

**Teenage Pregnancy & Mothering in the Face of Social Exclusion: Discourse,
Phenomenology, and an Affirmation of Positive Maternal Identity**

by

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ABSTRACT

In contemporary Western society teenage pregnancy and motherhood are understood almost exclusively as problematic, undesirable, and in need of intervention. Social anxieties are seemingly paradoxical, however, given the decades of steadily declining, and current historically low rates. Using poststructural analysis, psychoanalysis, and autobiographical narrative, the purpose of this study was to examine the underlying power dynamics inherent in discourse about teenage pregnancy and teenage mothers in Canada and the United States, to challenge hegemonic assumptions about adolescent pregnancy, early motherhood, and young mothers themselves, and demonstrate that stigmatizing and marginalizing adolescent pregnancy and young mothers has consequences that are counterproductive, and harmful to young women and their children at the phenomenological level. While many studies have documented the effects of adolescent pregnancy and parenting, few have examined the role of discourse itself in shaping and impacting young women's experiences, and moreover, its role in shaping, and compounding many of the adverse effects associated with teenage pregnancy and childbearing. Lastly, to my knowledge, no studies have examined the subject by drawing on and incorporating the researcher's own experiences of adolescent pregnancy and mothering.

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- Pregnancy and Immediate Aftermath

I didn't understand that I was pregnant until I was about 6 months- though it's difficult to gage the timeline, if only because my brain either didn't comprehend the situation, or if it did, shut off. Maybe I was 3 months, 4 months...I don't know. I have vague memories though of staring blankly at myself in the mirror, of putting my hands on my stomach and being confused. Not about what to do, but rather, about why I looked the way I did. At some point I became aware enough to start hiding myself under oversized hoodies, even if I wasn't entirely sure why.

In grade 8, I successfully auditioned for the school play. Several days before the play I was at drama practice being fitted for a costume that did not include an oversized hoodie. I remember the drama teacher giving me a funny look, at which point I knew I needed to do something. My plan: go to the golf course at night, bring blankets, have baby, anonymously drop baby off at hospital, sneak back in before dawn, and no one would know. This brilliant plan came crashing down on stage in front of a gymnasium filled with parents several nights later. I remember people asking me afterward if my character was supposed to be pregnant. My mother left the school before me. I tried to not go home but was driven home.

I walked through the door and tried to lock myself in the washroom, having designs on escaping through the window and making a run for the golf course. My mother cornered me before I could lock the door. I distinctly remember mascara and eyeliner running down her face as she tried to make me show her my stomach. When I refused she pulled my shirt up and collapsed. I insisted over and over again that I wasn't pregnant. She took me to the doctor the next day. I was 8 1/2 months pregnant.

The immediate aftermath: My grandparents lived across the street. My grandfather was so upset he got in his car and, not telling anyone where he was going, drove to rural Quebec from Nova Scotia to "think". He came back a week and a half later. At this point my parents were in the middle of divorcing. I remember my father's only words to me on the phone being "how could you do this to your mother?" My

school is informed I have mono. I tell absolutely no one outside of my immediate family otherwise until my daughter is two and a half months old and I start grade 9 following the summer break.

“We've got to ask our community leaders and all kinds of organizations to help us stop our most serious social problem. Tonight, I call on parents and leaders all across this country to join together in a national campaign against teen pregnancy to make a difference. We can do this, and we must” (Bill Clinton, 1995)

“Babies are the new handbags” (*Maclean's Magazine*, 2008)

CHAPTER 1

INTRODUCTION

In contemporary Western discourse pregnancy and motherhood are depicted as key markers in a woman's life. Pro-natalist public policy¹, the marking (and mass marketing) of Mother's Day, and grocery store magazine racks, for example, all indicate a cultural understanding of pregnancy and motherhood as taken-for-granted, or “natural” and desirable social activities. Embedded in this idea of motherhood are implicit assumptions about normative and problematic distinctions of fertility and motherhood, which again, we largely take to be self-evident, stable, and categorical. Yet even a brief examination of poststructuralist and feminist writings on fertility and mothering (e.g., Glennet al., 1994; Jackson, 1993; Kelly, 1996; Weedon, 1987) reveals great variability, both across and within historical periods and cultures in child rearing practices, the

¹ For example, Quebec's Allowance for Newborn Children program, offers families financial incentives of up to \$8,000 after the birth of a child. In Newfoundland and Labrador similar tax-free, universal benefits include the Progressive Family Growth Benefit Program (\$1,000 lump sum payment to residents of the province who give birth to a baby or have a child placed with them for adoption on or after January 1, 2008), and the Parental Support Benefit (\$100 monthly benefit to residents for the 12 months after the child's birth or the 12 months after the adopted child is placed in the home) (www.fin.gov.nl.ca).

relationships between mothers and children, and relationships between mothers, children and significant others.

In the context of contemporary Western society, teenage pregnancy and early motherhood are understood almost exclusively as problematic, undesirable, and in need of some sort of intervention. Society's anxieties and taken-for-granted assumptions about the "problematic" nature of teenage pregnancy and childbearing are paradoxical, however, not only because they overlook the historical and cultural variability and fluidity of childbearing and childrearing practices, but also because, and perhaps even more so, for the reason that they contradict over 50 years of steadily declining teenage childbearing rates. Contrary to the public's widespread perception, early childbearing rates actually sit at an all-time historic low.

This research starts from the position that fertility, and motherhood, our assumptions about what constitutes normal and transgressive practices, and our universalization of the 'ideal' characteristics of the 'good' mother are dependent on one's particular time and place. It challenges the notion that fertility, motherhood, and mothering are 'natural' social activities: that they are authentic, stable, or somehow, knowable. In doing so, this thesis challenges the boundaries used to define and confine concepts of normative fertility and motherhood in contemporary Western culture, and the conditions upon which these boundaries exist and operate. I explore these boundaries and inconsistencies by using discourse about teenage pregnancy and teenage mothers as my key site of inquiry.

An emphasis on teenage pregnancy and teenage mothers serves as my logical point of entry for several interconnected reasons. First, throughout the Western world teenage pregnancy and teenage mothers are almost universally accepted as problematic

and in need of intervention. As it falls so decidedly outside the boundaries of normative motherhood, we are rarely called upon to challenge or to question the variables that have come to define and shape the problem as such. To do so, however, raises complex and nuanced questions about fertility and mothering, and more specifically about what it means to be ‘a good mother’. In the more immediate sense, the purpose of this study is to critically examine the underlying power dynamics inherent in hegemonic cultural discourse about teenage pregnancy and teenage mothers in Canada and the United States. In doing so, I challenge taken-for-granted assumptions about adolescent pregnancy, early motherhood, and young mothers themselves. In the broader sense however, examining the problematization of teenage pregnancy and childbearing in dominant discourse allows me to probe considerably more complex questions about normative and deviant fertility and motherhood, as well as questions of class, race, and gender.

Fundamentally, teenage pregnancy and mothering serves as this study’s point of entry because of my own experience of pregnancy and becoming a mother at the age of fourteen. While a multitude of studies have documented the effects of adolescent pregnancy and parenting on young women and their children, very few studies have examined the role that discourse itself plays in shaping young women’s experiences of pregnancy and mothering, and moreover, its role in shaping, and compounding many of the adverse effects commonly associated with teenage pregnancy and early childbearing. At its foundation, my research ultimately hopes to show that stigmatizing and marginalizing adolescent pregnancy and young mothers as transgressive has consequences that are not only counterproductive but also harmful to young women and their children at the phenomenological level.

Being pregnant and becoming a mother at the age of fourteen has, without a doubt, permeated my identity and so much of what I have done up to this point in my life. Despite this, but also because of this, I have found it difficult to sit with many of my experiences beyond the most surface level. My foray into examining these experiences has therefore, proven quite challenging, painful, and even confusing for me in ways that were not easily foreseen. Because of this, the distance between the aim of my thesis and its actual course has also proven challenging, painful, and confusing both personally and theoretically. It is a paradox that has in and of itself become a central focus of the research, which I examine and challenge throughout the thesis.

While the aim of my thesis is not to speak for, or on behalf of pregnant teenagers and young mothers as a group, it is my hope that the research yields certain insights, which may not otherwise be obvious or accessible to other researchers in this area of study. Indeed, to my knowledge there are no studies that examine the dynamics of teenage pregnancy and mothering, and discourse, from a first hand, researcher-subject position. Again, the distance between my intentions, the processes of putting them into action, and the final outcomes has proven challenging and complicated. At this point I will simply reiterate that it is my hope that in critically examining my own experiences and perspectives, I can offer unique insights into those of a social group that typically finds its voice excluded from much of the conversation on teenage pregnancy and mothering.

Stigma

Social exclusion and stigma are key themes explored throughout the body of this research. I argue that teenage mothers represent an especially stigmatized and

marginalized category of problem mothers in contemporary Western society, and that dominant cultural discourse reinforces the marginalization and stigmatization of pregnant teenagers and young mothers from a myriad of angles. For example, ostensibly proactive teenage pregnancy prevention campaigns routinely utilize alarmist discourse and shame and blame tactics. Candies Foundation celebrity endorsed campaigns, for example, proliferate slogans such as: “You’re supposed to be changing the world, not changing diapers... Change it! #No Teen Pregnancy” (Carley Rae Jespen). Consider also New York City’s 2013 series of anti-teenage pregnancy posters (plastered en masse around city subways: “I’m twice as likely not to graduate high school because you had me as a teen” and “Honestly mom... chances are he won’t stay with you. What happens to me?”

Popular reality television shows like *Teen Mom*, and *16 and Pregnant* document (and exploit) precautionary tales about the “hardships” of teenage motherhood for television viewers’ entertainment, while attention grabbing print media headlines like ‘Why we should sterilize teenage girls...temporarily at least’ (*The Daily Mail*), and ‘Suddenly teenage pregnancy is cool?’ (*Macleans*) sell newspapers and magazines to the masses.

In the political arena social anxieties about the alleged problem of teenage pregnancy and teenage mothers are routinely stoked as a means of garnering support for cuts to social spending². For example, throughout both of his terms in office President Bill Clinton made a point of singling out teenage pregnancy and young mothers when

² From a policy stand point, the marginalization and stigmatization of young mothers was pushed to the forefront with such punitive public policies as the 1996 Personal Responsibility and Work Opportunity Reconciliation Act, and Nova Scotia’s 2000 Employment Support and Income Assistance Act: (PRWOR) (PL 104-193), also known as the 1996 Welfare Reform Act, was signed in to law on August 22, 1996, by President Bill Clinton. The Act is described by the U.S. Government as "a comprehensive bipartisan welfare reform plan that will dramatically change the nation's welfare system into one that requires work in exchange for time-limited assistance".

speaking publically about taxation and welfare reforms. In his first State of the Union Address (1995) he called unmarried teenage mothers both, the greatest problem facing the nation, and a crisis of the spirit (Pillow, 2004, p. 46). Later in a 1997 weekly radio address, he declared, “we have to make it clear that a baby doesn’t give you a right and won’t give you money to leave home and drop out of school” (Ibid). Lastly, academic commentary about the inevitable costs and consequences of teenage pregnancy and childbearing continues to inform and buttress popular culture, public policy, and political rhetoric (e.g., Jaffee et al. 2001; Larson, 2004; Traister, 2009).

Dominant cultural discourse reinforces the marginalization and stigmatization of pregnant teenagers and young mothers from multiple angles, not only in terms of the medium, but also in terms of the angle of the message. The young girl who becomes pregnant and decides to parent is undoubtedly assumed to have made the wrong personal choice, yet the costs and consequences of her poor decisions are also framed as extending well beyond the individual young mother and her children. For example, individual families bear the weight both financially and emotionally, and oftentimes exponentially. Studies have even shown that teenage pregnancy can have a “contagious effect” within families, whereby the probability of a younger sister having a teenage pregnancy increases when the elder sister has a baby as a teenager³ (Monstad et al. 2011).

Broader communities must also bear the weight of early childbearing. In the United States, for example, discourse commonly emphasizes the costs and consequences of teenage pregnancy and young mothers both, to and within African American communities. In Canada, this emphasis typically shifts to Indigenous (particularly First

³ Monstad et al. found that the probability of a teenage pregnancy went from one in five, to two in five in the case of an elder sister having a baby as a teenager (2011).

Nations) communities (Archibald, 2004), as is made evident by the following Nunatsiaq News headline: “Exploding numbers of new, immature teenage mothers are putting a huge strain on Nunavut’s health and social service system” (Nunatsiaq News, May, 19, 2000).

Beyond individual young women and their children, extended families, and broader communities, it is society as a whole (according to dominant discourse) that bears the weight of teenage pregnancy and childbearing. If teenage pregnancy prevention is a priority among policy makers and the public because of the associated high economic, social, and health costs for teenage parents and their families (Solomon-Fears, 2013), it is actually the purported costs to taxpayers that ultimately seems to guide society’s concerns and public discourse. For example, in 2008 the Center for Disease Control and Prevention estimated that teenage pregnancy and childbirth accounted for nearly \$11 billion per year in costs to U.S. taxpayers for everything from increased health care and foster care, incarceration rates among children of teenage mothers, and lost tax revenue because of lower educational attainment and income among teenage mothers. (“About teenage pregnancy” retrieved from www.cdc.gov/teenpregnancy/aboutteenpreg.htm). While these kinds of definitive figures are less available in Canada, Canadian discourse similarly depicts the alleged costs of teenage pregnancy and childbearing as resting on society’s shoulders.

At the same time, a growing body of longitudinal research contradicts the above narratives, and suggests that early childbearing is far less costly than previously thought, not only for individual women and children, but also for the taxpayer (Furstenberg, Brooks-Gunn, Chase- Lansdale, 1989; Geronimus, 1990, 2004; Kelly, 1999; McKay, 2012). Studies by Geronimus (1990), Hotz et al. (2006), and Fenelon (2011), for example,

actually found that teenage mothers from underprivileged socio-economic backgrounds are better positioned in later life than women from comparable backgrounds who wait until their 20s to have children.

According to Hotz et al. (2006) teenage mothers were overall less likely to live in poverty in later life than their older childbearing counterparts. By age 35, mothers who had children in their teen years, had actually paid more in taxes, and collected less in public assistance than their older childbearing counterparts. Geronimus (2004) has suggested several possible theories. She hypothesizes that teenage mothers have more freedom to earn a living in their 20s because their children are old enough to be cared for by family members who are young and healthy enough to do so. She also suggests that infants in poverty-stricken communities are healthier if their mothers are in their teens rather than their 20s, because poor mothers are healthier when they are younger. Geronimus' research also finds that teenage mothers are more likely to form relationships with the fathers' families, whether or not they married, which she suggests further contributes to the improved economic positions of young mothers (p. 155).

Despite declining teenage childbearing rates and more positive long term outcomes than previously assumed, a move toward conservative populism in Canada and the United States finds teenage mothers as increasingly representative, not only of the expansion of the welfare state (at the expense of the taxpayer), but actually symbolic of the nexus of many of our social ills. As Kelly (2000) points out, the images of teenage pregnancy and young mothers, however they manifest themselves, provoke intense public reaction that are quite literally, "pregnant with meaning" (p. 42). Indeed, the problem transforms so many already embedded contradictions, false assumptions, and stigmatized meanings into a single message, that it is difficult to discern what troubles society most

about pregnant teenagers and young mothers, and in turn, challenge more nuanced dialogue about the subject.

For those concerned with moral issues around sexual permissiveness, contraception, abortion, the pregnant teenager personifies unchecked female sexuality: “Spare you and your daughter the drama, emotional insecurities that come from having sex outside of marriage, bad reputation, broken dreams, unrealized potential, etc... and invest in your daughter. Let her know what love really looks like and why she is worth waiting for!” (Lindsey Isham, *No Sex in the City*, 2009). For those preoccupied with changing gender relations and family structures, the unmarried teenage mother represents the breakdown of the traditional two-parent family unit. For example, Schwartz (2012) sees the popularity of television shows about teenage pregnancy as emblematic of this breakdown... “Teen Mom curiously and carefully represents one of the greatest contemporary trends in American social life of the last few decades: the gradual diffusion of the household, or the anti-family” (*The Anti-Family. The New York Inquiry*).

For those who are worried about the breakdown of traditional cultural lines of authority (i.e., the family unit, the church, educational institutions), pregnant teenagers and young mothers represent unchecked youth rebellion. The following argument by author Faye Weldon (2008) in the *Daily Mail* speaks to this particular interpretation... “Teens are notorious for spurning adults’ advice, but when it comes to getting pregnant, their refusal to listen is more than merely annoying: it’s become a public health problem.” A 2013 blog post by Audra echoes this theme of youth rebellion and irresponsibility: “If parents spoke out and tried to do something then it might tame this cultural disaster. They need to show their irresponsible kids that there are consequences

to actions like this. Stick them in a home for pregnant teens, shun them, let them know that they're ashamed of the outcome." (*The Daily Mail*, 2013, December, 22).

For those anxious about global economic restructuring, teen mothers represent the expansion of the welfare state. Another quotation from a *Daily Mail* article drives home this sentiment quite crudely: "Just having a child because you want one and assuming other taxpayers will foot the bill shows total irresponsibility". In addition, for those distressed about poverty, and child welfare, teenage mothers represent both cause and effect: "Though many young girls "love babies", they dislike the children they grow up to be. Rearing a child is a lot more difficult than "having a baby". Watch young mothers slap their troublesome offspring in the supermarket and see what I mean." (*The Daily Mail*. February 15, 2008).

Admittedly, not all narratives about teenage pregnancy and teenage mothers are as condemnatory in tone. Pregnant teenagers and young mothers are equally infantilized as "babies having babies", and victims of difficult life circumstances beyond their control (i.e., divorce, single parent led households, poverty, neglect, sexual abuse, exploitation by older males, and so forth). The teenage mother's maladaptive behaviours and misguided decisions are viewed as the consequence of instability and psychological damage, though not any less problematic. Harriet Sergent's 2011 *Daily Mail* article, for example: "Bad girls: Explosive violence, a craving for love and the heartbreaking truth about child mothers", or the detailed link one online reader makes with respect to teenage mothers and mental health:

The product of poor parenting, with many having childhood sexual abuse or trauma. They have impulsive, erratic lives and tend to attract more traumas due to their lifestyle choices. Little structure in their lives and flit from one drama to

the next. They're Personality Disorder patients and dominate psychiatry workload, clogging the NHS and benefits systems. They detest the PD label so usually claim they're bipolar, schizophrenic etc they are manipulative, 'I'll kill myself if you send me home' and unfortunately no amount of input/treatment is ever good enough. In fact engaging with them can result in creating difficult patients who are a minefield for the Drs and social workers involved. They're a financial burden (Internet post by scotdoc) (*The Daily Mail*, March 7, 2011).

