Journeys* mentioned the role, if any, that their parents played in their decision to have an abortion. This might suggest that the women interviewed in *50,000 Secret Journeys* did not include their parents in the decision-making process when they confronted a crisis pregnancy. In their study of abortion narratives in the United States, Kimport, Foster and Weitz found that most of their interviewees didn't tell their friends or families about the pregnancy or its termination (Kimport, Foster & Weitz 2011). In this, the fact that the abortion narratives of three Irish women were shared in such a public manner on Irish television would have to be noted as a key turning point in abortion discourse in Ireland. The open and honest natures of the interviews in *50,000 Secret Journeys* about personal experiences of abortion enabled a 'cultural conversation' where the media also served as an 'ongoing participant' (Press & Cole 1999: 3). However, the fact that *50,000 Secret Journeys* did not air as a stand-alone documentary as was originally planned created a distance between the personal narratives of the women involved and the opinions of the receiving public, a distance that was filled by a studio debate by activists and politicians.

The positioning of teenage pregnancy as a societal as opposed to personal crisis was emphasized in public consciousness by the stories of Ann Lovett and Joanne Hayes. Maguire argues that Irish women empathized with the personal narrative of Joanne Hayes given the realization that prevailing attitudes toward motherhood, sexuality and reproduction in Ireland were shaping the experiences of all Irish women (Maguire 2001). The personal life and relationships of Joanne Hayes were brandished across the national headlines in a manner that resulted from circumstances that were beyond her control and against her will. While not a teenager herself,

the profoundly public nature of her personal crisis was the result of her being connected to another baby, another unnamed, unspoken pregnancy that possibly began, and certainly ended, in crisis. The narrative highlighted the urgency and distress of women in ways that spoke powerfully to the Irish people.

What would be the outcomes if diverse personal narratives featuring contrasting situations and contrasting outcomes of teenage pregnancy were a feature of debates about teenage pregnancy and parenting? By incorporating personal narratives in a more prominent manner, audiences from more diverse backgrounds are included in constructing the dialogue and the possibilities for action in ensuring the best possible outcome, whichever outcome is chosen. In terms of the debate around the ambiguities inherent in Ireland's abortion laws, more voices from the middle ground are required. By reducing the number of contributions from politicians and activists who are totally pro-life or totally pro-choice and by increasing the number of contributions informed by the lived experience of 'unspectacular' teenage pregnancy, along with those of people who have mixed views on the issue of abortion, Irish audiences will become exposed to the personal, emotional and social complexities of the issues.

Primary status is given to 'expert' opinions of medical and legal professionals, politicians and activists from various pro-life and pro-choice organizations in discussions of teenage pregnancy and parenting in Ireland. The narratives that existed in *The Teens' Midwife* and *50,000 Secret Journeys* illustrate a subtle social stigma that still exists towards teenage mothers as well as those women who have had abortions; either way, a preferred status of 'ideal daughter' appears to be inherently compromised. However, this study only touched the surface of representations of personal narratives on non-fiction Irish television. Further research on this issue, particularly on specific aspects of crisis pregnancies such as news coverage from media beyond RTÉ of issues regarding the upcoming Citizens' Assembly on the Eighth Amendment would be extremely beneficial in uncovering attitudes and habits of the Irish media when reporting on one of the most dividing issues in Irish society and politics.

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7 The Construction of Teenage Parenting in the Republic of Ireland

ABSTRACT

This chapter discusses the issue of teenage pregnancy in the Republic of Ireland. It explores the incidence of teenage pregnancy both historically and in recent years. It describes the particular social construction of teen pregnancy in Ireland, the influences on this and how these have evolved over time. The chapter includes an examination of some of the key legislative areas that pertain to teen pregnancy and the social policy responses to teen pregnancy and motherhood. The final section explores Ireland today to ascertain whether the assemblages of teen pregnancy and mothering have changed and if so, in what ways. It concludes that despite significant positive social changes in Ireland during the past fifty years, inequalities such as social class, educational opportunities and outcomes, ethnicity, race and others persist which intersect in ways that create the conditions for teen pregnancy to remain an issue in particular social locations more than others. Inequalities also affect outcomes for teen mothers and their families. For young women in these circumstances, Ireland remains a very difficult place to be a teenage mother.

Introduction

Before 1960, teenage pregnancy was not a visible ‘problem’ in Irish society. Often, the first strategy of managing a non-marital pregnancy at this time (and beyond) was to encourage the marriage of the mother before the child was born. Mahon, Conlon & Dillon (1998) and Conlon (2006: 25) refer to the 1957 census to illustrate how vital statistics from that period provide evidence that pre-marital conceptions were a greater feature of Irish life at this time than non-marital birth statistics would suggest.

Teen fertility rates in Ireland increased from the 1960s to a peak in 1980. They then declined throughout the 1980s until 1995, when again they began to increase up to an all-time peak in 2000. At this time, the Irish teenage fertility rate was higher than the EU average, but still well below the rates experienced in the UK, New Zealand and the US (Conlon 2006). Ninety-three per cent of Irish teenage births were to ‘unmarried’ mothers, which represented the highest level in all European countries at this time compared with a European low of 11 per cent of unmarried mothers in Greece (Micklewright & Stewart 2000). Births to teenage mothers have steadily declined in Ireland since then. Numbers have fallen by 62 per cent in the period 2001–15, from 3,087 to 1,187 (CSO 2016). There has also been a decline of 72 per cent in the number of teenagers giving Irish addresses at abortion clinics in Britain in this time (HSE 2014). The health services and others tasked with dealing with the issue have cited education in schools as a key factor in this decline. In reality, the reasons behind the decline are likely to be much more complex. For example, access to information (potentially about sex, contraceptives and abortion) has drastically improved with improved access to the internet, which went from 20 per cent of all households in 2000 (CSO 2000) to nearly 87 per cent in 2016 (CSO 2016), with access also available in schools and other locations for lower prices.

Although Ireland has progressed through major positive social change in the past four decades, with significant improvements in the lives of women, the LGBTQ communities and other minorities,¹ the stigma and social exclusion of teenage parents persists. Both teenage mothers and teenage fathers experience stigma and social inequalities whether they are in a relationship with each other or not. It is a gendered experience and often different for both young women and young men. For this reason, this chapter focuses solely on young women. The particular way in which teenage pregnancy and motherhood is socially constructed determines how the issue is both analysed and responded to through policy.

1 See D. Ferriter (2008). ‘Women and Political Change in Ireland since 1960’, *Eire-Ireland*, 43 (1/2), Spring/Summer, 179–204; Yes Equality Campaign victory May 2015; Traveller Ethnicity recognized in Ireland on 1 March 2017.

Understanding the experience of teenage mothering in Ireland today requires an understanding of both the current and historical social context. The next section explores some of the historical influences that have created a very particular social construction of this issue today. This will be followed by an overview of legislation relating to two key areas – contraceptives and abortion – and later an overview of social policy responses, both historical and more recently. The stories of four pregnant teenagers are described in this chapter. Their stories elucidate the narrative of teenage pregnancy in Ireland, and the complex factors that affect this experience, better than any historical account alone ever could. These include the iconic stories of Philomena Lee, Ann Lovett, Miss X of the X case and the unnamed fourteen-year-old young woman, who in late 2016 was detained in a psychiatric unit when she sought an abortion under the Protection of Life in Pregnancy legislation in the company of her mother.

The social construction of Irish teenage motherhood

The ascription of the term ‘teenage motherhood’ is located in preferred family formation practices; namely, marriage as precursor to the creation of a family and deferred marriage and deferred fertility, which have occurred in Western democracies post-World War II. Arney and Bergen (1984) argue the notion of ‘teenage pregnancy’ came into being at a quite specific time and place: middle-class America in the mid-1960s. This ‘new’ categorization was largely underpinned by changing social and political understandings regarding the roles and responsibilities of young women in Western society, including spending longer in education, participation in the workforce, the availability of contraception, and deferred marriage and motherhood among the middle classes. As Wilson and Huntington (2005), reviewing the literature in the US, New Zealand and the UK argue:

Teenage mothers are vilified not because the evidence of poor outcomes for teen mothers and their children is compelling, but because these young mothers resist the typical life trajectory of their middle-class peers, which conforms to the current

government objects of economic growth through higher education and increased female work force participation. (p. 59)

Along with this new categorization of 'teenage' mothers, there emerged a number of negative discourses surrounding young motherhood. Much of the earlier research in the US asserts teenage pregnancy as the result of bad values and habits, which are pandemic and out of control (Zachry 2005). A belief that young mothers become pregnant for instrumental reasons (to get council housing or social security benefits) is often purported, but there is little evidence to support any of these claims (Phoenix 1991; Zachry 2005). Arai (2009) highlights that in the UK (as in other Western countries), there is a perception that teenage pregnancy and childbearing are increasing, when in fact rates of teen birth have declined. Arai also notes that much of the research that is cited as evidence of the negative outcomes of early childbearing is highly selective (*ibid.*) and that problems are not caused by 'early' motherhood, but usually predate it (Zachry 2005). These constructions of teenage mothering are based on constructions of normative family life and are gendered in their assumptions and lacking in a critical analysis of class. They also expose the representation of the one-parent family as a negative family structure. They highlight the dominance of the preferred male breadwinner model in social policy by highlighting the dependency of the mother on the state. They reveal the perceived sexual irresponsibility of women and lack of social responsibility in pursuing education or employment. Graham and McDermott's research (2005) corroborates the stigmatized position that teen mothers hold in society – 'young' when most mothers are deferring motherhood to later in life, and 'poor' when most mothers are not.

Duncan's (2007) research in the UK counters these arguments with research evidence that does not support the idea that age at which pregnancy occurs affects future social outcomes negatively. He contends that many young mothers themselves express positive attitudes to motherhood, and describes how motherhood has made them feel stronger, more competent, more connected and more responsible. This would suggest that the issue is not necessarily an early life pregnancy. Rather, the class-based inequalities associated with both the incidence and the outcomes

of teenage parenthood and the social construction of teen mothers are the real issues they face.

Ireland is no exception to these types of stereotypes, but it is crucial to note that in Ireland the social construction of teenage motherhood historically is also contained within the broader social history of all extra-marital births. It is well documented in the Irish literature on this subject that non-marital childbearing was highly stigmatized in Ireland (Viney 1964; Kilkenny Social Services 1972; Darling 1984; O'Hare, Dromey, O'Connor, Clarke & Kirwan 1987; Hyde 1996, 1997, 1998, 2000; Farren & Dempsey 1998; McKeown 2000; Conlon 2006). 'Deviancy, stigma, shame and condemnation' are all part of the story of unmarried motherhood in Ireland (Mahon et al. 1998: 531–6). Families headed by an 'unmarried mother' have, for decades, been 'castigated, punished, stigmatised, ignored, labelled and controlled' (Leane & Kiely 1997: 296) by, and within, Irish society. Social attitudes remained uncompromising into the late 1990s and beyond in Ireland. Participants in Hyde's study in the late 1990s felt that others made an automatic connection between a youthful appearance, marital status and state dependence. Hyde (2000) argues that the physical appearance of the body transmitted socially charged messages about gender relations (unmarried) and economic relations (state dependence), both highly stigmatized. Berthoud and Robson in 2003 found that taking a number of factors into account (education, marital status, mother's and father's employment), Ireland was the worst place in Europe to have a baby while still a teenager. They attribute this to educational levels and access to education, employment levels and the potential for social mobility.

An examination of the cultural narratives of 'Irishness' is also necessary to understanding how teenage mothers have been socially constructed and understood in Ireland. Ireland is a deeply patriarchal society and since the foundation of the state in 1932, the formation and maintenance of Irish national and cultural identity has relied, in particular, on two core institutions – the Catholic Church and the family (Byrne 2000: xi). Smyth (2005) argues that colonial and colonized national identities are constructed relationally. In the project of nation building post-independence, 'Irishness' was primarily constructed as 'not-English' (Smyth 2005: 35). As a core part of the Irish identity, and the antithesis of Protestant Englishness, 'Catholicism

came to be central in that which sets the Irish apart' from the English colonizer (Smyth 2005: 35). The Catholic Church has historically had a large influence on Irish family life and on Irish social policy (Inglis 1998; Millar 2003). The church took on the role as guardians of Ireland's moral welfare. According to Inglis (1998), the church was 'an organised system of power which conditioned and limited what Irish people did and said' (Inglis 1998: 193). The church preached the centrality of marriage and the family and the evils of all sexual activity not aimed at procreation, and held up the Virgin Mary as the model for all women (Horgan 2001).

Following a traditionalist form of nation building, the family was placed at the centre of Irish culture. Familism is clearly evident in the Irish Constitution (1937, Article 41), where we can see constitutional protection for the nuclear family and the male breadwinner model and where the terms 'mother' and 'woman' are used interchangeably. Article 41 of the Irish Constitution states:

1.1 The State recognizes the Family as the natural primary and fundamental unit group of Society, and as a moral institution possessing inalienable and imprescriptible rights, antecedent and superior to all positive law.

The State, therefore, guarantees to protect the Family in its constitution and authority, as the necessary basis of social order and as indispensable to the welfare of the Nation and the State.

2.1 In particular, the State recognizes that by her life within the home, woman gives to the State a support without which the common good cannot be achieved.

2.2 The State shall, therefore, endeavour to ensure that mothers shall not be obliged by economic necessity to engage in labour to the neglect of their duties in the home.

(Bunreacht na hÉireann 1937: Article 41)

Familism sees the subordination of individual interests in lieu of those of the family. Within the constitution and in social policy, women's social rights were contained in the 'context of dependence within the family' (Yeates 1997: 142). Examples of this include pensions and social security payments where women were treated as dependants. This establishes a crucial relationship between paid work, unpaid work and welfare, and creates a tiered

system of social rights (Coakley 1997).² Familism was maintained by the principle of 'subsidiarity', which ensured that the state only interfered when the family's capacity to serve its members was exhausted (Millar 2003).

Structural analysis of gender identities shows that a narrow range of gender and sexual identities were tolerated traditionally in Ireland (Byrne 2000). At the same time, the nation came to be increasingly symbolized by Irish motherhood. These images contained messages about appropriate lifestyles of women and girls, with particular prescriptions regarding women's sexual behaviour and in particular the appropriate context for motherhood (Gray & Ryan 1997). Married motherhood became the cultural ideal of being a 'good' woman. Essentially women's fertility, and maternity were constricted within married motherhood and other routes into motherhood as illegitimate.

The pregnancy and death of Ann Lovett in 1984 personifies this. Fifteen-year-old Ann Lovett and her baby died after she gave birth in a Catholic grotto on a cold wet January day in Granard, Co. Longford, where she lived. A group of boys found the prone figures of Ann and her baby son, who was lying alongside her, on their way home. She had given birth alone, in the rain, and had used a pair of scissors to cut the umbilical cord. She was dying when the boys found her. She died in Mullingar Hospital two hours later. An inquest into her death returned a verdict of death due to irreversible shock caused by haemorrhage and exposure during childbirth. The same inquest found a verdict of death due to asphyxia during birth for her baby son, who was never given a name. Ann's death became national news a few days later (Boland 2004). Along with other Sunday newspaper headlines, the headline 'Girl dies giving birth in a field' was read out to a national audience on the *Late Show*, the most-watched television programme at that time in Ireland. After the initial coverage of her death, little more information emerged (Ingle 2017). It has been argued that someone must have known, as Ann carried her baby to full term. The people of

2 Another example is the 'Marriage bar', where women working in the civil service were required to terminate their employment when they married. This remained in place until 1973.

the town refuse to discuss it. The father of the child or the circumstances of the pregnancy are never discussed, even years later.

Social policy responses to unmarried pregnancy

In the early twentieth century, there was little social policy in this area. 'Unmarried' mothers and their 'illegitimate' children are referred to in various policies but a specific policy did not emerge until the 1970s. In 1906 Mother and Baby Homes were established under the auspices of voluntary organizations of religious congregations (Conlon 2006). Garrett (2000) describes the policy towards unmarried mothers that emerged in the 'Report of the Commission on the Relief of the Sick and Destitute Poor, including the Insane Poor' (1927), as 'bifurcated', in that it distinguished between two categories or 'classes' of unmarried mothers: 'those who may be amenable to reform' and 'the less hopeful cases' where 'a period of detention was fitting' (333–4). Garrett summarizes that according to the report, the incarceration of women was not only to safeguard the moral community from the contagion of evil; it also made economic sense. A Department of Local Government and Board of Health report, published in 1933, referred to 'unmarried' mothers interned in institutions throughout the country (Viney 1964; Garrett 2000; Conlon 2006; Luddy 2011). This report deemed these women weak minded and in need of supervision and protection (Luddy 2011). The 1939 Public Assistance Act referred to accommodation for 'unmarried mothers' and 'illegitimate children' which would create conditions for the moral and social rehabilitation of the mothers. The famous Magdalene Asylums were among the institutions established to accommodate so-called 'fallen women', most of which were operated by the Roman Catholic Church, with a minority run by churches of the Protestant faith. As McCashin (2004: 173) notes, 'The denominational layer to the debate helped to reinforce the separation of unmarried motherhood from wider debates about poverty and the development of social security.' In these institutions the women were required to undertake

hard physical labour such as laundry work. It is estimated that 30,000 women were admitted during the 150-year history of these institutions. Women were interned in these institutions often at the request of family members, priests or other institutions such as industrial schools and convents (*ibid.*).

The story of Philomena Lee brought a human face to this experience. Philomena was born in 1933. After her mother's death when she was six, her father sent her and her sisters to a convent school and kept his sons at home. When she was eighteen, Philomena became pregnant. She was then sent to the Sean Ross Abbey in Roscrea, which housed unmarried mothers. She gave birth to a son and she lived and worked there for three years. In 1955 her child Anthony was sold and adopted by a Catholic family from America (Sixsmith 2009b). She was forced into signing the adoption papers. She did not reveal her experience to anyone until 2003. For decades, she had secretly been trying to find out what had happened to her son, with success. She had visited the Abbey a number of times, but the nuns there had lied to her and told her that all documents had been lost in a fire. Martin Sixsmith, a journalist, began to help Philomena in her search, and together they learned that he was adopted as Michael Hess and had grown up in America. He had died of AIDS in 1995, at the age of forty-three. He had tried, also without success, to find his mother. Before his death he arranged to be buried at the Sean Ross Abbey (Sixsmith 2009a). Sixsmith discovered that:

The Irish government was paying the Catholic Church a pound a week for every woman in its care, and two shillings and sixpence for every baby. [...] After giving birth, the girls were allowed to leave the convent only if they or their family could pay the nuns £100. It was a substantial sum, and those who couldn't afford it – the vast majority – were kept in the convent for three years, working in kitchens, greenhouses and laundries or making rosary beads and religious artefacts, while the church kept the profits from their labour. (Sixsmith 2009b)

The Catholic Church in Ireland made a lot of money from unmarried mothers and their children, while also using them as scapegoats to maintain fear and 'moral' obedience in the community. The last Magdalene Asylum in Ireland closed on 25 September 1996 (McAleese 2013). Finnegan (2004) suggests that they diminished in number and finally ceased to exist, as they

ceased to be profitable with the advent of the domestic washing machine. Inglis (1998) describes them as part of the institutional church's strategy for shaming and containing women who transgressed their moral rules and regulations.

We know from stories like Philomena's that illegal adoptions did exist, but adoption was not legislated for until 1952. The threat of incarceration in institutions and the lack of legal adoption were some of the main reasons why so many pregnant unmarried mothers fled to England to give birth and have children adopted, according to Garrett (2000). There was opposition to the Adoption Bill. This opposition centred on a possible breach to the constitution, that legal adoption might be counter to the teaching of the Roman Catholic Church and that it might create an opportunity for children's conversion to another faith and therefore a loss to the Catholic Church (Garrett 2000; Conlon 2006). Thus, when the Adoption Act was finally passed in 1952, a clause stated that adopting parents were to be of the same religion as the 'illegitimate' child (Garrett 2000). After this, greater numbers of Irish women did give their baby for adoption, but often preceded by concealment of the pregnancy (Flanagan and Richardson 1992; McCashin 1996). The proportion of non-marital births placed for adoption was high until the introduction of social welfare supports for unmarried mothers in 1973. In 1967, 97 per cent of non-marital births were adopted, falling to 71 per cent in 1971, to 30 per cent in 1980 and to only 7 per cent in 1990 (Conlon 2006: 25). By 2002, just 0.5 per cent of births outside marriage were placed for adoption (*ibid.*).

The development of social security for those parenting alone 1970–2000

The Widow's Pension was created in 1935. Over three decades later, in 1970, the means-tested Deserted Wife's allowance was introduced. In 1973, the 'unmarried mother's' means-tested allowance was introduced for a child until they reached the age of eighteen. The incremental development of policy in this area betrays the moral stigma against the idea of birth outside

marriage, protection of the traditional two-parent family model and preference for the patriarchal male breadwinner model of familial provision (NESF 2001: 25). Kennedy (2004) heralded this move as making the unmarried mother a 'visible recognised member of Irish society' (p. 219) for the first time. Like many other policies in Ireland that provided more equality for women, Europe had an impact. The Council of Europe made a declaration in 1970 on the Social Protection of Unmarried Mothers (Yeates 1997). It wasn't until 1987 that the Status of Children's Act removed the status of 'illegitimacy' and aligned the property and maintenance rights of non-marital children with those of marital children.

Nearly twenty years later, in 1990, the three payments to women parenting alone (Unmarried Mother's Allowance, The Widow's Benefit and the Deserted Wife's Allowance) were amalgamated to create the Lone Parent's Allowance. This removed the gender clause and the hierarchy of deserving and undeserving categories of those parenting alone. In 2000 this payment became the One-Parent Family Payment. This aimed to acknowledge the family and attempted to make the payment even less stigmatizing (Department of Social, Community and Family Affairs 2000).

Until the late 1990s, Irish policy firmly supported those parenting alone as parents, not workers (McCashin 2004). The original payments implicitly assumed that solo parents were not connected to the labour market.

The allowances did not facilitate combining care of children and paid work, and the payment structure was embedded in a wider context of non-participation in paid work among mothers in general, and gender discrimination against women in social security, taxation and employment. (McCashin 2004: 176)

This approach had both positive and negative effects on families. On the one hand, it supported families in parenting. On the other hand, it further disconnected those parenting alone, especially women, from the labour market. However, since 1997, the national approach to policy has been on employment as the best route out of poverty. This led to the development of pro-employment policies for women in general and particularly those in receipt of social welfare. McLaughlin and Rodgers note that there was 'a distinct focus on accessing young, single, never married, low skilled, poorly educated mothers in urban areas into paid employment' (McLaughlin and Rodgers 1997: 27). Participation in employment has been widely proposed

both internationally (Finlayson and Marsh 1998) and in the Irish context (Government of Ireland 1998) as the means of offering those parenting alone the best prospects for improving their standard of living for themselves and their children (NESF 2001).

The 2000s saw continuing debates regarding the ‘activation’ of lone parents, with the publication of proposals to support lone parents suggesting activation policies in 2006. Following the financial collapse in Ireland and global financial crisis in 2008, these policies were introduced as a condition of the Troika bailout of Ireland, with the aim of securing savings in social welfare spending (Crosse and Millar 2017). Changes to social security for one-parent families are both ongoing and regressive. In July 2014 more than 5,000 families became ineligible for the One-Parent Family Payment because they had children over the age of seven. Millar, Coen, Bradley & Rau (2012) argue that these sorts of policies are shaped by the ideology of helping individuals to help themselves through their (re-)integration into the labour force. The Minister for Social Protection at the time argued that such reforms ‘aim to assist lone parents to escape poverty and joblessness by providing them with enhanced access to the Department’s broad range of activation supports and services’ (Kenny 2014). These policies are framed in the discourse of welfare dependency. The focus of social interventions in Ireland and elsewhere is on labour market participation as a mechanism for social mobility. Full-time motherhood is not valued or supported (Guillari and Shaw 2005). For young women, often without academic progression or lengthy work experience, and with childcare restraints, a discourse that accords social and moral worth to individuals who work their way out of poverty is ‘likely to be contributing to the stigmatisation of young mothers who invest in motherhood on a full time basis’ (Kidger 2004: 34).

Legislative context

Two areas of legislation in Ireland are of particular relevance to the incidence of teen pregnancies – contraceptives and abortion. The sale and use of contraceptives and the provision of literature about contraception were

heavily restricted until 1979. Some women managed to access oral contraceptives under the legally acceptable guise of ‘regulating their menstrual cycle’ (Bloom and Canning 2003: 239), but this was not widespread. The McGee case in 1973 challenged the ban on contraceptives, arguing that marital privacy was protected under the Constitution and that the law prohibiting the importation of contraceptives, even for private use by married persons, infringed that privacy and was thus unconstitutional. This legalized the sale of contraceptives for personal use when it was formally implemented in 1979 (Bloom 2003; Ferriter 2008; McAvoy 2017).

Abortion has always been socially and politically divisive in Ireland. In 2017 in Ireland, abortion remains highly restricted. The Offences Against the Person Act (1861), still in effect today, criminalizes women with the punishment of ‘penal servitude for life’ for procuring ‘a miscarriage’.³ The Act also makes it a criminal act to help a woman procure an abortion. In addition to this Act, four of the thirty-four amendments to the 1937 Constitution of Ireland (Bunreacht na hÉireann) provide legislation relating to abortion.⁴ The first of these was passed in 1983,⁵ following an extensive campaign by pro-life groups seeking constitutional protection for ‘the unborn’ (O’Carroll 2013). Article 40.3.3 of the Constitution reads:

The State acknowledges the right to life of the unborn and, with due regard to the equal right to life of the mother, guarantees in its laws to respect, and, as far as practicable, by its laws to defend and vindicate that right.
(Bunreacht na hÉireann 1983)⁶

- 3 The Offences Against the Person Act (1861) can be read here: <<http://www.irish-statutebook.ie/eli/1861/act/100/enacted/en/print.html>>.
- 4 For a detailed explanation of Constitutional referenda in Ireland and a full list of all amendments to the Constitution, please see <http://www.citizensinformation.ie/en/government_in_ireland/elections_and_referenda/referenda/constitutional_referendum_in_ireland.html> and <http://www.taoiseach.gov.ie/eng/Historical_Information/The_Constitution/>.
- 5 The Eighth Amendment to the Constitution was passed in a referendum in 1983, 33 per cent to 67 per cent, with 60 per cent turnout. An account of the campaign for this referendum can be read here: <<http://www.thejournal.ie/abortion-referendum-1983-what-happened-1225430-Dec2013/>>.
- 6 The Eighth Amendment is still in effect and has implications for the health care provision for all pregnant women in Ireland. It denies women abortions in life-threatening

One of the key cases that illuminated the issues that this legislation created for women was the pregnancy of a teenager in 1992. ‘Miss X’⁷ became an iconic figure in the Irish struggle over reproductive rights. Yet she was a young pregnant teenager without a name. The human story of ‘Miss X’ is lost. Miss X was a fourteen-year-old girl when she became pregnant by rape in a situation of long-term sexual abuse in 1992. ‘Miss X’ was suicidal and, with her family, travelled to England for an abortion. However, before she could procure an abortion, she was served with an injunction that made her travel illegal. Based on the Eighth Amendment, the state sought to protect the life of the ‘unborn’. A high court ruled that the risk to the unborn was greater than the risk to the mother’s life and thus her travel was illegal. She had to return to Ireland, still pregnant, and face carrying her child to term.

The Supreme Court later overturned this ruling and this established the right to abortion where there is a risk to the mother’s life by suicide. However, this ruling was resisted by successive governments. A referendum was held on the issue in 1992, which would have overturned the ruling, but it was rejected by the people. The Supreme Court ruling was not legislated for until the Protection of Life in Pregnancy Act, over twenty years later, in 2013.

A number of events and issues led to the eventual passage of the Protection of Life in Pregnancy Act in 2013.⁸ The death of Savita Halappanavar⁹ in University College Hospital, Galway on 21 October

and health-threatening medical situations. It denies women choice in cases of pregnancy by rape and where there are fatal foetal abnormalities. It affects the informed consent of women in all aspects of their health once they are pregnant, including during labour and birthing (AIMS Ireland 2017). Now in 2017, there is a growing social movement to repeal the Eighth Amendment.

7 A detailed account of the ‘X case’ can be read here: <<http://www.thejournal.ie/twenty-years-on-a-timeline-of-the-x-case-347359-Feb2012/>>.

8 All the events of this period are accounted for here: <<http://www.irishtimes.com/news/health/the-abortion-issue-and-ireland-a-timeline-from-1983-1.2831517>>.

9 Savita Halappanavar died from septicaemia, following a miscarriage at seventeen weeks. Savita died asking for a medical abortion that she was denied. Her health care practitioners claimed that she was in a Catholic country and could not procure

2012 further highlighted the negative impact of the constraints of the Eighth Amendment. This Act legalized termination in cases where the woman's life was in danger, including the risk of suicide, and attempted to provide clarity on the circumstances in which this could occur. Twenty-six terminations took place during 2014, the first year of the Act (Bardon 2015) and the Minister for Health stated that he believed the legislation was working (*ibid.*). Critics, however, argue that the process is cumbersome and inaccessible, and does not address the real needs of women.

Unfortunately, it was the story of another teenage pregnancy that emerged in mid-2017 that highlighted some of the ongoing issues with the legislation. The young woman, seeking an abortion under the legislation, was detained in a mental health facility in late 2016. The young woman and her mother were referred to Dublin following a psychiatric evaluation that the teenager was depressed and suicidal. The first psychiatrist they met there argued her risk of self-harm could be treated by mental health services. However, a district judge ruled the young woman should be discharged after a second doctor had said she did not show signs of mental illness and therefore could not be detained under Ireland's Mental Health Act. Commentators likened the treatment to that of Miss X, twenty-five years previous (ARC 2017).

In 2016 the Citizen's Assembly¹⁰ was tasked with examining 'the Eighth Amendment' and making recommendations. In April 2017 the Assembly called for a referendum and voted to support the replacement of the Eighth Amendment with another provision rather than simply repeal it. The Assembly specifically recommended that terminations be available without restriction up to the twelfth week of pregnancy and that terminations

an abortion even though her health was suffering. The story was published by Kitty Holland in the *Irish Times* on 14 November 2012: <<http://www.irishtimes.com/news/woman-denied-a-termination-dies-in-hospital-1.551412>>. Numerous rallies and protests followed Savita's death and called for a change in the abortion laws in Ireland. There were several inquiries into the case.

10 For more information on the Citizen's Assembly, please see <<http://www.citizensassembly.ie>> and <<http://www.irishtimes.com/news/politics/who-exactly-are-the-citizens-in-the-citizens-assembly-1.3059708>>.

be legislated for in various other circumstances including in cases of fatal foetal abnormality and in the cases of rape, with various time restrictions. Now in 2017, the government are considering these recommendations and there are suggestions that there may be a referendum next year.

Social change in Ireland: Changing contexts changing lives?

Ireland has undergone significant social and cultural changes in the past four decades. Until the late 1970s, Ireland was characterized by population growth, high fertility rates and large families based on marriage. Since contraception became available, there have been declining fertility rates, smaller families, delayed marriage, delayed childbearing and voluntary childlessness (Spangers & Garssen 2003; Hannan 2008; Lunn, Fahey & Hannan 2009). In addition, Ireland went from having one of the lowest non-marital birth rates in Europe in 1980, at 5 per cent, to one of the highest rates at 36 per cent (Hannan 2008: 3; Spangers & Garssen 2003: 11; CSO 2016). In recent years there have also been significant changes to attitudes about family formation. Fine-Davis (2011) states that 84 per cent of people now believe that it is better to live with someone before marrying them. Sixty-nine per cent believe that cohabiting provides a solid base to start a family and almost half (49 per cent) of the sample had cohabited at least once in their lives (*ibid.*).

The dominance of Catholicism has also declined in Ireland in recent years. From the 1990s on the Catholic Church has faced revelations of widespread sexual abuse and gradually the stories of the Industrial Schools and the Magdalene Laundries have emerged. The number of persons citing Catholicism as their religion fell from over 90 per cent in 1980 to 78.3 per cent in 2016 (CSO 2016). More significantly, an MRBI/*Irish Times* poll from 2012 shows that the weekly mass attendance for Irish Catholics dropped to 34 per cent in 2012 (McGarry 2012). Despite these changes, however, teen pregnancy and single pregnancy and motherhood are still stigmatized. As recently as 2005, Irish journalist Kevin Myers called single

women with children ‘MoBs’ – ‘mothers of bastards’, in a tirade against social welfare for women parenting alone (Myers 2005) in his column in a mainstream national broadsheet. That the article was published at all could suggest that this view was accepted as legitimate, at least by some sectors of the population.

Power’s research (2011) in Ireland highlights a discourse of ‘class disgust’ attached to teen motherhood where teen mothers are contrasted with middle-class cultural practices and norms. Similarly in the UK, Tyler (2008) argues that teen mothers are presented as dole scroungers, lazy, idle, working class and as the nemesis to the middle-class affluent woman. Bradley (2014) argues that although the stigma of ‘single’ motherhood in Ireland has shifted over the past four decades, both an economic or class stigma and a moral stigma are still present in Ireland. In Irish society and in Irish social policy a hegemonic femininity remains where preferred families are based on heterosexual marriage and prescribed gendered family roles. Bradley argues that at an individual level stigma is felt more severely, where there is significant difference in the immediate social network of the individual. In particular, where the value system that underpins the stigma is subscribed to by the stigmatized, she internalizes the oppression and self-stigmatizes. Stigma has a functional dimension in Irish society to preserve the nuclear family, an aspiration set out in the constitution in 1937 and under threat by demographic and social changes of which these women are a part.

Conclusion

Historically, the religious and cultural influence of the Catholic Church was the main influence on the social construction and the societal response to teen pregnancy in Ireland. In modern Ireland, the Catholic heritage still shapes how this issue is viewed and it is implicit in how it is responded to in policy. The laws governing abortion are a prime example of this. The social welfare system still based on a male breadwinner model is another example.

However, the experience of teen pregnancy today is also very much more complex than simply the historical legacy of religion. Social class and all the implications of this, such as access to information, educational opportunities and outcomes, and the ability to travel or not where this option is sought, is the biggest factor in Ireland affecting the incidence of teen pregnancy and the outcomes for the women and their children. Citizenship status is another big issue. This affects young women's ability to access services such as abortion and, in the case of direct provision, mainstream social security. Ultimately, a social policy that is informed by a gendered, moral and economic stigma continues to limit real life opportunities and outcomes for teen mothers and their families. For real change in the twenty-first century, a reconstruction of the 'issue' and the response is needed.

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FIONA MCGAUGHEY

8 Irish Travellers and Teenage Pregnancy: A Feminist, Cultural, Relativist Analysis

ABSTRACT

Views of teenage parenting can be culturally situated, as explored in this chapter in the context of an indigenous minority population in the Republic of Ireland – Irish Travellers ('Travellers'). The demographic profile of Travellers is of a young population, due to high mortality rates. Traveller culture is changing, but shows strong adherence to patriarchy and pro-natalism, with an emphasis on chastity for Traveller girls, young marriage and childbearing. Teenage pregnancy outside of marriage brings shame for the Traveller girl and her family whilst, conversely, teenage pregnancy of a young bride is a cause for pride and happiness. Therefore, I argue that for Travellers 'teenage pregnancy' per se is not constructed as problematic; rather it is pregnancy outside of marriage that is constructed as problematic. Adopting a feminist cultural relativist approach, I argue that the role of Traveller women and girls could be re/assembled, but only with impetus from Traveller women and girls themselves.

Introduction

It has been acknowledged that teenage parenting has been socially constructed as problematic (Weed, Nicholson & Farris 2014). Adolescent motherhood in particular has been framed by social scientists as associated with psychological dysfunction, poor parenting and socioeconomic disadvantage (Breheny & Stephens 2007). These dominant views of teenage parenting are to some extent culturally situated, and this chapter explores teenage pregnancy in the context of an indigenous ethnic minority population in the Republic of Ireland – Irish Travellers ('Travellers'). As a researcher, I am cognisant of my identity as a member of the majority Irish

population, carrying out research with a minority population (see, for example, Knight 2000). The chapter predominantly draws on qualitative research I did for Pavee Point Traveller and Roma Centre ('Pavee Point').¹

In this chapter I adopt a feminist cultural relativist theoretical framework. Previous studies drawing on feminist theories with reference to ethnic minority groups and teenage pregnancy have tended to focus on groups with a higher incidence of teenage pregnancy (see, for example, Jacobs 1994). This differs from the cultural context of Irish Travellers, as this chapter discusses. The theory of cultural relativism holds that rights and rules about morality only gain meaning within a cultural context and exhibit cultural and historical variability (Donnelly 1984; Jivan & Forster 2005). This is generally contrasted with universalism, which holds that international human rights and associated values are universal (Donnelly 1984), drawing on the normative claims to universality articulated in the Universal Declaration on Human Rights and other instruments (United Nations 1948). Some feminist scholarship finds itself caught in the cultural relativism versus universalism debate on sensitive topics such as female genital mutilation and child marriage (Jivan and Forster 2005). I draw on Desai, who argues that feminists should support women who oppose aspects of their culture (1999: 805), a view also reflected in one of the interviews for this research. This is what I mean by a feminist cultural relativist theoretical framework. Through this theoretical framework, I argue that for Travellers 'teenage pregnancy' per se is not constructed as problematic; rather it is pregnancy outside of marriage that is constructed as problematic.

The chapter is structured as follows. It begins by summarizing the research methodology in 'About this research and methodology'. This is followed by an overview of the Traveller population: 'About Travellers', presenting a profile of a much younger population than the majority population due to high mortality rates. Drawing on the research I conducted for Pavee Point, the findings on 'Traveller attitudes to sex and sex education' are then summarized, also providing an insight into Traveller culture.

1 I carried out this research for Pavee Point Traveller and Roma Centre in 2010 and 2011 and am grateful for their permission in drawing on the findings. See McGaughey (2011).

Whether sex education is available to Travellers also contributes to our understanding of whether teenagers understand how to avoid pregnancy. The analysis of teenage pregnancy is then situated within the context of Traveller attitudes to 'marriage, family and gender roles', focusing on the strong patriarchy and the particular moral virtue expected of Traveller girls. In this section I also discuss media portrayal of Travellers and Traveller culture regarding gender roles and marriage, and the risk that negative media coverage can further marginalize and ridicule a group already experiencing discrimination. Understanding that teenage pregnancy can often be portrayed as unplanned, I provide an analysis of 'pregnancy planning within the context of patriarchy and feminist cultural relativism'.

In conclusion, I argue that there is a need for more Traveller-led research and commentary, particularly challenging the assemblage of the life of teenage Travellers presented in a voyeuristic and exploitative way by popular media. Traveller culture is undergoing rapid change, but shows strong adherence to patriarchy with an emphasis on young marriage and childbearing. Traveller girls are expected to maintain their virginity pre-marriage, and teenage pregnancy outside of marriage constitutes an enormous shame for the girl and her family. Conversely, teenage pregnancy of a young bride does not attract the same reproach and is rather a cause for pride and happiness. Adopting a feminist cultural relativist approach, I argue that how the role of Traveller women and girls has been assembled by the Traveller community may be open to challenge and re-assembly, but only with impetus from Traveller women and girls themselves, supported by others if necessary (Miller 1996).

About this research and methodology

This chapter predominantly draws on research I carried out in 2010 and 2011 for Pavee Point Traveller and Roma Centre in Ireland (Pavee Point). Pavee Point is a non-governmental organization committed to the attainment of human rights for Travellers. It comprises Travellers and members

of the majority population working together in partnership.² Pavee Point commissioned the research, funded by the Crisis Pregnancy Agency of Ireland, on Travellers' attitudes to sexual relationships and sex education (McGaughey 2011), as a response to concerns that young Travellers may not have been receiving sex education in school or at home.

Adopting a feminist cultural relativist approach, I selected a qualitative methodology for the research, as it is important to understand the cultural context of the Traveller community, which the qualitative method facilitated. This method also allows the challenging of stereotypes and assumptions which can result from quantitative surveys (Alderson 2001). I conducted the research through single-sex focus groups with Traveller young people aged sixteen to twenty-five years in urban and rural locations. The sixteen to twenty-five age bracket was chosen on the advice of Pavee Point, as 62 per cent of Travellers are aged under twenty-five. As such, this is a significant population group. Also, it was advised that parents of Traveller children younger than sixteen years of age may have been resistant to their children participating due to the taboo nature of the subject for some Travellers. Young people aged between sixteen and eighteen required parental permission to participate. Focus groups were also conducted with Traveller parents in both rural and urban locations, recruited via local Traveller organizations which also hosted the focus groups.

In total, thirty-two Travellers participated in the focus groups. This was followed by eight interviews with teachers, youth workers and health care professionals. Although peer researcher strategies have been employed successfully for Traveller and Roma research projects (see Kelleher et al. 2010), I am not from the Traveller community. However, this mitigated against the risk that Travellers may not have been as forthcoming in interviews and focus groups with a member of their own community, discussing what can be a taboo subject for Travellers. For Traveller men focus groups, a gendered approach was necessary and these were conducted by male peer researchers, supported by me, although I did not attend, given that some men may not have been comfortable having a woman present. All

2 Pavee Point Traveller and Roma Centre: <<http://www.paveepoint.ie/>> accessed 12 January 2016.

interviews and focus groups were recorded and transcribed with permission of participants.

Although teenage pregnancy was not the focus of the research, discussions on teenage pregnancy emerged amidst a picture of culture and attitudes towards marriage, families and gender roles that is relevant to our understanding of Traveller teenage pregnancy. For the purposes of this chapter, these have been supplemented with findings from a comprehensive *All Ireland Traveller Health Study* (AITHS) conducted by University College Dublin (Kelleher et al. 2010), data from the Central Statistics Office and other scholarship, including ethnographic studies (such as Helleiner 2000).

About Travellers

Travellers are a small indigenous minority on the island of Ireland, constituting 0.6 per cent of the population of the Republic of Ireland (Central Statistics Office 2012). There are Irish Traveller populations in Northern Ireland, Great Britain, the United States and elsewhere, but this research focuses on the Traveller population in the Republic of Ireland. Travellers have a value system, language, customs and traditions which make them an identifiable group both to themselves and to others; they are identified as people with a shared history, including historically a nomadic way of life (Government of Ireland 2002). European Union (EU) bodies use the term 'Roma' to refer to Roma, Sinti, Kale and related groups in Europe, including Travellers, and Roma and Travellers share a similar history of discrimination, marginalization and socio-economic disadvantage (Hayes and Acton 2007). The AITHS confirmed that Travellers experience poor health, education, housing and employment outcomes relative to the majority population, and experience discrimination in many areas of public life (Kelleher et al. 2010).

Roman Catholicism (Catholicism) is the predominant religion in Ireland, with 84 per cent of the population reporting as Catholic in 2011 (Central Statistics Office 2012), and Travellers are noted to be particularly

devoted Catholics (McGaughey 2011), citing religion as ‘important’ or ‘very important’ in 89 per cent of cases and rating religion more highly than it would with the general comparable population (Kelleher et al. 2010). Catholic doctrine has been critiqued as being preoccupied with sexual morality, and teachings against using contraception, abortion and reproductive technology have a disproportionate effect on women: ‘since the Church is a bride, a mother, and a virgin, brides, mothers, and virgins ought to be like the Church’ (Kalbian 2005: 94–5). Catholicism’s dictates on women, sexuality and reproductive rights can be situated within a patriarchal paradigm,³ and are likely to influence Travellers’ attitudes in these areas.

The modern Traveller community is in a stage of fluctuation and change (Kelleher et al. 2010); culture is not static but rather is constantly adapting and reforming (World Health Organization 1996). Therefore, generalizing about, or essentializing, Traveller culture would be problematic. Nonetheless, there are trends and differences between Travellers and the majority population, and it has been established that attitudes to teenage pregnancy can be culturally bound (Dean 1997). It has been argued that culture needs to be redefined as dynamic, interactive and responding to, but not determined by, socio-historical realities (DePalma & Francis 2014). Traveller culture does not remain untouched by the majority culture and other socio-historic realities. For example, although Travellers on average marry younger than the majority population, they marry at a younger age in Northern Ireland than in the Republic of Ireland. The legal age of marriage is lower in Northern Ireland, at sixteen years compared with eighteen years in the Republic of Ireland (Kelleher et al. 2010). This demonstrates the influence of national laws on Traveller culture.

Travellers’ demographic profile presents a very young population. The population pyramid remains more similar to a developing country population profile and to other Indigenous minorities internationally than to the majority Irish population (McGaughey & Fay 2011). In 2011 over half of all Travellers were aged under twenty (52 per cent), and the average age of Travellers was twenty-two compared with thirty-six for the general

3 See Vuola (2002), for example, with reference to Christianity more broadly.

population (Central Statistics Office 2012). Only 3 per cent of Travellers are over sixty-five years of age, compared with 13 per cent of the general population (Kelleher et al. 2010). Traveller mortality is three-and-a-half times higher than the general Irish population – on average Traveller men will die fifteen years before their counterparts in the general population and Traveller women eleven years before their counterparts (Kelleher et al. 2010).

There is a paucity of data on teenage pregnancy in Travellers. One reason for this is that ethnicity data, or ethnicity data including a ‘Traveller’ category, is not routinely collected by all mainstream government agencies. Pavee Point has been advocating for collection of ethnic data within a human rights framework for a number of years (Pavee Point Traveller and Roma Centre 2016), and European and United Nations’ human rights bodies have also made recommendations in this regard (Pavee Point Traveller and Roma Centre 2016). So, for example, reports and data on incidence and trends in teenage pregnancy in Ireland do not disaggregate by ethnicity (see, for example, O’Keefe, McGrath & Smith 2006 and Health Services Executive 2006). Traveller-specific research has not yet focused on the question of teenage pregnancy. I suggest that this is partly because the socio-economic and health inequalities facing Travellers are so considerable that this topic has not been a priority for the community, together with the fact that it is an uncomfortable topic for some Travellers. As I argue in this chapter, it could also be related to the fact that although pregnancy outside of marriage is seen as problematic by Travellers, teenage pregnancy within marriage is generally not. This, together with the strict moral code for Traveller girls, may mean that the incidence of teenage pregnancy is lower in the Traveller community than it is in the majority population.

Despite the lack of mainstream data on Traveller teenage pregnancy, there is data on maternal age brackets. According to the AITHS, the maternal age profile of Traveller mothers has not changed since 1987, with the average age of mothers at twenty-five years nine months, whilst the average maternal age of the general Irish population has shifted, with an average age of thirty-one years (Kelleher et al. 2010). The highest age group of Traveller mothers is in the twenty- to twenty-four-years age group, comparable to other Indigenous minorities, such as Aboriginal peoples in Australia and Maori in Aotearoa New Zealand. The AITHS also found some recent

decline in fertility relative to a previous study in 1987, having fallen to 2.7 per 1,000 in the fifteen- to nineteen-year-old female age group, but remaining above the general population total fertility rate of 2.1 (Kelleher et al. 2010); this is one of the highest fertility rates in Europe. Travellers also experience higher levels of infant mortality – Traveller infants are 3.6 times more likely to die than infants in the general population (Kelleher et al. 2010). A birth cohort study as part of the AITHS recorded that of the twelve deaths in the study period, the causes were congenital anomalies (five), pre-term births (two), metabolic diseases (four) and accidents (one) (Hamid, Kelleher & Fitzpatrick 2011). Previous research with the Traveller community identified that Traveller babies were ten times more likely to die from Sudden Infant Death Syndrome (SIDS) and congenital diseases than the general population (Brack, Monaghan & Parish of the Travelling People 2007).

Traveller attitudes to sex and sex education

The Pavee Point focus groups and interviews revealed that there is a general lack of information about sexual health among young Travellers. Sex and sexuality remain taboo subjects in many cases; and although young Travellers, particularly girls, may show some resistance to the topic and display embarrassment, given the opportunity to learn about sex, they show a keen interest. This emerged during my focus groups with young Traveller men and women and was also reported by teachers and sex education facilitators in interviews. Whether sex education is available to Travellers also contributes to our understanding of whether teenagers understand how to avoid pregnancy. Contraception emerged as an area where there was a general lack of knowledge and where Travellers requested further information and education, indicating an interest in avoiding sexually transmitted infections (STI), predominantly among young men, and a desire for more family planning among women.

Focus group participants agreed that sex is often not spoken about at home, although some Traveller mothers do tell their children about sex.

Traveller fathers are much less likely to do so. Irish society and attitudes to sex have changed greatly in the last forty years. For example, cohabiting and children born outside of marriage are now commonplace. In many ways Travellers' attitudes have not changed at the same rate; cohabiting, pregnancy outside of marriage and sexual activity before marriage (at least for Traveller girls) are not generally seen as acceptable. However, that does not mean that these behaviours never occur; but where they do, they are seen as bringing great shame on the girl and her family.

The Pavee Point research identified a wide range of experiences of sex education (or lack thereof) among focus group participants. Some had had no sex education in formal education due to higher levels of early school leaving and absenteeism among Travellers, and in some cases due to parents' refusal to grant consent to attend sex education classes. Some focus group participants had received sex education in school, sometimes in biology or religion classes, with their parents' consent. Some said they found it useful; others did not, and said that Traveller girls would laugh and giggle during class whereas 'settled' (majority population) girls would ask questions and seemed to know more about the topic. One of the young men's groups could not remember anything they had learned in the classes. Some focus group participants, often female, had not been allowed to participate in sex education classes at school, as their parents did not consent and so they were excluded from the class. One said: 'I had to sit in the computer room [...] I would like to have been in the class.'

Some young women were told about the facts of life ('them other things' as one participant said) by a family member, including mothers, a father (in one case), aunts and sisters. Sometimes it was seen that older sisters were more keen on preserving a younger sister's reputation and so would give limited information and could not be trusted, as they would 'rat on you' to your parents if you wanted to know too much. Girls sometimes discuss sex with their friends and share information in that way. Some focus group participants also mentioned the internet as a source of information. In some cases young women felt they had received information from their General Practitioner, for example, in relation to contraception. This was not a source identified by young men. Other sources of information on sex for both males and females included television. Aside from classes in

school, both young men's groups said they accessed information about sex mainly from television. Other sources included pornographic websites, magazines and friends. Generally, the young men said sex was not talked about at home, perhaps with the exception of fathers warning them not to get anyone pregnant or older brothers asking 'if you are getting any'.

Some groups initially rejected any notion of parents talking to their children about sex, and younger participants expressed embarrassment at the thought of such a conversation taking place, as it was 'shameful'. Upon reflection, one group felt that perhaps a mother could talk to their daughters and perhaps their sons, but that fathers certainly could not. As outlined in this section, this was not universally agreed upon amongst the groups. The Traveller parents' (mothers) focus group generally agreed that sex education should be delivered in schools, and participants had generally had a positive experience of sex education for their children. They were glad that parental consent was sought in advance for sex education classes. There were a couple of participants who were less enthusiastic about sex education in school and felt they wanted more control as parents over the topic. It was generally agreed that parents had a role to play in relation to sex education in the home; some mothers said they would be happy to talk to both their sons and daughters about sex and relationships, and some had already done so. Others were less comfortable talking to their sons but might talk to their daughters; they felt the fathers should have more of a role in educating boys. Their own experiences of sex education growing up as Traveller girls were poor and they felt that they did not get enough support, advice or information. It was felt by some that this left them vulnerable, for example, when child sex abuse occurred and they did not understand what was happening or what to do about it.

In relation to technology, parents were concerned that they had little or no control over what websites their children are accessing, and what material they are viewing, receiving and sending over their phones. Several participants stated that they were aware that their teenage children had accessed pornography on the television, the internet or via their mobile phone. However, there was a marked difference within the group in relation to their attitudes to their children viewing these types of material. Some mothers felt that when it came to boys there was very little they

could, or needed to do, once they had reached the age of twelve or thirteen. However, all parents expressed concern about young teenage girls viewing this type of material.

Although a universalist would argue that children have the right to seek, receive and impart information as set out in the United Nations Convention on the Rights of the Child,⁴ the research concluded with a number of culturally appropriate recommendations drawn from Traveller parents and young people relating to sex education. Overall, Traveller parents saw sex education as an important part of young people understanding their bodies and relationships, and as a way of promoting good sexual health that is free from coercion and violence – identified as issues by participants.

Marriage, family and gender roles

Travellers' attitudes to teenage pregnancy are best understood within an analysis of attitudes to marriage, family and gender roles. Traveller culture has been described as one of proud patriarchal dominance with clearly defined gender roles (Kelleher et al. 2010; Helleiner 2000). This view was confirmed by Traveller participants in focus groups for the Pavee Point research. The general picture emerging from discussions around social environment was one of greater freedom for Traveller boys than Traveller girls (before marriage). There is an expectation that Traveller girls will spend more time at home and with family than socializing outside of the family. Conversely, boys of sixteen years of age (and sometimes younger) are considered as men among Travellers (Kelleher et al. 2010). Girls help

4 The *Convention on the Rights of the Child* opened for signature on 20 November 1989, 1577 UNTS 3 (entered into force on 2 September 1990). Article 13 (1): 'The child shall have the right to freedom of expression; this right shall include freedom to seek, receive and impart information and ideas of all kinds, regardless of frontiers, either orally, in writing or in print, in the form of art, or through any other media of the child's choice.'

with housework and caring for children, preparing for their roles as wives and mothers.

This role for a Traveller girl is closely linked to her reputation. Above all else, she should not bring shame on her family and should maintain premarital virginity. This was a recurrent theme in all Pavee Point focus groups. Young women stated that a girl's name could be 'put out', saying that she has done something seen as inappropriate with a boy, and that this could damage her reputation. It was stated that this is sometimes done maliciously by other Traveller girls and is very damaging to girls, with participants expressing anxiety about this happening to them. Activities that could bring shame range from being seen socializing with young men to being pregnant before marriage. Although there is a lack of data on Traveller teenage pregnancies, it was discussed in focus groups that pregnancy before marriage does occur, although less frequently than in the majority population. It has already been established that unmarried mothers are 'poorly tolerated' within the Traveller community, perhaps as a means to control fertility (Reid & Taylor 2007).

This concern for Traveller girls' reputation is a deeply gendered phenomenon, with little concern for young men's sexual activity or 'morality'. Young Traveller men have more freedom to socialize, and reported being sexually active from a fairly young age. They reported having girlfriends among the non-Traveller community, usually without their Traveller parents' knowledge. Both Travellers and professionals reported risk taking among young Traveller men, including not using condoms. There were also discussions of under-age alcohol consumption among young men. These behaviours present risks of STI and unplanned pregnancy. In general, among all focus groups, knowledge and understanding of STI emerged as a key gap.