Despite being positioned as a measure (both cause and consequence) of society's moral decline, I am of the opinion that teenage pregnancy and teenage mothers ultimately serve as unique and politically expedient touchstones for broader social anxieties. My thesis examines the grounds for, and the mechanisms by which teenage pregnancy and early childbearing have come to be conceptualized as problematic and undesirable. Throughout the thesis I explore key 20th century social developments, including the emergence of adolescence as a distinct life stage, significant medical, technological, and legislative advancements (i.e., the birth control pill and abortion legislation in its emergence), changing population patterns, concerns over the fate of the traditional family, shifting gender roles, including women's en masse entry into the paid labour force, an increasingly globalized and competitive market economy, themes of privatization and the rise of conservative populism.

What is clear is that cultural narratives about teenage pregnancy and childbearing are inconsistent and difficult to tease apart. They are distinct yet inextricably intertwined, and while I explore these dynamics throughout my thesis in greater detail, there are several key points that warrant an introduction at this point. It is important to first consider how, exactly, we pathologize pregnant teenagers and mothers as problematic.

Here, I find it useful to draw on Anne Phoenix's (1987) theory of the normalized absence/pathologized presence.

Teenage Pregnancy and Mothering: What's in a name?

According to Phoenix (1987), when we talk about human experience in the abstract or general sense we tend not to state that we are, in fact, usually describing the experience of one particular group. Phoenix refers to this group as the normalized absence. Alternatively, when talking about the experience of other groups, we highlight the particularity of their experience by identifying race, disability, homosexuality, or economic marginality, for example. Phoenix terms this defining of groups through their difference as the pathologized presence⁴. When speaking and thinking about teenage pregnancy and teenage mothers, age operates as the seemingly straightforward pathologized presence. The following print headlines illustrate how age is used to define the problem as such in cultural discourse: "Children Having Children: Teenage Pregnancies are corroding America's social fabric" (*Time Magazine*, June 21, 2005); "Too Many Babies Having Babies: Young Girls Propelling into Family Life Too Fast" (*Otter Realm*, October 27, 2011); "Mothers Too Soon" (*Hamilton Spectator*, Nov19, 2011).

According to the above narrative the young mother's transgression is her decision to parent at the wrong age. The idea that teenage pregnancy and teenage childbearing are fundamentally an error in timing (Kelly, 2000) depends on several inherent assumptions, however, that demand further explanation and examination. The first taken-for-granted assumption is that adolescence is a distinct life stage in and of itself.

⁴ Phoenix points out that large quantitative studies and evidence-based research methods can serve to reinforce this way of thinking by focusing on the statistical norm and presenting this as the 'normal' in a sense of value. She also argues that policy and research related to children and families in particular, is deeply structured by the normalized absence and pathologized presence.

Adolescence is widely accepted as a distinct time of transition involving multi-dimensional biological, psychological (including cognitive) and social changes (Karunan, 2006), yet, historically speaking, adolescence is a relatively new social construction, which owes much to particular aspects in the development of the Western urban-industrial society (i.e., the application of technology to improve productivity; the affluence that this process generated; and the accompanying demographic transition) (Fasick, 1994, p.7).

While I examine the development of the concept of adolescence in greater detail in later sections, a brief look at adolescence, and the idea of early childbearing as an error in timing is useful at this point. Child psychiatry generally divides adolescence (roughly) into three distinct stages: early adolescence (11-14), middle adolescence (15-17), and late adolescence (18-21). When we speak about teenage pregnancy and teenage mothers, however, we largely ignore these gaps in physical, emotional, and mental development (Cherrington Breheny, 2005), and instead employ the term teenager as an all-encompassing and descriptive category⁵.

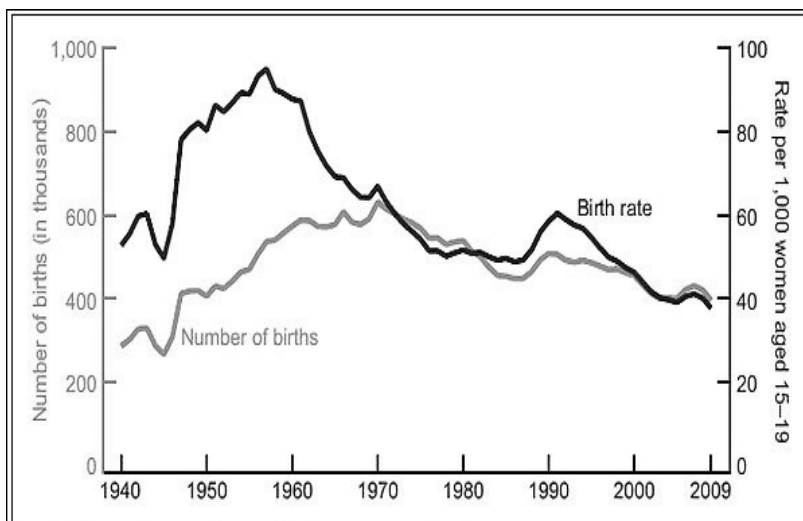
In thinking back to Phoenix's theory of the normalized absence and pathologized presence, the role of the age of the young mother in dominant discourse operates as both the absent trace and pathologized presence. On the one hand, pregnant "teenagers" and "teenage" mothers are singled out as a group of pregnant females, and mothers on account of their youthful age (pathologized presence). On the other hand, pregnant teenagers and teenage mothers are simultaneously taken for granted as a homogenous group (absent trace) where the breadth of the teenage years is otherwise generally acknowledged.

⁵ So much so that some literature on teenage pregnancy and childbearing now defines the demographic as encompassing young women up to the age of 21 (e.g. Dworsky & Courtney, 2010; Bopape 2009).

The concept of teenage pregnancy and childbearing as an error in timing depends on the acceptance of adolescence as a life stage, and a further assumption still, that the broad age range our definition of adolescence represents (11-21) is the wrong time for childbearing. Pathologizing pregnant teenagers and young mothers by their age certainly highlights the paradoxical nature of discourse about teenage pregnancy and mothering as a whole, yet it is this second assumption that warrants particular consideration. If adolescence is the wrong age, there must be a right age. What exactly is this right age for childbearing? How have we determined this age, and why? Who determined it, and is there uniformity in this ideal?

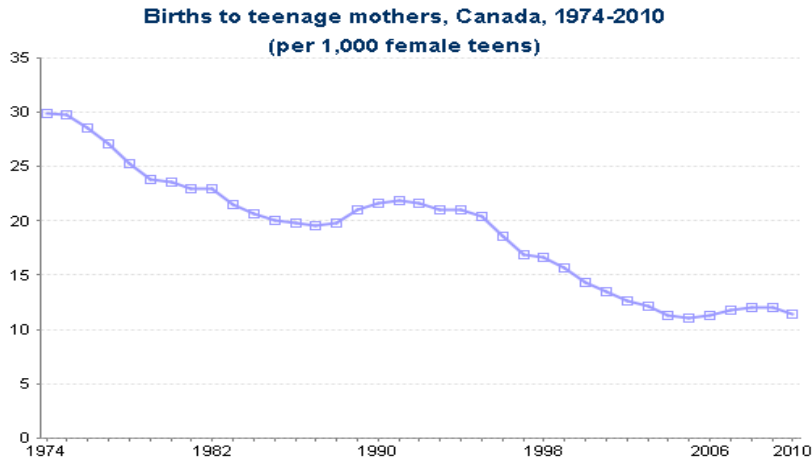
Ultimately I argue that, when troubled, questions about the “right timing” quickly become questions about the “right mother”. The concept of the right mother, or the good mother is one that I expand upon throughout my thesis, yet we cannot begin to problematize teenage pregnancy and teenage mothers without first giving some consideration to what it means to be a good mother. Fessler (2009) argues that dominant discourse about teenage pregnancy and teenage mothers reflects the assumption that “society’s evolution to later childbearing is beneficial to mothers and children because older women make ‘better’ mothers” (p.22). I argue however, that teenage mothers are seen as deviating from a model of motherhood that is based on decidedly white-middle class values and markers of success (Gregson, 2009). More specifically, I argue that teenage mothers challenge a model of success that fails to recognize that opportunities to achieve middle-class life options like higher levels of education, established careers, and higher incomes are not equally available to all groups. These are the taken-for-granted assumptions that form the normalized absence upon which discussions about teenage pregnancy and teenage mothers ultimately depend (Macleod, 2009).

If discourse about teenage pregnancy and teenage mothers is inconsistent, the timing of their emergence as problematic remains equally paradoxical. Like adolescence, the concept of early childbearing as problematic is a recent historical phenomenon; save for passing concern about early marriage, virtually no mention about teenage pregnancy and childbearing exists in literature prior to the 1960s. The timing of the introduction and acceptance of the concept of teenage pregnancy and mothers as problematic is particularly curious given that public anxiety begins to surface at the point where early childbearing rates begin to steadily decline from their post-World-War II historical highs. From a statistical standpoint the epidemic of teenage childbearing, if ever there was one, preceded the public's perception of the problem by several decades. The first figure illustrates a post-war spike, and then leveling off of early childbearing rates for women ages 15-19 in the United States. The second figure, while slightly later, demonstrates similar downward trends in Canada. The third and fourth figures demonstrate, however, that teenage childbirth rates also paralleled the overall population boom, and subsequent leveling off of birth rates following the end of the war.

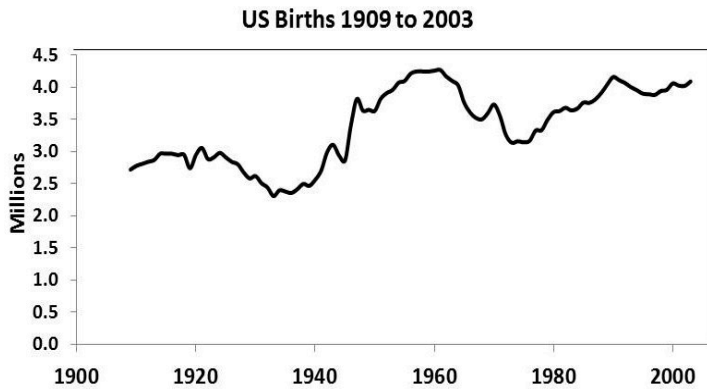


NOTES: Data for 2009 are preliminary. Data table for Figure 1 is available from:
http://www.odc.gov/nchs/data/databriefs/db58_tables.pdf#1.
SOURCE: CDC/NCHS, National Vital Statistics System.

National Center for Health Statistics/CDC

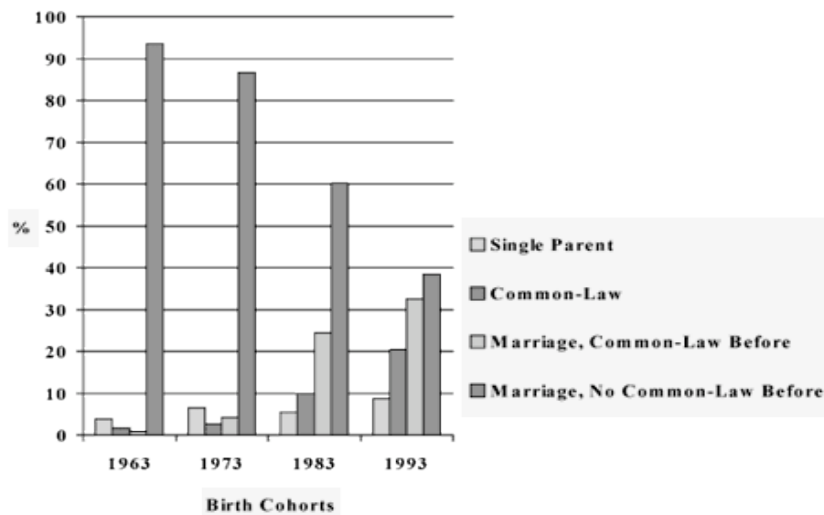


Employment and Social Development Canada (<http://www4.hrsdc.gc.ca>).



This incongruence between the public's perception and actual early childbearing rates can be at least partially explained by the shifting marriage patterns, and the

subsequent move toward, or at least toleration of, out-of-wedlock childbearing. For example, the figure below shows the family context at birth for various cohorts of Canadian children, and demonstrates that nearly all children born in the early 1960s were born to parents who were married. By 1993 the number of single parents, common law parents, and those living common law prior to marriage, had all risen sharply. I suggest that what these shifts ultimately underscore is that assumptions about fertility and childbearing practices are only partial accounts of the world that are constructed from within and throughout particular social and historical contexts.



Source: Government of Canada Department of Justice. Custody, Access and Child Support: Findings from The National Longitudinal Survey of Children and Youth

Conclusion

My thesis takes the position that concepts of teenage pregnancy/mothers as problematic, undesirable, and in need of intervention are the culmination of a multitude of political, economic, and moral forces (Kelly, 1997). Working from this standpoint I aim to better understand not only why, but also how, teenage pregnancy and teenage motherhood have come to be so taken for granted as problematic and to be so thoroughly

framed in such disparaging and negative language. How and when did anxieties about teenage pregnancy and teenage mothers usurp moral anxieties over out-of-wedlock childbearing? Why are pregnant teenagers and teenage mothers marginalized in contemporary Western culture, where many majority world countries see early childbearing as a standard feature of daily life?⁶

While this research aims to challenge the paradoxical nature of discourse about teenage pregnancy and teenage mothers, it is perhaps most interested in the potential costs of framing teenage pregnancy and teenage mothers as problematic. From my perspective as both a researcher and subject, dominant discourses about teenage pregnancy and teenage mothers are misleading, as well as reckless. For example, if we as a society recognize motherhood and adolescence as significant life stages and periods of identity development, what might it mean to stigmatize and marginalize young women on both fronts? It is an approach that is not only harmful and damaging to pregnant teenagers, young mothers, and the children of young mothers, but also self-perpetuating. Thus, while I trace the emergence and development of teenage pregnancy's problematization and acceptance as transgressive, and challenge the ideological underpinnings embedded in these developments, what I am also asking is, how might themes of exclusion, marginalization, and stigma negatively alter and influence young women's lived experiences, their available life choices, and ultimately the decisions they make? Are there alternatives from which they can draw support?

⁶ For example, in Latin America and the Caribbean over 19% of adolescent females bear children. In sub-Saharan Africa approximately 25% of adolescent females bear children (Eure, Lindsay and Graves, 2002). Early childbearing is not only not problematic, but a key marker of social life with well-established practices in place for supporting young mothers and their children. North America on the other hand, allocates significant resources (e.g., sociologists, social workers, health professionals, and community organisations.) towards preventing the occurrence of pregnancy and childbearing by women 20 years of age and younger.

I challenge theoretical questions about discourse in the hopes that more positive and supportive alternatives can be put forward, yet the relationship between these goals, and my position as both researcher and subject, presents certain tensions within this thesis. I use critical discourse analysis in order to show how concepts about pregnant teenagers and young mothers are the result of a complex and inconsistent interaction of shifting social forces. The goal is not an abstract theoretical analysis, however, but rather, a better understanding of what it means for actual pregnant teenagers and young mothers to fall so far outside of the boundaries of ideal motherhood.

Challenges moving forward

From a methodological standpoint I face certain, seemingly inherent, challenges moving forward. For example, where postmodernism rejects the premise of essentialist discourse, foundational truth, and the idea of the coherent self (Bride, 2009), a phenomenological approach examines the “structures of consciousness as experienced from the first-person point of view” (Smith, 2011). As a researcher and subject, to take an autobiographical approach to phenomenology and critical discourse analysis serves to further compound this process. For example, applying Foucault’s concept of genealogy is to “arrive at an analysis which accounts for the constitution of the subject within a historical framework”, which is to say, to remove the subject itself (Foucault, 1980, p.117). On the other hand, drawing on phenomenology and autobiographical narrative reveals difficult questions about my research motivations. The unpacking of these questions reveals surprisingly complex and intense connections between my subjective experience of teenage pregnancy and motherhood, and a very deep and personal desire to gain control

over, and even re-write, complicated and often painful, subjective experiences of stigma, marginalization, and exclusion.

In order to move forward with the study, I have attempted to compartmentalize these tensions to a certain extent. The first section of the thesis investigates the development of the problem of teenage pregnancy and teenage mothers in Canadian and American society. I examine concepts of teenage pregnancy and young mothers as problematic alongside broader concepts of normative and deviant fertility and motherhood. Drawing on poststructural theory, including Foucault's concepts of archaeology, genealogy, and power-knowledge, I frame fertility, childbearing, and mothering practices, within a more complex theoretical analysis of discursive systems of power.

Throughout the second section of my thesis (Chapters 5 and 6) I explore the phenomenology of teenage pregnancy, teenage motherhood, and concepts of normative and deviant fertility and mothering. By looking at young women's experiences of teenage pregnancy and motherhood, my thesis emphasizes the complex relationship between discourse and phenomenology. While my original intention had been to use critical narrative analysis as a means of exploring the experience of teenage pregnancy and teenage mothering as a whole, the research process produced a body of work that is profoundly focused on my own experiences of pregnancy, motherhood, and discourse, and more pointedly, on the complicated and difficult process of exploring these experiences through writing narrative and psychoanalysis.

— The hospital

I go to the hospital at around 8 am. I am admitted and started on an IV of oxytocin and strapped to a monitor. I remember my mother sitting and knitting. I don't think I'd ever seen her knit before (or since) this. I remember walking around a bit, trying to get my labour moving more quickly. I remember them controlling the oxytocin, making it go up higher to also speed this along. At around 1 o'clock I begin having strong labour pains. I remember kicking nurses out of my room, telling one who tried to put another IV in my hand to put it in her hand.

I remember a look of complete and utter helplessness on my mother's face watching me. She had tears in her eyes watching me in pain. I think I remember calling her mummy in the midst of trying to make sense of what was hitting my body. I remember a doctor coming in and giving me an epidural at this point. I don't remember anything really between this point and when I had her at 8 minutes after 4 in the afternoon. I don't remember the actual labour part at all. I thought this lasted maybe about 10 minutes, but my mother tells me it was over an hour of pushing. I remember nothing of this.