Family violence emerged as a theme in many of the focus groups. A young men's focus group felt that violence was acceptable within marriage if 'she shames you' or if 'she pushes you physically or verbally, then you can hit them'. A sex education facilitator who was interviewed also commented that violence was often proposed as a solution during classes when discussing behaviour seen as unacceptable, for example, getting pregnant before marriage.

Marriage and children were seen as inevitable for focus group participants, and marriage was identified as a seminal event for families. All Pavee Point focus groups agreed that Travellers, particularly Traveller women, get married young. One female participant stated that she was told she was 'left on the shelf' when she still had not married at the age of twenty. The 2011 Census data also indicates that Travellers tend to marry younger than the general population – 33 per cent of fifteen- to twenty-nine-year-old Travellers were married, compared with 8 per cent of the general population (Central Statistics Office 2012). At the time of the Census, there were 252 married fifteen- to nineteen-year-old Travellers, of whom 91 were males and 161 females (Central Statistics Office 2012), confirming that Traveller girls are generally married at a lower age than Traveller boys.

The legal age of marriage in Northern Ireland is sixteen years (with parental consent), and in the Republic of Ireland it is eighteen years. It has been claimed that many Traveller families 'cajole' their children into an early marriage and even if they live in the Republic of Ireland will cross the border to avail of the lower age of marriage, a claim rejected by a Traveller representative organization (Holland 2015). Helleiner (2000) has linked this trend towards early marriage to Traveller children's historical involvement in work, which in the past had provided a degree of economic competence and a related capacity for early family formation. It may also be associated with the higher mortality rates of Travellers.

The practice of arranged marriages has also been identified as a feature of Traveller culture over many years (Gmelch 1975) and is a feature that concerns non-Travellers, particularly the lack of choice and its impact on young women (Helleiner 2000). The Pavee Point focus groups, however – occurring more recently than some previous studies – indicated that although traditionally many Traveller marriages were arranged ('matched'), this was much less common now, and that young men and women had more choice in marriage. There remained examples of 'match made' marriages, which were seen as a family tradition in some families, with generations of the family having had arranged marriages. This appeared to be more acceptable to some participants in a Traveller parents' focus group in a rural area than by participants in some of the other focus groups, including young peoples' groups. Although it did not arise in discussion in the Pavee

Point focus groups, the prevalence of consanguineous marriages, including between first cousins, has been documented elsewhere.⁵

Having children was seen by focus group participants as an integral part of marriage. Previous studies have confirmed that Travellers greatly value children, and that many Traveller women conceive soon after marriage and have large families, facilitated by early marriage and thus a long reproductive span (Kelleher et al. 2010; Helleiner 2000). In the 2011 Census, 26.9 per cent of Traveller women had given birth to five or more children, compared with 2.6 per cent of the general population, and 13 per cent of Traveller women had given birth to seven or more children, compared with just 0.4 per cent of women generally (Central Statistics Office 2012).

As many Traveller women continue to marry young, being pregnant before marriage is likely to be a teenage pregnancy. Therefore, this implies that although for the majority population it is true that teenage pregnancy has been socially constructed as problematic, for Travellers it is pregnancy outside of marriage that can be problematic, not teenage pregnancy per se. Given that young Traveller women can marry in Northern Ireland at sixteen years of age and in the Republic of Ireland at eighteen years of age, if they become pregnant soon after marriage, this could be classified as a teenage pregnancy. While the term 'teenage pregnancy' carries with it a pejorative and judgemental undercurrent in the majority population in Ireland, and an implication that the pregnancy is unplanned, for young married Traveller women, it is unlikely to be any of these. Media coverage of Traveller marriages, families and gender roles has at times presented the 'facts' of young marriage and parenthood in a fairly neutral way – for example, by allowing Travellers to voice their opinion on marriage, gender roles and mothering:

Sandra got married at sixteen. 'I wanted to get it over with,' she says. 'Traveller girls are different to settled girls,' declares Bridget. 'They're much more mature at 16. Settled girls have childish ways. They're not used to caring for children or helping run the house' (Boland 2011).

Sandra's pride in her early marriage, maturity and child-rearing skills are evident from this statement. Less positive is her intention to 'get it

5 For a summary of the literature, see McElwee, Jackson and Charles (2003).

over with'. More commonly, however, media coverage has sensationalized Traveller marriage, gender roles and mothering through a voyeuristic portrayal of the most outlandish Traveller weddings⁶ and tabloid coverage of early marriage, forced marriage and arranged marriages (see, for example, Bond 2012; Russell 2015). The Pavee Point research did indicate that Travellers marry young, but not that they are forced to do so. The effect of negative media coverage of Traveller culture can be to further marginalize, vilify and ridicule a community already facing significant discrimination and exclusion in Irish society. Traveller representative organizations have found television shows such as *Big Fat Gypsy Weddings* to be particularly voyeuristic and demeaning, and have argued that they present racist stereotypes of Traveller and Gypsy communities. However, Ofcom, the communications regulator in the UK, did not uphold complaints to this effect made by Traveller representative organizations (Ofcom 2013).

Pregnancy planning, patriarchy and feminist cultural relativism

There is a common assumption that teenage pregnancy is unplanned. As discussed above, where a teenage Traveller woman is married, it is likely that the pregnancy is planned. However, there are also broader considerations around pregnancy planning, such as whether there is societal or group pressure to procreate. It has been noted that pro-natalism is strong within Traveller culture, and that the culture is one of dominant patriarchy where women tend to be more closely linked to their husband's family after marriage (Helleiner 2000; Kelleher et al. 2011). In other patriarchal cultures women have reported seeing procreation as a duty and feeling hemmed in by the pressure of normative agents such as their husbands and

6 Television documentaries such as *Big Fat Gypsy Weddings* produced by Channel 4 in the United Kingdom and also broadcast in Ireland.

mothers-in-law, with authors concluding that patriarchy directly controls women's lives and health (Boyacıoğlu & Türkmen 2008).

Many professionals I interviewed for the Pavee Point research were critical of patriarchy in Traveller communities. Some service providers reported that Traveller women had to hide from other members of their community, and sometimes from their husbands, the fact that they were using contraceptives. They were also critical of the expectation that Traveller women are expected to get married young and have children. A teacher who invited anonymous written questions during sex education classes reported that a Traveller girl asked: 'Why does God keep sending more babies when you can't look after the ones you have?'

Some interviewees were very concerned about the lack of information about basic health matters among many young Travellers, and some felt that it was unfair that people would not understand what was happening to them, for example, when a girl got her first period or when a woman was having her first baby. Other interviewees felt strongly that Traveller girls were particularly disadvantaged by the gender roles in the community and that this had to be challenged. One person commented of young Traveller women: 'the most punishing thing they have to endure is the lack of choice'. Borovoy and Ghodsee (2012) have critiqued the narrow liberal emphasis on choice, finding that it captures only one aspect of what is at stake for women in issues such as the politics of family planning. They argue that ethnographic investigations show that women from many cultures relinquish rights for broader social goods and protections, which the women find equally or more acceptable.

The dissent was not only amongst the non-Traveller participants in the research, however. For example, there was a feeling among some participants in two of the young women's groups that men were more likely to want 'lots of babies', perhaps in order to prove their manhood, but that it would be women doing all the hard work. Some participants felt that when women stayed at home looking after children, their relationship with their husband changed and you are seen as 'just a mother'. In general, though, I found Travellers in the focus groups were less challenging of the gender roles than the interviewees, many of whom were non-Travellers. A non-Traveller interviewee felt that any challenge of the gender roles needed to

come from the community itself. As scoped in the introduction, this aligns with Desai's argument that feminists should support women who oppose aspects of their culture (Desai 1999), an approach I refer to as a feminist cultural relativist approach.

A practical example of the conflicting values and culture of the majority population and those of Travellers is evident from the Pavee Point interviews with professionals (including youth workers, teachers, health care workers, staff from Traveller organizations, etc.). Some professionals from the majority population suggested that mixed classes of majority population and Traveller children in sex education classes could work well. It was also suggested that there is a plethora of materials that could be used with Travellers. For example, the Crisis Pregnancy Agency and National Youth Council of Ireland were rolling out 'delay training' called *B4U Decide*, based on the *Delay* programme in the United Kingdom but being adapted for the youth sector in Ireland. It focuses on delaying sex until you are ready, focusing on building positive friendships, communication skills and having sex when it is ready and right for you. A Traveller interviewee on the other hand felt that existing materials and terminology may not always be suitable for Travellers. Traveller interviewees and focus group participants were more likely to suggest Traveller-specific approaches and materials. Freire's plea could be applied to the cultural borders in this scenario: 'I don't want to be imported or exported. It is impossible to export pedagogical practices without reinventing them' (Freire & Macedo 1998: 6).

As well as the influence of patriarchy and pro-natalism cultures, pregnancy planning, where individual women decide to depart somewhat from such cultural norms, requires access to contraception. The AITHS also found that 40.8 per cent of Traveller women in the Republic of Ireland had been on the contraceptive pill, compared with 72.8 per cent of the comparable socio-economic population within the majority (Kelleher et al. 2010). Some Traveller women in the focus groups had used contraception. Of these, some felt that they could be open with their husbands or future husbands about this; others did not and said you 'could hide the pill in a cupboard'. The young men's groups discussed contraception, specifically condoms. Some said they used condoms 'for safe sex', and some said they were aware it provided protection, but that you did not get

the same sensation when having sex. Others did not use condoms; one said 'I won't carry a condom, it's her responsibility'. Travellers' changing attitude to contraception was also reflected in the AITHS (Kelleher et al. 2010).

Conclusion

In this chapter I provided an introduction to the unique demographic and cultural drivers for young Traveller marriage and pregnancy. There remains a lack of both quantitative and qualitative data on the prevalence and experiences of Travellers and teenage pregnancy, including pregnancy outside of marriage. Collection of ethnicity data, including Traveller ethnicity by government agencies within a human rights framework, would contribute to filling this gap. There is also a need for more Traveller-led research and commentary, particularly challenging the assemblage of the life of Travellers, including teenage Travellers, presented in a voyeuristic and exploitative way by popular media.

What is clear from the research I carried out for Pavee Point is that engaging in pre-marital sex and being pregnant outside of marriage are not only seen as bringing shame on the Traveller girl and her family, but may lead to retribution for the girl. While young men avoid the same level of shaming, they are nonetheless warned not to get anyone pregnant. Conversely, being married young – at age sixteen in Northern Ireland or eighteen in the Republic of Ireland – and conceiving immediately would be a source of pride for many Travellers. This is supported by a patriarchal, pro-natal culture, but also arguably necessitated by a high overall mortality rate and high infant mortality rate for Travellers.

All of these findings are tempered by the proviso that Traveller culture is changing. This means that how the role of Traveller women and girls has been assembled by the Traveller community may be open to challenge and re-assembly, but only with impetus from Traveller women and girls themselves and in ways that fit with their needs and within the fluid boundaries

of culture. Such reassembly can be supported by people outside of the Traveller community if necessary, in a spirit of feminist cultural relativism.

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KYLA ELLIS-SLOAN

9 Personal Decisions, Responsible Mothering: Un-picking Key Decisions Made by Young Mothers

ABSTRACT

Having a child as a teenager continues to raise questions regarding rationality, morality and maturity. Subsequent decisions made by young mothers are treated to similar questioning. This is, in part, a result of the growing popularity and application of neoliberalism outside of the political sphere. Ideals of personal responsibility, free choice and resilience have intensified the scrutiny and apportioning of blame to disadvantaged groups. Constraints on choice are disregarded. This chapter presents young mothers' narratives around two key areas of decision-making: the decision to re-enter or delay entering education following childbirth and the decision to leave or remain in a relationship with the father of their child. Analysis demonstrates the continuing influence of gender as it underlies the constructions of 'good' mothering the women seek to live up to when making decisions. As such, the chapter challenges neoliberal conceptualizations of choice and stigmatizing representations of teenage mothers.

Introduction

In 1991 Ann Phoenix argued in her ground-breaking book *Young Mothers?* that 'an understanding of the social contexts in which particular women live is [...] crucial to an understanding of how (and why) early motherhood affects lives as it does' (1991: 246). Since then, the problematization of teenage motherhood has been robustly challenged (see particularly Arai (2009a) and Duncan, Edwards & Alexander (2010)). Nonetheless, popular culture serves to remind us that teenage motherhood is still largely accepted as disastrous for mother and child. For example, in MTV's popular series *16 and Pregnant*, young mothers are presented as 'cautionary tales' with

material which is intended to 'encourage responsible sexual practices and life planning' (Ouellette 2014: 409). Its spin-offs *Teen Mom*, *Teen Mom 2* and, most recently, *Teen Mom UK* continue in much the same vein, with *Teen Mom*'s 'constant repetition of bad mothering practices and dysfunctional relationships' (Thomas 2013: 111).

The problematization of teenage motherhood is further exacerbated by the ascendancy of neoliberal ideals, namely, tropes of free choice and personal responsibility. This thinking emphasizes the individual's role, rather than the actions (or inaction) of the state. As such, it resonates with New Right ideologies (Brannen & Nilsen 2005) and has become politically popular. As Brown (2006) argues, however, the neoliberal project has extended beyond politics and into the lives of individuals. It has become *the* 'normative framework, based on the ideas of citizens as rational and self-interested economic actors with agency and control over their lives' (Phipps 2014: 11).

There are clearly issues with the dominance of these ideas, not least that they rest on a number of suppositions such as the idea that risk can be avoided, that there are no constraints on choice and that outcomes are solely (or at least largely) the result of individual choices. In short, there is an overemphasis on agency. These points are significant; when things 'go wrong', individuals are held responsible 'for their own adaptation and progress; regardless of the circumstances they have been dealt' (Baker 2010: 187). In other words, context is either ignored or disregarded as something an individual should be able to circumvent with hard work and determination.

We can see how these ideas are implicit in the problematization and stigmatization of teenage pregnancy and parenthood in, for example, the MTV programmes noted above. Murphy (2012) and Ouellette (2014) point out that *16 and Pregnant* reflects neoliberal thinking by focusing on discourses of self-regulation, choice and agency in order to construct the 'problem' of teenage pregnancy. Consequently, the programmes play down wider social factors such as restrictions on abortion, contraception or sex education in the US;¹ instead, the emphasis is on women's individual

1 The *16 and Pregnant* and the *Teen Mom* series are based in the US but have an international audience.

behaviours and choices and the solution is presented as one which is beyond the scope of policymakers. In accordance with neoliberal tropes of personal responsibility, complexities become lost in the clamour to present teenage mothers as feckless young women. Within popular discourses, this translates as ‘inappropriate motivations’ (Arai 2003: 202). Where context (such as poverty, social exclusion or inadequate sex education) is acknowledged, rather than a different choice, youthful mothering is defined as a poor choice stemming from ‘low expectations’ or ‘ignorance’ (SEU 1999). As a result, teenage motherhood is treated as a result of poor (or immoral) decision-making requiring young mothers to be taught responsibility² or ‘nudged’ into making better decisions (Cabinet Office 2010). Decisions made by young mothers around education, employment and single parenthood are also de-contextualized and ascribed a limited form of rationality. For instance, young mothers not in education or employment are labelled as NEET (not in education, employment or training) rather than ‘stay-at-home mothers’. Whilst conducting this research, a young parent worker expressed concern as to the labelling of young parents as NEET. Several young mothers she worked with were supported by the father of their children yet were classed as NEET rather than a housewife or stay-at-home mother. This meant they were subject to interventions she felt were inappropriate (Field Notes 23.06.08). As Yardley (2009) points out, labelling young mothers as NEET supports assumptions that young parents are rewarded by the welfare state for doing nothing. In contrast to older mothers who stay at home to care, young mothers are subject to questions with regards their dependency. These policy decisions support the assumption that young women intentionally get pregnant in order to avoid employment and education and to access state ‘hand-outs’.

A number of academics have engaged with these representations of teenage mothers to question the problematization of teenage parenthood. Still others have pointed to the resulting stigma and its effects (see, for

2 See, for instance, Gordon Brown’s statement in 2009 that sixteen- and seventeen-year-old parents who get support from the taxpayer should be placed in a network of supervised homes in order to ‘learn responsibility and how to raise their children properly.’

example, Whitehead (2001), Yardley (2008) and Ellis-Sloan (2014)). This chapter draws on a piece of qualitative research conducted with young mothers which sits alongside these studies in encouraging a more nuanced approach to teenage motherhood. The project sought to re-contextualize the lives of young women on their paths to becoming a teenage mother by focusing on choices and decisions. Where others have focused on one area (see Lee, Bristow, Faircloth & Macvarish's 2004 study on abortion decisions, for example), this study took a narrative approach and traced the women's paths to motherhood before, during and after pregnancy. Such an approach enabled the women to define for themselves what were 'key' decisions and discuss a range of underlying influences and rationalities. Data was further sensitized by several months of participant observation in toddler and parent groups. These methods provided background context on experiences in the family of origin, views on abortion, personal ambitions, an orientation (or not) towards motherhood as well as personal and sexual relationships with partners. Consequently, decisions could be analysed with a fuller understanding of the wider contexts in which they were made.

This chapter focuses on two areas of decision-making made by the women post-pregnancy: the decision to return (or not) to education and the decision to remain in or leave the relationship with the baby's father. The focus on these decisions is deliberate; being seen to make the 'wrong' choice in either case has important implications for young mothers, as it risks them being further defined as a problematic figure. Teenage mothers are already considered to have 'failed'; the 'correct path' would be to take responsibility in accordance with neoliberal affirmations of personal triumph over adversity. This would entail returning to (and succeeding in) education alongside 'good' mothering set within a committed relationship and the idealized nuclear family. Such an outcome also chimes with expected life paths for women in contemporary Western society. It is argued here that contemporary constructions of 'good' motherhood underpin these decisions. This chapter points out the problems with this influence whilst also using it to challenge deep-seated stereotypes of teenage mothers and the 'choices' they make.

‘Becoming a teenage mother’: Study context and methods

The study was conducted with young parents in the south-east of England between 2009 and 2012. This period is significant; not only was this in the final throes of the Blair/Brown Labour government (and therefore the last broadly left-leaning government in the UK), it was also the tail end of the Teenage Pregnancy Strategy (TPS). The TPS was a centralized strategy that aimed to prevent teenage pregnancy and support those who did become young parents. The strategy drew on findings of the Teenage Pregnancy Report (SEU 1999), which identified three key risk factors for the incidence of teenage pregnancy: ‘mixed messages’, ‘low expectations’ and ‘ignorance’. Framed by these understandings, the TPS aimed to halve teenage pregnancy and to increase the numbers of young parents in education, employment and training. The women in this study were some of the last to engage with such a large-scale attempt to address challenges associated with teenage pregnancy and parenthood. Whilst there were undoubtedly problems with the approach (see Kidger 2004 and Arai 2009b), a range of initiatives, funds and professionals were made available to support young parents. In some areas care was provided through support groups which ran similarly to toddler and parent groups but with a programme of events tailored towards the needs of young parents. This research was conducted in three such groups.³ Participant observation was conducted in the groups for a period of between nine months and a year and included twenty-eight young mothers. In terms of demographics, the sample was broadly reflective of the local population in terms of ethnicity (the majority being white British). The women’s ages also corresponded with the general picture of teenage motherhood. Most of the women had given birth over the age of sixteen. Five had been sixteen at the point of birth and three had been under sixteen (the youngest was fourteen).

Twenty-one women from the overall sample went on to be interviewed. The data presented here comes largely from the interviews; however, questions and analysis were informed by the period of observation. The following sections will present this data before discussing the findings in detail.

3 For further discussion of the groups and the policy context, see Ellis-Sloan (2015).

‘Good’ motherhood versus ‘good’ teenage motherhood: Conflicts around education and employment

I start here with Sophie’s narrative. Before becoming pregnant at fourteen, Sophie had a chaotic home life, spent time in the care system and reported hating school, being bullied and having few friends. Following the birth of her daughter, her relationship with her father broke down and Sophie’s living arrangements were considered unsafe. Consequently, her daughter was placed into the care of her paternal grandmother while custody arrangements were considered. At fourteen, Sophie was subject to legal requirements regarding her education and she was expected to return to school when her eighteen weeks of ‘maternity leave’ ended. With her return imminent, Sophie became argumentative and angry. She truanted most of the first week, complaining that she was ‘treated like a dummy’ and felt her time was being wasted when she could be with her daughter.

Sophie’s refusal to return to school is unsurprising. When the timing is not decided by a parent (of any age), leaving a baby is likely to be a difficult and emotional experience. Returning to the school where she had been bullied – but this time as a teenage mother with all the negative connotations attached to it – made this additionally daunting. Moreover, to do this whilst under the stress of assessments regarding the custody of her baby, and with their time together already limited by access arrangements, would have been extremely difficult. Shortly following her return to school, Sophie attempted suicide. Whilst we cannot make presumptions about her exact reasons, we also cannot overlook the fact that the pressure she was under would not have been helpful to her emotional well-being. Discussions with a reintegration officer⁴ in reference to a different case indicates the kinds of pressures some young mothers are exposed to:

We think she went and got pregnant on purpose because we threatened her with prosecution if she didn’t go back to school [she then laughed]. (Field Notes 13,06.08)

4 These were personnel introduced under the TPS tasked with ensuring the continued education of pregnant and parenting teenagers.

Although certainly not representative of other workers I came into contact with during the course of the research, this officer's approach (as well as the flippant way she reported it to me) demonstrates the kind of de-contextualizing the research was concerned with. The emotions, needs and wants of the woman involved as well as the complexities of her situation were reduced to an assumption of bald rationality. This narrow interpretation of rationality and decision-making is what underpins the oft-repeated assumption that a teenage pregnancy is a calculated means by which to access council housing or benefits (see Mason 2013). Nonetheless, the women in my study indicated that their decisions were informed by an entirely different rationality – the need to 'be there' for their small children. The strength of feeling demonstrated by this young woman about wanting to be the primary carer for her baby are no different from those expressed by other young parents:

The whole point of having children is to see them grow up and see them do different things. (Rachel, seventeen)

That's why I don't want to go back to work yet. I don't see the point in having kids if you just go back to work straight away [...] you want to get to know your child and see everything that they do because it changes every day. (Trish, nineteen)

I didn't want to miss those important; first crawl, first walk. (Nicola, nineteen)

These expressions of a desire to 'be there' during the early years of their children's lives are consistent with the wishes of many older mothers (Gauthier, Emery & Bartova 2015). For some parents in the study, the thought of leaving a young child was an anathema to them. What was particularly interesting was the way in which childcare was presented as an abdication of responsibility. One mother (Kelly, seventeen) looked disgusted when subsidized childcare from the local college was suggested to her, stating there was 'no way' her baby was going into childcare. Another young woman, Fiona (eighteen), expressed similar disgust. Here she presents her decision to care for her baby herself as a responsible resolution to her unplanned pregnancy:

They said 'well if you don't want to bring it into college you can always put it in a day-care centre or something' and I was like 'well no, it's my baby and my responsibility and I don't want to do that you know'. I was the one who got pregnant so I have to be the one who's got to look after it.

The involvement of social services and benefits advisors (for some), reintegration officers and personal advisors⁵ (for all) meant to varying degrees the women were all encouraged to re-engage with education. Similar to Sophie, all expressed that their primary responsibility required them to remain at home whilst their children were small. Unlike Sophie, however, most of these women were all over the age of sixteen and so had relative autonomy over their return to education and when *they* felt their children were ready to be left. Once children were judged to have reached an appropriate age (which was most often when they reached pre-school or school age), the women began to consider their own return to education. Interestingly, although education was encouraged on the basis of improving the women's own prospects, most of the women framed their decision to return to education as being about providing for their children. This was in terms of financial provision:

I've got more to drive for because I'm doing it for him [son] as well as me because I don't want to be living on benefits for the rest of my life. (Jane, seventeen)

The provision of a role model:

I hated school and that but now that I've got my little boy I want to go back to college, I *want* to do stuff, I *want* him to have an education so if I show him that I'm doing something then when he's older he'll be like 'oh my mum done this' (Kasey, eighteen, her emphasis)

Or as a way to provide children with opportunities:

Every course that I can do so that he can go into crèche I took that opportunity just so that he can go and meet friends. It doesn't matter if he doesn't know anyone, put him in the front line. At least he's not clingy and he just has his own little independent life as well as I do what I want to do. (Kasey, eighteen)

- 5 Personal advisors worked for the Connexions service, a government agency. This was originally envisaged as a holistic service offering advice on a range of issues such as drugs, housing and careers. However, it effectively took over from the careers service and narrowed its focus to education and employment. Together with other teenage pregnancy workers and re-integration officers, they worked to meet one of the key aims of the TPS; to get 60 per cent of teenage parents into education.

Education was therefore reframed to fit into what they saw as responsible mothering. While for many, their definition of mothering responsibly chimed with what they wanted to do (stay-at-home mothering), this was not always the case. Some of the women's narratives indicate that taking 'responsibility' meant that they sacrificed desires or needs of their own. For instance, Harriet's mothering responsibilities required her to stay at home, but conflicted with her personal preferences of returning to college. She described herself as being 'gutted' when her pregnancy meant she had to give up her college course. Similarly, Claire (sixteen) had continued attending school throughout her pregnancy and started college shortly after her son was born. She left, however, saying she couldn't concentrate because of her son. Nancy (sixteen) wanted to go to college but said it was 'not a good time'. This was despite her own frustrations at being a stay-at-home mum now her daughter was attending pre-school for a portion of the week:

I do feel really low because some days I don't have absolutely anything to do. The house is all clean, everything's done, no meetings, no shopping, nothing, and I just sit here all day. I'm so bored. So so bored. (Nancy, sixteen)

Nancy was keen for her daughter to go to a private school and was using the pre-school (which was attached to the school) to increase her chances of getting a scholarship. She would not have been able to maintain her daughter's place at her pre-school if she was at college and unable to drop her off and pick her up. Putting her own education first could have jeopardized this opportunity. Consequently, these women's own education was put on hold in order that they put their children's needs first.

Leaving a violent relationship

This section concentrates on the accounts of two young women (Naomi, eighteen and Nicola, nineteen). Both discuss their decision to end their relationships with the fathers of their children following a period of domestic violence. We start with Naomi:

You can't get away, I tried getting away loads and you can't because it just gets more violent. So as much as you want to get away you can't. You do anything you can but you can't get away, sounds really weird, it is really weird, because you can't [...] I don't know, I can't explain why.

As Naomi's palpably confused narrative indicates, leaving a violent relationship is challenging and the reasons for staying are not always understood, even by the victim. As others have reflected, there are many barriers to leaving a violent relationship. For instance, violence can be hard to recognize, particularly when it is part of an otherwise functional or acceptable relationship (Lloyd & Emery 2000):

When he's done something like been violent towards you only think about the good times, you think 'oh that was really sweet, that was really nice' and you sort of think 'oh well'.

For Naomi, this included her partner's role as a father. She described how he worked long night shifts and would then look after their daughter during the day, often taking her to the park or to see family. Women may also downplay or normalize the violence they experience (Bekaert & SmithBattle 2016). This was also evident in Naomi's account; for instance, she reported that her partner had tried to 'kick the baby out of her', stating, 'how she's still alive I don't know'. Nevertheless, this incident was minimized later on in the interview:

He didn't do it hard, he threatened to do it hard but when he did it wasn't hard, it wasn't hard, it wasn't really hard enough to do any damage and I think he did it to get at me because everything he was saying to me I was saying, 'yeah whatever, whatever, whatever' and he didn't like that so he tried a different tactic to try and get to me, so I think that's why.

Cultural norms which hold women responsible for the emotional well-being of the family and relationship (Wilcox 2000) may also lead to women feeling responsible for the breakdown of the relationship, or the violence. This can also be seen in the above extract, where Naomi appears to be suggesting that she was goading her partner. Naomi did finally leave the relationship, however; the breaking point was when her daughter witnessed a violent attack:

She didn't really see anything until the last time he did it which was Christmas Eve. I had her in my arms and he was punching me in my head. He smashed in the house, up through the front door and was punching me in the head. I had my phone in my hands and I rang [friend] [...] when eventually [friend] came in and [friend] rang my dad and I said that is it. That is it.

Nicole (nineteen) presented a similar story. When she was pregnant, Grant held a knife to her throat. She called the police but Grant convinced them that it was self-defence and that she had also been violent. As a result, no action was taken. This was repeated several times after the violence started in earnest following the birth of her son. When the police continued to ignore the situation, Nicole stated that she had 'lost faith in any officials'. As Bekaert and SmithBattle (2016) note, trust erodes easily when professionals do not respond to young parents seeking help with care. Nicole began to isolate herself from friends and relatives who had begun to recognize the abuse:

Everyone was saying 'he's no good he's no good' and you sort of went 'oh you know nothing'. I separated myself from people who didn't like him because I didn't like hearing it.

Like Naomi, Nicole initially found the violence difficult to recognize, as it was juxtaposed with what she described as an otherwise gentle and caring man. However, once her son was born, her partner's disinterest and jealousy of the baby as well as his refusal to form a relationship with him meant that Nicole ceased to see Grant's caring side. She began to think, 'I don't actually need you, go away'. Nonetheless, Nicola describes how the importance of family, and particularly a biological father (regardless of his actual fathering), was behind her reasons for returning to the relationship:⁶

A couple of times I left but, I don't know, something just pulled me straight back. I suppose because I wanted that family unit. You know because I grew up in a stepfamily, I wanted my children to have their biological parents together, happy.

6 There are, of course, myriad reasons why women remain in violent relationships, not least as a result of the psychological effects of sustained violence, and I don't wish to gloss over these; nonetheless, it is the women's reasons and rationales which are at the forefront here.

In accordance with Naomi's account, it was concern for her son that led Nicole to leave for the final time:

[the] violence spiralled [...] he just flipped totally and everything I did was wrong to the point where I thought I can't keep my son here, I can't, it's not safe [...]. My mum was in domestic violence, I want to break that cycle now. I can't let another generation go through it.

Firstly, we see her concerns for her son's physical safety, and, secondly, we see the long-term effects (and for Nicole, known effects) of living with domestic violence.

Teenage mothers' relationship decisions: Staying together?

This section focuses on three women: Kasey (eighteen), Harriet (eighteen) and Amanda (sixteen). All three were observed and interviewed at a time when their relationships were of particular concern to them and all shared their deliberations as they considered their futures with the fathers of their children. Kasey confided during her interview how she and her partner Nathan were 'in the process of splitting'. She cited her unhappiness with Nathan's fathering as her main reason:

He just ignores him [son] and plays on his Xbox or goes out or something. Great [sarcastic]. Or if he's like in danger or if he falls or something, he's like 'oh watch him' [in a grouchy voice] or if he does fall over 'why weren't you watching him?' His dad's only just started feeding him, at fourteen months, and he don't change his bum at all so I can't even leave him with him because it's a constant worry and if I do leave him with him is he going to be alright?

Kasey's account does not betray any love or regret about her relationship with Nathan. The nearest she comes to any reference to feelings is her fear of loneliness:

The only thing when he is there that I like is at night sitting down with him and having someone to talk to other than the baby. That's the only thing that I like about having him there.

Nonetheless, she emphasizes Nathan's failures as a father (in her eyes) as her justification to end the relationship. Her account is strikingly similar to those of Harriet and Amanda. Despite expressing unhappiness in their relationships, however, both remained with their partners:

Sometimes I wish he wasn't there like half the time because he doesn't actually do anything, he just sits there [...] when I go to the toilet or go and have a bath or something and I'm like watch [son] and he's like 'uh', 'take these headphones off' and stuff and he's like 'oh [...] yeah' [says in a dopey voice] so it's a bit hard like sometimes [...] he is a good dad but sometimes I just wish he wasn't there sometimes because he doesn't actually physically do anything. (Harriet, eighteen)

Harriet's description of Ed as a 'good dad' appears somewhat inconsistent with her account of his fathering. Furthermore, she describes herself as being 'lucky' to have Ed because 'he goes to work, he buys him all the stuff that he needs'. Nonetheless, Harriet expresses frustration at Ed's involvement with other elements of fathering:

He's like 'it's your turn because I changed it last time'. It shouldn't be a competition about who changes more nappies because I'm with him every day when he goes to work and I don't think he understands that I do most of it. He just says 'I've been at work all day'.

Amanda's account demonstrates a similar sense of frustration around the fathering role:

I'm the only one now who's doing anything, Simon just sits at home, he plays the PlayStation all day. I need more help from him at the moment. I can't bear him sitting around while I'm doing everything, it really drives me mad. He's just sitting there and I'm running around after two kids all day long.

Amanda provides a somewhat paradoxical description of Simon: 'Oh he's a brilliant dad. He is really good but he does usually just sit on his arse and do nothing to be quite honest'. She goes on:

I hope it will last out because I love him to pieces. I don't love him as much as what I used to. But there is obviously love there because he is my kid's dad and in that perspective I do love him.

Amanda's contradictory accounts of her feelings reflect her confusion about the relationship and its future. They also indicate how romantic feelings

are intertwined with fathering. As Kasey notes, 'if he was more supportive and done more things with him I think we would be better together'. For Kasey, Nathan's 'failures' as a father led to the failure of their relationship. Interestingly, though, when Nathan did not live up to be the father she envisioned for her son, Kasey hints at an idea that her son would be better with another man, someone more willing to be a father:

There's no point staying together just because we've got a kid together. I'm sure there's loads of nice guys out there who'd love to have kids.

As we can see here, whereas for some women idealized notions of 'the' family and relationships may lead them to persist in unhappy relationships, for others this may lead to a search for something better. We therefore end on two key points: firstly, the women's decisions explored here are informed by the values they attach to relationships, families and particularly motherhood. In turn, these then are underpinned by traditional gendered ideals, for example, around parenting roles. Secondly, although the outcomes of decisions may differ between women, ultimately they are informed by a shared desire to do the best for one's children. These spheres of influence will now be discussed below.

'Good' mothering, 'good' fathers and 'the' family

In contemporary Western society what makes a 'good' mother is synonymous with intensive mothering ideology (see Hays 1996). This refers to a discourse of motherhood in which a child-first imperative demands that mothers commit significant amounts of time and energy to their child's upbringing to ensure optimum physical, emotional and cognitive development. As mothers' responsibilities have expanded, so have the perceived needs of children, so much so that they have become 'elevated above mothers' needs and desires [and ...] increasingly opposed to those of mothers' (Wall 2010: 163). As a result, parents (and predominately mothers) are under increased pressure to invest in children in order that they compete

intellectually and developmentally. Joan Wolf (2011) incorporates these ideas in her recognition of 'total motherhood', arguing that mothers are also expected to predict and prevent potential harm to children. Contemporary constructions of 'good' motherhood therefore draw on both traditional ideas around gender roles and neoliberal tenets of personal responsibility, investment in the self and risk management.

This form of mothering is evident in the accounts of the women here, especially with regards their decisions around education. Here the well-being of their children was at the forefront even when it required sacrificing educational opportunities or the women's own well-being. Even a return to college (an outcome desired and encouraged by those working with the women) was framed as being for the children rather than any educational worth. As Claire (sixteen) summarizes, 'everything I do now is for him [...] he has to come first now. I've got to do it [college] for him'.

The problem with the dominance of intensive motherhood is not one of women wanting to care for their children but the pressures this implies. Intensive mothering requires considerable amounts of financial, emotional and physical resources, yet it acts as an imperative regardless of individual women's abilities to live up to and maintain the standards required. Furthermore, intensive motherhood (as the name suggests) is a burden largely shouldered by women. Hays (1996) argues that messages about intensive parenting are more strongly internalized by mothers than fathers. These messages are, however, also more likely to be aimed at mothers, and they are ubiquitous. Within popular culture, Douglas and Michaels (2004: 113) argue that the 'celebrity mom profile was probably the most influential media form to sell new momism'.⁷ Critique has begun to emerge within academia (see Lee et al. 2014, for example) and in a proliferation of blogs and books detailing the 'realities' of motherhood (Mesure 2016). Nonetheless, celebrity-endorsed intensive mothering practices remain evident and influential (Feasey 2012). The television programme *16 and Pregnant* and its spin-offs were originally conceived of partly as a form of public education aiming to deter teenage pregnancy. They also, however, chime with the intensive mothering messages played out within celebrity

7 New momism is Douglas and Michaels' (2004) take on intensive motherhood.

culture where fathers 'are not subjected to the same level of surveillance and discipline' (Murphy 2012: 92) and women bear the burden (and personal sacrifices) 'as primary subjects of corrective initiatives' (Oullette 2014: 411). Teenage mothers, it seems, are not exempt from intensive mothering ideology. Indeed, as Nicole found, the approach was reinforced by the professionals tasked with supporting her:

I was struggling emotionally with being a parent because [...] I suppose there was so many expectations of 'you're a mum; you should be able to cope with everything'. But [...] it [...] everything was just squashing me down into the ground [...]. It was all me. It was, 'well he's out working two jobs so you know, you should be able to cope'.

Although the father is cast into a secondary role, there is an increased expectation of fathers to be 'involved' (Dermott 2003; Dermott & Miller 2015). The nuclear family therefore remains the idealized institution for childrearing alongside which the single mother is problematized and politicians express concern around the absent or the distant dad (Faircloth 2014). The intersection of these two constructions explains some of the conflict expressed by the three women considering the futures of their personal relationships. Here we saw how their frustrations with their partners' perceived lack of involvement was key to their deliberations. Their feelings for their partners and the relationship were bound up with their conceptions of them as 'good' fathers. This was particularly evident with Harriet. On the one hand, she drew on traditional conceptions of the fathering role (providing) in order to define Ed as a 'good' father. However, contemporary fathering, like mothering, now requires more. Breadwinning is considered the bare minimum of the fathering role (Summers, Boller, Schiffman & Raikes 2006), which 'is no longer seen to legitimize a form of fathering whereby men are exempt from active involvement with children' (Brannen & Nilson 2006: 348). Consequently, Harriet also drew on contemporary constructions of fatherhood under which she defined him as less than ideal. Similarly, Amanda described her partner's fathering in somewhat scathing terms and then went on to define him as a 'brilliant dad'. Whilst venting about a partner's shortcomings is apparent in most relationships, such gripes are rarely accompanied by genuine concern as to the relationship's future. The complaints here signal something more; they point to the value

for these women that the family includes a 'good' father and ideally one that corresponds with contemporary constructions of fatherhood. In some cases, the importance of a father was an impediment to leaving a violent relationship. A key element of being seen as a 'good' mother is mothering in the 'correct' social, sexual and economic context. Only then can motherhood be considered 'normal' and 'natural' (Letherby 2009). Bock (2000) argues that the most important factor in claiming legitimacy is the presence of the father. Where the father was not present (as was the case with her sample of 'single mothers by choice'), Bock found that the women were able to call on other factors in order to claim legitimacy for their decision to mother. This included 'age, responsibility, emotional maturity, and fiscal capability'. Bock argues that teenage mothers 'frequently have no man to serve in the instrumental function of bread-winning' (Bock 2000: 66). Therefore, she says, teenage mothers lack legitimacy in the eyes of society.

Whilst this aspect of 'good' mothering led to the maintaining of an unhappy relationship, the child-first imperative had the opposite effect. Naomi and Nicole both found that their children provided the catalyst to leave their violent partners. This is not uncommon; Bekaert and SmithBattle (2016) found that over and above self-preservation, protecting a child was often a compelling reason for leaving a violent relationship. We cannot then overlook the positive effects of mothering ideologies. As Duncan (2007) argues, teenage motherhood can act as an inspiration or motivation. These are, however, by-products of a discourse which actively promotes sacrifice in the name of parenting, and benefits for women as individuals in their own right cannot be assumed. Care must be taken in attributing gendered ideals around motherhood as a positive catalyst. Idealistic notions of motherhood and the family were implicit in some of these women's decisions to enter into, or remain in, unhealthy relationships. Harriet and Amanda appear unhappy, resentful and even angry towards their partners. Whilst we may applaud women's continued efforts to 'make it work', the idea that anyone should sacrifice their feelings (or indeed safety) for the sake of the family is problematic. Seen in this context, young women's desires for a better future through motherhood and 'the' family may be self-defeating, especially when, in some cases, family life did not match up to the expectations and sometimes exacerbated the issues the women were already dealing with.

Whilst 'good' mothering discourses pose a challenge to all mothers, those parenting outside of cultural norms (such as young parents) face particular problems, particularly as there is a conflict between what is required of them as 'good' mothers and as 'good' *teenage* mothers. For instance, mothering full-time may conform to the norms for some older mothers of small children, but it puts young mothers at odds with what is expected of them, namely, to engage in education, employment or training. Some of the women were able to negotiate space to mother and could resist policy priorities around education. It seems they were not similarly able to resist dominant discourses around a mother's role, however. Both Hays (1996) and Christopher (2012) found that older mothers justified entering employment with reference to the ways in which it benefitted their children. This was also found to be the case here. However, Christopher found that the majority of her sample were able to reject core tenets of intensive motherhood and justified their employment on the basis of their own needs. This finding was not mirrored here. Instead, the majority of this sample set aside their own desires for education and instead presented them as benefitting the children. The positioning of teenage mothers as being outside of the normative framework of motherhood means they have little power to resist 'good' mothering ideals. It is more challenging to assemble an alternative story if doing so marks you out as being non-compliant or to resist mothering requirements when these could cost you custody of your children.

Concluding thoughts: Re-contextualizing 'the' teenage mother

Examining personal decisions to consider the context of young mothers' choices challenges commonly held stereotypes of teenage motherhood. For example, although some of the women did end up as single parents (even if temporarily), it is clear that this is far from the desired or anticipated position. The discussions here indicate that normative ideals around relationships and the family persist. The above discussions of fatherhood

demonstrate the value the women place on the nuclear family. Even when the women did decide to 'go it alone', single parenthood was neither desirable nor a 'choice'. Whilst the absence of a supportive father may not be ideal, it may be a question of: 'what else can you do?' particularly when the relationship is violent. Neither do these accounts indicate that fathers are not considered important; when relationships flounder (or fail) there is a continuing commitment to family. For example, amongst those who were single mothers, considerable effort was made to continue to involve the father in their children's lives. Furthermore, although re-partnering and stepfamilies are often used as evidence that 'the' family is in decline, Kasey's account indicates that fathering and family may actually inform a desire to re-partner. Biology may guarantee a father but not a 'good' father and, for Kasey, this is what matters. Such an understanding supports the assertion that an ethic of care 'transcend[s] blood and marriage ties' (Williams 2004: 17).

Challenges to commonly held stereotypes were also evident in relation to the women's decisions around education. Here, it was the women's conceptions of where they should be (at home with their children) rather than an inclination towards benefit dependency which prohibited their engagement with education. When the women felt their children were ready to be left, education and employment became a consideration again. This chimes with the priorities and timings of many older mothers (Gauthier et al. 2015) and is a far cry from the presentation of young mothers as feckless, irresponsible and motivated by welfare benefits. Further, it demonstrates that young mothers, no less than older mothers, are influenced by contemporary constructions of 'good' mothering.

The influence of discourses around motherhood poses a challenge to neoliberal conceptions around free choice. The continuing influence of structures of gender and traditional notions of parenting roles raises questions around empowerment and agency. As I have argued elsewhere (Ellis-Sloan 2014), we need to attend to the women's presentation of self by considering the language they use in discussing their decisions. In terms of 'becoming' a young mother, claiming a positive decision to mother is often difficult for young parents. We can see here how neoliberal tenets are imbued in the women's presentation of self, for example, in discussions of

responsibility around education and mothering. For some, this remained at the level of language, for example, where the women framed education around the needs of the children rather than the women. Nonetheless, as Christopher (2012: 91) argues, 'our accounts of our behaviours reflect not only what we do but also what we think we *should* be doing' (emphasis in original). Such language therefore alerts us to the influences of intensive motherhood and neoliberalism. Importantly, for some young women, notions of personal responsibility (and the ways in which they intersect with intensive motherhood) went beyond presentation and affected what choices were available.

Dominant constructions of teenage parenthood continue to present young mothers as irresponsible and their lives as beset by bad decisions. Yet multiple spheres of influence, including key workers, politicians, celebrity culture as well as the media are implicit in the construction of mothering norms and expectations, which then come to bear on young mothers. Attending to the voices of young mothers themselves enables a contextualization of their lives and decisions to emerge. It means moving beyond a simple 'snapshot' of the moment of pregnancy or early motherhood and taking into account personal histories and dominant discourses in order to gain a deeper understanding. Throughout these narratives, shared understandings of family and discourses of 'good' motherhood (both of which lead to a child-first imperative) are identified as shaping decisions and choices. Yet this chapter fails in one regard in terms of re-assembling the image of 'the' teenage mother. Joyful decisions and happy outcomes do not feature highly in the accounts here. This does not mean they did not occur. One young mother married her partner and went on to have another baby; another celebrated her partner's completion of his paramedic training. Naomi and Nicole both met new partners who willingly and lovingly took on the role of stepfather, and other young women completed courses, made new friends and enjoyed the everyday minutiae of parenting life. However, these were not decisions and moments that were agonized over and neither did the women feel these required explaining or justifying to me or other members of authority. Consequently, these areas were quietly glossed over by the women and, I realize in retrospect, by me too. There is then a danger in highlighting the navigations of young mothers that we

compound the assumption that teenage pregnancy leads only to misery and challenge. In picking apart these potentially stigmatizing ‘choices’ we must take care that our focus does not also shift from equally important moments of triumph or even the mundane.

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PAM ALLDRED AND NICK J. FOX

10 Teenagers, Sexualities-Education Assemblages and Sexual Citizenship: A New Materialist Analysis

ABSTRACT

In this chapter Alldred and Fox explore teenage pregnancy, sexualities education and sexual citizenship using a new materialist toolkit of assemblages, affects and micropolitics. They use data from two studies to study the impact of different sexualities-education assemblages (constituted around teachers, school nurses and youth workers) upon the sexual and non-sexual capacities produced in young people. These capacities – for instance, a capacity to assert rights to express specific sexual desires or a capacity to manage fertility proactively – contribute inter alia to young people’s (sexual) ‘citizen-ing’. Alldred and Fox conclude by assessing the wider implications of these assemblages for sexual citizenship – in the context of the continuing emphasis upon educational approaches to address issues of non-normative sexualities including teenage pregnancy and parenting, and the opportunities for an alternative nomadic citizenship of becoming and lines of flight.

Introduction

The moral panic over teenage pregnancy that informed UK policy since the end of the last millennium (Alldred & David 2010) has subsided. In 1999 UK Prime Minister Tony Blair declared that:

Teenage mothers are less likely to finish their education, less likely to find a good job, and more likely to end up both as single parents and bringing up their children in poverty. The children themselves run a much greater risk of poor health, and have a much higher chance of becoming teenage mothers themselves. Our failure to tackle this problem has cost the teenagers, their children and the country dear. [...] As a country, we can’t afford to continue to ignore this shameful record. (Social Exclusion Unit 1999: 4)

Blair thus prefaced the report of the Social Exclusion Unit (SEU) to Parliament that established the UK government's Teenage Pregnancy Strategy – a strategy that drove policy for the following decade. The SEU report asserted three causes for the UK's high teenage pregnancy rates (the highest in Western Europe): low expectations by teenagers concerning their life prospects, ignorance about sex and relationships and mixed societal messages around sex and contraception (*ibid.* 7). The solutions, set out in its action plan, focused upon better sex education in and out of school, improved access to contraception and sexual health advice, and targeting high risk groups and young men. This strategic plan had as its underpinning an aim to reduce 'social exclusion' by encouraging teenage parents to return to education and providing assistance for child care (*ibid.* 8–9).

Almost two decades later, this Strategy appears to have had a remarkable impact upon the incidence of teenage pregnancy. By 2008, the under-eighteen conception rate had fallen by 13 per cent to a twenty-year low, with births down 25 per cent (Department of Health 2008: 4). Ten thousand teachers and nurses were trained to deliver Personal, Social and Health Education (PSHE) in schools, school and college-based contraceptive and sexual health services increased radically, and measures were in place to assist young mothers to attend college with help for childcare costs (Teenage Pregnancy Independent Advisory Group 2010). Latest official figures show a continued fall, with teenage conceptions of 21 per 1,000 women aged fifteen to seventeen, its lowest levels since records began in 1969 (Office for National Statistics 2017) and massively down from the rate of 46.6 per 1,000 in 1998.

Whether this dramatic decline in teenage pregnancy is down to the Strategy's educational focus is, however, in doubt. Funding for the Strategy was cut off in 2010 with the election of the Tory/Liberal Democrat coalition government (Skinner and Marino 2016: 539). Recent analysis by the Cochrane Collaboration indicates no measurable effect of school-based sexual and reproductive health educational interventions in reducing teenage conceptions, though there is some evidence that incentivizing school attendance may have an effect (Mason-Jones, Sinclair, Mathews, Kagee, Hillman & Lombard 2016: 2).

In this chapter we want to step away from cause and effect models of education and teenage pregnancy. Instead, we examine how the UK's

Teenage Pregnancy Strategy's framing of teenage pregnancy and motherhood in terms of education and exclusion bears upon issues of citizenship and sexual citizenship. The provenance of the Strategy within the Labour government's Social Exclusion Unit is deeply significant, as non-normative parenting has long been blamed for social breakdown and exclusion, as well as societal ills from drug abuse to poor educational achievement (Armstrong 1995; Weeks, Heaphy & Donovan 2001: 157). By implication, pregnant and parenting teenagers are either excluded – or exclude themselves – from the rights and responsibilities of citizenship. The Strategy aims to draw such excluded individuals back into economic productivity and self-sufficiency, and defines this as social participation and inclusion (Allred and David 2010: 26; Kidger 2004; cf. Tapia 2005 for a US perspective).

Allred and David (2010) argued that the Labour government's educational focus reflected the increasing individualism and conditionality of the UK welfare contract, and an increasing desire to mould citizens rather than tackle the conditions of their lives. Rather than understanding young parents' needs through a social welfare model, focusing on the relative poverty of young people, and young parents specifically, intervention was focused on change at the individual level – as prevention of teen pregnancy and 'support' for teenage parents. Reducing teenage pregnancy is part of the strategy for combatting social exclusion. Social inclusion rather than equality is the aim, and is defined by participation in paid work (or training or education towards this). Education becomes an important tool for trying to change individual behaviour. This is floridly revealed in the Teenage Pregnancy Strategy, in which sexualities education became a key tool.¹ This emphasis on educational approaches to sexual citizenship continues,

1 At the time of the Strategy, school-based Sex and Relationship Education (SRE) curricula were structured around three themes: attitudes and values, personal and social skills, and knowledge and understanding. This structure foregrounded and legitimated particular values, allowed contentious statements to be presented as fact, and articulated certain individual qualities as skills to be developed. Thus, for example, in the 'Knowledge and Understanding' theme, the final two topics were 'learning the reasons for delaying sexual activity' and 'the benefits to be gained from such delay, and the avoidance of unplanned pregnancy' (DfEE 2000: 5).

with a new framework for 'Relationships and Sexuality Education' in UK primary and secondary schools being legislated as we write.

Citizenship has been conceptualized as the foundation for 'modern claims to liberty, equality, rights, autonomy, self-determination, individualism, and human agency' (Nyers 2004: 203), though it has been criticized conceptually as 'the worn out offspring of liberal humanism' (Shildrick 2013: 153). 'Sexual citizenship' has assessed societal recognition of sexual diversity (Weeks 1998: 35), participation in markets and public life (Evans 2013: 8) and access to rights of sexual expression and identity (Monro 2005: 155–62; Richardson 2017: 211).² It has been applied conceptually to study 'the balance of entitlement, recognition, acceptance and responsibility' (Weeks et al. 2001: 196) of different sexualities in a variety of settings (Ammaturo 2015; Mackie 2017); of co-habitation and parenting (Plummer 2001: 238); but also as a rallying cry for sexual activism and resistance (Weeks et al. 2001: 197–8). In all these aspects, citizenship has a central bearing upon teenage pregnancy and parents.

Our approach to exploring sexual citizenship as *materially assembled* is novel. We shall use data from two studies of school-based sexualities education conducted by Pam to explore the production and reproduction of sexual citizenship and sexual citizens. We apply a new materialist, micropolitical ontology and methodology to explore the impact of different models of sexualities education (constituted around teachers, school nurses and youth workers) upon the sexual and non-sexual capacities produced in young people. These capacities – for instance, a capacity to assert their rights to express specific sexual desires or a capacity to manage their fertility proactively – may contribute inter alia to their (sexual) 'citizen-ing'. This relational perspective offers opportunities to step beyond notions of belonging and exclusion/transgression (Ryan-Flood 2009: 2; Taylor 2011: 588), and a binary opposition between 'citizens' (so defined by their inherent, acquired or ascribed rights or social identities) and those excluded from this attribution (Sabsay 2012: 610).

A relational framework would instead explore sexual citizenship as emerging from the material network or assemblage of bodies, things (such

2 Plummer (2001) prefers the term 'intimate citizenship', and this terminology perhaps encompasses the issues of reproduction and parenting more obviously than 'sexual citizenship'.

as money, property), collectivities (communities, nation-states), norms and values, legal and policy frameworks, and ideas (nationality, belonging, democracy). It would concern itself with the micropolitical flows between these assembled elements (Koster 2015: 225): a bottom-up exploration of the continued and 'rhizomic' production and reproduction of 'the sexual citizen'. Concerns with *which* sexual identities are incorporated within sexual citizenship and which are excluded shifts to an investigation of how the micropolitical processes at the interface between sexualities and the social world produce 'citizenship effects' of inclusion and exclusion, security and insecurity, legitimation and transgression. It opens the door, theoretically and practically, to a 'nomad citizenship' that can 'serve and foster the enrichment of life internally or locally, rather than thrive on and foster external threats' (Holland 2006: 202, see also Shildrick 2013). This replaces concern with belonging with an open-ended becoming (Braidotti 2013: 169), lines of flight rather than boundaries and closure (Alldred and Fox 2015b; Friehe and Smith 2016).

The structure of the chapter is as follows. First we set out the new materialist framework for our analysis of sexual citizenship, with specific reference to sexualities and sexualities education. We then look at empirical data from the two studies of sexualities education, and analyse these in terms of the *sexualities-education assemblages* that they reflect. We conclude by assessing the implications of these assemblages for sexual citizenship, in the context of the continuing emphasis upon educational approaches to address issues of non-normative sexualities such as teenage pregnancy and parenting, and the opportunities to constitute instead a nomadic citizenship of becoming and lines of flight.

A new materialist perspective

The new materialism that has emerged in the humanities and social sciences since the millennium shifts focus away from post-structuralist concerns with textuality and social *construction* (Coole & Frost 2010: 7; Taylor & Iverson 2013: 666), to assert a central role for matter within processes of social *production* (Barad 2003; DeLanda 2006). Drawing on a very wide

range of disparate philosophical, feminist and social theory perspectives (Coole & Frost 2010: 5; Lemke 2014), these new materialisms recognize materiality as plural and complex, uneven and contingent, relational and emergent (Coole & Frost 2010: 29).