I remember after having her, my doctor telling me I had great legs. This made me laugh. I remember my mother crying and asking me if she could go see the baby. They had whisked off with her on account of the amniotic fluid in her lungs. I remember staring up at the overhead operating room lights. I remember everything being very quiet, I remember being left there alone, that everyone had gone to look at the baby who was having difficulty breathing. I remember lying there completely alone staring up at those white lights. I remember my legs trembling. I remember the doctor giving me stitches. I remember the nurse asking if I wanted to see Allison. I said no. I was planning to place her for adoption and thought that I shouldn't see her. I wanted to go home. I asked them to let me go home. They said the delivery had gone well and I was in good enough health

CHAPTER 2

Theory & Methods

Section 1: Theory

Critical discourse analysis: The making of the subject

In its most basic sense, discourse can be defined as writing, talk, conversation, and communicative events (van Dijk, 1993). Practitioners of critical discourse analysis (CDA) do not limit discourse to language, however, but rather, view it as something that encompasses and permeates all we do. Discourse shapes and constrains our beliefs, values, relationships, and identities, our truths and knowledge, and our systems of truth and knowledge. It is the fundamental process by which language allows us to know and make sense of our worlds and how to behave in them. As a theoretical framework, critical discourse analysis provides us with the tools for analyzing the production of truth and knowledge through language and representation, and its institutionalization through the use of everyday contexts (Du Gay, 43, 1996).

Power/Knowledge & Genealogy

How do certain truths and knowledge come into being, or come to be accepted where others are rejected? One way of addressing this question is to look at Foucault's concept of power/knowledge. Simply defined, power is the ability of its holder to make other individuals compliant on any given grounds in any given social relationship, and knowledge is a person's or a society's familiarity with and consciousness of a topic or an idea created through any type of discourse. Foucault joins the terms power and

knowledge into the singular concept power/knowledge in order to explain the omnipresent interplay between the two. According to Foucault, dominant forces in society are able to utilize discourse by constructing knowledge and regimes of truth that favour their interests: thus power creates and reinforces itself through language by creating and reinforcing certain “truths” and “knowledge” (Du Gay, 1996).

Throughout the Western world, teenage pregnancy and early childbearing are framed and accepted as problematic and undesirable, and in need of intervention. Indeed, Homrighausen (2008) even calls teenage pregnancy a worldwide health problem, equally affecting developed and developing countries alike, and Hadley (2007) simply calls teenage pregnancy “everyone’s business” (p.101). In any sort of historical context Homrighausen and Hadley’s assessments of teenage pregnancy and childbearing seem curious, given that teenage childbearing rates peaked in the 1950s and 1960s, and that virtually no mention of the phenomenon can be found in literature until early childbearing begins to decline in the 1970s.

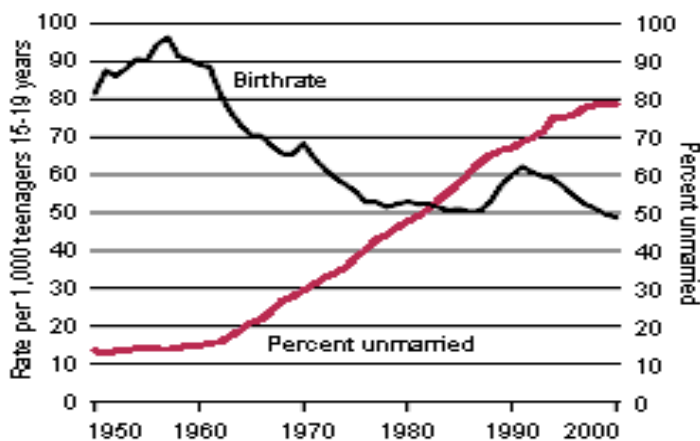
Given that the problematization of early childbearing, rather than early childbearing itself, is a recent historical development, it seems important to not only ask why and how it has come to be seen this way, but also, who in society benefits from this particular knowledge. Rather than simply pointing out the historical inconsistencies in discourse about teenage pregnancy and teenage mothers, my thesis aims to answer the above questions within a historical context. In taking such an approach I will draw on genealogy; a concept most closely associated with Michel Foucault.

Genealogy is both a historical perspective and an investigative method that offers an intrinsic critique of the present. Crowley (2009) writes that genealogy provides us with “the critical skills for analyzing and uncovering the relationship between knowledge,

power and the human subject in modern society and the conceptual tools to understand how their being has been shaped by historical forces (p. 2). A genealogical approach to history differs from that taken by more traditional historians in its understanding of concepts like continuity, unity, and linearity. It is less concerned, for example, with causal connections that might be characteristic of particular grouping of events (i.e., a century) Foucault emphasized the importance of studying texts in their full social and historical context, but ultimately rejected the idea of history as a chronological pattern of events that can be traced back to an all-determining point of departure (Sembou, 2011). His aim then, was not to unearth and interpret certain historical “facts” and events, but rather, to uncover and deconstruct the idea of “history as a chronological pattern of events emanating from a mystified but all-determining point of departure” (Sembou, p.2). In this sense genealogy is a perspective and method concerned with tracing origins and questioning the idea of origins and deeper meanings. In keeping with the concept of power-knowledge and the tenets of critical discourse analysis, its main goals are to: 1) identify the power relations, or ‘force relations’ of particular events and historical developments, and, 2) identify certain underlying principles that connect the seemingly disconnected (Foucault, 1981; Prado, 1991).

What does this mean then, for tracing the development of the problematization of teenage pregnancy and teenage mothers? Historically speaking, we know that, from a statistical standpoint, teenage childbearing rates peaked in the 1950s and 60s in the United States and Canada, and that the public, policy makers, and social scientists remained largely unconcerned until these rates began to decline in the 1970s (Kelly, 2000). This incongruence can be at least partially explained by taking shifting marriage patterns, and more specifically, the growing tolerance of out-of-wedlock childbearing,

which accompanied these shifting marriage patterns, into consideration. Prior to these shifts, early childbearing clearly existed, yet social norms defined normative and transgressive childbearing practices by a woman's marital status rather than her age. Early childbearing existed, and in fact, married teenage mothers were not only not problematic, but also moderately common throughout the 1950s and 60s. For the most part the unmarried woman who found herself pregnant (regardless of age), found herself with one of two options: marriage⁷ or adoption. The following figure illustrates the overall increase in the percentage of births to unmarried mothers in the US, from the 1960s onwards, while simultaneously showing the overall decrease in teenage childbearing⁸.



Source: National Centre for Health Statistics, "Births to Teenagers in the United States, 1940-2000," National Vital Statistics Report, 2001, Vol. 49, No. 10.

What has changed over the following decades throughout much of the Western world is not that young women get pregnant, but that young women now see single parenting as a possibility. Indeed, in 2012 more than one half of the births to women

⁷ Ellison estimates (2005) that from 1960 to 1970, 27% of all births to married women between the ages of 15 and 29 were conceived premaritally.

⁸ The figure at the top of page 20 illustrates the extent to which marital status also dictated the family unit in Canada in the 1960s. For example, nearly all children born in the early 1960s were born to parents who were married.

under 30 occurred outside of marriage in the United States⁹ (www.newyorktimes.com, 2012). While out-of-wedlock rates remain lower in Canada, rates are also growing (according to the Canadian census approximately 30% of children were born to unmarried parents in 2006, compared to 13% in 1980) (Statistics Canada, 2011). I suggest that “Illegitimacy”, the historical target of our moral condemnation, is now the social norm, and that teenage pregnancy and teenage mothers have stepped in to replace unmarried mothers as the signal of our great moral decline.

A conventional historian might trace certain historical developments and events in order to better understand how or why this particular break in continuity has occurred. Indeed, my initial attempts to provide a historical overview of teenage pregnancy and mothering were very much in line with this approach. I examined historical developments (the rise of industrialization, population cycles, the development and wider availability of birth control, for example), in order to pin down the point at which teenage pregnancy came to be conceptualized as problematic, and the developments and events leading up to this point. Doing so, I assumed, would enable me to clearly demonstrate that childbearing and mothering are social activities shaped by one’s particular time and place, and thereby challenge assumptions about young mothers. Taking a genealogical approach to teenage pregnancy and mothering, however, has proven more challenging and abstract.

Foucault (1991) explains some of the nuances of genealogy, and what it meant in terms of taking a genealogical approach in his work on prison systems:

⁹ Moreover, 70% of children born to unmarried mothers in the United States are born to women 20 years of age and older (Hollander, 1996).

The target of analysis wasn't 'institutions,' 'theories,' or 'ideology' but practices". The "hypothesis" was that these types of practice are not just governed by institutions, prescribed by ideologies, guided by pragmatic circumstances – whatever role these elements may actually play – but, up to a point, possess their own specific regularities, logic, strategy, self-evidence, and 'reason.' And the goal ("the aim") was to grasp "the conditions that make these acceptable at a given moment". So I was aiming to write a history not of the prison as an institution, but of the practice of imprisonment: to show its origin or, more exactly, to show how this way of doing things...was capable of being accepted at a certain moment as a principal component of the penal system, thus coming to seem an altogether natural, self-evident, and indispensable part of it. Therefore, "It is a question of analyzing a 'regime of practices' – practices being understood as places where what is said and what is done, rules imposed and reasons given, the planned and the taken-for-granted meet and interconnect (p. 75).

From a genealogical perspective, my own research on teenage pregnancy and childbearing focuses on key historical developments and events such as the introduction of birth control, Roe vs. Wade, the declining popularity of the nuclear family unit, and women's growing participation in the globalized market economy. It does so, however, with the aim of uncovering and deconstructing power relations, and underlying continuities and patterns in discourse about women's reproductive activities, childrearing practices, and decision-making.

Criticisms and limitations of Foucault

Foucault discovers in Kant, as the first philosopher, an archer who aims his arrow at the heart of the most actual features of the present and so opens the discourse of modernity ... but Kant's philosophy of history, the speculation about a state of freedom, about world-citizenship and eternal peace, the interpretation of revolutionary enthusiasm as a sign of historical 'progress toward betterment' – must not each line provoke the scorn of Foucault, the theoretician of power? Has not history, under the stoic gaze of the archaeologist Foucault, frozen into an iceberg covered with the crystals of arbitrary formulations of discourse?

—Habermas, "Taking Aim at the Heart of the Present" (1984)

Foucault has often been criticized for being overly deterministic, and for producing radical political analyses with little practical value. He has been critiqued for lacking a theory of agency, a sense of history as progressive (as if history is nothing more than an endless story of oppression), and any concept of freedom that might inspire other theorists (O'Farrell, 2009). To be sure, Foucault, CDA, and poststructuralism in general, have proven both confusing and stifling at times throughout the writing of this thesis. While Foucault's theory of power may have felt fatalistic to me at points, however, it is decidedly less so than Marx or Gramsci's commentary on hegemony and the capitalist ruling class.

Ultimately Foucault argued that discourse does not exist independent of the historical, cultural, social, and political conditions it shapes, but also that discourse itself is subject to these same conditions, and in this sense, he understands power as more net-like than inevitable. Power may lead discourse into preferred directions, but knowledge is changeable: subjects create different discourses through their power and knowledge, and

new types of discourse create new forms of knowledge, and so forth. Foucault's concept of counter-discourse -- "for every action there is a reaction" -- speaks to this philosophy.

Foucault argued that for every discourse there is a counter discourse to define and assert itself against. In this sense, discourse needs not only to be acknowledged as an instrument for the assertion of knowledge and power, but also as the instrument and process by which structures of knowledge, power, and inequality are resisted, critiqued, challenged, and ultimately, changed (van Dijk, 1993). As Scott (1991) points out in defence of Foucault: "Subjects are discursively constituted, but there are conflicts among discursive systems, contradictions within any one of them, and multiple meanings possible for the concepts they deploy... These conditions enable choices, although they are not unlimited" (pp.792-793).

The following section provides an overview of key interpretative discursive frameworks about teenage pregnant and childbearing, and within this, Foucault's concept of counter discourse. The final framework discussed, for example, focuses on young women's experiences and interpretations of pregnancy and childbearing, and moreover, how young women resist internalizing dominant discourse and stigma with their own counter discourses. For example, in a later discussion about cultivating positive maternal identities, I cite an ethnographic study by Mollidor (2013). Mollidor found that teenage mothers from working-class backgrounds countered pejorative discourse about teenage mothers and welfare by positioning themselves as more dedicated to their role as full-time mothers as opposed to older mothers who worked outside of the home.

Interpretive Frameworks

Over the course of my research, narratives about pregnant teenagers and young mothers, however fragmented, contradictory, and interlocking they may be, have tended to fall within several overarching themes. At the same time it is important to point out that within these themes, certain narratives and characteristics quite often apply differently to different social groups¹⁰. For example, women with low social resources from non-minority backgrounds are more likely to be framed as lazy, and stupid, or as having highly dysfunctional familial and communal variables at play; placing the emphasis not only on the individual transgressions of the teenager, or her more immediate family, but also on broader communities. A term like “White trash” might be used to describe teenage mothers in this kind of context.

Such nuances speak to the challenge of trying to assign distinct qualities to distinct narratives. On the one hand doing so can risk both simultaneously oversimplifying, and obscuring a larger and more meaningful picture and analysis. On the other hand, analyzing how certain underlying principles connect the outwardly disconnected is not possible without first identifying these differences and distinctions. In my own research this task has been aided by Kelly’s establishment of four interpretive frameworks for examining discourse about teenage pregnancy. They are:

- 1). The “wrong girl” (academic and bureaucratic experts)
- 2). The “wrong family” (re-privatization groups)

¹⁰ For example, a teenage mother from a more middle-class background is much more likely to be framed as a “baby having a baby”. Middle-class teenagers are certainly still stigmatized and judged harshly, but there is a level of victimization or sympathy at play that, quite simply, is less likely to be extended to poor women and their families. Narratives about minority teenage mothers are decidedly complex in that they draw on variations of both of the above. Aboriginal, and African American teenage mothers, for example, often have their transgressions located in their broader communities. The teenage mother, and her respective community, might be viewed through a lens of victimization, or more overt negative stereotypes and racism.

- 3). The “wrong society” (oppositional social movements)
- 4). The stigma is wrong (teenage mothers)

An Error in Timing: (The “Wrong Girl”)

The idea that pregnant adolescents and teenage mothers are problematic supports the assumption that they deviate from an otherwise acceptable model of fertility and childbearing. Teenage pregnancy and the teenage mother are conceptualized as an issue of timing by their very definition, which suggests that these parameters are seemingly straightforward enough. Even a casual examination makes it clear, however, that the problematic nature of teenage pregnancy and childbearing rationalizes and emphasizes characteristics, qualities, and variables, that are decidedly more complex than the category of age.

Teenage pregnancy and teenage motherhood deviate from a white middle-class ideal of success. Within this model, women are expected to secure certain social markers in their lives, and in a particular order, before proceeding with pregnancy and motherhood. These markers include attaining higher education and financial stability, developing and firmly establishing oneself professionally, and securing a stable partnership, preferably through marriage. The teenage mother’s age generally precludes her from having achieved these markers, and her decision to parent is seen as further jeopardizing her chances of ever doing so.

To some extent then, age seems to be the appropriate qualifier insofar as the teenage mother makes an error in judgment, not because she chooses to become a mother, but because she chooses to do so at the wrong time. At the same time, this error in timing judgment depends upon other fundamental assumptions. First, that there is

some explicit middle-class ideal of success to begin with; second, that it is the natural governing model of success for society as a whole; third, that there is a natural route to it, and fourth, that both, the model and route are inherently desirable and attainable. If we accept these premises, the question becomes, why do certain girls irrationally jeopardize their future success and happiness by choosing motherhood at the wrong time? What are the motivations and characteristics of adolescents who become pregnant, and more specifically, of those who choose to keep their babies? Ultimately, the answers to these questions are on display throughout my review of social science research and expert literature.

The error in timing narrative articulates teenage pregnancy and young mothers through themes of victimhood, tragedy, and instability. Researchers will often attribute the motivations of the teenage mother to the emotionally immature, egocentric, and insecure maladaptive individual, but perhaps even more so, to a larger unstable and dysfunctional environment. This same narrative posits that pregnant teenagers and young mothers are the product of the instability that surrounds them; victims of life circumstances beyond their control: divorce, single-mothers, poverty, intergenerational welfare dependency, neglect, sexual abuse, exploitation by older males, and mothers who bore them as teenagers themselves. The teenage mother naively craves the unconditional love of a baby and escape from the turmoil in her life. These desires, behaviours and decisions are attributed to the inherent emotional immaturity of the individual, as well as the environmental instability around her. In this way, the adolescent's decision to parent is an especially tragic personal choice. She not only fails to pull herself out of it, but also dooms her child(ren) to the same cycle of poverty and dysfunction that lead to her pregnancy in the first place.

The error in timing narrative selectively infantilizes young women as “babies having babies”¹¹. The young mother proves she is not emotionally mature enough to parent by the very virtue of her decision to do so, and this inability to make decisions that are in the best interest of herself and her children entitles others to make decisions on her behalf. The extent of societal entitlement can range anywhere from welfare legislation requiring teenage mothers to live in ‘adult-supervised settings’, and remain in school to qualify for assistance, to a case-worker evaluating the diet and personal hygiene of your children, to harsh judgment calls about your parenting skills on the bus or in other public venues, to unsolicited, and seemingly friendly advice from strangers about the importance of “getting your education”. Ultimately the overriding message is one of intervention, monitoring, and rehabilitation: to help the girl recognize her mistakes so she makes more appropriate decisions in the future.

The “Wrong Family”

In simple terms, the error in timing framework approaches teenage pregnancy and early childbearing as a deviation from the natural order. The young girl who gets pregnant or gives birth makes a mistake, and liberalist prevention and interventionist measures are designed to help her get back, and stay on track. It is also the framework from within which most academic and bureaucratic experts who are concerned with teenage pregnancy and early childbearing operate.

¹¹ The majority of teenage mothers are between 18-19 years of age at the time of birth, making them eligible for military service, voting, and marriage in all Canadian and American (ex. Mississippi) jurisdictions. Most allow marriage at 16 with parental, or judicial consent (Georgia allows marriage at 15, and Texas 14, with parental or judicial consent, while California, Kansas, and Massachusetts have no minimum age) (US Legal Inc). It is particularly interesting to note that no one in Alberta can marry under the age 16, except for females where a physician’s certificate demonstrates she is pregnant or the mother of a living child (Alberta Marriage Act, 2000).