Importantly, however, the new materialisms do not recapitulate historical materialism, and the material factors implicated in producing the world and human history extend far beyond the structural forces regarded as the drivers of social change in the classical Marxist materialism (Edwards 2010: 288). The world and history are produced by a range of material forces that extend from the physical and the biological to the psychological, social and cultural (Barad 1996: 181; Braidotti 2013: 3). In this schema, elements as disparate as a mountain, the wind, a tiger, a human, a thought, desire or feeling, a 'discourse' or an ideology may all be regarded as constituent parts of a relational material universe that interacts, assembles and disassembles continually to produce the flow of events that comprise the world, history and lives – including human sexualities. The new materialisms thus cut across distinctions between mind/body (Braidotti 2011: 311); appearance/essence (Widder 2012: 23), and thus also between 'reality' and 'social construction'.

Given the interests of readers of this collection, we shall set out the principal features of a new materialist approach (henceforth, for conciseness, we refer simply to 'materialism') in relation to sexualities. Our efforts to develop a materialist approach to empirical social study of sexuality and sexualities education have used the powerful toolbox of concepts deriving from Gilles Deleuze's (1988) reading of Spinoza, as developed and applied in the work of Deleuze and Guattari (1984, 1988), by social and feminist scholars such as Braidotti (2006), DeLanda (2006), Grosz (1994) and Thrift (2004), and by social researchers such as Fox and Alldred (2013, 2014), Renold and Ringrose (2011) and Youdell and Armstrong (2011). We have drawn also on insights from Braidotti's (2011, 2013) development of a posthuman philosophy and ethics of engagement that steps beyond the dualisms of nature/culture, man/woman, human/non-human to open up all kinds of possibilities for 'becoming-other' (ibid. 190), including possibilities for sexualities.

Sexuality has been regarded by biological and medical scientists and by many social scientists as quintessentially an attribute of an organism, be it plant, animal or human. This perspective defines an essentialist and

anthropocentric model of sexualities, an outcome of which has been to define quite narrowly what counts as sexuality and sexual identity, for instance, in a simplistic classification of sexualities in terms of gendered objects of desire (Lambevski 2004: 306). Consequently, practitioners of non-normative (heterosexual, monogamous) sexualities have been labelled as bad, mad or ill, and punished/analysed/treated according to essentialist perspectives by the law, medicine, psychotherapy and other social agents (Alldred & Fox 2015a).

Against this anthropocentric backcloth, materialist authors have offered an alternative conceptualization of sexuality (Beckman 2011; Braidotti 2006; Holmes, O'Beirne & Murray 2010; Lambevski 2004; Probyn 1995; Renold & Ringrose 2011; Ringrose 2011). Braidotti (2011: 148) describes sexuality as a 'complex, multi-layered force that produces encounters, resonances and relations of all sorts', while Deleuze and Guattari (1984: 293) state quite bluntly that 'sexuality is everywhere': in a wide range of interactions between bodies and what affects them physically, cognitively or emotionally, from dancing or shopping to state violence or authority. Inspired by these arguments, we have used the materialist perspective that underpinned them to develop an approach (and ontology) that situates sexuality not as an attribute of a body (albeit one that is consistently trammelled by social forces) but within a new materialist understanding of a 'sexuality-assemblage' (Alldred & Fox 2015b; Fox & Alldred 2013). This assemblage comprises not just human bodies but the whole range of physical, biological, social and cultural, economic, political or abstract forces with which they interact; as such, sexuality-assemblages bridge 'micro' and 'macro', private and public, intimacy and polity.

In this view it is not an individual body but the sexuality-assemblage that is productive of all phenomena associated with the physical and social manifestations of sex and sexuality, including the norms and values that produce culturally specific versions of 'sexual citizenship'. Sexuality is 'an impersonal affective flow within assemblages of bodies, things, ideas and social institutions, which produces sexual (and other) capacities in bodies' (Fox & Alldred 2013: 769) – capacities to do, feel and desire. We will now swiftly consider the conceptual framework required to establish this materialist perspective on the sexuality-assemblage, with specific reference to teen pregnancy and parenting.

First, the sexuality-assemblage asserts the fundamental *relationality* of all matter: bodies, things and social formations gain their apparent 'is-ness' only when in relation. Rather than taking the body or thing or the social organization as a pre-existing unit of analysis, we look instead at the fluctuating assemblages that coalesce to produce both events and the apparent reality of the relations that they comprise. For example, an event such as a teenage conception assembles not just the two parenting bodies but also relations that may include sexualized media, alcohol, social spaces, sexualities-educators and classes, contraceptive devices and techniques, mobile phones, family and friends, health professionals and so forth (Fox & Bale 2017). As noted in the introduction, bodies and things do not possess fixed attributes (relations of interiority), but instead gain capacities as they assemble with other materialities (relations of exteriority).

Second, a sexuality-assemblage must be analysed not in terms of human or other agency, but by considering the assembled relations' ability to *affect* or *be affected* (Deleuze 1988: 101). Within a sexuality-assemblage, human and non-human relations affect (and are affected by) each other to produce material effects, including sexual capacities and desires, sexual identities and the many 'discourses' on sexualities, reproduction, teenage pregnancy and so on; these affects are qualitatively equivalent regardless of whether a relation is human or non-human. Importantly for the study of sexuality, desire is itself an affect (rather than some essential quality of a body, no matter how culturally shaped), to the extent that it produces specific capacities to act or feel in a body or bodies, be it arousal, attraction, sexual activity, rejection or whatever. An assemblage's 'affect economy' (Clough 2004: 15) can be understood as the forces shifting bodies and other relations 'from one mode to another, in terms of attention, arousal, interest, receptivity, stimulation, attentiveness, action, reaction, and inaction'.

The affective micropolitics of sexualities

This emphasis on affect economies and the changes they produce in relations and assemblages provides a dynamic focus for the micropolitical study of sexuality assemblages, including teenage pregnancy and parenting. We

may ask what a body can do within its relational assemblage, what it cannot do, and what it can become. What sexual capacities might be produced in bodies by a particular assemblage of things, ideas, norms, policies and other bodies? Assemblage micropolitics, we suggest (Fox & Allred 2017: 32) can be explored in terms of two affective processes – ‘specification’ and ‘aggregation’ – which we now summarize briefly.³

Specification may be understood as an affective process within a (sexuality) assemblage that produces specific capacities in a body or thing; other affects may *generalize* capacities, opening up new possibilities and limits for what a body can do. Sexual arousal, attraction, preferences and conduct can be understood as particular specifications produced by affects and desires within a sexuality-assemblage. So a kiss may specify a body into sexual arousal. Yet that same kiss – say from a new lover – might propel a body into new possibilities such as polyamory or a new life begun elsewhere, what Deleuze and Guattari (1988: 277) called ‘a line of flight’. Similarly, a pregnancy will undoubtedly specify the biological, social and cultural capacities of a teenager or for that matter any mother, though these capacities may both close down and open up possibilities for action and interaction.

Aggregation, meanwhile, reflects those affects in assemblages that act similarly on multiple bodies, organizing or categorizing them to create converging identities or capacities. In the field of sexuality, ideas and concepts such as love, monogamy, chastity or sexual liberation, prejudices and biases, and conceptual categories such as ‘women’, ‘heterosexual’, or ‘perverted’ all aggregate bodies, as do the categories of ‘mother’ and ‘teenage mother’. By contrast, other affects (for instance, a gift from a lover, or a smile from a newborn child) produce a *singular* outcome or capacity in just one body, with no significance beyond itself, and without aggregating consequences. Singular affects may be micropolitical drivers of generalization, enabling bodies to resist aggregating or constraining forces, and opening up new capacities to act, feel or desire.

Exploring the micropolitics of sexuality, sexualities education and sexual citizenship in terms of affective movements in assemblages radically

3 These terms are founded upon DeleuzoGuattarian concepts of ‘territorialization/deterritorialization’ (Deleuze & Guattari 1988: 88–9) and ‘molar/molecular’ (Deleuze & Guattari 1984: 286–8) respectively.

shifts the focus of attention. From a materialist perspective, sexuality needs to be seen not as an attribute of an individual human body, but as an impersonal web of intensities and flows of matter, powers and desires within and between bodies, things, ideas and social institutions, producing sexual (and other) capacities in these different materialities. How sexuality manifests has little to do with personal preferences or dispositions, and everything to do with how bodies, things, ideas and social institutions assemble. Specifying forces produce body compartments, identities and subjectivities, 'masculinity' and 'femininity', and shape sexual desires, attractions, preferences and proclivities according to the particular mix of relations and affects in an assemblage. Sexual codes are culture-specific aggregating affects that establish the limits of what individual bodies can do, feel and desire in specific sociocultural settings, and shape the eroticism, sexual codes, customs and conduct of a society's members, as well as the categories of sexual identity such as 'hetero', 'homo', polyamorous, queer and so forth (Linstead & Pullen 2006: 1299).

These specifications and aggregations mean that while sexuality is a generalizing, multiplying, branching flow of affect between and around bodies and other relations that has the potential to produce any and all capacities in bodies, and indeed 'subversive and unforeseeable expressions of sexuality' (Beckman 2011: 11); the flow of affect in the sexuality-assemblage is continuously subject to restrictions and blockages (Deleuze and Guattari 1984: 293). Thus specified, sexuality loses its potential, channelling desire into a relatively narrow range of sexual capacities linked to conventional desires. This, sadly, is typical within a contemporary society trammelled by codes, norms and expectations into sexual specification and aggregation,⁴ though always still with the possibility of subsequent generalization or line of flight. This tension inheres within the processes described by feminists and queer theorists concerning sexual and intimate citizenship which we summarized earlier.

4 Arguably teenage pregnancy and parenting also transgress cultural codes, norms and expectations concerning children and sexuality, as well as moral attitudes that link sex and parenting to adulthood and 'stable relationships' (Allred & David 2007: 2-4; Bay-Cheng 2012: 64-6; Luker 1996: 10).

Three approaches to sexualities education

We turn now to the substantive concern of this chapter, to address how sexualities education among young people (including its practices, framings and messages concerning teenage pregnancy and parenting) contributes to the social production of sexual citizenship. The data that we subject to materialist analysis is taken from two studies conducted by Pam. The first was the two-year 'Sex and Relationship Education Policy Action Research' (SREPAR) study, funded by the UK Department of Education and Employment as part of its strategy to use Sex and Relationship Education (SRE) to reduce teenage pregnancy (Allred & David 2007). Interviews were conducted with seventeen teachers with responsibility for SRE and fifteen school nurses serving seventeen secondary schools and their feeder primary schools. The second study was the 'Sites of Good Practice' study conducted in 2009, during which Pam interviewed twelve youth workers engaged in sexual health work with young people. Data from these studies have been reported elsewhere (Allred & David 2007; Allred 2017).

In this section we summarize findings from these two studies in terms of the differing material assemblages associated with the practices of teachers, school nurses and youth workers. For each group, we paint a brief picture of their material practices, before moving to analyse the differing sexualities-education assemblages that they reveal. We use this analysis to identify the capacities for sexual citizenship that each produces in the bodies of young people, and consequently for teenage pregnancy and teenage parents. Our method of analysis differs markedly from a traditional qualitative approach. Applying the new materialist conceptual framework described earlier, the first step is to identify by close reading of the data the range of relations that assemble around events such as a sexualities education class. Close reading of the data can also supply understanding of the affective movements that draw these particular relations into assemblage (for example, a teaching affect that transmits factual information to school students). These movements (including the specifications and aggregations described in the previous section) constitute the affect economies that surround bodies in sexualities-education assemblages. They produce particular

micropolitical effects in young people, so from this analysis we can gain insight into the consequences of different assemblages for the capacities produced in young people – what these bodies can do (for instance, producing a normative moral sensibility about sexual actions). For a fuller account of this methodology, see Fox and Alldred (2015).

At the time of the SREPAR study, government guidance to UK state schools (DfEE 2000) located SRE within a ‘values framework’, to help school students deal with ‘difficult moral and social questions’, to ‘support young people through their physical, emotional and moral development’ and teach the ‘importance of values and individual conscience and moral considerations’. For the teachers interviewed, SRE took place within the context of the wider educational environment of the school, and a national educational context of a defined curriculum of academic subjects. The latter underpinned an ‘achievement agenda’ that aimed to improve educational aspirations and engagement as a means to reduce social exclusion. This context, the study found, had severe knock-on effects upon the delivery of SRE. As a non-examined subject – and one that (like PE and manual crafts) addressed bodies rather than minds – it was of low status, and had to compete with academic subjects for timetable space. This was most marked in schools with high levels of academic achievement.

Low status meant less staff training and material resources for SRE, which impacted on staff confidence. Many teachers interviewed during the study saw SRE as a dubious response to societal moral panic about sexualization and teenage pregnancy, and were uncomfortable about being drawn into a moral agenda. They regarded discussions of sexuality with children and young people as a parental responsibility, and only reluctantly accepted their own contribution to SRE. Even those who supported the SRE agenda resented having to take time to prepare a class in which the materials were potentially controversial, particularly as parents have the right under the UK law to withdraw school students from SRE classes. Some (particularly older and male teachers) considered that teaching about intimate and personal matters around sexualities could impact negatively upon their day-to-day relationships with school students and parents. According to one teacher, ‘You’re a form teacher and you don’t just want to go in and suddenly talk about sex.’ Many teachers in the study resisted involvement

in SRE, which for many was an unwelcome add-on to their subject specialism, and one where they considered they lacked educational expertise, adding to their anxieties about teaching SRE classes. One said:

(Teachers) feel underprepared for it. Being under-prepared for it is horrible: I think the biggest fear as a teacher in a situation like that is being asked a question that you just don't know how to answer.

These data enable us to locate teachers' engagement with SRE within a sexualities-education assemblage comprising at least the following relations (in no particular order).

Teacher – school students – parents – information – minds – bodies – curriculum – workload – colleagues – 'achievement agenda' – classroom – tabloid newspapers – public outrage –resources – models of education and development – teachers' attitudes and sexualities

These relations assemble as a consequence of a powerful 'educational' affect, by which information/knowledge/values are passed from SRE curriculum to teacher to school student. However, there is a broader affect economy at work here, constituted from the contexts noted above concerning schools' and UK government's orientation toward educational achievement, the limited staff, resources and time allocated to SRE as a non-academic subject, societal moral attitudes towards sex and sexualities, and perceived negative consequences of teenage pregnancy/parenting. These latter affects all tended to constrain the capacities of teachers to deliver effective SRE in schools, and hence the policy for SRE, sexual health and pregnancy reduction. For the students, the affect economy of this assemblage marks out both a *specification* (in terms of a particular teacher-led perspective on sex and sexualities) and an *aggregation* (locating sexuality within a top-down moral framework) of their capacities. This has an impact for their sexual citizenship, which we discuss (along with the other assemblages) in the following section.

Turning to the school nurses, the SREPAR study found that this group regarded themselves as sexual health experts, with a major part to play in the campaign to reduce teenage pregnancy rates. They considered that their role was supplying up-to-date, accessible medical information that

empowered school students to make informed decisions, without moral judgement. As one nurse commented:

What I'm interested in is: at the point they got pregnant, had they got all the information that they needed? Could they have prevented it had they wanted to? Whatever choice they make, as long as it's an informed choice and they make it because it's what they want to make, I've no problem with it.

Most nurses in the study had responsibility for a secondary school and four primary schools, typically teaching classes for school students between eleven and fourteen years, and offering drop-in sessions for individual consultations. Unlike teachers, they felt confident about their skills, communication and use of teaching aids, and reported positive school student responses to a 'no-nonsense' teaching style (for instance, a competitive 'condom test' to engage boys in learning about safe sex). However, nurses were rarely involved in curriculum design, and were often underused. One nurse described being 'allowed' to sit in a 'cupboard' to run her drop-in, while another said school students 'had to brave a corridor of power' to knock on her door.

The sexualities-education assemblage in which school nurses are relations may be summarized as:

School nurse – school students – diseases – bodies – other health professionals
– biomedical model of sexual health – medical information – teenage pregnancy
reduction agenda – STIs – condoms – teaching staff – school spaces – school rules

These relations assemble as a result of a 'health promotion' affect that educates young people's minds and bodies into safe, healthy practices. Nurses generally embraced the UK Teenage Pregnancy Strategy as a framework within which to teach about safe sex. However, the study reveals a second powerful affective movement in this assemblage. Whether nurses conducted whole class sessions or individual consultations, they described young people as their clients, and their provision as young person- rather than school-centred. This client focus ascribed agency and decision-making capabilities to young people possessing legitimate needs for health and sexual health information. Granting young people both sexual and moral

agency recognized their potential to be moral and sexual decision makers, and to see the role of sex education as enabling them to make informed life choices. This contrasted with teachers' accounts, in which school students were passive in the face of external pressures to be sexual, and devoid of agency or sexual desire themselves.

Once again, the affects in this assemblage *specify* school students' capacities, by placing sex and sexualities within a health register, and an *aggregation* to practice sex rationally, safely and healthily, according to health promotion principles. However, the professional/client relationship is a *singular* non-aggregating affect that acknowledges them as sexual decision makers in their own right. The significance for sexual citizenship will be discussed in the concluding section.

The youth workers in the Sites of Good Practice study provided sexual health and relationships work in youth groups and schools, and one-to-one work with young people. Both practices were framed as supporting young people's well-being, and reflected the general youth work principle of 'giving people the choice and the chance to make informed choices'. Youth workers increasingly are being invited into schools to contribute to SRE, their expertise in engaging with young people on a range of topics recognized. In the study, youth workers provided sex-positive accounts, addressing the positive contributions sex might make to relationships or well-being, alongside the risks to health or self-esteem. One youth worker describes his aim as being '[...] to get young people talking about sex and relationships [...] to get young men to take responsibility towards young women they see in relation to relationships, consent and sexual health.' Another explained his role as:

raising young people's awareness of the range of decisions and choices open to them around sex and offering opportunities for discussion and debate on the implications of particular choices; offering learning opportunities for young people to develop their capacities and confidence in making decisions [...] respecting young people's choices and views, unless the welfare or legitimate interests of themselves or other people are seriously threatened.

The relations in this sexualities-education assemblage may be represented as follows:

Youth worker – young people – youth work principles (voluntarism, participation, equality, social justice) – information – services and resources – autonomy and agency – learning opportunities – responsibility – sexual subjects – schools and teachers

Unlike the assemblages around teachers and nurses' SRE work, here the principal affect is not around information transmission, but instead seeks to support and resource young people to make active decisions about sex and sexualities. Youth workers in the study engaged with young people as sexual subjects who were potentially sexually active, with desires, fantasies and experiences. Sexuality was a subject for discussion, not to minimize risks such as STIs or pregnancy, but as a means to enhance positive experiences and relationships, in both present and future selves.

Consequently, the affect economy in these youth work assemblages was both *generalizing* and *singular* (non-aggregating) and produced a different and potentially wider range of capacities in young people than those discussed previously, including sexual autonomy, sexual responsibility and a respect for sexual diversity. Young people become materially affective within these sexuality assemblages, opening up possibilities for their current and future sexual expression. We now turn to consider the implications for sexual citizenship of this assemblage, along with the two others discussed earlier.

Discussion: Assembling sexual citizenship

Sexual citizenship has conventionally been located as a concept that bridges public and private domains (Evans 2013: 64; Plummer 2001: 238; Richardson 2017: 212; Weeks et al. 2001: 197; Weeks 1998: 36), linking the world of experience, embodiment and identity with the social, economic and political forces of markets, the law and governance. The new materialist approach we have developed in this chapter approaches this intersection *micropolitically*, addressing the relationality that produces capacities in bodies, things, institutions, cultures and abstract notions. Specifically, we have examined the material micropolitics of sexualities education, drawing

out the different assemblages and affect economies that emerge in three differing professional approaches to sex and relationship education, and the capacities that these produce in bodies. We wish now to address how the micropolitics of these assemblages and capacities contribute to sexual 'citizen-ing', to the emergence of young people with material capacities that mediate their engagement with the social world, and hence to issues around teenage pregnancy and parenting.

We have shown how the different material settings of sexualities education (including the inputs of different professionals) can have profound impacts on the sexual capacities produced in school students. As has been noted, each of the three assemblages analysed produced capacities in young people in relation to sex and sexualities. The first assemblage that we explored – the 'teaching assemblage' – revealed an uncomfortable encounter between a profession tasked with educating young minds and a top-down agenda to control their fertility, delivered by often unwilling and anxious staff within strict time constraints. The capacities of students that emerged from this conflicted affect economy were specified and aggregated into a particular social and moral context for sexual behaviour and reproduction.

The 'health-assemblage' that we analysed next reflected a very different professional focus upon sexual health, in this case delivered by enthusiastic professionals who saw an opportunity to use their expertise to engage students-as-clients to promote safe sex and the government teenage pregnancy reduction strategy. Once again, capacities were specified and aggregated: into a biomedical understanding of sex and reproduction, and the knowledge and skills for healthy, safe and – if possible – non-procreative sex. However, the professional/client model adopted by nurses was singular and non-aggregating, opening up potential for a move away from the biomedical model and toward individual decision-making. Finally the 'youth work-assemblage' was shaped by a professional ethos based upon a commitment to young people as partners in learning and decision-making, and to helping young people develop their own values (National Youth Agency 2004). Young people were treated as autonomous and potentially sexually active, and this affect was generalizing and singular, encouraging capacities of sexual autonomy, responsibility and sexual diversity, and hence a

potential 'line of flight' from the kinds of specification that the other SRE assemblages produced.

These three material assemblages thus have profoundly different effects on students' capacities, including procreation and parenting. Some capacities are constraining, locating sex and sexuality within narrow framings; others are expansive, opening up potential for sexual exploration and becoming. However, it is facile simply to celebrate the latter and condemn the former. After all, knowledge of sexual health, contraception and the moral codes surrounding sexuality in one's culture are valuable capacities that can limit negative consequences such as unwanted pregnancy or a criminal record; neither of which is likely to be an unmitigated line of flight. On the other hand, sex and sexuality have been the subjects of specification and aggregation for millennia and we need to be vigilant to counter those assemblages that unintentionally impose specifications and aggregations upon sexualities.

We would argue that the value of this micropolitical analysis of assemblages is in the innovative insight it offers into sexualities education and sexual citizenship, both broadly and in relation to teenage pregnancy. Earlier we noted that, according to (new) materialist ontology, social production is an emergent outcome of the affective assembling of relations and the capacities these produce – there is no 'other level' of structures or mechanisms at work in this ontology (DeLanda 2013: 51). Consequently, 'sexual citizenship' (and citizenship more generally) needs to be conceptualized as an emergent property of the material flux of affects between humans, things, social collectivities and ideas. This posthuman flux produces capacities in all these elements – in what a (sexual) body can do, feel, think and desire – but also in things such as condoms and contraceptive devices or dating apps; in organizations such as schools and health services; in social institutions such as the law, marriage and the family; and in abstractions and social constructs such as monogamy, nationality and democracy. Sexual citizenship – with all its consequences for pregnant or parenting teenagers – is one of the emergent capacities of this assemblage of diverse materialities.

This supplies the connection between sexualities education and sexual citizenship. By examining the material relations within SRE, we can discern capacities engendered in young people (such as safe sex, responsibility in

sexual relationships or acknowledgement of sexual diversity) that permeate beyond the immediate contexts of a class activity or a group discussion, to produce impacts (often highly normative) upon the capacities of young people as participants in a society and a culture. The sexualities education assemblages we have described – and the knowledge, skills, subjectivities and identities these variously produce – contribute not only to young people's capacities to participate or not participate in sexual encounters, but also to the wider social context within which human sexualities are located (Tapia 2005).⁵ This includes the 'public' face of sexualities that sexual citizenship scholars have examined.

Of course, young people's capacities are not simply an outcome of the assemblages we have analysed here: what a young body (or young 'citizen') can do sexually will be a consequence of all the events, actions and interactions that together constitute a life, from sexual encounters, interactions with peers (Allred & Fox 2015b), engagements with sexualized media and pornography (Fox & Bale 2017), interactions not normally considered sexual (Austin 2016) and so on. There will be myriad specifications, aggregations, generalizations and dis-aggregations of capacities that together produce 'the sexual' and the phenomena that comprise 'sexual citizenship'. This suggests a research agenda to explore the wider micropolitical production of sexual citizenship in events sexual and non-sexual.

However, the value of a micropolitical analysis of sexuality-assemblages extends beyond mere scholarly interest or a conceptual re-thinking of sexual citizenship to suggest practical applications. If we can 'reverse engineer' assemblages such as the educational support and development of young people we looked at in this chapter to understand their micropolitics and the capacities they variously produce, the same ontology may be used to 'forward engineer' or re-design these and other assemblages to foster positive sexual and other capacities in participants. This opens

5 Although the studies we have reported in this chapter have focused on the production and reproduction of embodied human capacities in sexualities education classes, elsewhere we have explored in greater detail the broader affectivity of sexualities education (Allred & Fox 2015b; Allred, Fox & Kulpa 2016) and indeed the post-human production of sexualities more generally (Fox & Allred 2013).

the way pro-actively to design interventions and developmental engagements that move far beyond conventional sexualities education to open up opportunities both for sexual lines of flight and for safe, healthy, diverse and responsible participation in the sexual and sociological world. Such a perspective re-makes notions of sexual citizenship (and citizenship more generally) beyond normative and value-laden constructs.

This perspective cuts across both top-down initiatives to reduce teenage pregnancy and parenting *and* liberal arguments that situate these latter as individual choices or exercises in autonomy or transgression. Sexual citizen-ing is not to be regarded as simply an act of human agency or resistance to force or discourse. Rather it is the more-than-human becoming of sexuality-assemblages that come in all shapes and sizes, and that encompass both normative sexualities and those that conventionally have been excluded from full citizenship, from homosexuality to bisexuality, trans, fetishes and BDSM (Monro 2005: 155–62), as well as pregnant and parenting teens. From such a perspective, citizenship can never be a neat process whereby bodies are either assimilated into a cultural milieu or cast out as transgressive, to plough their own counter-cultural furrow (see also Ryan-Flood 2009: 186; Taylor 2011: 588). It has not escaped our attention that this assessment may be applied beyond the confines of pre-teen and teenage education, to all members of a society or culture.

In conclusion, we have applied in this chapter a materialist approach to analyse the sexualities-education assemblages associated with the UK Teenage Pregnancy Strategy, and have demonstrated how these assemblages articulate with notions of citizenship and sexual citizenship. This form of analysis enables both proactive interventions to support sexualities education and sexual citizenship, but also establishes a broader agenda for research, policy and activism that engages with the public and private dimensions of sexualities and the complex sexualities-assemblages of contemporary societies that produce the social, economic, political and psychological manifestations of human sexualities and reproduction, including teen pregnancy and parenting.

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II What If Becoming a Teenage Parent Saved Your Life?

ABSTRACT

In this chapter, I gather a number of narratives – my own, and those of young parents – to speak to the formation, operation and impact of a Teen Parent Unit in Aotearoa New Zealand. Karanga Mai Young Parents' College evolved from small beginnings, a 'gathering' of young parenting women seeking support in re-engaging with and completing their school qualifications, and educators seeking to offer that support. The chapter traces the unique narratives of Faith, Andy, Kate and Tatiana and the voices of other students: their beginnings, aspirations and achievements and the re/assemblage of their lives and priorities. Woven within these narratives is the progressive assemblage of the College itself in buildings, people, belonging, Memoranda of Agreement, drivers, funding, media, policy and so on. The chapter portrays the centrality in Aotearoa New Zealand of a nurturing, holistic whānau-based culture and practice in creating a context where teenage pregnancy can, indeed, save a life.