Kelly characterizes the “wrong family” framework as socially conservative in nature. Pregnant teenagers and young mothers are not misguided girls with the odds stacked against them: they are social dropouts. By virtue of getting pregnant and choosing parenthood prematurely, teenage mothers do not confirm a naïve inability to make decisions that are in the best interests of themselves and their children. They confirm a poor moral constitution, and a blatant disregard for the good of society as a whole.

Teenage pregnancy and teenage mothers accentuate, and fuse, an impressive number of social concerns within this framework. For instance, social conservatives conceptualize the ideal family model as one where two heterosexual parents preferably occupy traditional gender roles: the self-governing male breadwinner, the female caretaker, and children who respect their parents as traditional lines of authority.

From this perspective, the pregnant teenager, and teenage mother (reliant on public assistance), represents an all out assault on the fabric of society: from adolescent rebellion against parents and other adults, to unchecked female sexuality, the demise of the traditional family, and changing gender roles, to the misallocation of taxpayers’ funds, and the “official sanctioning of everything from universal childcare to state-run adoptions” (Kelly, 1996, p. 431). The unmarried teenage mother, who relies on public assistance, represents the embodiment of the wrong family.

The Wrong Society

The personal histories of disadvantage commonly associated with teenage mothers have led some to question whether teenage childbearing may in fact be a logical or practical life choice for some. The teenager mother may simply recognize that her prospects for educational, professional, and personal, middle-class “success” are weak,

and thus have little incentive for delaying childbearing. Some researchers (Males, 2008; Hotz et al, 2005; SmithBattle, 2005; Hoffman, 1996) have pointed out that teenage mothers from under-served communities might actually position themselves better by having children in their teen years, than their counterparts who wait until their 20s to have children. Sociologist Mike Males (2008), and anthropologist/primatologist Sarah Hardy (2007) have theorized, for example, that because poorer groups tend to die younger, early childrearing better ensures that grandparents and extended family members are alive and sufficiently healthy to aid in the raising of children (thus maximizing the survival of their offspring). In this sense early childbearing serves as both a viable economic and evolutionary strategy for poorer groups¹².

The Stigma is Wrong

Whether we are talking about “wrong-girl”, “wrong-family”, or even, “wrong-society” narratives, approaches to teenage pregnancy and teenage mothers are characteristically very paternalistic in nature. Young women’s voices, self-interpretations, and expert-knowledge are subjugated in favour of the authoritative knowledge of institutions and professionals, who instead, profess to speak on behalf of young women, their needs, and the needs of their children. I argue, however, that this absence of young women’s voices can only contribute to a lack of insight into their needs, to the needs of their children, and into the social variables that shape their experiences, and the decisions they make. What might young women’s narratives tell us that is not otherwise articulated

¹² Similarly, Hrdy argues in that although mothers are vital for a child's development and wellbeing, the offspring of early humans would not have survived without an abundance of protection and support from siblings, fathers, aunts, friends and grandparents. Humans, Hrdy argues, would have had to develop extraordinary social skills, including cooperation, empathy and altruism, ultimately making cooperative parenting fundamental to why humans are human (Hrdy, 2007).

in dominant ways of conceptualizing and speaking about teenage pregnancy and mothering? (Kelly, 1996)

I also assert that teenage mothers hold complex interpretations of their experiences, which inevitably run up against and into discourse about teenage pregnancy and parenting. This last point is paramount if we wish to better understand young women's narratives and experiences of pregnancy, childbearing, and mothering. Dominant discourse about pregnant teenagers and young mothers is overwhelmingly disparaging, and grounded in as many contradictions as it is agendas. At the same time, young women inevitably draw from, and interpret their experiences through discourse. Throughout this section I examine the different mechanisms young women use to resist, challenge and transform dominant discourse.

If social, economic, and political relations shape discourse, what role does negative discourse play in shaping what stories young women tell, and in how they are interpreted? In examining these shifting tensions I ultimately grapple with the following questions: is it possible for pregnant teenagers and teenage mothers to even counter dominant discourse, and if so, what might this look like? Examining the tensions within young women's narratives demonstrates just why it is so important to change the dialogue, but ultimately, does not readily answer the question of how such change might come about.

Section 2: Methods

Introduction

Taken together or separately, poststructuralism, psychoanalysis, and narrative writing can set up difficult terrain and complex tensions for the researcher. From a

practical standpoint the abstract nature of poststructuralism makes any of these challenging theoretical tools to work with. For example, Foucault did not develop a singular theoretical framework for practitioners of CDA. Instead, he provides a conceptual toolbox of sorts, which invites practitioners to use certain tools in whatever ways prove most useful for providing insights into power and discourse (Mills, 2003). Indeed, from a philosophical perspective CDA is an attractive and seemingly fitting theoretical framework for the purpose of this thesis, yet how exactly do I go about doing CDA without a cohesive framework in place? Throughout this chapter I explore the difficulty in answering this question, and the challenges in working with a framework that, in essence, demands deconstructing itself.

Incorporating psychoanalytical theory and narrative writing into the framework creates even more complicated and circular methodological tensions for me as the researcher. For example, Brown & Strega (2005) argue that, from a psychoanalytical perspective, narrative holds our perspectives, voices, and stories, and ultimately, our epistemological and ontological standpoints. Indeed, Bullough & Pinnegar (2001) suggest that one's research can only ever exist as a study of the researcher's self in relation to "the other" (p.14). On the other hand a Foucauldian understanding of the subject takes both "the self" and "the other" as fundamentally discursively constituted. Given these contradictions, how might one be expected to move forward with CDA, psychoanalysis, and autobiographical narrative as methods? With these questions in mind I use the following chapter to map out how I apply the theories and methods used throughout my thesis, and the specific choice of texts that I apply them to.

Critical Discourse Analysis Framework

It is generally established that any explicit method may be used in CDA research so long as it can adequately and relevantly produce insights into the ways in which discourse reproduces (or resists) social and political inequality, power abuse or domination¹³. It is in this overtly political agenda where CDA differentiates itself from linguistics and other forms of discourse analysis. In its deconstructive moments, CDA aims to disrupt hegemonic power relations in everyday talk and writing; in its constructive moments it aims to expand analysis of discourse and social relations with an ultimate aim toward a more equitable distribution of discourse resources (Fairclough, 1992).

CDA does not characterize a school, a field or a sub discipline of discourse analysis, however, but rather an explicitly critical approach, position or stance of studying text and talk. In terms of actually carrying out CDA, van Dijk (1995) offers the following guidance: “CDA requires good theories of the role of discourse in the enactment and reproduction of social dominance and resistance. More than theories that merely claim descriptive or explanatory adequacy, however, successful CDA must be effective: Its conclusions, recommendations and other practical interventions must work” (p. 19).

Van Dijk’s explanation is useful insofar as it tells me what I must do, but again, offers little in terms of how I am supposed to do it. Here it is useful to look at the work of another pioneer in the field of critical discourse analysis, Norman Fairclough.

Fairclough’s approach to language and language-use, while rooted in Foucauldian theory, differs from Foucault and other philosophical enquiries not involving the use of linguistic

¹³ For example, feminist CDA is likely to focus on discourse as the process by which patriarchal social orders are maintained (Lazar, 2004). Feminist scholar Michelle Lazar has utilized CDA to demonstrate how discourse maintains “power relations which systematically privilege men as a social group, and disadvantage, exclude, and disempower women as a social group (Lazar, 2007, p. 141, 145).

methodology¹⁴. Fairclough has attempted to address the practical challenge of “doing CDA” by developing “a method of language analysis, which is both theoretically adequate and practically usable” (1992, p.1). His blueprint for CDA ties three inter-related processes of analysis to three inter-related dimensions of discourse. The three dimensions of discourse are:

- 1) The object of analysis (including verbal, visual or verbal and visual texts)
- 2) The processes by means of which the object is produced and received (writing/speaking/designing and reading/listening/viewing) by human subjects
- 3) The socio-historical conditions that govern these processes

Fairclough’s model applies the following three types of analysis to each of these dimensions:

- 1) Text analysis (description)
- 2) Processing analysis (interpretation)
- 3) Social analysis (explanation)

Fairclough’s approach is useful on several fronts. First, it allows researchers to focus on the specific question: “what conceptual tools are relevant for this or that problem and for this and that context?” (Weiss & Wodak, 2003, p.7) Fairclough’s approach also enables practitioners to focus on the signifiers that make up the text, the specific linguistic selections, their juxtapositioning, their sequencing, their layout, and so on and so forth (Janks, 1997, p.1). Janks adds a suggested checklist to Fairclough’s model to further assist practitioners in systematically examining common linguistic devices.

¹⁴ Fairclough’s line of study (also called textually oriented discourse analysis) is specially concerned with the mutual effects of formally linguistic textual properties, sociolinguistic speech genres, and formally sociological practices. The main force of Fairclough’s analysis is that (if, according to Foucauldian theory) practices are discursively shaped and enacted, the intrinsic properties of discourse, which are linguistically analyzable, are to constitute a key element of their interpretation. He is thus interested in how social practices are discursively shaped, as well as the subsequent discursive effects of social practices.

DIMENSIONS OF DISCOURSE

TYPES OF ANALYSES

1. Lexicalisation	7. The thematic structure of the text
2. Patterns of transitivity	8. The information focus
3. The use of active and passive voice	9. The cohesion devices
4. The use of nominalization	10. Naming
5. The choices of mood	11. Pre modifiers
6. The choices of modality or polarity	12. Indirect quotes

Based on Halliday's Introduction to Functional Grammar (1985).

Fairclough's model and Janks' suggestions have certainly been helpful in moving forward with what, for me, has been quite abstract terrain. In the most practical sense they have been useful in terms of simply keeping track of, and organizing, the sheer number of texts I have used over the last five years. In a broader sense they have served as a life raft of sorts for me; for my frustrations, and at times, total exasperation with the theoretical rabbit hole that is poststructuralism, and the challenge of using CDA as a grounded analytical and methodological approach.

Some have criticized Fairclough's emphasis on modelling and systemizing, however, as an attempt to construct a scientific edifice around CDA. According to Pennycook (2001), it is a contradiction that demonstrates a blindness to the politics of knowledge on Fairclough's part. Fairclough identifies critical social science as needing a scientific basis, and describes his work as "a scientific investigation of social matters", yet defines "scientific" in terms of rational and evidence-based arguments. In the end this fundamental contradiction proved to limit the usefulness of Fairclough's model for me. What it did do, however, was provide me with a clearer focus of the task at hand.

Choice of texts

In approaching this challenge I chose to draw resources from several different arenas, including popular culture, political discourse and social policy, and social science discourse. Drawing from different genres of discourse has not only made for a broader understanding of teenage pregnancy and childbearing, but also allowed me to approach the research with a greater appreciation of the influence, omnipresence, and fluidity of discourse as a whole.

In looking at cultural discourse specifically, I drew on a broad swath of texts, including radio interviews, television and film, and print and online newspaper and magazine articles¹⁵. My discussion here, however, will focus on a variety of printed texts. I found that printed popular culture texts about teenage pregnancy and teenage mothers tended generally to fall into three frequently overlapping categories: articles focused on the problem of teenage pregnancy and mothering as a whole; hot topic stories; and opinion editorial pieces.

Articles falling into the first category tended, by and large, to be written in response to newly released research findings about “risks and outcomes”. (i.e., Teens with mental health issues have higher risk of pregnancy: study, *The Canadian Press*, February, 2014; Why teen pregnancy is on the rise again in Canada (and spiking in these provinces), *The Globe & Mail*, January, 2013); Suddenly teenage pregnancy is cool?, *Macleans Magazine*, January, 2008). Those falling into the second (hot topic) category tended to focus on specific examples that were sensationalist, celebrity-focused, or controversial in tone (i.e., Pregnancy boom at Gloucester High, *Time Magazine*, June, 2008; Baby-faced

¹⁵ I have drawn on several radio broadcasts over the course of my research, including CBC Radio’s, “The Hurried Infant”, Part 1&2, and “Have 16 and Pregnant, Teen Mom affected birth rates?”.

boy Alfie Patton is father at 13, *The Sun*, January, 2011; Shame Campaign: NYC ad campaign on teen pregnancy marshals crying babies, March, 2013, *New York Daily News*; Palin's Teen Daughter is Pregnant; New G.O.P Tumult, September, 2008, *The New York Times*). Articles in the final category (opinion-editorials) tended to combine elements of the first two, whereby writers selected particular research findings and expert opinions in order to back up what were often controversial and inflammatory positions (i.e., Why we should sterilize teenage girls...temporarily at least, October, 2010, *The Daily Mail*; Shame is not a four letter word, March, 2013, *The New York Times*; The real mistake in 'teen pregnancy', July, 2008, *The Los Angeles Times*).

Political Discourse & Social Policy

Prior to the 1960s, there is almost no mention of teenage pregnancy and childbearing in social science literature. Subsequently very little mention of teenage pregnancy and childbearing exists in political discourse prior to its emergence in Canadian and American politics toward the end of the 1970s. Where the problem really begins to gain traction is with its incorporation into growing political discourse about welfare and welfare reforms during this same period. For this reason, I pay particular attention to social welfare policy, and the welfare reform movements throughout the 1980s and 1990s. In an American context this involves looking more closely at policies by political figures like Ronald Reagan, and Bill Clinton, and in Canada, Mike Harris, and Preston Manning.

Social Science Research

While popular culture texts play an important role throughout my analysis, I am particularly interested in the role that the “expert gaze” plays in both, informing and reflecting the narratives found in popular culture texts. As such, I examine a wide range of literature on teenage pregnancy and childbearing. I begin with early social science research, a period during which researchers attributed any poor outcomes to the timing of the birth itself. Over the next 25 years, research broadens its focus to include additional factors such as family structure, parental income, and education levels (Hoffman, 1998). (Furstenberg, 1976; Trussell, 1976, 1988; Murray, 1984; Furstenberg et al., 1987; Hofferth, 1987; Upchurch & McCarthy, 1990). I examine texts, which document this shift in focus to questions of causality versus correlation.

Research continues to focus on the many risks and outcomes commonly associated with teenage pregnancy and childbearing, but has, over time, moved away from comparing young women who have teenage pregnancies and/or births to those who have not. At the same time, many contemporary studies mark a return to some of the earliest research on teenage pregnancy and childbearing by measuring the outcomes of pregnant adolescents and young mothers against those of older mothers: the emphasis being on transgressive mothers rather than transgressive adolescents, and on the timing of the birth itself as the key explanatory tool.

— Revisiting The Home of the Guardian Angel

While working with the Spryfield Single-Parent Centre for a summer I had the opportunity to revisit the adoption home where I had placed my daughter some seven, possibly eight years earlier. Prior to my supervisor mentioning the home, I'd had no knowledge of a connection between the two: that the Home of the Guardian Angel opened the Single Parent Centre in 1980, and that my supervisor, Sister Joan O'Keefe served as the coordinator for both. I asked to accompany Sister O'Keefe to the home later that afternoon. I'd felt that revisiting the home at such a different point in my life might offer some measure of inspiration and closure. I was equally curious, nervous and optimistic. The experience that followed, and my attempts to make sense of this experience continue to baffle and fascinate me to this day.

I did not bring my daughter home with me from the hospital. In fact my mother and I seem to have almost succeeded in convincing the nurses to discharge me from the hospital hours after giving birth. I'd wanted a clean break, so to speak. In the same way that I'd refused to acknowledge my pregnancy for eight and a half months, I meant to go on imagining that I had not actually had her. I elected not to see her after I'd given birth, and again, wished to leave at the earliest opportunity. Late that evening, I snuck down a darkened hospital corridor alone and peeked in the nursery window. I don't remember mentioning this to my mother when we left the hospital the following day. I do remember her words getting into the car: "I've got my girl back". Nonetheless, I walked directly through the front door into my room, locked the door, and cried for days.

Despite my original intentions, my memories of time spent with Allison in the days and weeks following her birth are incredibly vivid and detailed. In the same way that I'd secretly visited her at the hospital, I'd take the bus across the bridge to secretly visit with her at the Home of the Guardian Angel, throughout its seventeen-day mandatory waiting period. My memories are of sitting alone and singing to her.

Yet, I have no way to gauge whether or not any of these memories are even true. I'm not sure who was more confused when I asked to see the Home's nursery. I insisted it was in the basement, they assured me that it was not, and nor had it ever been. The nursery was warm and inviting, and upstairs, yet my memory to this day, remains something akin to One Flew Over the Cuckoos Nest. The basement nursery is cold, poorly lit with harsh fluorescent lighting, I sit on a metal chair beside her in a metal crib inside a metal and plexi-glass cubicle, the floors are linoleum. Almost everything is a dull greyish white, we are left alone in the dark basement dark, there is no sound, except for my voice talking and singing quietly (Elvis Costello's Allison). At the far end of this larger room is a door with a small window on top. Through it I see mid-morning sun, bright green grass, rhododendrons and peonies. None of this exists outside of my head, yet the memory remains exactly the same. I refuse to believe the memory does not exist, despite knowing it does not.

Psychoanalysis & Self-Study

“There are no facts, only interpretations” (Friedrich Nietzsche, *Late Notebooks* (1886-1887) (2003).

From a Foucauldian genealogical perspective there are no facts to interpret; facts themselves are constructed out of the researcher’s “will to truth”¹⁶ (Sembou, 2011). For many researchers this kind of radical declaration presents an impasse. For others, (particularly in the social sciences), there is a growing recognition and acceptance that we are in fact deeply and personally invested in our studies (Bride, 2009). It is an acknowledgement that inevitably opens up more challenging questions. For example, can scientific inquiry only ever be a perspectival enterprise; can pedagogy ever operate outside a system of social exclusion; if not, to what extent can researchers speak on behalf of research subjects given their epistemic privilege?

Brown and Strega (2005) argue that, from a psychoanalytical perspective, narrative holds our perspectives, voices, and stories, and that narrative must therefore also hold our epistemological and ontological standpoints. From this perspective, however, the researcher’s attempt to speak authentically on behalf of a research subject’s experiences seems all but impossible. Indeed, if Bullough & Pinnegar’s (2001), “Guidelines for quality in autobiographical forms of self-study research” are any indication of this challenge, one’s research can only ever exist as a study of the researcher’s self in relation to the other (p.14). Therefore, when we take a Foucauldian perspective of the subject into consideration (the idea that both “the self” and “the other”

¹⁶ “This will to truth, like the other systems of exclusion, relies on institutional support: it is both reinforced and accompanied by whole strata of practices such as pedagogy (naturally), the book system, publishing, libraries, the learned societies in the past, and laboratories today. But it is probably even more profoundly accompanied by the manner in which knowledge is employed in society, the way in which it is exploited, divided and, in some ways, attributed”. (Foucault cited in Reuben, 1980, p. 325)

are discursively constituted), the question becomes, how might one be expected to move forward, or in any direction really, with poststructuralism and psychoanalysis?

When I began my thesis I did not intend for my own experiences and interpretations of teenage pregnancy and motherhood, and the situational factors that have influenced these, to be the ultimate subject matter. I expected rather, to draw theoretical connections between certain individual experiences, cultural discourse, and broader political implications. My reasoning for including narrative and autobiography (at least consciously) was not to examine or deconstruct myself as a research subject, but rather, to ground what I saw as a certain level of authority when speaking about and on behalf of other pregnant teenagers and young mothers. An excerpt from an earlier draft of my thesis illustrates these intentions:

Under the banner of poststructuralism my thesis aims to challenge narratives about the causes, consequences, and extent, of teenage pregnancy and early childbearing, and the social inequalities underlying these. I aim to demonstrate that scapegoating pregnant teenagers and young mothers is detrimental to young women and to the children of young women, in the hopes that more positive alternatives for young women and their children can be put forward.

The motives, aim, and approach outlined above are sincere, but after attempting to write from such a place for over five years, it seems all but impossible. What this approach produced was an exasperated student, and a thesis formed and defined by my repeatedly failed attempts to compartmentalize and pull out only the most attractive and comfortable components of myself; a project defined by the irreconcilability of my role as researcher and subject. While these tensions have ultimately shifted the thesis towards a

more critical form of self-study, the process continues to be challenging, and at times, maddeningly circular for me. I remain unsure as to how I position myself in the research.

Continuing to grapple with the issue seems only to raise more complex questions about positionality. Questions like, how can my thesis be rooted in my experience, but somehow excused from its subject matter, and, what authority do I have to speak about and on behalf of, young women's experiences and self-interpretations, given my reluctance to deconstruct my own narrative in any comprehensive way? These open up broader questions like, are teenage mothers' experiences and self-interpretations even any more capable of transcending dominant discourse to some new point of clarity; are our narratives somehow more authentic? (Kelly, 1996) While it is clear to me now that these questions do not easily yield yes or no answers, I doubt that I would have been inclined to ever undertake the project, had I not also not seen them as answerable.

Taken together or separately, poststructuralism, psychoanalysis, and narrative writing can set up difficult terrain and complex tensions for the researcher. Speaking about psychoanalysis specifically, Bride (2009) writes that "through psychoanalysis one is encouraged to remember some of the forgotten and reflect upon the pleasures, pains, losses, desires, ambivalences and inconsistencies of experience" (p.39). She also writes that one of the attractions of psychoanalysis is in this possibility of self-examination. By re-examining ourselves we have the capacity for self-awareness, and within this, the possibility for discovering what holds us back from realizing our full potential. From this perspective, self-study and writing narrative can be attractive as methodologies because they appear to offer the opportunity, or at least the possibility, for creating, reshaping, and bettering our circumstances and our selves. Bride also points out, however, that this suggestion of self-realization, or self-actualization is based on a modernist concept of the

self, which runs counter to the postmodern understanding of the subject. It relies on the presumption of the “authentic self”, and on the presumption that “one’s true identity can be shored up by making the right choices about one’s life, yet from a poststructural perspective the discursive subject does not experience as an individual, but rather, as a subject constituted through the experience itself” (p. 53).

The implication seems to be that speaking in one’s own voice is impossible, which raises the question, what is the point of self-examination? What is the point of using self-study as a method of inquiry, when poststructural theorizing is centrally focused on the deconstructing of the self, of the presumed coherent and certain identity (p. 40), and what might it mean to represent oneself in writing? Throughout my thesis I have used personal narrative as a tool for exploring the complex relationship between discourse and phenomenology where teenage pregnancy, mothering, and stigma are concerned. I have also used personal narrative as a means of illustrating representations of myself in writing, of exploring some of the losses and pains that have defined certain experiences and representations for me, and moreover, the complex ambivalences and inconsistencies of these experiences and representations. Indeed, narratives like “Returning to the Home of the Guardian Angel” (p. 53), not only demonstrate the subjectivity of experience, but also the opacity of the unconscious mind, and ultimately, the interplay between the two.

For all of the attractive possibilities, self-examination requires confronting difficult knowledge and uncertainty about oneself and one’s future in ways that are often very uncomfortable and disruptive (Bride, 2009). The researcher engaged in self-study is asked to unhinge, dismantle, construct and reconstruct their subjectivity and truths, and in the end, their identity. They are engaged in what Bride describes as a “project of loss”. Indeed, writing narrative did not turn out to be a process of simply describing certain

experiences, as I had originally planned, but rather, an unbelievably difficult process unhooking many of the attachments, truths, and coping mechanisms that have been fundamental to my identity.

For me, this not only raises the question, “why autobiographical narrative?” but also “what compelled me to pursue a thesis on such a difficult topic for me in the first place?” In many ways, I am further away than ever before in answering most of these questions. Indeed, if the writing itself is always a furthering of the experience (Bride, 2009; Baikie & Wilhelm, 2005), then it is a process that would appear to have no finish line in sight. I could have written on a less challenging topic, and at any point throughout this protracted process, shifted my research topic to one more emotionally manageable for me. What could my possible motivations be for choosing and continuing down this path? Psychoanalysis’s focus on the unconscious, and particularly so where questions about the role of repression and resistance as unconscious processes in our lives are concerned, may provide some insight into these questions.

According to Freud’s psychoanalytic theory of personality, the unconscious mind holds certain emotional disturbances (unpleasant, unacceptable, and disturbing feelings, thoughts, urges, and memories) from our conscious awareness. It keeps these feelings of pain, anxiety, and conflict from coming into consciousness when (for whatever reason) they are simply too threatening to acknowledge fully (Erdelyi, 2006). In the most basic sense, psychoanalysis understands resistance as the process by which the subconscious manages conflict (Westen, 1999; Tillet & French, 2006). It is the mechanism by which the unconscious mind defends the conscious mind from difficult knowledge, knowledge that potentially threatens certain deeply held values, truths, and beliefs, knowledge that threatens the image we hold of ourselves. Westen (1999) points out that these processes

exist well under the surface of conscious awareness, yet nonetheless exert significant influence on our behaviour and experience.

Psychoanalysis explores this relationship between psychic resistance, loss, suffering and pain, but also the relationship between political resistances (Schwab, 2013). In this sense, psychoanalysis is a useful and appropriate theoretical and humanist framework for my research whatever my frustrations. As Bride explains, psychoanalysis is a humanistic project that aims to highlight the ways that identities can get stuck in the past. In doing so, psychoanalysis help to free individuals from repetitive and seemingly fixed behaviour (Bride, p.56). At the same time psychoanalysis is a powerful theoretical tool that alerts us to the need for an understanding of how subjectivity is structured alongside cultural forces, and how these cultural forces operate in the individual's experience.

Despite agreeing with this overall assessment of psychoanalysis I am left with certain reservations about both psychoanalysis and poststructuralism as they relate to my experience of teenage pregnancy and childbearing, and the process of writing this thesis. Ruti writes that psychoanalysis “compels us to face the return and repetition of the past even when this past is less than ideal” (quoted in Bride, p. 43). Butler (2005) supports and furthers this position, by arguing that the process (of learning to construct narrative) is an especially crucial practice when “discontinuous bits of experience remain disassociated from one another by virtue of traumatic conditions” (p. 13). Both of these points raise certain questions where the issue of trauma is concerned.

In terms of my own experience, pregnancy, childbearing, and mothering at such an early age produced certain psychological traumas, which, even today, continue to affect me in certain ways that are in keeping with symptoms of post-traumatic stress disorder. For example, the autobiographical passages about the experience of childbirth

itself, and that of the adoption home immediately afterward, and several years later, each demonstrate dissociative and depersonalization symptoms commonly seen in people with PTSD. Thus, while Butler's emphasis on the importance of learning to construct narrative is compelling, it seems to lack any explanation of the concept of trauma itself. Are there any boundaries we can ascribe to trauma, and if so, how do we recognize them? Surely there is a distinction between something being uncomfortable or less than ideal, and trauma induced psychiatric disorders. What might it mean to face return and repetition of the past in the case of prolonged trauma? To what extent have past traumas informed my own conscious and unconscious decisions and motivations, and particularly so where the processes of this particular project is concerned?

In exploring these questions further I turn to Freud's 1920 essay *Beyond the Pleasure Principle*. In it Freud investigated the idea of repetition compulsion, or, trauma and the compulsion to repeat the original trauma. According to Freud one possible explanation for repetition compulsion is the subject's subconscious attempts to retrospectively "master" the original trauma by turning passivity into activity¹⁷ (1989, p. 285). Freud's theory emphasizes a level of self-efficacy that appeals to me in thinking about my experience, and the underlying motives for this research. I am willing, and even eager, to accept that I subconsciously chose to undertake this thesis as a means of gaining control over certain traumas in my life, that I continue to press on with a seemingly endless pursuit because I am tenacious. The alternative, more unsettling, explanation, however, suggests that repetition compulsion is more likely a case of mastery gone wrong. For example, according to Bowins (2010), "repetitive maladaptive behaviour of traumatic

¹⁷ Though too extensive for the purposes of this thesis, Freud details four key aspects of repetitive behaviours and repetition compulsion in *Beyond the Pleasure Principle*.

origin is characterized by defensive dissociation of the cognitive and emotional components of trauma, ultimately making it very difficult for the person to integrate the experience” (p. 285). He argues that in spite of wishes and efforts to the contrary, repetition compulsion does not achieve mastery, and points to the fact that the problem is rarely resolved without therapeutic interventions. Bessel (1989) also argues that repetition compulsion (while providing a temporary sense of mastery or even pleasure) actually perpetuates chronic feelings of helplessness, depression, self-blame, and a subjective sense of being out of control, and suggests instead, that the goal of healing is “gaining control over one’s current life, rather than repeating trauma in action, mood, somatic states” (p. 409).

Poststructural theory and psychoanalysis trade the possibility of self-realization and self-actualization, for the possibility of insight into the role that language and discourse play in constituting subjective experiences, and our unconscious attachments. Still, I carry reservations about the usefulness and appropriateness of my theoretical framework, but even more than this, the actual undertaking of a project that is at least, partly rooted in psychological trauma. Ultimately I am left questioning whether I undertook, and continue with, a project defined by resistance, repression, loss, and trauma, as a means of self-efficacy or as a means of self-defeat?

Doing Self-Study

Like critical discourse analysis, narrative research traditions are diverse and encompass methods developed across and within a variety of fields (i.e., folklore, psychology, literature, history, anthropology, and education). Differences arise in data collection, analysis, and presentation among these approaches, and given this diversity, it

is not surprising that, again, like CDA, there is no clear definition of what counts as narrative, or lines between narrative methods and the results of social science and historical inquiry that can be clearly drawn (Bullough & Pinnegar, 2001, p. 13). For example, when Fenstermacher (1997) reviewed a collection of papers on narrative and narrative inquiry for his article, "On Narrative," he concluded that he remained unsure as to how to decipher what narrative is, or how he might judge whether one was good or not.

Like CDA, it seems that the same set of questions and challenges present themselves in terms of how to actually do self-study. For me, the ability to answer these questions rests on several others. For example, can self-study offer insights into the underlying continuities and patterns in discourse about women's reproductive activities, childrearing practices, and decision-making? If so, how might it achieve these goals laid out in my earlier discussion of genealogy? More than this, the question I have struggled with is, what exactly makes this autobiographical self-study worthy?

When I sat down to try and write narratives, I asked myself out loud, "what do you want to write about?" For the most part I did not choose to write the narratives I did with any sort of agenda or design in mind. I wrote about experiences that stood out as particularly significant for me. As Pinnegar and Hamilton (2009) point out, however, unlike methods for doing traditional research, self-study methods are both the phenomenon under the study and the method of researching oneself and others. The significance of this point gains clarity when I reflect on the process and the focus of my narrative writing over the course of my thesis.

Earlier narratives like, "Pregnancy & Aftermath", "The Hospital", and "Home of the Guardian Angel", for example, are very visceral and deep-seated. I wrote these with

great difficulty, sobbing by myself at 4am, and without any intention of trying to make them fit with the research. While not obvious to me at the time, the experience of writing these particular narratives developed into the phenomenology under study, a key aspect of the method for researching myself, and others, and for drawing broader theoretical connections between the two. They forced me to confront the personal challenge of writing narrative for me, to sit with the experiences, and attempt to face why they remain so difficult for me. At some point these challenges and questions pushed me to think about my experiences in the broader theoretical sense.

Later narratives like “Christmas Cookie Party, and “Mrs. Charles”, while not written explicitly to “fit” the research, reflect a shift in my ability to draw more complex connections between the theoretical implications of the phenomenological. For example, I argue that society perceives teenage pregnancy and childbearing as less stigmatized as a moral problem than in previous generations. At the same time, I also argue that while this may be true in some sense, teenage mothers have not lost their morally problematic character; the boundaries of morality have simply shifted, and are in many ways, more obscured than in previous generations.

The extent to which society continues to hold punitive views became particularly clear to me when writing about my high school Vice Principal’s arguments against on-site childcare. The crux of Ms. Bell’s position was that childcare at schools would encourage teenage pregnancy. While I had always felt this to be an utterly ridiculous logical fallacy, what I failed to grasp prior to writing about our exchange was the inherently punitive nature of Ms. Bell argument. I had argued that childcare provided young mothers with more opportunity to stay in school. Teenage mothers “dropping out” of school is, after all, one of the key reasons given for why teenage childbearing is cited as a problem. What

Ms. Bell was actually saying however, was that making it easier to stay in school was the problem; that providing childcare removed a consequence and therefore a deterrent to teenage pregnancy. Making it difficult to stay in school was actually the preferred policy.

I would suggest that Ms. Bell was not a particularly socially conservative woman, or at least that some of her life choices/circumstances indicated otherwise. Yet, when it came to teenage pregnancy and teenage mothers she participated in a punitive moral discourse more often associated with social conservatism. Using phenomenology and self-study as a theoretical method allowed me to make multiple connections in this particular case. It not only demonstrates the contradictions embedded in discourse about teenage pregnancy and teenage mothers, but also the fluidity of these contradictions, and discourse in general, and lastly, the challenge of trying to assign particular characteristics and variables to interpretative frameworks (i.e., moral discourse, bureaucratic discourse, social conservatism, liberalism, and so forth).

Conclusion

Before going on to critically analyze the texts discussed earlier in this chapter, the following chapter will serve as an overview and background of sorts for the remainder of my analysis. I begin chapter 3 by unpacking the very labels “teenage pregnancy” and “teenage mother”. I follow this with an explanation of my particular demographic focus on teenage pregnancy and childbearing in Canada and the United States specifically. From here, I provide an historical overview of fertility and childbearing practices so as to better account for the development of the concept of early childbearing as problematic, undesirable, and in need of intervention, in my remaining chapters.

CHAPTER 3

BACKGROUND

LABELS, DEMOGRAPHICS & HISTORY

Unpacking the labels “teenage” pregnancy & teenage “mother”

“Teenage pregnancy” and “teenage mother” are seemingly neutral terms that are used to describe females between the ages of thirteen and nineteen (or sometimes 21) who become pregnant, and bear children¹⁸. I use the following section of this chapter to challenge the neutrality of these terms on several fronts. First, deconstructing these terms makes it clear that they are not objective, but are instead, culturally loaded labels informed by existing doctrines, social bias, and power relations (Wilson, Huntington, 2005); second, it demonstrates that conceptualizing teenage pregnancy and teenage motherhood as a problem of age creates and reinforces misleading stereotypes and assumptions about young women; and third, it shows that these labels ultimately serve to undermine young women’s unique and multifaceted experiences of pregnancy and motherhood.

When speaking and thinking about teenage pregnancy and teenage mothers, we use age as the primary category with which to define the problem, yet the inconsistency with which we understand and apply this concept is present almost immediately. For example, adolescence is generally recognized as a time of transition involving multi-dimensional biological, psychological (including cognitive) and social changes (Karunan,

¹⁸ The term teenage pregnancy is a misnomer in and of itself. The negative consequences of adolescent childbearing and pregnancy described in policy and programmatic literature are, literally, the consequences of parenthood (childbirth) not pregnancy, yet the terms are used interchangeably as if they are one and the same (Nathanson, 1991, p. 163).

2006). When speaking about teenage pregnancy and teenage mothers, however, we replace the gaps in development with an all-encompassing, descriptive concept of the teenager. What is more, we shift the distinct definitional boundaries of this category in such a way as to collapse the three stages of adolescence into the earliest group. This leaves us with cultural catchphrases like “babies having babies” and “kids having kids”, which are not only problematic, but also misleading and disingenuous.

Most teenage mothers in Canada and the United States are not babies having babies, but actually legal adults¹⁹, between the ages of 18-19, at the time of giving birth²⁰ (Wiggins et al. 2005; Statistics Canada, 2006). Categorizing pregnant teenagers and teenage mothers by their age first and foremost, not only infantilizes young women, but also implies that the implications of pregnancy and motherhood for young women are basically uniform across the board. We fail to distinguish between younger and older mothers, (implying that pregnancy and motherhood mean the same thing for a 12 and 19 year old), between those who are married versus unmarried (approximately 20% of mothers under the age of 20 are married at the time of their first birth)²¹, and between those who are financially independent or supported by their families versus reliant upon state supports (reinforcing welfare narratives).

¹⁹ The term legal adult is a social category itself that speaks to certain contradictions and paradoxes.

²⁰ The age of majority in the United States is 18 years of age (with the exception of Nebraska and Alabama). The age of majority in Canada is 18 in the majority of the provinces and territories, and 19 in the remaining.

²¹ Concerns about teenage pregnancy and teenage mothers are frequently interchangeable with concerns over the rise of single-motherhood (Seiler, 2002). This is despite the fact that that approximately 70% of unmarried births in the United States are to women over the age of 20 (Brookings Institute, 2001).

“Boy dad Alfie Patten yesterday admitted he does not know how much nappies cost, but said: I think it’s a lot” (The Sun, January, 12, 2011).