Background

A former secondary school teacher and probation officer, and a mother of two children, I worked from 1994 to 2008 with teenage parents and their children in Aotearoa New Zealand. In the 1990s I helped to set up Karanga Mai¹ Young Parents' College, the second of New Zealand's schools for teenage parents; I directed the College until the end of 2008. Subsequently, my doctoral research explored the longer-term influence of the College on the lives of ten former students (Hindin-Miller 2012). That study drew

1 *Karanga Mai* is a Maori greeting in response to being called on to the meeting house.

on participants' narrative accounts and became a wider story of the (re) construction or re-assemblage of the young women's identities as learners, as mothers and as young women. The dominant negative construction of teenage parenthood in New Zealand provided a context for my research, as it did for my work at the College. Political, historical, economic, cultural and racial factors, which privilege white, middle-class, neoliberal norms, inform this negative construction (Daguerre & Nativel 2006). Because teenage parenthood is 'out of time' with normative life trajectories, it is constructed as an unacceptable path to adulthood, a form of social deviance with negative implications of state dependence, 'unfit' parenthood and social exclusion (Bullen, Kenway & Hey 2000). Quantitative health-based research (Dickson, Sporle, Rimene & Paul 2000; Fergusson & Woodward 2000; Woodward, Fergusson & Horwood 2001; Woodward, Friesen, Horwood & Fergusson 2009) has also contributed to this deficit discourse by 'pathologizing' teenage parenthood. Poor outcomes for teenage parents and their children are seen as the consequence of parental youth rather than of socio-economic deprivation. This is contested by more recent research (SmithBattle 2006; Wilson & Huntington 2006). Within this wider context, all but one of the young women whose narratives are shared in this chapter had experienced school exclusion. Most had already left, or been asked to leave school, and had few if any qualifications. Several left school on becoming pregnant or were redirected to the College by school principals or teachers. Teenage parenthood and engagement in education were life-changing turning points for the young women, which supported the re/assembling of more positive identities than those prescribed by the many constraining contexts of their lives. These re/assemblages contest dominant constructions of the negative impacts of teenage pregnancy on young women and their children.

This chapter tells a series of stories: stories of several young women who became mothers in their teens; stories of their decisions to return to school to gain qualifications so that they could provide 'a better life for their children'; the story of Karanga Mai Young Parents' College which they attended; stories of their achievements at and after leaving the College; and the story of the College's role in helping them to re/assemble their lives and achieve their aspirations.

Faith's story²

Faith was the second oldest of thirteen children. In her own words:

My parents had unusual religious beliefs and chose to shield us from any outside influences that might lead us astray from their religious teachings. Therefore, growing up, we never watched television or read newspapers, and we had very minimal contact with the outside world.

My siblings and I never attended kindergarten or school and never went to the doctor. Excursions outside our home were heavily supervised. We did not even attend church. We had no friends or contact with extended family. The full extent of our education was limited to reading, writing, addition and subtraction.

All aspects of my childhood were controlled [...] We were subjected to abuse – so much so, that it led to a significant jail sentence for my father. I escaped home at fifteen, barely knowing how to cross a road properly. Not long after this, my younger siblings were removed by Child, Youth and Family³ and put into the care of a family member whom they had not previously met. At fifteen, I was enrolled in a course to assist young women in gaining life skills. It was about that time that I began renting my own one-bedroom unit and began my first relationship.

A few months later, at just sixteen, I discovered I was pregnant. I remember standing in the bathroom, staring at the pregnancy test. It felt like I was holding two bus tickets and had to decide which way to go. I could adopt out my child or work hard and give the best I possibly could to my baby. I chose the second path even though the fear of continuing my childhood cycle was very real. I knew I had to raise my son in the opposite way to how I was raised [...]

Not surprisingly, my young relationship did not last, and I found myself giving birth to my baby at sixteen, alone, gratefully holding a nurse's hand. After three days in hospital, my new baby Andre and I bussed home to our own little flat. Unable to attend my life skills course, and now with even more of a sense of urgency to improve

- 2 Faith is this young woman's real name. Her story has been taken from her doctoral thesis and is included here with her permission.
- 3 The New Zealand government agency responsible for the care and protection of children and youth.

my education, I enrolled at Te Kura, the Correspondence School.⁴ I sat on the floor of my one-bedroom flat and studied every time little Andre was asleep. This continued until I learned about another school, Karanga Mai, a school for teen parents. (Jeremiah 2016)

Karanga Mai is where I first met Faith. Unused to classroom environments and to spending time with her peers, Faith found it difficult adjusting to life at the College. For several months she could only sit for short periods at a school desk and I would look up to see her wandering outside, alone and lost. Faith recalled, 'At Karanga Mai I learned social skills. I learned how to learn. I even learned how to catch a ball [...] it has taken a lot of hard work, dedication and support for me to catch up socially and academically.'

After more than three years of determined effort and the committed support of her teachers, Faith left the College 'with a heavy heart, but great anticipation for the future'. She had been awarded a scholarship to attend Canterbury University. Faith has since had a second child; she has also completed her Bachelor of Commerce and her Honours degree, studying part-time. A top student in her Honours year, Faith began the final stage of her long-term academic goal – a PhD in business management – which she achieved in 2016. As a busy parent of two children, she had developed the discipline to study for forty hours per week, and had come far from the young mother and learner who had difficulty sitting at a desk all day.

Rather than 'ruining her life', Faith's teenage pregnancy and parenthood can be understood as turning points in her life, leading to her engagement with education and a personal commitment to learning. In her quest to be a good mother, Faith enrolled at Karanga Mai. The support she experienced encouraged her aspirations for a positive future and helped to set her on a pathway of exceptional academic achievement, which may not otherwise have been realized.

Teenage parenthood is a reality for many young women such as Faith; between 3,500 and 4,000 teenage women give birth in New Zealand each year (Social Policy Evaluation and Research Unit 2015). This reality

4 The New Zealand school responsible for providing distance education from early-childhood level to Year 13.

challenges our communities to respond in constructive rather than negative ways. In this neoliberal, post-feminist age which values full-time employment, education qualifications and the autonomy of the individual, young parents are vilified as irresponsible and unfit parents who are a burden on the state. A more constructive response is the life-affirming approach of supporting young parents and their children. Karanga Mai Young Parents' College was an endeavour to provide such support.

A short history of Karanga Mai Young Parents' College

In the mid-1990s I was employed by a Community Trust⁵ as a teen parent support worker for twenty-five young mothers and their children. As a result of extensive community-based research, the Trust had identified teenage parents in their community as a significant and marginalized group which needed support. Funding was provided by the Lotteries Commission, Community Organisations Grants Scheme (COGS), Canterbury Community Trust and multiple other sources. This was reviewed annually and was not reliable in the longer term.

The College itself had modest beginnings. Two of my young clients, who had previously dropped out of school, wanted to study for secondary school qualifications to improve their chances of finding employment. They had received their first School Certificate English booklets⁶ from the Correspondence School, and asked for my help with their assignments. Excited to be teaching again after fifteen years away from the classroom, I organized a weekly study group in my office, and we set to work.

My students' enthusiasm encouraged me to extend the group to include other young parents who were interested in resuming their schooling; the Community Trust which employed me rented a local church hall for our

5 Waimakariri Community Development Trust, now known as Wellbeing North Canterbury Community Trust.

6 The equivalent of the current Level 1 National Qualification, or GCSE in England.

weekly study group. We studied at wooden trestles, the young women's babies and toddlers playing around our feet. The following year, our study group moved into a Community Centre. Plunket⁷ was conveniently located just down the hall. I started collecting the young mothers and their children in a community-owned van; two volunteers helped with the children while we studied.

Early in 1997, the Trust secured funding for three years from the Crime Prevention Unit (CPU).⁸ CPU's brief was to 'address the needs of youth at risk' (Rivers, O'Regan & Lynch 1997); teenage parents and their children were regarded as youth at risk. Viewing education as a way of successfully addressing the needs of teenage parents, CPU selected our study group as one of four 'demonstration projects' across New Zealand to receive funding. With the support of this funding, the year ended with a successful prize-giving ceremony, attended by local dignitaries, the media, family and friends, to celebrate the young women's academic achievements in their Correspondence School courses.

The chairman of the Community Trust was also the local high school counsellor and, as a result of her lobbying, Kaiapoi High School decided to support our educational initiative and signed a memorandum of understanding with the Trust to this effect in 1998. Our formal relationship with the Ministry of Education had commenced, and this secured some meagre funding for our young parents as adult students, enrolled at a secondary school. The Trust was now able to employ a driver, a second support worker and two childcare assistants to help with the study group. Each new development was enthusiastically covered by the supportive editor of the small local newspaper,⁹ and we began to receive offers of help, including volunteer literacy tutoring, and funding assistance from ZONTA and Soroptomist¹⁰ (*North Canterbury News* 1998).

7 A long-standing component of the New Zealand landscape, Plunket is a free health-based support service for new parents and their children.

8 Part of the Department of the Prime Minister who, at that time, was the national government's Honourable Jenny Shipley.

9 The *Kaiapoi Mail*.

10 Professional and business women's service organizations.

The next significant development occurred when, as a result of the Trust's active lobbying, the Waimakariri District Council decided to donate an unused building for our use as a childcare facility. Our study group, which now comprised eighteen young parents and their children, had greatly outgrown the 'shoe-box' facilities of the Community Centre. Kaiapoi High School agreed to locate the Council building on unoccupied land, away from other classrooms at the school's rear entrance (Stewart 1999). I had been reluctant to relocate to the high school because of the young women's negative school experiences, but they were overwhelmingly supportive about the move. There were, however, mixed responses from the wider community. Many were supportive, but some saw the location of an early-childhood centre on high school grounds as an 'incentive' to teenagers to become parents by normalizing teenage parenthood.

CPU funding enabled us to set up our early-childhood centre, which was officially opened with a dawn blessing by our high school's kaumātua¹¹ in 1999. The children moved into their new premises and our study group used the audio-visual theatre at Kaiapoi High School as a classroom on three mornings a week. My teaching work with the young parents was now supported by the voluntary assistance of my mother and the school counsellor/chair of the Community Trust.¹² In 1999 the Council contributed further funds towards the purchase of a much-needed portable classroom, which was attached to the early-childhood centre by a covered veranda. We now had our own study space. During this year a fully qualified early-childhood teacher was employed to oversee the licensing of the centre. This milestone (the first licensed early-childhood centre attached to a teen parent school in New Zealand) was achieved in 2000; other qualified early-childhood teachers were employed and my teaching ranks were swelled by two more part-time teachers. With careful management of funds, we purchased a second-hand van to assist with our ever-increasing transport requirements.

During these years supportive working relationships were built with other small teen parent schools which were springing up around New

11 Māori elder.

12 Ministry of Education funding did not yet extend to the provision of paid teaching assistance.

Zealand. Strenuous negotiations with the Ministry of Education followed and a series of annual school meetings was established. This provided an excellent networking forum for the schools, and a professional association, the Association of Teen Parent Educators of New Zealand (ATPENZ), was formed in 2002. A member of its first executive body, I hosted our inaugural national conference. ATPENZ provided a unified and successful voice for funding negotiations with the Ministry, which finally produced a Circular (2004) with policy and funding guidelines to regularize our diverse teen parent initiatives, now referred to as Teen Parent Units.

Karanga Mai's next success came with the intervention of our local Member of Parliament, who succeeded in securing Ministry funding for a new, well-resourced classroom block. This would not only accommodate our growing student numbers but also our staff, which now included two part-time support workers, six part-time teachers – selected for their diverse subject strengths – two drivers and an administrative assistant (in addition to our seven early-childhood teachers). At the start of 2005 we moved into our purpose-built premises, attached to our existing portable classroom, which had been remodelled as a kitchen and second classroom.

Karanga Mai Young Parents' College had become a five-day-a-week school and support service for teenage parents, with an attached and licensed early-childhood centre for their children (*Kaiapoi Leader* 2001). In accordance with Ministry policy, the young parents were enrolled as students of Kaiapoi High School, and the College became an attached unit of the high school. An example of a grass-roots initiative, we had evolved in response to the needs of our young parents and their children. We had been supported by diverse community and government agencies and organizations and by a number of interested individuals because we were seen to be working in a successful and constructive way with this marginalized group of young people. This perception reflected the prevailing view of education as the panacea of social and economic disadvantage (Save the Children 2004; SmithBattle 2006). Over the years, we were visited by Members of Parliament, including the Prime Minister¹³ and Ministers

13 This visit was reported in the *Belfast Kaiapoi Times*, 25 October 1999.

of Education and Finance, the Children's Commission, various media (*North Canterbury News* 2003; *Northern Outlook* 2002, 2007, 2008; *The Press* 1998, 2001, 2003; *The Star* 2006), other Teen Parent Unit teachers, Ministry of Education and local government officials, international guests and numerous other visitors keen to see what we were doing. We felt like a 'show-piece' and were proud and enthusiastic to share manaakitanga¹⁴ with our guests.

Recognizing and responding to students' needs¹⁵

Our school roll had been set at thirty students in 2004, and our early-childhood centre was licensed for twenty-five children. The cultural identities of our students comprised a predominance of Pākehā¹⁶ and between one quarter and one third Māori. Small numbers of young women of Pacific ethnicity also attended. The College and early-childhood centre were physically connected in a 'U' shaped arrangement of three buildings. This enabled the young women to see and hear their children playing in the playground. It also supported them to interact during the school day, for breastfeeding, the settling of babies, consultation with the early-childhood teachers and daily shared lunches. In my time as Director, we had also had seven young fathers as enrolled students, but many more fathers visited the College and early-childhood centre, and some participated in aspects of the daily programme, such as feeding their children at lunchtime or going on outings.

Two drivers transported the young parents and their children to and from school each day. Two social support workers (one female and one male) were available to support the young parents with issues related to

14 Māori term for the extending of hospitality to guests, a practice central to Māori culture.

15 'Thick [or multiple] needs' as opposed to 'thin needs' such as those provided in short courses for teenage mothers (Lesko 1995).

16 New Zealanders of European descent.

the abuse of drugs and alcohol, parenting, relationships, budgeting, accommodation, legal advice and advocacy with a range of agencies. A number of services provided outreach at the College – including Plunket, Work and Income¹⁷ – and specialized counselling. Healthy food was provided, with morning teas catered by the high school canteen and weekly shared lunches prepared by the young women themselves. Dental services and free health checks were provided on occasion, and while the young parents initially had weekly access to the health clinic at Kaiapoi High School, today the College employs its own nurse for two days a week.

In line with other alternative education centres, the College operated a teacher to student ratio of 1:10. Each student had an Individual Education Plan (IEP) which articulated goals and career aspirations. Courses of study covered the full range of secondary as well as some tertiary-level programmes and drew upon distance learning options and group programmes taught at the College and, occasionally, at Kaiapoi High School. The young parents were encouraged to achieve the National Certificate of Educational Achievement (NCEA) at Levels 1 and 2 (the government target for secondary school student achievement) and many also achieved NCEA Level 3. The students were enrolled for at least two or three years in order to achieve these certificates. Seven part-time teachers, with a range of subject strengths in maths, English, science, computing, commerce and the humanities, were employed.

In addition to the academic programme which was studied individually and in small groups, the College offered creative and performing arts, health, sports and fitness, tikanga Māori,¹⁸ parenting, cooking and crafts. There were regular activities and outings with the children, at which family members were welcome. Guest speakers addressed a range of subjects including sexual health, budgeting, relationships, careers advice and parenting. Individual students were supported to sit their Driver's Licence, to complete First Aid Certificates and to undertake structured work experience. There was an annual Reading Challenge to encourage parents to read to their children, and a Smoke-Free Challenge for those young mothers

17 New Zealand's government agency responsible for provision of state-funded welfare.

18 Cultural practices.

who wanted to quit smoking. Student representatives were involved in the selection and employment of new members of staff and the hosting of visitors to the College. The young women also participated with enthusiasm in College planning processes.

In understanding and responding to the ‘thick’ (Lesko 1995) or holistic needs of its students as parents, as learners and as young women, the College assisted students to successfully re-engage with education. Its comprehensive response was supported by international research which has found that educational initiatives for teenage parents are most effective when multiple services such as transport and childcare are provided (Amin, Browne, Ahmed & Sato 2006; Hosie 2002; Lesko 1995). Within the context of Aotearoa New Zealand, the holistic and all-encompassing approach to education and support at the College was exemplified in the *Whare Tapa Wha* model (Durie 1998). This uniquely Māori model uses the four walls of the *tupuna whare* or ancestral house as a metaphor for holistic human development. Each wall – spirit/*wairua*, body/*tinana*, mind and emotion/*hinengaro* and family/*whānau* – is interdependent. Durie (1998) argues that the balanced development of each component or ‘wall’ is required for health and well-being: the Māori concept of *waiora*/personal well-being and *whānau ora*/well-being of the *whānau*.

Holistic *whānau*-based culture and practices were an integral part of *Karanga Mai*’s distinctive identity. Built on the acknowledgement of the young women’s multiple needs, the College provided practical, emotional, familial and spiritual support and nurturing. A unique example of this was the integration of spirituality – an essential component of *taha Māori* – into the cultural practices of the College and early-childhood centre. *Karakia*/prayers were used as a natural part of daily routines, affirming the cultural identities of the Māori young women and their children and acknowledging the bi-cultural roots of the College (Macfarlane, Glynn, Waiariki, Penetito & Bateman 2008). This practice is in marked contrast to the secular culture of New Zealand state secondary schools. The sense of well-being and belonging that this holistic approach created in the young women and their children is revealed in their narratives concerning the College community; it is to these narratives that the chapter now turns.

Assembling lives

I would now like to introduce the reader to three young women – Andy, Kate and Tatiana¹⁹ – whom I met and worked with at Karanga Mai. These young women were participants in my doctoral research concerning the lives of ten former students of the College. Their stories reveal markedly varied but consistent accounts of childhood challenges, alienating school experiences and early school leaving, substance abuse and mental health problems, lack of hope for the future and ‘early’ pregnancies and motherhood.

Andy’s story

Andy recounted a lonely childhood, marked by severe economic privation and social isolation. Her father was in prison for much of her childhood, and her mother was deeply stressed and emotionally unavailable. Her much older siblings, both of whom also became mothers in their teens, were difficult and demanding of their mother’s attention. Social agencies were involved with the family over long periods. As a child, Andy felt self-conscious about being different from other children because of her family’s poverty and her father’s incarceration. Although sensing that she was bright and capable, Andy’s confidence was eroded at intermediate school²⁰ and she became an angry and resistant student. By secondary school, she had stopped trying for fear of failure. A frequent truant, she was finally stood down from school for a serious incident of classroom violence. At fifteen, Andy was unemployed, drinking heavily and suffering bouts of depression. At sixteen, she was pregnant. When she told her boyfriend of her pregnancy, he rejected her, threatening to kill her if he came across her in the street.

When Andy’s first-born child was a year old, she was encouraged by a Plunket worker to enrol at the College. In her first months of attendance

19 Research pseudonyms chosen by the young women.

20 The New Zealand equivalent of Junior High School, for students in Years 7 and 8.

Andy was volatile and resistant. Her teachers worked extremely hard to engage her academically and socially. For months she angrily refused to participate in the school curriculum. Other students found Andy unapproachable; she was slow to make friends. At last, when her teachers had almost given up hope of winning her confidence, her maths teacher coaxed her into tackling a few simple 'unit standards'²¹ which she achieved easily. This was Andy's first taste of academic success since early primary school; it started her on a journey of personal and academic growth that was to have surprising results for her and her teachers.

Kate's story

Kate came from a supportive professional family. However, she recalled school as a negative experience because of her learning difficulties, which were neither recognized nor well supported by her state primary school. Kate became identified as a failing student who, despite her best efforts, felt that 'nothing I do is ever good enough'. By the time she started secondary school, Kate had 'given up' on her education. She started drinking heavily, developing a 'successful' counter identity within her peer group. She also started using drugs, and in order to fund her increasing dependence, Kate began selling drugs while still at school. Despite these challenges, she received ongoing support and encouragement from her parents and managed to achieve NCEA Level 1 before leaving school. With few hopes and aspirations, Kate felt like a failure within the culture of her successful and high-achieving family. Involved in a violent relationship, Kate experienced increasingly severe mental health challenges. At sixteen, she became pregnant.

It was Kate's mother who persuaded her to attend Karanga Mai. When she started at the College, she was a quietly spoken, nervous and very young-looking pregnant teenager. She came with a file of diagnostic testing which

21 Unit standards are registered at one of the approved levels of the New Zealand Qualifications Framework. They are sometimes regarded as more easily achieved than the more widely used Achievement Standards.

identified her learning difficulties, and the teachers were apprehensive that their lack of specialized training would make it hard to meet Kate's learning needs. Soon after starting, Kate had her baby prematurely, and within a few weeks she returned to the College with her tiny daughter. For a year, Kate found it difficult to engage in schoolwork because of her ongoing marijuana dependence. However, with support from the College counsellor, Kate finally became drug-free. She was now emotionally and intellectually ready to engage in academic work, under the close tutelage of her teachers.

Tatiana's story

Tatiana described her family circumstances as marked by parental conflict and alcohol abuse. Her parents separated when she was twelve, and she and her older sister remained with their mother – an alcoholic and multiple drug user – who encouraged her young daughters to drink with her, to keep her company. Tatiana described herself as a child alcoholic. When reflecting on her mother's behaviour, she said: 'I believe it was cos she was pregnant so young (at fourteen) and never had her teenage-hood. She was like a kid, like a fifteen-year-old herself when we were teenagers. She was just like one of us'.

Tatiana's mother committed suicide when Tatiana was thirteen. Although Tatiana was the second daughter, she felt responsible for maintaining some semblance of order in her chaotic family while her sister and her father 'lost it, pretty much'. She took charge of the household, effectively parenting her five-year-old brother. Within this context, Tatiana 'just couldn't be bothered with high school'. Leaving school in her third year with several NCEA unit standards, she found a job at a café. The following year she met her long-term partner and became a mother as an older teen. Pregnancy and parenthood prompted Tatiana to re-evaluate her life and she decided to return to school when her baby was six weeks old, to complete an initial qualification and prepare herself for a career.

Tatiana was already nineteen when she enrolled at the College. Spending most of her first weeks in the early-childhood centre with her little son, the classroom teachers seldom saw her until she was ready to

leave her child in the centre's care. Socially outgoing and straight-forward, Tatiana easily made friends. Like Kate and Andy, Tatiana was guarded with her classroom teachers in those early days at the College, bringing with her some challenging behaviours and attitudes acquired from her previous negative experiences of schooling. Describing herself as 'crap' at school, she had 'hated all [her] teachers apart from one'. Stubbornly independent and non-compliant, Tatiana required much 'wooing' and persuasion before she would agree to the simple requirements of College enrolment such as participating in sports and other non-academic activities; she initially deemed these activities a waste of her time. Although Tatiana was motivated to succeed and manifested a strong will and determination, she continued to struggle with academic work throughout her two years at the College.

'It was the one place where I felt I was OK'

Each of these young women had decided to return to education by way of the holistic provision offered at Karanga Mai Young Parents' College: Andy because she was bored and lonely; Kate to keep her parents 'off her back'; and Tatiana to provide the 'best future' for her son. Initially, each struggled to adjust to 'school' because of her previous negative experiences and her own coping mechanisms: Andy's fear of failure; Tatiana's issues with control; and Kate's learning difficulties and addiction to marijuana. Each was reluctant to engage in schoolwork, having to be coaxed and gradually won over by teachers who appreciated the level of patience and support that would be required to allow a re/assembling with educational endeavours.

Kate said:

When I first started I thought it would be, 'Poor little thing!' but everyone there, it was the one place where I felt I was OK, I was just like everyone else, it was like a wee bubble [...] The childcare staff just loved our children, they were great! It's hard as a young parent doing activities on your own and getting negative looks and comments from other people. At the College you didn't feel like you were abnormal. You didn't feel self-conscious. The group made you feel awesome. The teachers really cared

about what I was doing and they wanted me to really do well, we were partners [...] When I came to the College, my plans changed. The supermarket wasn't an option any more, there were bigger and better things to do! People liked me, they liked me for me! And they loved my daughter!

Andy:

I don't know what I had pictured it to be like. I didn't expect that level of support to come from teachers. I didn't think they'd care so much. You could see and feel that genuine love. That was overwhelming, like 'Wow!' It felt so special, it felt nice to have adults who cared about me in that way. If we didn't have those relationships with the teachers and if we didn't feel accepted, it was our feelings of self-worth, none of us were going to achieve anything unless we sorted that out first [...] We were all safe, we were all secure in our place there. There was such a strong sense of well-being, it was just like a second home.

And Tatiana:

I spent most of my early days in the childcare, cos Matias was so young – he was six weeks when I started and I didn't really go into the classroom until he was twelve weeks old. So, yeah, I got to know all the childcare teachers first before I got to know everybody else. In the childcare, that was my grounding place. That's what I was studying (early-childhood care and education) and that's where Matias was and that's where I felt most comfortable like, from Day One [...] We were all teenage parents, so at school it was like a safe haven. There was no-one looking down on you because that's what we were. Cos no-one was any different from any other ones. I felt real comfortable there.

Over time, each of these young women was supported to experience for the first time the empowering rewards of academic success and, in the case of Andy and Kate, to re/assemble their identities as academically able and competent learners. The College also supported the young women to be responsive and caring mothers as well as confident and well-rounded young women with aspirations for 'successful' futures for themselves and their children.

Andy attended the College for three-and-a-half years, achieved NCEA Levels 1 and 2 and her Driver's Licence and started a tertiary-level diploma. She was awarded a prestigious scholarship to complete her tertiary studies. Despite her initial reluctance, Andy joined in other cultural activities

at the College, singing in the choir and playing sports. She had learned through her experience of success to better manage her periods of angry self-doubt. Andy had become more outgoing, and was a committed and responsible parent.

Kate, the 'failed' learner, also attended the College for more than three years, achieving NCEA Levels 2 and 3, her Driver's Licence and the Award for Academic Excellence. Despite her shyness, she talked on behalf of the College to local groups, played netball and sang in the choir. During her time at the College, she had overcome her drug addictions. Whilst still quiet, Kate had blossomed into a socially assured young woman who was a committed and loving mother.

Tatiana spent two years at the College, achieving her NCEA Levels 1 and 2 and completing her Certificate in Early Childhood Education. She gained her Driver's Licence and First Aid Certificate. She danced Hip Hop and sang in the choir. Awarded the early-childhood centre's Awhina Award²² for her active participation in the centre, Tatiana was a devoted and capable mother, often assisting other young women with their children. Tatiana retained her independent spirit, but as we got to know her better, we came to understand her within the context of a life story of courage and extraordinary optimism in the face of personal struggle and tragedy.

Each of these young women made enduring friendships at the College. Each felt like she was 'leaving home for the first time' when she left the College to assemble a life, 'out in the world'. Not all of the young women who attend Teen Parent Units in New Zealand achieve the academic success of Faith, Kate, Andy and – to a lesser extent – Tatiana. Not all students at any school achieve to their potential. However, we were continually surprised at the talents and abilities of the young parents with whom we worked. These abilities were able to find expression and flourish in the nurturing environment of the College with its many opportunities for personal, social and cultural growth and affirmation.

22 Help and support.

Assembling positive identities

The narratives of these young women demonstrate the ways in which their self and identity were assembled within the cultural contexts of their lives. These contexts included their families, schooling, ethnic and socio-economic groupings, as well as the discourses and structures of the wider dominant social context. Each of these contexts offered the young women narrative possibilities upon which they drew to story or assemble their own identities. These narrative possibilities had mostly constrained their opportunities and identities as learners, as young women and as mothers. However, identity-making is a fluid process (Bruner 2002; Burr 1995), strongly impacted by turning point experiences and changing contexts (Kehily 2007). For these young women, attendance at Karanga Mai was recounted as one such turning point.

As demonstrated in the narratives above, the College was effective in supporting the re/assembling of identities by immersing its students in a context offering positive narratives about who they could become as young women, as learners and as parents. It did this by challenging and transforming conventional school practices, which had mostly alienated and failed them as learners and as young people (te Riele 2007). In marked contrast to these conventional school practices, as described by the young women, the College offered them loving and affirming relationships with teachers and staff members, and with the other young women and their children (Macfarlane, Glynn, Cavanagh & Bateman 2007). This relationship-centred culture of *whānaungatanga* shares its 'beating heart'²³ with Māori culturally responsive pedagogies developed to enhance the achievements of Māori students alienated within the mono-cultural classrooms of conventional schools (Bishop, Berryman, Cavanagh & Teddy 2009; Macfarlane et al. 2007). These pedagogical practices have also been found to succeed with other alienated students, regardless of ethnicity, such as the teenage parents at the College (Bishop et al. 2009; Macfarlane et al. 2007).

23 Pumanawatanga.

Through the nurturing whānau environment of the College, alternative and empowering possibilities of school, family and community were presented which supported the students' identities as valued young women. This loving and supportive culture was made more effective because the young women and children were members of the College community for an extended period (often for three or more years). Intensive long-term exposure served to normalize this culture for the young women and their children even though it was, in many cases, very different from the troubled contexts of their homes, relationships and communities, where negative discourses remained dominant. This is evident in their many descriptions of the College as a 'second home', 'a home away from home', and a 'safe haven'.

It felt safe, it was so easy, you could go there every day and you'd know that it was always going to be the same. It was so normal, coming from a life where you never knew, you could get bashed up or something like that [...] it was very supportive. (Emma, research participant)

The College's supportive whānau environment was of particular importance for the young women because they were parents and, in common with *all* new parents, they needed the enveloping support of a nurturing whānau to enable them to blossom and grow in this new identity and to experience the whānau ora or well-being that is provided by all effective models of whānau (Lawson-Te Aho 2010; Wilson & Huntington 2006).

The College also reconstructed negative social discourses about teenage parents as educational failures by offering hopeful discourses about teenage parents as educational successes. It achieved this by normalizing, affirming and celebrating the young women's status as parents, and by supporting them to succeed academically within a context where all the students were parents and where academic success was a normal and much-celebrated part of the College culture. This enhanced the young women's confidence and self-belief and their sense of future possibilities. In a New Zealand study of the imagined futures of young women attending Teen Parent Units, Patterson, Forbes, Peace and Campbell (2010: 17) concluded that these units provide 'young mothers with the social context in which they can both assert a positive maternal identity and imagine futures in which their lives, and those of their children, can turn out well'. The 'success' narratives

of the young women included in this chapter are examples of these positive imagined and realized futures.

‘Yoohoo – look at me!’

Andy is now in her late twenties, has completed her tertiary qualification and works full-time in IT. She is the first person in her family to have gained education qualifications at any level. She and the father of her second child are now married and have purchased their own home. When asked about the influence of the College on her life, she said it had made her aware of opportunities, shown her she could set and achieve goals and instilled in her a work ethic and an unexpected love of learning. It had increased her confidence and her self-belief.

I still go, ‘Wow! I did finish NCEA Level 1 and 2’ and it feels a bit surreal looking back on it, and getting the Scholarship. It feels so nice cos it was the first time in my life that I felt like I was achieving anything. At the time I would have been a bit humble but now I’m like, ‘Yoohoo! Look at me!’

Kate has now completed her degree and is working full-time as a health professional. She lives in a committed and loving relationship after a number of years as a single parent. After the Canterbury earthquakes,²⁴ this quiet young woman visited all her elderly neighbours to see if they needed any help.

I feel good about who I am today – I’ve changed a lot but in a good way. I’m quite happy with my achievements. It’s good to have hard work rewarded and to be on the right track.

Tatiana has successfully established her own home-based business; she and her long-term partner, a qualified tradesman, have had a second child,

24 A major earthquake hit Christchurch in February 2011, destroying the central city and devastating a number of suburbs. One hundred and eighty-five lives were lost in this quake.

who was planned. When asked about the influence of the College on her life, Tatiana said:

I wouldn't have my own business, that's for sure, and I wouldn't be on a career path. I doubt I'd be doing anything really [...] it was so much easier to do it through the College, there was so much support rather than trying to do it on my own.

Even Te Huia – selected as a research participant because in my view the College had failed in its attempts to support her to succeed to her potential – described the impact of the College as 'life-saving' because we had helped her to leave her violent partner.

When reflecting on their experience of the College, the young women talked about their growth in confidence, their less judgemental attitudes to others, the positive transformation of their learning identities and their understanding of the importance of education for their children. They talked about their increased opportunities and self-belief, and the impact of these on their life aspirations, their enhanced capacity to manage life challenges, the importance of the support and affirmation they had received as parents, the social benefits of friendships formed at the College and the social and educational benefits for their children.

Teenage motherhood: 'It just changed my life completely'

The young women who participated in my doctoral research ranged in age from fourteen to nineteen years when they became pregnant. The three youngest women – Jade and Zena, who were fourteen, and Sam, who was fifteen – were still at school; Anahera, who was seventeen, was completing her final year of secondary school. All the other young women had already left, been asked to leave, or had 'dropped out' of school.

Andy and Kate were both sixteen when they became pregnant; Tatiana was nineteen. Kate and Tatiana were working in what they called 'dead-end' jobs; Andy was unemployed. Kate was an addicted drug user; Tatiana and Andy were drinking heavily. Tatiana was living in a positive and committed

relationship with the father of her child; the other two were in abusive relationships, which terminated shortly after they became pregnant.

Despite the 'shock' of discovering they were pregnant, the experience of pregnancy for all of these young women marked a turning point in their lives and aspirations, prompting them to think about their own and their child's future well-being and, in some cases, to consider a different style of life, a different assemblage. For several, these changes were literally 'life-saving': leaving the gang, stopping drug-use, even extricating themselves from violent relationships. For example, Kate said, 'I knew I should use it to turn my life around. I knew I needed a change and I should just take it. I knew that if I went on, I'd end up a junkie with a junkie baby'. Emma said:

When I found out I was having Eli, I was more relieved than anything because I was in a really bad situation [...] I was excited. Before, I didn't know what I was going to be doing the next year but I knew this was going to be something completely different. I thought, 'Well, I can't go back to that life now, I'll have someone else to look after.'

These are examples of the ways in which many teenage women 'reorganize their lives and priorities around the identities [...] of mothering' (SmithBattle 2006: 131).

One outcome of this reorganization of lives and priorities was the recognition by my young women participants that school qualifications would help them to provide a better life for their children. Renewed interest in schooling and education was a significant change for these young women who had all, to some extent, been school-averse and regular truants. Six of the ten had left school with few if any school qualifications, and most regarded themselves as 'failed' or failing learners. It had seemed that school was 'not for them'. Pregnancy and parenthood was the first step in assembling a new identity as a 'good' and responsible parent who could counter dominant deficit discourses by making positive choices and returning to school (Zachry 2005; SmithBattle 2006). Jade observed:

I think that when you have children it changes you, who you are, because you're thinking about what you're going to do in the future so you kind of put your feelings aside about school and then you want to do something with your life so then you come back to school!

And Rachel said:

Yeah, I grew up real fast. I knew that I had to do something with my life. Before I had Ella I didn't really have any goals in life but then, as soon as I had her, I knew it was time to change and then, given this opportunity [to return to school], it just changed who I am and my life completely.

When I asked Andy what she thought she would have been doing if she hadn't become pregnant at sixteen she said, 'I think I would have been a complete write off, I really would've been, because of the people that I knew and the things I did.' And for Kate, her sense was that, 'I've changed a lot but in a good way. I think what I've done is a lot better than what I would have done if I didn't have my daughter! I think that would have been a tragedy!'

In closing the chapter, the final afterword draws on a conversation that took place between another of my participants – Zena – and her partner – Simon – about how their lives were transformed when they became parents in their early teens. This couple had begun their parenting journey at the age of fourteen and fifteen, and were still together after ten years. Zena had attended Karanga Mai for three years before leaving to work in the hospitality industry. Simon had run his own business since he was twenty and the couple was hard-working and focused on achieving their life goals.

SIMON: It focused me a lot. Before, I was just drifting around and not doing much, whatever I felt like doing at the time, but it focused me a lot. I wouldn't change anything. By now, I could still be not doing anything.

ZENA: Yeah, well that's what I feel too, cos I was really naughty and never home and drinking and doing stupid stuff, and I could still be doing that now.

SIMON: Yeah, people we know, who don't have kids, are still doing that now and getting into mischief and stuff like that.

ZENA: You want to tell them to wake up. Yeah, you think more responsibly.

SIMON: You still have plenty of fun. I don't think you miss out on too much.

ZENA: I just think being a young mum doesn't stop you from doing what you want to do. Sometimes, being a young mum you can do more than if you weren't a young mum!

All of these young parents see themselves as responsible and successful adults. They recount lives transformed by parenting in their teens, and by the connection they made with the College and its commitment to their education and well-being. The positive re/assemblage of lives and identities, revealed in their narratives, strongly refutes the findings of academic research that teenage parenting always, and of necessity, results in negative outcomes for teenage parents and their children. It constructs this experience as a potential opportunity rather than a problem, provided there is access to holistic whānau and educational support for both parent and child (Carville 2013). As the Māori whakatauki²⁵ (Turia 2012) affirms:

Ka whangaia, ka tupu, ka puawai
That which is nurtured, blossoms and grows

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25 Māori proverb.

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12 The 'Missing' Parent: Teenage Fathers Talk About the Meaning of Early Parenthood

ABSTRACT

Literature on adolescent parenthood is skewed towards young mothers, with male counterparts often forgotten or invisible. The paucity of research into the experience of teenage fatherhood has created a space occupied by myths and negative stereotypes. Teenage males are cast as disinterested and/or unwilling participants in their children's lives who mostly fail to meet parental responsibilities. This chapter reviews research conducted by us, based on extended interviews with teenage fathers. We ask whether the findings of our exploratory research, undertaken a decade ago, have been further supported, challenged, or overturned. Contemporary literature provides some different perspectives but, essentially, supports our research conclusions. While there are undoubtedly challenges and pressures on teenage fathers, there are also psychologically positive aspects whereby fatherhood can be transformative. Teenage fathers do take up the responsibilities of fatherhood and advocate on behalf of their children in respect of intergenerational repair and a better future for their children. These positive features are far from guaranteed. However, they offer a counter discourse to stereotypical views of teenage fathers as selfish and impervious to their children's needs. This counter discourse unsettles the invisibility and negativity which has dominated discussions about teenage fatherhood. Given the 'right' support, teenage fatherhood can be reassembled as an opportunity rather than a tragedy.

Introduction

Previously, we have interrogated the psychology of teenage fatherhood in Aotearoa New Zealand by examining key discourses around which the talk of teenage fathers was structured. In particular, we have considered discourses of responsibility and intergenerational repair (Tuffin, Rouch & Frewin 2010), the transformative experience of becoming a teenage father

(Tuffin & Rouch 2007), the redemptive positive psychology of teenage fatherhood (Rouch 2005) and identity issues associated with the accelerated developmental transition involved (Frewin, Tuffin & Rouch 2007). In this chapter we revisit these notions in the light of more recent international literature which has examined the experience of teenage fatherhood. The fundamental question we address is whether the findings of our exploratory research, undertaken a decade ago, have been further supported, challenged, or overturned. Did we get some things right, or has recent scholarship displaced our suggestions with more enlightened understandings of the meaning of the atypical disjunction of becoming a father before becoming an adult?

Dominant discourses of the teenage father

Teenage fatherhood sits at the intersection of biological possibility and cultural expectation, and for that reason is peppered with challenges. When a fourteen-year-old boy announces that he is the father of two children this can raise eyebrows as we question social expectations about maturity and parental responsibility. When the usual sequence of adulthood preceding parenthood is reversed, is it still appropriate to refer to such a young father as a 'boy'? For some, this highly politicized area represents a public health problem (Lawlor & Shaw 2002). Negative public perceptions are well documented with, for example, Mollborn (2011) reporting an opinion poll where teenage pregnancy was rated by 42 per cent as a very serious problem, while a further 37 per cent rated it as an important problem. Others have questioned the assumptions of negativity and suggest beliefs are closely tied to wider socio-cultural climates (Cherrington & Breheny 2005).

Until recently, the topic of teenage fathers was greatly neglected, especially in comparison with the research on teenage mothers (Strug & Wilmore-Schaeffer 2003). The absence of teenage fathers from the literature (Bunting & McAuley 2004) fostered the development of myths and damning stereotypes which contributed to the pathologizing of teenage fathers as

uncaring, selfish and indifferent to parental responsibilities (Kiselica 2008; Weber 2012). The apparent absence of teenage fathers is in stark contrast to the wider societal trend involving increased visibility of fathers, increased awareness of traditional constraints around the role, and debates about the changing nature of fatherhood. The traditional 'breadwinning' role of fathers remains dominant (Bryan 2013); however, the narrowness of this has been foregrounded by research examining expectations of fathers' more active involvement in parenting (Carlson 2006). Discussions about 'new fathering' (Roy 2006) have widened the parameters of what this identity means. Dermott (2008) suggests these changes have not displaced the importance of constructing fatherhood as synonymous with providing, but fatherhood now includes increased expressions of love and affection. Constricted definitions of fatherhood have broadened to include the idea of fathers as caring, with the gender-equal father increasingly becoming a core part of contemporary masculinity (Johansson & Klinth 2008).

Negative characterizations of teenage fathers have been exacerbated by research which has studied perceived 'risk' factors which differentiate teenage fathers from their childless peers. Demographic factors such as poverty, family instability, low self-esteem and low educational attainment have been cited (for example, Winstanley, Meyers & Florsheim 2002). As we have argued previously, these negative characterizations line teenage fathers up alongside Kelly's (1996: 429) emblematic description of teen mothers as 'girls from flawed backgrounds making tragic mistakes'. While much of the theorizing around teen parenting (Cherrington & Breheny 2005) has been dominated by deficit models informed by the identification of risk factors, there are also studies which directly challenge the myths about teenage parents (Weed, Nicholson & Farris 2015). These studies form an intellectual counterpoint in highlighting the positive effect of fatherhood for the teenage father and the positive contributions teenage fathers can make. Most impressively, these contributions occur at a time when the teenage fathers are least able to deal with the responsibilities of parenthood. They are disadvantaged in terms of limited resources such as experience, maturity, workplace skills and access to well-paid employment. Hendricks and Montgomery (1983) concluded that teenage fathers were generally accepting of fatherhood, and Johnson (2001) noted high levels of

paternal involvement, with the sustainability of this being, unsurprisingly, linked to employment. Stug and Wilmore-Schaeffer (2003) suggest teenage fathers care deeply and take an active role in the care of their offspring, and Knoester and Eggeben (2006) have shown how the unique challenges of early fatherhood can lead to positive personal reorganization and growth.

Teenage fathers in Aotearoa New Zealand

Our research was stimulated by Miller's (1997) conclusion that this area has been sorely neglected and required further study to explore teenage fatherhood from the perspective of the teenage father. Thus, we sought to extend this line of work which considered 'insiders' perspectives (Breheny & Stephens 2007) by examining the talk of teenage fathers with a view to considering the validity of the prevailing negative stereotypes. The work we have undertaken was based on interviews informed by critical social psychology and social constructionist epistemology (Tuffin 2005). This approach assumes our understandings are inextricably located in language use involving metaphors and discourses. Critical social psychologists have reconceptualized social life as language use, thereby giving linguistic precedence to what was formerly considered the psychological (Wetherell 1996). Our theoretical claim is that discourse does not merely describe, but rather structures the very experience of teenage fatherhood.

Participants in the study we present here were twelve fathers who had become fathers prior to their nineteenth birthday and who were twenty or younger at the time of interview. While the number of participants may seem modest, this number is likely to have captured a good deal of the linguistic variability, and such data saturation would make further interviews superfluous to the key discourses. We wish to note some observations, as our research employed an inductive methodology and detailed data analysis. Firstly, our claims and conclusions reflect the exploratory nature of the research and we fully acknowledge the partiality of the work. Secondly, while the discourses structuring the experience of teenage fatherhood are

largely positive, this work remains agnostic with respect to the sustained commitment to fathering. Such questions are best addressed by longitudinal research, as would also be the case for non-adolescent fathers. Thirdly, we note that participants self-selected for the study, which raises the possibility of more positivity toward parental responsibility.

In what follows, we review key discourses and associated issues and conflicts which arose from our analysis (Frewin, Tuffin & Rouch 2007; Rouch 2005; Tuffin & Rouch 2007; Tuffin, Rouch & Frewin 2010). We then review a number of more recent studies from the international literature and discuss these in the light of our original work published nearly a decade ago.

A discourse of responsibility

A discourse of responsibility considered talk relevant to paternal duties, obligations and responsibilities and was pervasive in the data. Responsibility was constructed as being age neutral and youthfulness was not talked about as a barrier to good fathering. Discursively this formulation attends to possible concerns that teenage fathers may be too young to be successful, responsible parents. However, age wasn't regarded as providing a guarantee of good parenting.

The responsibility discourse was organized around the traditional male imperative to act as breadwinner and provider. Taking up these responsibilities positioned teenage fathers as necessarily re-evaluating priorities, with freedom and autonomy compromised by the demands of work, fiscal responsibility, parental obligation and the considerable challenges involved in managing these duties. One significant challenge arose from the move to full-time paid work. Born out of financial necessity, this involved a dramatic shift from being time-rich, free and independent to becoming time-poor, responsible fathers. While enabling the financial viability of the young family, paid employment meant less time available to spend with their children and supporting their partners. Stepping up to enter

the workforce also meant stepping out, thereby becoming distanced from both the emotional joys and demands of parenting. Successfully managing these issues and stresses was pivotal to constructing the teenage father as a committed parent. Undeniably, competing demands on parental time are not unique to teenage parents, with three quarters of parents wishing they had more time for family (Roxburgh 2006). However, time constraints may apply more acutely for teenage fathers who have incomplete educational qualifications and limited work skills and experience. This places them in an unenviable position of working for lower pay and needing to work longer hours, often in work which is physically exhausting, adding pressure to their time-poor status and impacting negatively on the quality of family relationships. The imperative to provide contributes to the family's financial capital, but comes at a cost to the family's social capital (Christiansen & Palkovitz 2001). The responsibility discourse constructs work related commitments as imperative, with the tragic irony that this may undermine the very family the teenage father is striving to support.

A discourse of intergenerational repair

This discourse centred on teenage fathers' reflections on their own childhoods and the strong desire of many to ensure their children benefited from better parenting. Thus, damaged childhood became opened to the possibility of repair through the next generation. The teenage fathers wanted their offspring to have a better childhood than their own as they sought to repair the mistakes of their own upbringing through striving to become better parents than the previous generation. Such generational comparisons were readily accessible given the teenage fathers' own early childhood provided a recent linguistic resource against which to measure their aspirations as parents and their wishes for their children.

In some cases this involved material possessions which were afforded a psychological value as indexing the broader notion of improved quality of life. The pursuit of the 'good life' for one's children also meant avoidance of

dysfunctionality which was commonly referred to without being detailed. More positively, repairs were constructed as being associated with active involvement in the child's upbringing with demonstrative expressions of love and affection: attention, cuddles, spending time with children and enquiring about the things that are important to them. The discourse of intergenerational repair rests on the good intentions of teenage fathers to improve on their own upbringing and this means willingness and desire to do fathering differently from what they experienced as children. Such aspirational talk does much to dispel suggestions of paternal disinterest in their children.

The notion of generational repair runs contrary to suggestions of intergenerational transmission of abusive parenting and the theorized nature of this as cyclical and repetitive. The cyclical aspect of this can be positive and it is highly desirable to have intergenerational transmission of constructive and positive parenting (Chen & Kaplan 2001). For our participants, the notion of repair and improved parenting was often a reaction to, and hence motivated by, their own fathers' lack of involvement. Having an absent father (Allen & Doherty 1996) can stimulate teenage fathers to solidify their commitment and have constant contact with their children. The motivational aspects of teenage fatherhood are also intimately involved in the discourse of transformation which is considered next.

A discourse of positive transformation

This discourse arose from talk about fatherhood, with the dramatic transformation it instigated offering opportunity for personal development, positive change and psychological growth. Fatherhood broadened the horizons of these teenage fathers as their newly acquired responsibilities demanded maturity and offered a greater sense of self-importance and deeper appreciation of relationships with significant others. The comparative structure of this discourse was twofold: firstly, involving contrasts between pre- and post-fatherhood experience and, secondly, between themselves and peers

who had not yet become fathers. The initial contrasts see directionless hedonistic freedom replaced with awareness of paternal responsibility. This contrast did not involve complaints about loss of youth or freedom, but focussed on the positive aspects of becoming a father. The comparison with peers who were not fathers yielded negative judgements regarding lack of direction and reliance on welfare, drugs and alcohol. Former peers were associated with risk and illegal and dangerous activities. There was reference to friends who had been incarcerated, injured in car accidents, or idled their time away in a directionless drug haze. The status of fatherhood served to motivate the relinquishing of this lifestyle and associated risky activities. While formerly positioned as socially precarious, the positive transformation of fatherhood moved them toward greater stability and provided motivation and purpose.

Triggered by the arrival of a child, the transformation saw teenage indulgence and indolence replaced with direction, industry and responsibility. This motivational turning point is dramatic, relatively quick and stimulates consideration on behalf of the future of both the new father and the child. These futures are inextricably linked and the acceptance of paternal responsibility entails planful talk which is, emblematically, captured here: 'I've got to do something with my life otherwise, yeah, my baby's not going to have a life'. The interactive and inter dependent characterization of fathering is evident with the father taking responsibility for his child, and symmetrical responsibility emerging by providing a strong motivation for the father's future. Not only does the father seek to give the child a life, but the child also gives his life greater meaning.

A final feature of the discourse of positive transformation was evident in the way social relationships were talked about. Teenage egocentrism yielded to more compassionate, pro-social understandings in two respects. Firstly, family and friends were valued more than previously. Consistent with Knoester and Eggeben (2006), fatherhood encouraged increased intergenerational and extended family interactions. The detachment that formerly characterized teenage interactions became replaced with a preference for increased family involvement. Secondly, greater empathy was noted with regard to basic issues of human tragedy. In particular participants talked about being emotionally impacted by news stories of human

suffering. Fatherhood has a profound effect and this has an impact on the teenage father, who not only recalibrates self-appraisal, but also rethinks the meaning of important social relationships. This transformation encourages priorities to be re-evaluated which in turn may lead to the emergence of a more caring human being (Marsiglio 1998; Palkovitz 2002; Tuffin & Rouch 2007). This suggests that fatherhood can broaden the narrow psychological horizons of the typical teenager, opening up a more mature orientation to both their family and wider events in the world.

A discourse of identity development

Against a developmental backdrop of considerable challenge, adolescent identity is required to navigate dramatic physical, psychological and social change. For all men, fatherhood revolves around a metamorphosis that imposes demanding psychological upheaval irrespective of the age of the father. These processes are intensified for teenage fathers, who experience an accelerated developmental trajectory and are faced with the formidable confrontation of a swift and often unexpected transformation.

Our research examining identity formation highlighted the discourse of dual identities. The teenage father is positioned between the lure of independence and freedom and the responsibilities and duties of parenthood. Caught between disparate identities, these teenage fathers sought to reconcile the conflicting identities of adolescent and father–adult. Contrary to negative stereotypes that cast teenage fathers as reluctant to yield the freedoms associated with an adolescent identity, our participants were willing to overcome the psychological disequilibrium involved and demonstrate significant investment in their changing identities. A shifting sense of self was evident with acceptance of themselves as fathers. This movement may not be without problems, but it was talked about with strong intent, leading to suggestions of strength and determination rather than the ineffectiveness suggested by the more negative characterizations of teenage fathers.

Part of the psychology of teenage fatherhood was the unexpected nature of parenting. It is likely that some teenage fathers deliberately seek fatherhood, but none of our participants set out to achieve this. And while these conflicting identities are characterized by considerable upheaval, there was never any suggestion of disinterest. Indeed, responses showed considerable nuance and sophistication in not regretting their new found identity as fathers but, given the difficulties involved, neither was this life course to be recommended.

Revisiting the international literature on teenage fatherhood

Reviewing this literature involved sourcing ten new studies of teenage fathers from a number of geographically and culturally diverse groups including African American, Brazilian, Mexican, African, Australian, Puerto Rican and Swedish. The review included qualitative studies that had typically interviewed teenage fathers, in addition to one study (Johansson & Hammarén 2012) which analysed constructions of fatherhood based on internet blogs. Our review is structured around three key themes, all of which relate to the work we undertook in Aotearoa New Zealand: struggles, the meaning of fatherhood, and relationships. Each of these will be detailed and discussed in terms of how this adds to or informs our earlier work.

Struggles

Despite their willingness to be involved as fathers and the positive transformations this could entail, research strongly suggests these young men face almost overwhelming pressure and struggle with a number of issues. While they very much sought intergenerational repair, this was compromised by a pressing need to find employment in order to provide material necessities for their child. There were also difficulties in gaining a balance between spending time with their child and spending time attaining long-term

goals such as completing educational qualifications. Further difficulties were encountered with respect to relative loss of freedom and the need to deal with stigma and negative societal judgements.

The financial pressures on teenage fathers are considerable. With limited educational qualifications and experience, their earning power in the labour market has a low ceiling and the available work often involves long hours of exhausting manual labour which takes time away from being with their child (Wilkes, Mannix & Jackson 2011). Not only was quality time with their children scarce, but the complex demands of sleep deprivation, managing child-care and balancing work and financial commitments had a negative impact on attempts to engage with educational goals. For Finch and Bacon's (2015) participants, this combination of factors was rated as the main stress as they attempted to juggle complex competing demands. While education was often valued as a means of providing a solid foundation for the future, this was difficult to manage without the support of wider family (Bordignon et al. 2014).

Planning for the future could be either inhibited or enhanced by early fatherhood. For some, their plans were interrupted by the arrival of their child, but others were stimulated to think about the future in a manner that went beyond the narrow considerations of 'the selfish teen'. Planning involved considerations about their relationship with the child's mother and, most importantly, thinking about the future they could provide for their child (Wilkes, Mannix & Jackson 2011). For some teenage fathers, the birth of their child motivated them to plan meaningfully for the future. This could involve committing to finishing school, or moving to a new area based on the hope of a better chance of work or accommodation (Parra-Cardona, Sharp & Wampler 2008).

Another struggle involved the dramatic transition whereby the typical freedoms of the teenage years were replaced with the responsibilities of fatherhood. Finch and Bacon (2015) noted this with the requirement of accelerated maturation in combination with the loss of the ostensibly carefree years of youth. These stresses were also evident for the teenage fathers in Johansson and Hammarén's (2012) study, which highlighted the conflict between being young, fun loving and carefree and the need to take on the responsibilities of maintaining a household. Similarly, tensions

were apparent for the African American teenage fathers in Paschal, Lewis-Moss and Hsiao's (2011) study, where participants acknowledged the conflict between wanting the perceived 'freedom' of youth, and the responsibilities of fatherhood through which such freedoms were compromised.