While sensationalized stories such as this about adolescent teenage fathers do occasionally make it into the headlines, the public image of the problem is normally that of the “bewildered adolescent girl, who is incongruously, both pregnant, and overwhelmed by an armload of schoolbooks” (Vinovskis, 1988, p. 232). Therefore, when we use the terms teenage childbearing and teenage parenting, what we are more accurately referring to is teenage mothering. The gendering of teenage pregnancy and parenting clearly warrants some unpacking.

On the one hand, it implies that the problem of teenage pregnancy and childbearing is that of a female alone, because only the female gets pregnant. At the same time, we conceptualize teenage pregnancy as an event involving “teenage boys” and “teenage girls”. This double standard is even more complicated by the fact that most teenage pregnancies do not actually involve males of high school age or younger: approximately 70% of teenage pregnancies and births involve men over the age of 20 (a significant number of which involve men over the age of 25) (Guttmacher Institute, 1997; Klein, 2005). This additional double standard begs the question: how is it not a contradiction to define the problem of teenage pregnancy and childbearing by the youthful age of the mother, to assign her responsibility for preventing the pregnancy, as well as the task of childrearing, and not her adult male partner?²² (Males, 2008)

²² In the U.S, states are increasingly enacting and more rigorously enforcing statutory rape laws as a means of curbing teenage pregnancy by deterring adult men from becoming sexually involved with minors. Experts argue, however, that statutory rape laws do not reduce teenage pregnancy rates, but rather, they discourage adolescent females from obtaining reproductive health care out of fear that disclosing

The language we use when speaking about the subject of teenage pregnancy and teenage mothering, is neither neutral, nor objective. “Teenage pregnancy” and “teenage mother” are not simply descriptive terms, but are rather powerful labels that denote fundamentally pejorative assumptions about young women. They offer an incomplete and inaccurate picture at best, and at worst, one that is misleading and disingenuous. On one level they assign young women responsibility for preventing the pregnancy, and then, childrearing as the price for failing in their role of gatekeeper.

On a more abstract level they serve to undermine the complex ways that young women experience pregnancy and motherhood by highlighting and defining the particularity of their experiences collectively. If we accept that pregnancy and maternity are “multifaceted and unique experiences for women” (Pillow, 2004, p. 101), why do we not extend this acknowledgment to include teenagers? Instead, we place pathologizing labels on pregnant teenagers and teenage mothers which preclude them from viewing their choices and their experiences within a wholly positive framework.

With this in mind, I have chosen to use certain descriptive language inconsistently throughout my thesis. In keeping with the spirit of critical discourse analysis, I do so as a means of recognizing, and in some small way, protesting these labels. For example, when speaking about young women and pregnancy, childbearing, and mothering, I use the words “teenager”, “adolescent”, and “young” interchangeably, as well as the words “mother”, “mothering”, “childbearing”, “parenting”, “parent”, and so forth.

information about their partner will lead to a criminal charge (Teare and English, 2002, cited in Planned Parenthood Fact Sheet, 2012).

Demographic focus

Teenage pregnancy and childbearing in Canada & the United States

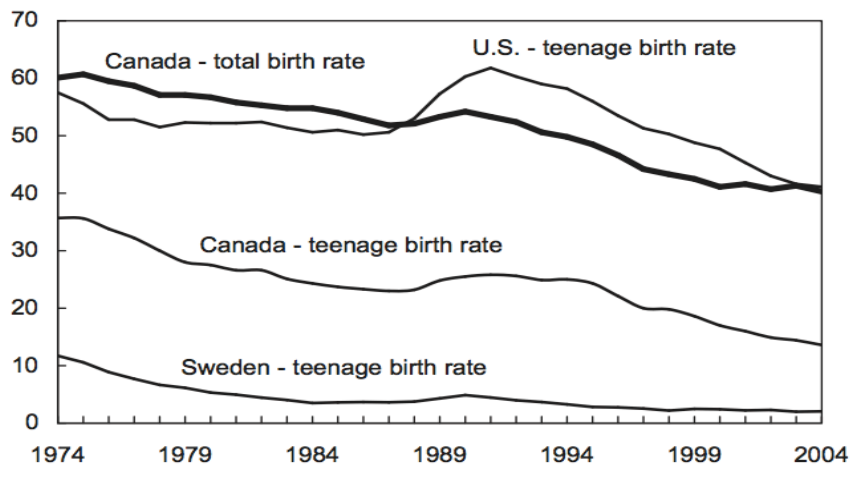
Teenage pregnancy, which is detrimental to the health of mother and child, is a common public health problem worldwide. It is a problem that affects nearly every society- developed and developing alike. There is a growing awareness that early childbearing has multiple consequences in terms of maternal health, child health and the over all well-being of society (G. Dangal, 2004, p. 4)

Teenage pregnancy and early childbearing have increasingly come to be conceptualized as a “worldwide problem”. In terms of the sheer scope of the subject, however, I have chosen to limit my research primarily to teenage pregnancy and childbearing in Canada and the United States. While my original intent had been to direct most of this attention toward Canadian content, it became apparent early on that texts focused on Canada specifically were somewhat lacking, particularly when compared with American texts on the subject.

Although Canada and the United States share many cultural traits and values with one another, there are important differences between the two, which warrant some consideration. From a statistical standpoint teenage pregnancies and teenage births have always been higher in the United States. The United States leads the developed world with 75.4 pregnancies and 53 births per 1000 females under the age of 20 (UNFPA, 2002). Canada on the hand has a rate of 33.9 pregnancies and 16 births per 1000 females under age 20 (McKay, 2006).

Chart: Canada's teenage birth rate in the midrange of developed countries

Birthrate per 1000 women



Source: Statistics Canada Catalogue no. 75-001-X

From a socio-cultural perspective there are notable differences with respect to how young women within particular communities are pathologized. For example, in the United States, distinctions are often made between teenage pregnancy and childbearing trends among African American, Hispanic, and Caucasian populations. Regional distinctions are sometimes also made between the Southern, Northern, and Midwestern states. In Canada, distinctions tend to be made between Aboriginal and non-Aboriginal populations with additional distinctions being made between on and off reservation populations. Regional distinctions (often already inherent when speaking about Aboriginal populations) are sometimes drawn between Eastern Canada, Quebec, and Northern and Western Canada.

In all of these instances, race, ethnicity, culture, and sub-culture serve the same function as signifiers. First, they serve to highlight certain differences, and second, they serve as important explanatory tools (MacLeod and Durrheim, 2010). So, for instance, when research about teenage pregnancy and childbearing highlights the sexual and

reproductive behaviours of African American females, it frames whatever deviations might arise within the context of the broader “African American community”, and young women’s membership within this. While I explore this point in more detail later, it is interesting to note here that Canadian and American texts alike tend to emphasize socio-cultural variables when speaking about pathologized groups of pregnant teenagers and young mothers (i.e., Aboriginal teenagers), and psycho-medical variables when speaking about pregnant teenagers and young mothers in abstract terms²³.

The liberal welfare state

According to Esping-Anderson (1989) there are three models of welfare capitalism that countries can fall under: the corporatist welfare state, the social democratic welfare state, and the liberal welfare state. Both Canada and the United States can be considered examples of the model liberal welfare state. According to Esping-Anderson the main features of liberal welfare states are: “means-tested assistance, modest universal transfers or modest social-insurance plans” in which “benefits cater mainly to a clientele of low-income, usually working class, state dependants”, where “the limits of welfare equal the marginal propensity to opt for welfare instead of work” and where “entitlement rules are therefore strict and often associated with stigma; benefits are typically modest” (p. 167).

Esping-Anderson describes the class character of the liberal welfare state as one where the middle-classes are institutionally wedded to the market economy²⁴ (i.e., privatized health care, childcare, pensions, etc.), and goes on to argue that this failure to

²³ With this in mind, it is important to consider MacLeod and Durrheim’s argument that expert literature about teenage pregnancy contributes to the entrenchment of ‘race’, ‘culture’ and ‘ethnicity’ as fixed, ‘natural’ signifiers, through the process of racialization (2010).

²⁴ The individual parameters of this relationship vary. Discrepancies between privatized and public health care funding and services in Canada and the United States illustrate this point.

forge loyalties to the welfare state on the part of the middle-classes, leaves states vulnerable to periodic welfare state backlash movements and tax revolts. It is within this context that teenage mothers have come to symbolize the expansion of the welfare state at the expense of the middle-class taxpayer, and it is within this environment that Canadian and American politicians (of all stripes) have attacked teenage mothers as a drain on society, and as examples of the undeserving poor.

Checkland and Wong (1999) provide an interesting example of the ideological parallels and tensions between Canada and the United States, in recalling Preston Manning's 1995 visit to Washington DC to meet with U.S. House of Representatives speaker, Newt Gingrich. The high-profile Republican credited Manning's 1993 Reform Party platform as a model and inspiration for the Republican Party's successful electoral program. Checkland and Wong write that, while Manning basked in the endorsement, he also took pains to separate his policy from Gingrich's in portraying himself as more moderate than his American allies. At a press conference Manning tried to establish this distance by stating that he disagreed with some of the harshest measures proposed in the Republican agenda, including the denial of welfare to teenage mothers. Still, it is difficult to gauge the degree to which the parties' ideologies and agendas did or did not overlap; when Gingrich introduced Manning as a "revolutionary" in the midst of his weekly cable TV program, Manning replied, "A revolutionary should neither look like one nor act like one to get ahead in our country" (p. 53).

Historical Overview

Introduction

Practices of fertility, childbearing, and childrearing, the concept of motherhood, and the universalised characteristics of the ‘good mother’ are commonly taken for granted as natural concepts. They are, however, complex and dynamic variables that ultimately reflect and inform the socio-political preoccupations of one’s particular time and place. Shifting concepts of how society understands and approaches young mothers surely speaks to this point. Teenage pregnancy and teenage childbearing are taken for granted as undesirable and problematic within Western society, and have increasingly come to be conceptualized as needing intervention on a global scale. Despite this current salience of teenage pregnancy and childbearing in contemporary culture, however, its designation as a problem has a relatively short history.

In Canada and the United States teenage births peaked in the two decades following the Second World War. At the height of the baby boom in the United States more than a quarter of all women had their first birth before the age of 20 (Cherlin, 1981), yet, apart from modest concern over the ill effects of very early marriage, virtually no research or public concern about teenage pregnancy or early parenthood then existed. The concept of teenage pregnancy and childbearing only begins to emerge toward the end of the 1960s in the United States, and early 1970s in Canada.

A detailed historical analysis of the developments and events leading to this shift is certainly of particular interest to me, but it is beyond the scope of this thesis. Instead, I offer an historical overview of teenage pregnancy and childbearing in order to provide context for our present-day understanding of teenage pregnancy and teenage mothers. Throughout this section I draw on Foucauldian genealogy in order to consider the

following questions: at what point did teenage pregnancy and childbearing appear on the public's radar; when did pregnant adolescents and young mothers become worthy of scientific investigation and public scrutiny, and what are the conditions that set the stage for these developments and events? Although I trace key social and historical developments and events, it is impossible to tease them apart in any sort of linear fashion, or measure their significance and influence in any meaningful, definitive way. My goal then, is to reveal the discontinuities inherent in the parameters of normative and deviant fertility and motherhood.

Industrialization

Stepping as far back as pre-industrialization is somewhat far-reaching given that the aim of my thesis is not an in-depth historical analysis of teenage pregnancy and childbearing. On the other hand, the Industrial Revolution and the emergence of the modern-capitalist based economy mark a seismic turning point in history that influenced almost every aspect of daily life in some way. While the details continue to be debated by some historians, the Industrial Revolution, and the period from about 1760 to sometime between 1820 and 1840 in particular, is generally recognized as the time of transition from agrarian-based society to industrial-based society.

Again, while an in-depth historical analysis is too expansive for the scope of this research, there are important historical developments, which give way to a complex of growing social anxieties, and the increasingly morally anxious citizen. With this in mind I draw attention to the emergence of the market economy, the factory system and the growth of cities and urban areas in response to the factory system, the financial viability of

the nuclear family as a social unit, and subsequent development of the middle-class, and the emergence of child labour laws and growing attention to child welfare.

Adolescence as a life stage

The degree to which the emerging middle-class dictated the interpretations and effects of many of the above anxieties is perhaps no more obvious than with the emergence of the category of adolescence. In 1904, G. Stanley Hall defined the broad psychological and physiological parameters of modern adolescence for the first time in his two volume work, *Adolescence: Its Psychology and Its Relations to Physiology, Anthropology, Sociology, Sex, Crime, Religion, and Education*. Hall described the teen years as a time of unavoidable physiological and psychological turmoil, and warned that while it was normal for adolescents to think about sex, they were too physically and psychologically immature to engage in sexual intercourse or become parents. It is important to note, however, that at the time of Hall's writings, few teenagers were actually socially or economically positioned to transition into marriage and parenthood. According to Fasick (1994) less than 1% of males and 11% of females (age 14-19) were married in 1900.

Prior to Industrialization, adolescence was understood not so much as a life stage, but rather as a convergence of physical, psychological and sexual maturation. Physical capacities and life circumstance (as opposed to age) set the dividing line between childhood and adulthood. For females the move from childhood to adulthood was generally established by the ability to bear children²⁵. For males (outside of the upper classes), the capacity to do physical labour marked the change from childhood

²⁵ Most females reached menarche around age of sixteen or seventeen. In keeping with this, State codes outlining minimum-age-at-marriage laws followed English common law that permitted girls as young as twelve to marry without parental consent.

dependence to a state of semi-dependence, with marriage marking full adult independence and its associated responsibilities. While some did so within their teenage years, the combination of biological, social, and economic factors limited pregnancy and parenthood for most youth²⁶.

Industrialization brought with it, improved health conditions and better economic opportunities for young males, which, somewhat paradoxically, both encouraged a newfound level of autonomy for young people, and a growing dependency, contingent on one's social group. On the one hand, economic independence encouraged a growing number of couples to marry and become parents at younger ages. At the same time the trend toward earlier marriage and childbearing ran counter to an increasingly popular social definition of adolescence among urban middle-class families.

Advocates of the urban-middle-class-family ideal viewed adolescence as a distinct period of life separate from adult responsibilities, and encourage society as a whole to aspire to this model by leaving their teenaged children in school instead of sending them to work or allowing them to marry²⁷. Industrialization also brought with it the emergence of professionals such as developmental psychologists and social workers who, tasked with better socializing the newly defined category of youth, begin imposing different constraints and regulations on young people. Child labour laws²⁸, compulsory education

²⁶ Though many boys assumed strenuous jobs in adolescence, few could earn enough to support a family of their own until their early to mid-twenties. From colonial times through the late nineteenth century, marriage and parenthood was a rational choice for people living in a society dependent on family production. While class, race, ethnicity, and region could influence individual circumstances (rural areas experiencing the lowest age at marriage), the vast majority of Americans chose to marry and have children by their early to mid-twenties.

²⁷ From the 1820s onward, a growing number of middle-class parents had been sending their adolescent children to high schools.

legislation²⁹, juvenile courts and the mental hygiene movement³⁰, efforts to control sexuality, and a myriad of other age-specific policies reflect this new social attitude toward adolescence.

Post-Industrialization: 20th century marriage and fertility in Canada & the United States

Research has generally established that marriage and fertility trends react negatively to downturns in economic growth, and positively to times of economic prosperity (Hotz, 1997). While I agree with this overall premise, the overview above clearly demonstrates that economic trends have a multifaceted influence on marriage and fertility trends, and moreover, that economic trends do not affect marriage and fertility decisions in the same way across various social groups (Sobbotka, Skirbekk and Philipov, 2010, p. 4). Keeping both this, and the limitations of my thesis in mind, I offer a general overview of family formation patterns and fertility trends throughout the first half of the 20th century.

Industrialization and urbanization signalled a shift from a preference for families with a large number of children to the much smaller family prevalent in Canada and the United States today (Kozmetski & Yue, 2005). In both countries, the crude birth rate fell steadily throughout the 1910s and 1920s (a time of rapid economic growth), as more

²⁸ Although child labour existed prior to the Industrial Revolution it became more visible during this time due in part to an increase in population and education, and the poor conditions child labourers were subjected to in the growing numbers of factories and mines. Fasick points out that it was not the working class, but primarily the upper and middle-classes, who spearheaded child labour laws.

²⁹ Mandatory schooling served to regulate the development of lives of young people in carefully organized institutionalised fashion (Fasick, 1994).

³⁰ Many young people resisted attempts to restrict and regulate their autonomy, leading to the establishment of juvenile courts.

couples used birth control to limit family size, before bottoming out in the 1930s (Population Reference Bureau, 2012). Throughout the Great Depression and the period leading up to World War II, young women and men postponed marriage, while women of all ages curtailed their fertility (Haines and Steckel 2000). During this period the crude birth rate in the United States dipped to 18.15 births per 1000 women (Kozmetski & Yue), and 20.1 births per 1000 women in Canada (Statistics Canada, 2010).

The long run decline in the lifetime fertility of women was temporarily interrupted by the post-World War II baby boom. The baby boom is generally described as the period of increased birth rates following World War II, lasting from roughly 1946-1967. Researchers have offered a variety of explanations for this historical anomaly. First, the Great Depression prolonged the decline of birth rates in Canada and the United States: The increase in fertility begins with the generation of children whose births had been postponed by parents during this era. Improved economic conditions caused a recovery that began to accelerate during the Second World War, and with that, a larger portion of Canadian and American adults married, and did so at earlier ages than previous generations. At the height of the baby boom close to half of women in Canada and the United States married before the age of 20. At the same time, approximately one-third of women gave birth to their first child before the age of 20 (Luker, 1996). This larger portion of adults marrying also had more children. By 1945 the birth rate in Canada had risen to 24.3 per 1000 women and jumped to 27.2 by 1946. It remained between 27 and 28.5 until 1959, at which point it leveled and continued on with its gradual decline³¹.

³¹ This trend was also highlighted by key post-war political-economic variables. For example, women exited the paid work force in order to make room for men returning from the war. Women's return into the home

Demographers estimate that over a 25-year period, the baby boom produced approximately 1.5 million more births in Canada that would otherwise not have occurred. Over half of these have been attributed to the larger number of adults who married following the war, and more specifically, the larger number of people who married young (Krotki & Henripin, 2012).

It is worth considering the extent to which, this “timing phenomenon” was actually a case of a rise in premarital pregnancies precipitating the rise in early marriages. Prior to the 1960’s premarital sexual activity and unintended pregnancies among teenagers remained largely concealed by “shotgun” marriages, leading some to estimate that during the 1950s and 60s, over a quarter of marriages among women under 20 were because of, or at least hastened by, premarital pregnancy (Furstenberg, & Brooks-Gunn Morgan, 1987).