A number of studies reported negative stigma associated with teenage fatherhood. For teenage Mexican fathers, stigmatization and negative attitudes could begin with the family of the mother of the child but were also noted more publicly among older people who gave them dirty looks when they were out with their children and partners (Jaime, Robbins & De Los Santos 2016). Teenage Swedish fathers similarly talked about stigma within society and suggested that this stems from atypical masculinity/fatherhood (Johansson & Hammarén 2012). These young men defied expectations regarding fathers as being in their early thirties and middle class, and invoked negative judgements as a result. While negativity was evident, there were also sources of positive support, with Bordignon, Meincke, Soares, Schwartz, Barlem and Lundardi (2015) noting that the church and some neighbours were supportive, and Johansson and Hammarén's (2012) data suggesting teenage fathers received praise for remaining involved in their children's lives.

The meaning of fatherhood

One meaning that was predominant in this literature was the push toward self-improvement. In some research, teenage fathers talked about moving away from street life, gangs, drugs and excessive drinking in order to become better fathers (Finch & Bacon 2015; Foster 2004; Jaime, Robbins & De Los Santos 2016; Wilkes, Mannix & Jackson 2011). This fits well with the notion of a positive transformation and adds to the weight of evidence suggesting fatherhood can become a significant turning point for otherwise directionless teenagers.

The emotional and psychological impact of parenthood was to the fore when, as loving fathers, participants talked about their emotional connection and unconditional love for their children. They also expressed pride

in their accomplishments, embracing the new and developing identity of father (Jaime, Robbins & De Los Santos 2016). Fatherhood provided an increased sense of control over their lives and provided a strong purpose around which they could concentrate their energies (Wilkes, Mannix & Jackson 2011). The realization that they had the capacity to create life and the unique love that is both given and received from a child led to greater happiness and fulfilment (Parra-Cardona, Sharp & Wampler 2008).

The meaning of fatherhood was explicitly the focus of Johansson and Hammarén's (2012) research that analysed the blogs of teenage Swedish fathers. The blogs provided a new social space that enabled the narratives that largely countered the traditional negative stereotypes of teenage fathers. Indeed, these accounts projected positive and empowering constructions of teenage fathers. The narratives identified changing identities resulting from the responsibility and development of being a father. The young men spoke of feeling lost before they became fathers. Their children were a cause for change to become better people, with focus and purpose (Johansson & Hammarén 2012). This work aligns closely with the transformative discourse where fatherhood can serve as a catalyst to profound psychological change.

While the pregnancy was often unexpected, this was not a matter of pregnancy out of ignorance. The surprise factor did stimulate teenage fathers to consider the parenting they had received from their fathers and how this might be improved (Wilkes, Mannix & Jackson 2011). This sentiment resonates with the notion of intergenerational repair, and the kind of improvements included material and emotional resources. One fundamental aspect of such repair involved being present to make an emotional connection with the child. This was especially important for those whose fathers were mostly absent, and these teenage fathers were left with a strong desire to be different, to be better, and to be present (Jaime, Robbins & De Los Santos 2016). More generally, the teenage fathers were confident about their ability to be present, loving and caring fathers. Possibly in the light of their perceptions of their own childhoods, they were concerned about how their children would see them as fathers and this provided an incentive to be better fathers (Foster 2004). Undoubtedly, such repair comes at a cost, involving self-sacrifice and displacing the sometimes egotistical concerns of teenage years with the responsibilities of fatherhood, and

dealing with the struggles outlined above which are commonly entailed. Providing materially and emotionally was important and meant making sacrifices associated with putting the needs of the child first (Jaime, Robbins & De Los Santos 2016). Ideally, caring, present, engaged fatherhood prioritizes the child, and this extends to the wider notion of a family and may include love for the mother of the child.

For many of the African American men in Paschal, Lewis-Moss and Hsiao's (2011) study, fatherhood meant being a provider and providing nurturance. The economic imperative to provide for one's offspring was closely associated with fatherhood and masculinity and was regarded as a measure of being a good father and of being a real man. The issue of financial assistance and provision was more likely to be enacted when the relationship with the child's mother was intact and when the teenage father was employed. Under these circumstances, the teenage father would refer to 'his family' and was more likely to financially support the child's mother. This support was often supplemented by assistance from the teenage father's parents and wider family. Nurturance meant being actively involved with the child. This entailed spending time together, being physically present, providing emotional support and involvement in care giving.

However, a small group of participants in the 2011 study didn't identify with their role as a father, and expressed opposition to the idea of fatherhood. This group of participants thought they had no real obligation to be providers or to be involved in their children's lives (Paschal, Lewis-Moss & Hsiao 2011). In many regards, they saw themselves simply as sperm donors. All but one of the men holding this view had a negative relationship with the mother of their child. The pregnancies were seen as the fault of the mother and an attempt to 'trap' the man intentionally by not taking steps to prevent pregnancy, which was seen as being a woman's responsibility (Paschal, Lewis-Moss & Hsiao 2011).

For the young Hispanic fathers in Parra-Cardona, Sharp and Wampler's (2008) study, fatherhood meant the need to provide financial and emotional support along with the need to embrace their ethnic background. The need for financial provision is far from uncommon and the emotional support was talked about in terms of being actively involved in their children's lives and showing them unconditional love of the kind they were

denied as children. Another feature of what fatherhood meant to these young men involved the importance of proudly embracing their ethnic background and the Hispanic/Mexican values that stress the importance of family. This emphasis on the importance of family leads to the final thematic – that of relationships.

Relationships

In our research, the discourse of positive transformation highlighted a number of key areas where positive features were evident, and one of these addressed the issue of relationships with significant others. Youthful egocentrism gave way to greater understanding and compassion. Fatherhood contributed to shrinking teen detachment and a preference for increased extended family interactions. This reflection on the meaning of important social relationships carries with it the prospect of teenage fathers becoming more caring human beings and this is evident in the recent literature.

Jaime, Robbins and De Los Santos (2016) discuss how for the teenage father the birth of their own child is catalytic, whereby the historic framework of relationships with their own parents, and particularly their fathers, looms large. Those whose fathers were largely absent regard this neglect as something they seek to redress by way of intergenerational repair. They seek to embrace the responsibility of fatherhood and 'do better'. This underscores the extent to which these differing categories (struggles, meaning and relationships) merge into each other with the differentiations being important but far from absolute. When considering the influence of their own parents, participants in Parra-Cardona, Sharp and Wampler's (2008) study talked about a gendered sense of deprivation. While they were able to rely on their mothers, for many their fathers were either absent or emotionally unavailable. The loss of the father-son bond was evident, with participants still wanting contact with their fathers and feeling they had missed out on lessons in masculinity and what it meant to be a 'real man'.

Having a child also meant the relationship with the child's mother became an important point of focus. This was of critical importance, since it mediated the kind of relationship they could have with their child. In

some cases the pregnancy strained the relationship, but with others the couple were brought closer together (Jaime, Robbins & De Los Santos 2016). The teenage father's desire to be a good father was made extremely difficult if they were separated from their baby's mother (Parra-Cardona, Sharp & Wampler 2008, Wilkes, Mannix & Jackson 2011).

Cultural overlays provide a rich and complex lens through which to consider relationships, as Bhana and Nkani (2014) show in their study of South African Zulu, where unwed pregnancy requires the father to pay money to the woman's family. Failure to pay meant the rights of access to both mother and child were withdrawn. When access was available the freedom of the young couple was restricted by the woman's family, resulting in some of the men taking on other sexual relationships. While still professing love for the mother of their child, these young men separated love and sex within a particular cultural context where having multiple sexual partners is regarded as an important aspect of masculinity. Unsurprisingly, the mothers of their children are not extended the same sexual freedom and are culturally not permitted to have multiple partners.

The final cultural overlay considers the impact of criminality on teenage fatherhood and draws on the research by Shade, Kools, Pinderhughes and Weiss (2012) that looked at the developing identity of fatherhood among young Californian men who were also involved in the criminal justice system. Four patterns of fatherhood were identified: those who embraced fatherhood, those who were barred from fatherhood, those who were ambivalent and those who rejected it. Those who embraced fatherhood took great pride in co-parenting and sharing parental responsibilities. They also talked about the mother of their child with deep love and respect and prided themselves on sexual fidelity to their partners, which they regarded as an important feature of being a good father. The majority of men were prevented from fathering due to significant barriers. These included resistance from the child's mother or her parents, who restricted access to the child, incarceration, mental health issues and limited financial means.

In spite of these considerable barriers, these teenage fathers expressed a strong desire for a relationship with their children and hoped this would provide a motivational boost by encouraging them to make the necessary changes to their lives. Those who were ambivalent were most likely not to

have a caring relationship with the mother of the child and were likely to be unemployed. At one level they believed they should make a financial contribution but were unsure how to do this. Finally, there were some who actively rejected fatherhood. Typically, they had fathered a child with a woman with whom they were not in a meaningful relationship. The mothers of their children were, accordingly, devalued. They held negative views of women and took no responsibility for contraception, believing this was exclusively the woman's responsibility. In some cases, the men faced lengthy prison terms that constrained paternal involvement. While they rejected the current circumstances of paternity, they talked about wanting children in the future when it was time to settle down with the right partner.

Summary and concluding insights

Our research into the experience of teenage fatherhood challenged the prevailing negative stereotypes. Mostly the teenage fathers who have been the subject of these studies are far from disinterested and unwilling participants in their children's lives. Fatherhood entails many responsibilities. While this is true for fathers of all ages, it is acutely so for the teenage father. Are teenage fathers too young to be considered as successful responsible parents? The contemporary research suggests not, but when responsibility is operationalized through the traditional male imperative to provide, the challenges faced by the teenage father are considerable. These include the demands of work, fiscal responsibilities and parental obligations. Further, when working, these young men become time poor, which impacts on the expectations that as new fathers they will be nurturant, caring and willing to spend time with their children.

The discourse of intergenerational repair has retained its currency in the latest literature. Indeed, the desire to ensure their children benefit from better parenting has become even more pronounced in the recent literature. Fatherhood stimulated thinking about their own fathers and this was

particularly so for those whose fathers had been absent. This left a strong wish for these teenage fathers to be different, to be better and to be present.

The positive transformative function of fatherhood whereby becoming a parent became a motivational turning point also retained currency. The push toward self-improvement was prominent in the new literature, with young fathers talking about lifestyle changes in order to become better fathers. Prior to parenthood they often felt lost; their child provided the impetus to become better people. The trend for new fathers to become more empathic, caring men was also evident in changing identities and relationships.

The original discourse of dual identity saw, at its simplest, young men thrust into accelerated maturation in terms of social expectations as one identity was replaced with another. The new literature suggests that as loving fathers the emotional and psychological impact is evident. Participants talk about emotional connections to their children, pride in their achievements as new fathers, and increased control over their lives, which now involved a strong sense of paternal purpose. The unique love which is both given and received from a child increased their happiness and fulfilment. However, not all identified with their role of father, with one small group resisting any obligation to provide for their children. This group claimed to have been trapped by their partners' failure to take responsibility for contraception and – with only one exception – these men had negative relationships with the mothers of their children. This apparent hostility toward fatherhood and the child's mother highlights the importance of relationships, to which we now turn our attention.

Our original research documented a more mature outlook toward the importance of social relationships. Teenage aloofness was replaced with an appreciation of the importance of wider family relationships and the support afforded by these relationships. The most recent literature has supplemented this understanding and begun to show a more sophisticated and complex understanding of teenage fatherhood and the structural relationships which are fundamental to its viability and success. The notion of gendered deprivation came to light when participants considered their own parents and noted they had been able to rely on their mothers while, for many, their fathers had been absent or emotionally inaccessible. Accordingly, they felt deprived of lessons in masculinity.

In the complicated assemblage of relationships that support successful teenage fatherhood, prime importance must go to the relationship with the mother of the child. The importance of this cannot be overstated, since it mediates the relationship the teenage father can have with his child. The aspiration to be a good father became strained if the teenage father was separated from the baby's mother. The grandparents on both sides also assume great importance and can be a foundational source of support.

Finally, the complexity of these relationships was demonstrated by studies that considered two key overlays – culture and criminality. For South African Zulu, customs dictate that in the case of an unwed pregnancy the father must pay money to the woman's family in order to retain access to both child and mother. Incarceration had an impact on fatherhood for young Californian fathers, some of whom embraced fatherhood; others were prevented from participation; still others remained ambivalent; a small number rejected this completely. The complications for teenage fathers behind bars are almost overwhelming as they attempt to negotiate resistance from the child's mother, and/or her parents, incarceration, mental health issues and extremely limited financial means.

This chapter has assessed the currency of our research conclusions in the light of a review of contemporary international studies of teenage fathers. It is somewhat gratifying to be able to report that the tentative findings of our earlier exploratory research have largely been supported. The latest studies do support the key discourses, but also supplement and expand these in ways which contribute to our knowledge of teenage fatherhood. We did get some things right – and the recent epistemic validation of this work has added layers of complexity and depth to our fundamental understanding of this important, and often overlooked, aspect of teen parenting.

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ANNELIES KAMP AND MAJELLA MCSHARRY

Coda: The Promise of Re/Assembling the Pregnant and Parenting Teenager

[...] my definition of magic in the human personality, in fiction and in poetry, is the ultimate level of attentiveness. Nearly everyone goes through life with the same potential perceptions and baggage, whether it's marriage, children, education, or unhappy childhoods, whatever; and when I say attentiveness I don't mean just to reality, but to what's exponentially possible in reality.

— HARRISON (1988)

In 2008, *The Guardian* published a report in the US News section under the headline *17 Pregnancies at US School after Girls Make Baby Pact* (Pilkington 2008). The article reported a situation in Gloucester, Massachusetts – population 30,000 – where seventeen fifteen- and sixteen-year-old students at one school had become pregnant, eight having ‘entered a pact’ to have their children and raise them collectively.

Christopher Farmer, the school superintendent, said inquiries were started when the number [of pregnant students] reached ten. ‘They are young white women. We understand that some of them were together talking about being pregnant and that being a positive thing for them,’ he told Associated Press. (Pilkington 2008)

The article does not speak with any of the young women, nor does it consider what might underpin their desire (or not) to conceive. Dismay is reported that the father of one of the babies is a twenty-four-year-old homeless man. The article does not speak with him, nor does it engage in any way with the question of his relationship with a much younger woman (nor whether there should be equal amounts of ‘spirited debate’ about his homelessness). As much as the young women are singularly (negatively) defined by their pregnancy, he is singularly (negatively) defined by his homelessness.

On the basis of the article, reported as an international story, there is little consideration given to the assemblages formed by these girls, and particularly the eight who wish to 'parent collectively'. Towards the end of the article, unnamed 'commentators' make reference to the role of the media and '[point] to films portraying pregnancy in a humorous and empathetic light' (Pilkington 2008). Throughout the article there is a familiar narrative that the decision to parent under the age of twenty is of necessity a bad one and that it is equally bad to portray pregnancy in ways that are either 'humorous or empathic'.

Rather, the focus of the article is stopping: stopping teenagers have sex and, should that not work, stopping them having children. Within the school, we learn that the medical director and school nurse had both resigned in protest at the policy of the local hospital that refused to allow them to distribute contraceptives to pupils without parental consent; the hospital was 'anxious about the reaction to handing out contraception from the strongly Catholic local community' (Pilkington 2008). In this assemblage, the potential reaction of a conservative 'public' seemingly carries greater weight than the needs of young people to manage their own fertility. Within the broader context, budgetary cuts with the state infrastructure had led to the loss of sex/reproductive health education programmes. Yet 'experts in teenage sexual behaviour' were said to be 'baffled by the events in Gloucester' (Pilkington 2008).

Here, having reached the closing pages of this collection, we are less baffled by the ambiguity that can surround pregnancy and parenting. We would suggest that the events at Gloucester are far more complex than watching too much *Juno* and lacking ready access to contraception. As the previous chapters have portrayed, embodiment, desire, media, consumerism, community, religious doctrine, self-worth, health initiatives, belonging, aspiration, family, poverty, government policy, love, drugs, sexual assault, school and any number of other actors can be a part of this particular assemblage. To understand teenage pregnancy and parenting – to pay the ultimate level of attentiveness that results in support for what is exponentially possible in the reality for teenage parents and their children – demands a stance of sustained interest. In what follows, we take up the idea of becoming to canvas a range of observations that arise from the chapters

in the collection. This coda does not sum what has gone before; rather, it introduces a number of thoughts 'to be continued' (Massumi 1992: 140), thoughts that we hope will open space for a productive re/assemblage of the pregnant and parenting teenager.

Preoccupation with age-related social norms and transitions significantly shape the unique event that is pregnancy, especially for younger and older women. Adolescence is a period increasingly characterized by various sociological arguments of some form of 'delayed adulthood' yet this is set against the biological reality of earlier onset puberty: an assemblage that, in itself, complicates the plotting of pregnancy along a linear chronological timeline. Through informal 'rules', teenagers are informed of the age-related structuring of the life course. Settersten (2004: 86) suggests that firstly, there are *prescriptions for*, or *proscriptions against* engaging in particular behaviours or taking on particular roles at specified points in the life course. Secondly, there is a general consensus about these rules. Thirdly, the rules are enforced by imposing positive sanctions to keep young people 'on track' and negative sanctions to get young people 'back in line'. Essentially, while life is full of transitions and role acquisitions, there is an expectation that most of these take place at age related, socially determined junctures. However, discontinuities frequently interrupt the rhythm of the life course and these discontinuities during adolescence can act as turning points that deflect earlier trajectories and send young people on divergent routes into and through adulthood (Elder et al. 2011). For some, teenage pregnancy will act as a turning point, but for all it implies a transition. The pages of this collection take up the human experience of this transition.

In this 'taking up' a number of authors have touched on concepts that evoke those used by Deleuze and Guattari to break down 'State thought' (Deleuze and Guattari 1987) – the kind of arborescent, molar thought that commonly underpins such normative perspectives on 'the correct life course' as well as thinking about any number of policy concerns. This kind of thought does not like equations other than the 'closed equation of representation, $x = x = \text{not } y$ ($I = I = \text{not } \text{you}$)' (Massumi 1992: 6). Teenagers who are pregnant or parenting reside outside the closed equation of $x = x$: a pregnant or parenting teenager is not a 'normal' teenager, nor is s/he a 'normal' pregnant person or a 'normal' parent within State thought. In

being both, s/he is 'deviant' in disrupting 'the proper chronology of events' (Lesko 2001: 138), even more so in the context of schools where teenagers are often compelled by law to be. As students, they perplex secondary school teachers: if they are already adults by virtue of their status as parents, what place do they have in schools increasingly concerned with keeping youths 'socially young' (Lesko 2001: 145)?

By contrast, nomad thought (Deleuze 1973) allows room to distinguish between the 'normal' agent – be they a normal teenager or a normal parent – and an indefinite one, a kind of 'anybody'. While the 'normal' is a statistical entity, the 'indefinite' is a vital potential (Rajchman 2000, 87), a vital potential that is evident in the narratives in this collection. In this, the focus rests positively on 'anomalies' which express the assemblage that is unique to a life, rather than resting negatively on departure from a majoritarian norm. These anomalies constitute a becoming that always involves 'desire'. In the Deleuzian sense, desire references an indication of a productive force, of life as a process of striving (Colebrook 2002); desire constitutes assemblage and is constituted by assemblage (Deleuze and Guattari 1987). Desire does not arrive 'ready-made', cannot be granted or demanded by someone else, or purchased: it is assembled over time in the context of our life experiences (Jackson and Mazzei 2012), including the experience that is pregnancy and parenting, whenever they occur. The experience of pregnancy – whether chosen or not – and the events that follow it can often evoke desire: the desire to move beyond the limitations of what was, to lose the characteristics of the previous stage, in the process allowing something with new, useful, potentialities, to come into being.

Within this collection, we share and form connections with our own narratives as women who have had, who are having, children. In 1976 one of us became pregnant, and went on to become a teenage parent, on the 'wrong' girl path; the other walked the 'right' girl path. We meet in this collection – both academics, both parents. Majella traced her own embodied experience of pregnancy and articulated the recognition of her fertility 'optimization'; Annelies traced a different embodiment of pregnancy, of the kind Majella can readily imagine. Both Majella and Annelies 'hid' their pregnant bodies, holding on to privacy, albeit for different reasons. Both experienced completely embodied experiences of pregnancy. While

Majella, as a married woman of appropriate age, still has at times to defend her decision to breastfeed in the context of twenty-first-century Ireland, Annelies was denied the opportunity to even begin such a defence: her breasts were bound in an (unsuccessful) attempt to suppress lactation. Breastfeeding was not considered advisable for teenage girls in the 1970s whose babies would, should, be given to others to raise. Yet, as we conclude this collection in mid-2017, we learn that skincare company Dove has been heavily criticized for an advertising campaign on the basis that it perpetuates a negative perception of breastfeeding in public. One advert states ‘75% say breastfeeding in public is fine, 25% say put them away.’ The company has responded by suggesting that the aim of the campaign is to celebrate different approaches and opinions around parenting. A celebration of ‘your way’. Yet even the existence of an advertising campaign that aligns statistical public opinion with the breasts of the feeding mother, preserves the labelling of ‘right’ and ‘wrong’ and an apparent entitlement to ascribe such labels.

How do the narratives presented in this collection speak to dominant discourses of teenage pregnancy and parenting and, more broadly, to critical youth studies? A number of potentialities appear. First, there seems potential to trouble the kinds of research commonly reported in media at times of heightened concern about young people, as a group. An example would be the ‘expert’ narrative that young people – adolescents in this particular discourse – are inherently prone to risk behaviour due to the immaturity of their brain development (see Arnett 2010; Galvan 2006; Johnson, Sudhinaraset and Blum 2010). While the detail of this literature is beyond our concern here, in general neuroscience argues that the brain continues to grow through and beyond the teenage years with the prefrontal cortex of the brain – the part of the brain ‘most often implicated in coordinating attention, impulse control, and planning’ (Johnson, Sudhinaraset and Blum 2010: 10) is possibly the last area to mature, and may not be developed structurally and functionally until beyond the teenage years. While this discourse is the subject of ongoing debate in the developmental sciences, it makes good reading for a population seeking answers to why teenagers do what they do – they just aren’t capable of regulating their behaviour.

The collection troubles easy acceptance that teenagers cannot plan, cannot assess options, cannot choose a course of action and execute it. While it may be the case that the body and the brain do go on growing beyond the teenage years, young people are more than just their brain development. In the chapters gathered here, teenage fathers embrace the opportunity to reflect on their life experiences and develop new storylines that break with the kinds of nurturing, or lack thereof, that they experienced in their own childhoods; teenage mothers such as Nicholas' mother in Chapter 2 experience desire for a reconfigured life assemblage that includes education for themselves, and for their children. They gain agency. This 'gain' is encapsulated in a short film entitled *Heartbreak* went viral in Ireland in January 2017, being viewed 650,000 times in just twenty-four hours. The poem by Emmet Kirwan that forms the narrative for the film, tells the story of one young woman's journey from her teenage pregnancy to the years that follow as she raises her son as a single mother while also balancing low paid work and a return to education. In some respects, the film does perpetuate easy explanations that teenage parents always come from 'those kinds' backgrounds defined by 'lack of'. Yet it also disrupts these assumptions and gives the teenage mother an empowered narrative about what can happen, what will happen, next. Her return to education enables her to articulate her 'incandescent rage' and to mobilize a new storyline. Teenage parenting can be, and often is, the making of young people who might otherwise not even survive the trauma of their own teenage years. This is not to say that 'spectacular youth' – those young people who occupy the edges of social inclusion – are only and always the young people who become parents. Young people of all walks of life become teenage parents. Young people who come from advantaged social backgrounds are often able to manage the event that is teenage pregnancy out of the glare of public view and opprobrium. Yet, these advantaged young people are also the young people who manage *least* well when confronted with teenage pregnancy and parenting given the scale of the disruption to their anticipated pathway.

However, we do not wish to romanticize the positive potential of teenage parenting, particularly not for those whose backgrounds do not equip them with high levels of economic, cultural and social capital. Teenage pregnancy and parenting is a complex endeavour, made more complex

by the expectations and structures of the neoliberal political economy. While neoliberalism remains the dominant policy discourse the expectation will be that the individual and those close to them should shoulder responsibility for fashioning a way to combine parenting, education, employment and citizenship in an entrepreneurial life trajectory. It is now well-established that the education of a mother is a central indicator of the future well-being of her child; thus, the importance of meaningfully identifying and responding to the needs to pregnant and parenting students seeking to complete their education in the hyper-competitive labour markets of the risk society (Beck 1992) cannot be overemphasized, even if we might fervently oppose a discourse that valorizes paid work over parenting, particularly parenting done by anyone under the age of twenty (Allred and David 2010).

In each of the four nations that are featured in this collection – the United States of America, the United Kingdom, the Republic of Ireland and Aotearoa New Zealand – there are concerns with specific groups of young people who are more likely to become pregnant, and are more likely to go on to become young parents. It is well established that rates of teenage parenting can be explained by socio-economic and demographic characteristics of the region. Yet this statistic, on its own, does not illuminate the experience of teenage pregnancy and parenting. In Aotearoa New Zealand, the regions with high rates of teenage pregnancy also have large Māori teenage populations. Māori have a higher rate of fertility than the general population, and Māori teenagers have higher rates of fertility than other teenagers (The Families Commission 2011). At the same time, there is a different cultural paradigm at play for Māori, in much the same way as there is a different cultural paradigm at play for young Traveller women in the Republic of Ireland.

Cultural dynamics, and their diverse implications for individual teenagers, frequently provide the fall-back position for those who would not wish to trouble their own narratives of who a teenage parent is, and can be. Urban myths abound concerning young women having one child after another (usually with the stated or implied rationale that this is so she will be supported by welfare and provided with a home – at the expense of ‘us’ – the worthy tax-paying citizens) are not supported by empirical evidence.

Rates of teenage parenting continue to decline and, in New Zealand at least, there is no evidence that even high-rate regions have unusually high rates of repeat childbirth to teenagers (The Families Commission 2011). Within this mythical narrative, the pivotal social role of mothering, one that is, in some contexts, placed above all others for those parents who are not teenagers, is apparently of no value at all.

Thus, the task of re/assembling the pregnant and parenting teenager highlights the central importance of research, and writing, that is contextualized and that allows space for the voices of young people as the authorities on their own lives. In this collection, the field(s) we have traversed illustrate the many meanings of teenage pregnancy and parenting. We cannot pre-assemble teenage pregnancy or parentings in ways that are blind to the full range of actors be they contextual, historical, cultural, digital, emotional, embodied, imaginary. As we write these final words, we find ourselves in a global context that is torn – the austerity that was implemented in the wake of the 2008 Global Financial Crisis has now been superseded by sharp political swings with the divisive agendas that have resulted in the election of President Trump and the decision of the United Kingdom to Brexit. Truth claims, broadcast through ‘factual’ representations that travel further and faster than narratives such as those contained in this collection, are easily derived from othering-narratives given the resonance they have with what we ‘already know’ (Bessant 2008). In this context, sustained advocacy and ‘spirited debate’ is required to ensure that young people who are pregnant and parenting – disrupting largely conservative norms – are able to affect what are often powerful transformations, be they spectacular or silently navigated, are not forced to a position of marginalization by those that may seek to silence the individual voice, seek to continue to normalize convenient, deficit, representations of teenage pregnancy and parenting.

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