Why was this historically high number of teenage mothers, and high number of premarital pregnancies, not a problem for society? Adams (1997) suggests that relief and optimism with the end of the war itself, oriented citizens toward the comfort of home and hearth. This coupled with unprecedented economic prosperity, an increase in government expenditures on education and housing, and a strong cultural emphasis on family, stability, and female domesticity (Cherlin 1981; Coontz 1992; May 1988), would seem to suggest, that in a post-war North America, the adolescent female who left school to marry, perhaps because she was pregnant, was simply conforming to her expected social role slightly ahead of schedule (Luker, 1996).

was facilitated, in part, by family values discourse and the idea that larger families denoted economic and perhaps social wellbeing at the individual and societal level.

In the 1960s, marriage and fertility rates began levelling off. By 1965, fewer adults were marrying, and those who did, were marrying later (Luker, 1996). At the same time overall birth rates dropped for women of all ages, while the age at which they began having their first births progressively climbed. For example, toward the end of the 1960s the average age of mothers at the time of first childbirth in Canada jumped from 23.5 years of age to 26.7 in 1975. By 2011 the average age of Canadian mothers at the time of birth of their first baby had climbed to 30.2 years of age (Statistics Canada, 2011). From 1986 to 2006 the proportion of first time births for women between ages 30 and 34 in Canada increased from 18.9% to 31.4%; 4.7% to 14.8% for women between the ages 35 of 39, and 0.6% to 2.8% for women between 40 to 44 (Johnson et al. 2012). By 2006 fertility rates for women age 30 to 34 years old exceeded those of women between the ages of 25 to 29, for the first time.

The trend toward delayed childbearing has invariably shifted the parameters of normative and deviant fertility and motherhood, and vice versa. From a genealogical perspective, teasing apart the historical and social events and developments that have shaped, and been shaped by these shifts is an impracticable, if not impossible, exercise. Indeed, my earlier attempts to situate contemporary discourse about teenage pregnancy and mothering within a historical framework, were repeatedly frustrated by my inability to untangle events, developments, and even, eras, from one another. At the same time, many variables factor significantly into our present understanding of teenage pregnancy and young mothers, and as such require a certain level of recognition and examination. For example, it is not unreasonable to point out that the development and wider accessibility of better methods of birth control (i.e., the approval of the birth control pill for contraceptive use by the FDA in 1960) significantly altered family formation and

fertility trends in ways that continue to reverberate throughout society. It is also fair to say that these developments affected social groups in decidedly different and complex ways, a point that is at the very heart of this research.

While I explore these tensions throughout the thesis, it is important to state that I am at this point largely referring to white middle-class ideals. Speaking with a certain level of exclusivity, however, also indicates the degree to which the white middle-class ideal serves as the frame of reference against which ‘others’ are judged as transgressive. The availability of the birth control pill, and legislative developments concerning abortion rights resulted in greater sexual autonomy, and greater control over reproductive choices for women. Increasing control over fertility afforded women a level of self-determination and mobility that allowed greater numbers the opportunity to move into the paid labour market more freely. Many women experienced a great deal of economic freedom and responsibility as a result of both the Great Depression, and WWII. The war allowed millions of women to work in jobs that otherwise would have remained the realm of men for a much longer period, while the Depression’s hardships required both parents to seek employment whenever it was available. Jobs for women were relatively plentiful in the 1920s and even earlier, though frequently limited in scope to classic roles (i.e., clerks, telephone operators, secretaries).

The widespread accessibility of birth control provides women with more sexual and financial autonomy, and ultimately, the possibility of more autonomy from men. The traditional family model³², and women’s role within it shifts irrevocably. For example, the

³² Early influential anthropologist G.P. Murdock described the family as “social group characterized by common residence, economic cooperation and reproduction. It contains adults of both sexes, at least two of who maintain a socially approved sexual relationship, and one or more children of the sexually cohabiting adult” (1949).

end of the 1960s sees fewer couples entering into marriage. At the same time, divorce rates begin to climb³³ (Whyte, 2000). During this period overall fertility rates also begin to steadily decline, while out of wedlock birth rates, conversely, begin rising dramatically. This last point has significant implications for contemporary discourse about fertility and childbearing, and more specifically, for narratives about teenage pregnancy and early childbearing.

Akerlof and Yellen (1996) directly attribute the rise in out of wedlock births to the gradual disappearance of ‘shotgun weddings’. They point out that shotgun marriages began to decline at almost the exact same time as certain reproductive technologies became more widely available. This growing acceptance of out of wedlock pregnancy and childbearing signals society’s move away from an understanding of normal and deviant reproductive practices in moral terms.

Moral Order versus Technical Order

Nobody ever asked me if I wanted to keep [my] baby, or explained the options. I went to a maternity home, I was going to have the baby, they were going to take it, and I was going to go home. I was not allowed to keep the baby. I would have been disowned.

— Joyce

“The Girls Who Went Away” (Fessler, 2007)

In the most basic sense, both moral and technical transgressions rely on the premise of a “natural” order, but differ in their relationship to the natural order, and by

³³ The divorce rate in the United States climbed from 2.1 per 1000 people in 1958 to 2.9 in 1968, and 5.3 in 1979 (Whyte, 2000).

extension, the responses and actions society deems appropriate. Moral transgressions can be understood as those that go against the “natural” (a loaded word as it implies essential/the socially constructed sense of right) order. Technical transgressions, on the other, are more likely to be seen as deviations from this natural order.

Throughout history, society has typically punished moral transgressions for their lack of conformity with practices of punishment, shame and social exclusion. For example, we know that until the latter half of the 20th century, women’s sexual behaviour, and fertility and childbearing practices, were generally understood as “normative” or “deviant” within a moral framework, and directly in relation to one’s marital status. Historically, Western society has espoused that sexual activity between unmarried individuals is sexually immoral. That society has also overwhelmingly assigned women moral responsibility can be seen in the kind of language used to talk about unmarried sexually active women, and unwed mothers (e.g., “fallen-women”, “disgraced”, “promiscuity”, “immoral”, and “illegitimacy”). Women typically circumvented the consequences and most obvious evidence (pregnancy) of a sexual transgression by marrying quickly, or failing this, by concealing themselves in homes for unwed mothers (or a similar institution such as a Magdalene laundry), so as to avoid disgracing their families, followed by the surrendering of their babies for adoption³⁴.

Whether or not teenage mothers face less moral condemnation than unmarried mothers in previous decades is a complex debate, which lacks entirely decisive answers. While it is true that society continues to emphasize a preference for childbearing within marriage, earlier moral practices of shaming pregnant women into marriages, homes for

³⁴ According to Fessler (2007) more than a million and a half (American) women were sent to maternity homes to be coerced into surrendering their children for adoption in the decades between World War II and the passage of Roe v. Wade in 1973.

unwed mothers, and coerced adoptions, have failed to outlast changing sexual behaviours and birth control technologies, and women's growing economic autonomy. Concepts of "normal" and "problematic" sexual activity, fertility, and childbearing practices have shifted to where they now emphasize transgressions as technical deviations from the natural order (Macleod, 2005). While unmarried teenage mothers continue to maintain their problematic character, the defining characteristic of this problem has shifted away from one of sexual immorality and illegitimacy to one of wrong timing.

In contemporary society pregnant teenagers and teenage mothers are seen as deviating from the natural order by miscalculating the natural sequence of life events, and within this, the appropriate time to bear children. Arney & Bergen (1984) explore this conceptual shift with their study about the changing role of maternity homes throughout the latter half of the 20th century. According to Arney & Bergen the move towards more scientific views throughout the 1970s positions the pregnant teenager as less a sexual miscreant and more as "a girl in trouble who had simply made a mistake". In response maternity homes shift from church-run homes for "fallen women", to service-oriented providers (staffed by social workers and child psychologists), that interpret teenage pregnancy as the manifestation of other deeper and nonsexual psychological problems and emotional needs (p. 93).

Technical Transgressions

Drawing on Foucault's model of biopower, technical transgressions can be understood as inviting technologies of correction and normalization (i.e., counselling, medical authority) that are designed to "help" the individual conform to their "true" nature; a concept that not only operates as an extension of the natural order, but also the

structuralist concept of the coherent self. When speaking about pregnant teenagers and teenage mothers, both concepts rest on the fundamental assumption that young women commit an error in timing; that this order of pregnancy and childbearing is fundamentally wrong, and thus problematic and undesirable³⁵. Professionals address the problem of teenage childbearing by asking why certain young women transgress this natural order, and then asking how they might most effectively intervene.

I explore the legitimation of professionalized intervention and its implications in greater detail in my analysis of social science discourse throughout chapters 5 and 6. Before moving on to this discussion however, it is worth briefly revisiting some of the inconsistencies that lay the groundwork for this shift, and the emergence of teenage pregnancy and childbearing as a social problem.

I have argued that problematic fertility and childbearing have shifted away from marital status and concepts of sexual immorality and illegitimacy, toward technical transgressions that now heavily emphasize age. While untangling the complex social forces that have influenced these shifts is less than practicable given my theoretical approach, there are significant variables that can be singled out for examination. For example, the wider availability of the birth control pill beginning in the late 1960s/early 1970s provides women with a greater control over their fertility, and in turn, a growing level of mobility and self-determination. On one hand, this development offers women a measure of reprise from the kind of earlier public moral condemnation directed toward them for engaging in sexual activity outside of marriage. On the other hand the ability to

³⁵ For example, Arney & Bergen's study of maternity homes shows how punitive practices like forced adoptions and unpaid forced labour are gradually replaced with institutionalized practices of normalization like counselling. Within this shifting environment the teenage mother was not punished for a transgression as much as she was encouraged to recognize and address her mistake and her psychological motivations for this mistake. Following the birth, she reintegrated into society (usually upon relinquishing her infant for adoption), equipped with the necessary tools for avoiding another offense.

make individual decisions about their fertility and sexuality renders women's sexual behaviour more visible. The paradox of this shift is that women's private choices become subject to greater public scrutiny.

This visibility goes some way in explaining why anxieties about teenage pregnancy and childbearing begin to emerge just as early childbearing rates begin to decline. Compounding this visibility however, is the coming of age of the approximately 1.5 million additional children born during the baby boom years. This surplus of adolescents brings their sexual activity into public view, and in doing so places adolescent females under a particularly heightened level of scrutiny.

If we only consider the trend toward delayed childbearing and the decline in the number of adolescent females bearing children, it is reasonable to suppose that the adolescent females who do become pregnant and bear children stand out all the more. Adding to this visibility is the dwindling number of teenage mothers choosing not to relinquish their children for adoption, or conceal their transgressions of social norms by marrying. All of this is to say that trying to untangle variables like the social, economic, and political implications of women's shifting roles in society, or the gendering of adolescence and extension of adolescence as a "life-stage", for example, is an impractical, if not impossible task. The emergence of the concept of teenage pregnancy and childbearing as problematic simply cannot be traced to any one point of origin. Indeed, my repeated unsuccessful attempts to situate contemporary discourse within a more conventional historical framework speak to this.

Conclusion

While it is clear that a complex of forces have coalesced to position pregnant teenagers and young mothers as transgressing contemporary social norms, I have argued that teasing apart these forces is an impractical task given my poststructuralist approach. This is not to say that key developments and events do not stand out as worthy of more in-depth analysis, but rather, that plucking these from a historical timeline, attempting to order them, or even draw lines between concepts of early childbearing as moral and technical problems limits the possibilities of an analysis focused not only on underlying social forces, but also the conditions and mechanisms that allow for the operation of these forces. With this in mind the following chapters explore these forces and mechanisms through the spectrum of social science discourse, populist and political discourse, and through young women's phenomenological experiences of teenage pregnancy and mothering, and narratives about teenage pregnancy and mothering. In effect, my thesis is concerned with the intertwined relationship between all four.

The next chapter will focus on social science discourse about teenage pregnancy and mothering from several different angles. I lay out key themes in social science research, and take a closer look at where these themes lie in relation to this emergence of social science literature about teenage pregnancy and childbearing toward the end of the 1960s, and how it has developed and shifted over the course of the last 40 years to the present day. After I lay out the themes, timeline and approaches, I offer a critique of social science research about teenage pregnancy and childbearing, and outline its different limitations.

Building on this outline and critique of social science research the subsequent chapter explores populist and political discourse about teenage pregnancy and mothering.

Here I apply elements of Deidre Kelly's interpretative framework ("wrong-family" and "wrong-girl") in order to analyze populist discourse, but also the relationship between populist and social science discourse. I also draw attention to the relationship between narratives about pregnant teenagers and young mothers and welfare discourse, and in particular, how politicians exploit discourse about pregnant teenagers/teenage mothers and welfare as a means of gaining support for cuts to social spending.

Where both of these chapters are concerned with critically analyzing how social forces shape discourse about teenage pregnancy and childbearing, chapter 5 turns its attention toward the actual implications of these forces for young women and their children. Throughout this chapter I argue that stigmatizing discourse about pregnant teenagers and young mothers (problematic, undesirable, and in need of intervention), runs up against most young women's self-narratives, and interpretations of their experiences of motherhood and mothering. I argue that stigmatizing discourse is counterproductive and damaging to young women and their children, but also that young women are not simply passive in this stigmatization. I use the "stigma is wrong" component of Kelly's interpretative framework, and (included in this) my own autobiographical interpretive framework, in order to explore how young women negotiate identity and representations of themselves, alongside societal representations of teenage pregnancy and teenage mothers and the stigma attached to both.

— Suddenly Teenage Pregnancy is My Thesis?

*When I first began thinking about graduate school, what research I might do, and what contributions I might possibly offer, I very briefly considered teenage pregnancy and childbearing. I dismissed this almost immediately, however, knowing the subject would be too uncomfortable for me; too deeply personal, and too difficult. It is a bit odd then that something as seemingly trivial as a magazine cover would change this for me. Perhaps even more odd, is that it did not occur to me to give any real consideration to the significance of the magazine cover throughout the process of writing my thesis. On the one hand it is possible there are no significant unconscious motivations to unearth and read into. Indeed, in terms of the actual image featured on the magazine cover, *Juno*, as both a film and the film's lead character, left surprisingly little imprint on me.*

Despite a predictable meltdown in the movie theatre during the birth scene, I left the movie feeling somewhere in between ambivalent and mildly disappointed with a one-dimensional character and script that had seemed to promise more. In revisiting these sentiments, however, it occurs to me that this ambivalence does not equal neutrality. Ultimately I wanted badly to identify with this character. She looked like 14 year-old Sandy. She was smart, independent, and cocksure: equal parts sarcastic and clever, defensive, insecure, and alone. She talked like me, wore the same clothes as me, read books, listened to the same bands, and even played guitar like me, and most important, getting pregnant and having a baby didn't ruin her life.

*The problem is that none of this, none of her decisions seemed to complicate her life all that much either. Film critic Wesley Morris articulates some of my disappointment with his review, “*Juno* lets smart girls identify with its glib but sweet spin on a teen's life-altering decision”:*

*“*Juno* serves cool, intelligent girls something they rarely see in a movie: themselves... But the movie is a shameless work of glibness, too... *Juno* forgoes an abortion not because abortions are*

wrong but because having one would ruin the innocuousness the movie's going for. She doesn't raise the baby because that would cramp her style. It all looks pretty easy from her perspective. Juno totally explains it all" (Boston.com, February 24th, 2008)

Ultimately, I identified my experience with that of Juno's quite superficially, which perhaps goes some way to explaining my response to the copy of Maclean's in my doctor's office. The headline pasted over the image of Juno, "Suddenly Teenage Pregnancy is Cool?" struck me for several reasons. Forgetting the lack of complexity of her character, I saw an image of a pregnant teenager that looked like me. The real "teen moms" on the inside didn't though. They looked like "stereotypical" teen moms. Never having ever wanted to write on the subject before I was angry, and felt hoodwinked.

They'd stuck someone on the outside who it seemed challenged something (that I also felt I challenged), only to reinforce it on the inside. Of course this interpretation and response raise impossibly complex questions themselves: maybe I was actually much more like the real teen mothers featured on the inside, maybe my anger reflected a subconscious mind attempting to reject/cope with a stigmatized identity? Or maybe the article simply pissed me off because the teenage mothers served as warning stories, and ultimately served the narrative the writer and magazine intended to reinforce.

CHAPTER 4

Social Science Discourse

Introduction

Contemporary discourse about normal and transgressive distinctions of fertility and childbearing widely reflects the assumption that teenage pregnancy and early childbearing are problematic, undesirable, and in need of intervention. When I began this research, my intention was to study this phenomenon by analyzing popular culture texts, which makes a certain level of sense given the role that popular culture played in me choosing teenage pregnancy and teenage mothers as a thesis subject. Over the course of writing the thesis, however, my focus shifted more toward discourse about teenage pregnancy and childbearing in social science texts. Ultimately, what was impossible to ignore while conducting research focused on mass media and popular culture, was the extent to which scientific expertise shapes, informs, and translates cultural texts about teenage pregnancy and childbearing for the mass media and broader public.

From a Foucauldian perspective, attending to the increasing authority of empiricism in society makes for challenging theoretical questions. The academic institution operates as a fundamental tool in the institutionalization of truth and knowledge, yet one must also acknowledge that scholarly knowledge is no less independent from the historical, cultural, social, and political conditions it influences (Foucault, 1980). Research cannot be objective from the society it studies, or play a neutral role in the people it studies, or operate without an agenda. From this perspective, social scientists did not simply settle on the need for research about teenage pregnancy

and early childbearing at random. Emerging scientific scrutiny directed at pregnant teenagers in the late 1960s/early 1970s obviously required the visibility of the problem, yet at the same time, this visibility was created, in part, by a scientific discourse aimed at discovering “the facts” of teenage pregnancy and childbearing (Anrey & Bergen, 1984).

In effect, my thesis draws from poststructuralism the view that discourse operates laterally across local institutional sites. By focusing on this fluidity the aim is to better understand the wider epistemological, and social power relations that inform the production and consumption of discourse about teenage pregnancy and childbearing overall. In this chapter, I outline the conceptual stages of research, and the themes present in research about teenage pregnancy, teenage mothers and mothering, and the children of teenage mothers. Following this I revisit the limitations of social science research by offering alternative research findings about teenage pregnancy and childbearing, as well as my own phenomenological interpretations.

Prominent early research

The emergence of the problem of pregnant teenagers and teenage mothers toward the end of the 1960s signals a shift in society’s understanding of transgressive childbearing as a moral problem defined by illegitimacy, toward a psycho-social problem in need of scientific scrutiny and intervention. Arthur Campbell is one of the earliest social scientists to foreshadow the potentially adverse effects of early childbearing with his 1968 study on family planning and poverty reduction. In it he concluded:

“The girl who has an illegitimate child at the age of 16 suddenly has 90 percent of her life’s script written for her. She will probably drop out of school; even if someone else in her family tries to help to take care of the baby, she will probably

not be able to find a steady job that pays enough to provide for herself and her child; she may feel impelled to marry someone she might not otherwise have chosen. Her life choices are few, and most of them are bad” (Campbell, 1968, p. 238).

At the time Campbell’s observations were largely conjecture given the lack of data he had to draw on at the time, and in turn, his limited ability to substantiate his claims. Still, Campbell’s observations draw attention to important social changes like changing family formations, the changing structure of the life course for adolescents and young adults, and the potential costs of entering into marriage and parenthood without adequate education and employment experience, for example, and in doing so, ultimately foretell society’s growing concerns over the causes and consequences of teenage pregnancy and early childbearing moving into the 1970s.

Social scientists attempt to address the empirical basis of these claims over the course of the next two decades by focusing on the factors affecting the likelihood of a teenage birth, and the poor socioeconomic outcomes of teenage mothers and their children. Initially researchers attribute their findings to the timing of the birth itself, before broadening their focus to include additional factors such as family structure, parental income, and education levels (Furstenberg, 1976; Trussell, 1976, 1988; Murray, 1984; Furstenberg et al., 1987; Hofferth, 1987; Upchurch & McCarthy, 1990).

Causality vs. Correlation

“If we could change a young woman’s age at first birth, but not change anything else about her, what impact would that have on her subsequent life outcomes and the life outcomes of her children?” *Kids Having Kids* - (Hoffman and Maynard, p.3, 2008)

Throughout the 1980s and 1990s social scientists shift their focus to questions of causality versus correlation (Hoffman, 1998). Studies start to statistically control for obvious measurable differences (between women who have had vs. not had a teenage birth) and find that differences in wellbeing can be attributed to factors other than age (i.e., family structure, and poverty). However, while research allows that the timing of the birth in and of itself may not necessarily cause poor outcomes (i.e., lower levels of education, lowered probability of eventual marriage, decreased family income, higher rates of welfare dependency), it ultimately upholds the fundamental belief that the residual effects of teenage childbearing are negative and substantial: a teenage birth might not be the cause, but it unquestionably exacerbates many of the problems already associated with poverty and familial instability. Frank Furstenberg's Baltimore study stands as a particularly important contribution to this body of scholarly work.

The Baltimore Project: 1966-1983

Furstenberg's Baltimore Project is a significant for several reasons. The 17-year longitudinal study is one of the first, and certainly one of the most comprehensive studies of teenage pregnancy and childbearing. Its influence is considerable because of this breadth and depth, and because of its sheer length, Furstenberg has been able to revisit, re-evaluate, and challenge some of his earlier findings where most researchers have not.

The initial phase of the project saw Furstenberg and his team interview every pregnant adolescent under the age of 18 who had registered with the Baltimore Sinai Hospital prenatal clinic between 1966 and 1968. Approximately 80% of the study's participants are poor, inner city, African-American teenagers. Research findings establish a clear link between early childbearing and a wide range of poor outcomes, including the

disruption of education, economic insecurity, unstable marriages, child-rearing hardships, and difficulty regulating family sizes. When compared to their classmates (particularly those that did not become pregnant premaritally during the five years of the study), the group of teenage mothers had a significantly worse record of achieving their immediate life objectives, leading Furstenberg to conclude that childbearing during the teenage years created a distinct set of problems that forced the redirection of his participants' intended life paths:

Adolescent mothers consistently experienced great difficulty in realizing their life plans, when compared with their classmates who did not become pregnant premaritally in their early teens. Marital instability, school disruption, economic problems and difficulty in family size regulation and childrearing were some of the complications brought on by their premature, unscheduled childbearing (p. 148, 1976)

While the first five years of Furstenberg's study confirm the widespread belief that early childbearing causes social and economic hardships, subsequent follow-ups challenge some of his earlier findings and presumptions about the deleterious long-term outcomes of early childbearing. When Furstenberg revisited the teenage mothers in their 30s he found encouraging evidence to suggest that their lives had not been thoroughly determined by the timing of their first birth. For example, most of the mothers were employed, had completed high school, and limited their family size to two to three children (Furstenberg, 1997; 2010). He also found more variation in terms of fertility, education, employment, and marital patterns than expected. He nonetheless concludes that the teenage mothers would have fared better with all of the above had they waited until their 20s to have children. He does note however, that the principal reason young

mothers encountered problems was not because they wished to deviate from accepted avenues of success, or were unaware or indifferent to the costs of early parenthood, but rather, because they lacked the resources to repair the residual damage done by the timing of the birth (2010).

Losing Ground

Charles Murray's 1984 book *Losing Ground*, though not expressly about teenage pregnancy and childbearing, is included in early research because of the significant impact it had on discourse about welfare and public policy, and specifically, the role of teenage pregnancy and childbearing within this. Murray argued that welfare created a system of disincentives for people to better their own lives and called for an end to public assistance for the poor. Murray singled out teenage childbearing as a critical link in the perpetuation of the cycle of social disadvantage, in a way that deeply resonated with politicians, policy makers, and the broader public, and continues to do so today. He argued that teenage pregnancy and teenage mothers were both a symptom and product of a misguided and distorted system of economic incentives that encouraged young women to have children, and discouraged young men from marrying them when they became pregnant. Echoed by politicians like Bill Clinton in the 1990s, Murray writes:

The lives of such young women (teenage mothers) are inevitably changed by the fact of their single motherhood, education, access to a job ladder, and simple freedom to mature without the pressures of raising a child are made extraordinarily more difficult. The lives of their children are affected decisively (p. 129).

Murray's attention to teenage mothers and welfare discourse reverberates throughout the next example, the influential 1987 policy report, "Risking the Future".

National Research Council Report: Risking the Future

Women who become parents as teenagers are at greater risk of social and economic disadvantage throughout their lives than those who delay childbearing until their twenties. They are less likely to complete their education, to be employed, to earn high wages, and to be happily married, and they are more likely to have larger families and to receive welfare (Risking the Future, 1987, p.138).

In 1987 the National Research Council released the influential public policy report entitled, "Risking the Future". Made up of a panel of American scholars and public health specialists, the study started from the position that the primary goal of policy makers, professionals, parents, and teenagers themselves, was to reduce the rate and incidence of unintended teenage pregnancies. "Risking the Future" is particularly noteworthy, however, for its emphasis on bureaucratic intervention.

The panel felt that knowledge about intervention strategies was out of step with advances made in the understanding of the precursors and consequences of early sexual and fertility behaviour. In addressing this perceived gap, the report laid out several overreaching goals, and several stages for achieving these goals. First, the panel aimed to identify gaps in data collection and analysis; second, it aimed to streamline the range of information utilized by researchers, policy makers, funding agencies, and service providers into one comprehensive source; and third, it intended for the first two goals to serve as a basis for developing conclusions, recommendations, and direction for potential

future programs. Again, the panel outlines three distinct stages for carrying out this work: First, streamline public statistics on incidence of sexual activity by age, gender, and race, as well as data on pregnancy, abortion, childbearing, marriage, and adoption (in the United States); followed by a review and assessment of existing literature, and interventions focused on adolescent pregnancy, and more generally on the maladaptive behaviours of adolescents; and last, pull together the growing multidisciplinary body of research on the individual and societal factors affecting early sexual activity, contraceptive use, pregnancy, abortion, and childbearing, and the research on the social, economic, and health consequences of early pregnancy and childbearing for young mothers and their children.

“Risking the Future” is not significant because it differs ideologically from earlier social science research like that by Furstenberg, but rather because it imprints the image of teenage pregnancy and teenage mothers as a public policy and public health issue. Ultimately the study’s final report recommends that policy makers continue to move toward reducing the rate and incidence of unintended pregnancy among adolescents, toward providing alternatives to adolescent childbearing and parenting, and finally, toward promoting positive social, economic, health, and developmental outcomes for adolescent parents and their children when preventionist measures fall short (Hayes, p. 5, 1987).

Measuring complex family factors

Throughout the 1990s research remained concerned with documenting the extent of the poor outcomes for young mothers and their children, and evaluating programs designed to help, but also increasingly questioned the significance of less

quantifiable factors, and how such factors might influence and bias their studies (Swann et al., 2003). For example, parental income and education are considered important factors in the socioeconomic wellbeing of young adults, but so too are parental attitudes and involvement, and other intangible factors that defy easy measurement. Rather than attempt to control directly for less measurable factors like this, studies moved toward trying to isolate and measure the causal effects of early childbearing by identifying groups of women similar to teenage mothers in more significant ways (2003).

At this point more contentious research findings and counter discourse begin to emerge. For example, Geronimus and Korenman (1990) used data from the National Longitudinal Survey of Young Women (NLSYW), to compare sisters who had first births at different ages, hypothesizing that the difference in socioeconomic outcomes between the siblings, (who presumably shared a family, neighbourhood background, and other less quantifiable characteristics), ought to offer a reasonable measure of the effect of the differences in their age at the time of first birth. Like earlier research they found that teenage mothers were less likely to be married (at the time of study), or have a postsecondary education than their sisters who delayed childbearing. They also found, however, that the difference in the sisters' family incomes from their late 20s through to their mid-30s was statistically insignificant, leading Geronimus and Korenman to question the extent to which earlier research might have overstated the negative impact of a teenage birth. They not only questioned whether the teenage mothers' poor outcomes were largely due to the variables that resulted in the teenage birth in the first place, but also put forth the controversial theory that early childbearing might actually serve as an optimal life option in certain disadvantaged subpopulations. Hoffman, Foster, & Furstenberg (1993) re-evaluated Geronimus and Korenman's findings, however, and

found that, while “fixed-effect” estimates were smaller than previously estimated, there were in fact, statistically significant and quantitatively important effects on economic status, the probabilities of being officially poor, and of graduating from high school. The probability of acquiring postsecondary education was also negative (p.293).

Like Geronimus and Korenman, Hotz, McElroy and Sanders (1993) took a similar controlled approach to their research by comparing mothers who had become pregnant at age 17 or younger to those who had conceived at the same age, but miscarried³⁶. They hypothesized that the teenagers who had miscarried should be doing better on average than those who had not, on account of the miscarriage forcing a delay in the start of childbearing. The study, which compared how well the two groups fared between the ages 16 and 30, produced surprising, and somewhat controversial findings. Although the teenage mothers had given birth to more children, and spent more time as single mothers by their mid to late 20s than those who had miscarried as teenagers, they too found that the teenage mothers fared better than previous research suggested. Much like Geronimus and Korenman’s findings, Hotz, McElroy and Sanders found the differences in educational attainment between the two groups to be small. Perhaps even more surprising and controversial, they found that the teenage mothers had actually worked more regularly and earned more income than their counterparts (1997).

Given the more promising outcomes for young mothers, and steadily declining number of teenagers mothers overall, one might assume that social anxieties about pregnant teenagers and teenage mothers would have lessened accordingly, yet concerns continue to grow. Teenage pregnancy and teenage mothers remain at the centre of

³⁶ Since most miscarriages occur randomly these two groups of young women ought to be sufficiently similar that we can look at the subsequent differences between them to gauge the effects of the teenage birth.

political and public debate, at the forefront of social policy, and social science research which continues to document the poor outcomes of young women and their children, and evaluate programs and policies designed to alleviate the problem. At the same time, social science research about teenage pregnancy and teenage mothers has not sustained itself by simply reproducing the same literature year after year, decade after decade. The following section examines more contemporary research and reveals some surprising, and somewhat paradoxical thematic trends in modern social science discourse.

Present-Day Research: From transgressive adolescents to transgressive mothers

When teenagers have babies, both mothers and children tend to have health, social, psychological and economic problems. Teens who have children out-of-wedlock are more likely to end up at the bottom of the socio-economic ladder...

These numbers have enormous economic implications for the country-and for the rearing of children in America (Dr. Alvin Poussaint, 2001, p. 73)

Present-day research remains largely committed to documenting the different risks and outcomes commonly associated with teenage pregnancy and childbearing, yet has largely moved away from comparing young women who have teenage pregnancies and/or births to those who do not³⁷. In the most basic sense, researchers have shifted their focus from young women who transgress the margins of adolescence by getting pregnant and having a baby, toward young women who transgress the margins of normative motherhood by bearing children at the wrong age. In many ways it is a shift

³⁷ For example, researchers have been particularly interested in studying sexual abuse as an indicator of pregnancy and childbearing.

that marks a return to some of the earliest research on teenage pregnancy and early childbearing.

Research initially attributed the poor outcomes of young mothers and their children to the timing of the birth itself, before broadening its scope to include additional factors such as family structure, parental income, and education levels. Researchers shifted this focus to questions of causality versus correlation (Hoffman, 1998) by identifying and comparing groups of young women that were similar to teenage mothers in significant way (i.e., siblings, comparable socioeconomic backgrounds, etc.).

Before moving on to an examination of more contemporary research, I wish to make two points; the first being that there is unquestionably more space for dissenting theories and counter-discourse in present-day research about teenage pregnancy and childbearing. At the same time, there has been a shift where it is now customary to measure the outcomes of pregnant adolescents and young mothers against those of older women, which brings contemporary research back to some of the earliest work on teenage pregnancy and childbearing by using the timing of the birth itself as the key explanatory tool. Researchers may attribute their findings to the young age of the mother without considering additional factors like economic resources, family structure, and education levels, or how other more complex and difficult to measure factors (i.e., societal attitudes towards teenage pregnancy and teenage mothers, the value of a support network of peers, cultural capital, etc.) might influence and bias their studies. Yet, while some recognize the importance of social forces affecting young women before they become pregnant, few have considered the relevance of the social force of stigma occurring after

the pregnancy and childbirth³⁸ (Fessler, 2008, p. 18). Indeed, it is crucial that we ask whether society's attempts to problematize young mothers through stigma, might contribute to (or cause) the poor outcomes that researchers otherwise attribute to the timing of the birth.

Unfortunately, the diminishing number of pregnant teenagers and teenage mothers has had the effect of placing those who do become pregnant and bear children under even greater public and scientific scrutiny, the implication being that no matter how low rates fall, they remain unacceptably high. Thus, if and when reports of declining rates are cited, warnings or reminders about the negative consequences of teenage pregnancy and motherhood usually accompany them. For example, from the United States Centre for Disease Control and Prevention website:

Despite this good news, there is still much work to do, because teen pregnancy has such a huge impact on the future of America's children. Having a child during the teen years carries high costs—emotional, physical, and financial—to the mother, father, child, and community. Parents, educators, public health and medical professionals, and community organizations all have a role to play in reducing teen pregnancy (United States Centre for Disease Control and Prevention, 2008).

Similarly, Jezebel.com writes: “This is great news, but take it with a grain of salt. Even with the drop in birth rate, America still has one of the highest birth rates among industrialized countries (USA! USA! USA!) And unplanned pregnancy still costs the government (and, by extension, the taxpayers) billions per year” (Jezebel.com, 2010). The

³⁸ Fessler suggests that neither the young age of teenage mothers nor the social context that contributed to their status as young mothers in the first place may be entirely responsible for the negative outcomes attributed to early childbearing.

message here is two-fold: it tells us that one teenage pregnancy will always be one too many, and it reflects the overwhelming cultural narrative that assumes the sky's the limit for girls who don't get pregnant. I expand on both of these points shortly in my critique of social science research, and throughout the following chapter. Before doing so I will provide an overview of the common themes presented in contemporary social science texts.

Obstetric and neonatal risks and outcomes research

By comparing the experiences of younger and older women, researchers have firmly established obstetric and neonatal risks and outcomes as one of the key caveats against teenage pregnancy and early childbearing. One area of particular concern is the wide-ranging health risks and complications associated with preterm delivery and low-birth weight³⁹ (Olausson et al., 1997). Studies have established that teenage mothers are more likely than older mothers to have both preterm births and infants with low birth weights. According to the March of Dimes 14.3% of women under the age of 20 give birth to infants prematurely, compared to 11.4% of women between the ages of 20-29 (2011). Further complicating the risks associated with preterm births are the higher incidence of low-birth weights for infants born to young mothers⁴⁰. Approximately 10% of young mothers between the ages of 15 and 19 give birth to low birth weight babies (compared with 8.3% of mothers over the age of 20), with risks becoming even higher for

³⁹ Under-developed internal organs, breathing problems (i.e., respiratory distress syndrome, apnea, and lung damage), bleeding of the brain, heart failure, acute intestinal problems, vision loss, jaundice, anaemia, autoimmune infections, and such risks as autism and cerebral palsy (March of Dimes, 2011; Martin et al., 2009).

⁴⁰ While low birth weight does not indicate premature delivery, approximately 70% of low birth weight babies are born prematurely (Health Canada, 2009).

younger teenage mothers. In 2006, 11.7% of 15-year-old mothers gave birth to a low birth weight baby compared to 9.5% of 19-year-old mothers (Martin et al., 2009).

Researchers have singled out several possible explanations for the higher incidence of premature births and low birth weights for teenage mothers, including poor eating habits and nutritional deficiencies, inadequate prenatal care, and substance-use.⁴¹ For example, infants born to mothers (of all ages) who receive late (beginning in the third trimester of pregnancy) or no prenatal care, have been shown to be at higher risk for a host of medical health problems, including low birth weight, preterm delivery, as well as an increased risk for infant mortality rates within the first year of life (Kingston, 2009).⁴²

Researchers have found that pregnant teenagers are among the least likely as a group to receive adequate prenatal care, and moreover, that the younger the mother is, the less likely she is to receive care. Approximately 22% of women under the age of 15 and 11.1% of women between the ages of 15 and 19 received late or no prenatal care. For women in their 30s, only 4.5% receive late or no prenatal care (Child Trends Databank, 2009-2012). Studies further link the erratic and unhealthy eating patterns, and subsequently, nutrient deficient diets of pregnant teenagers (and teenagers overall) as contributing to preterm births, low birth weight, and other poor obstetric outcomes (Jones, 2009). According to a 2009 British study, 52% of the five hundred pregnant

⁴¹ The more prematurely born the less the infant is likely to weigh. Infants with a moderately low birth weight (1,500 to 2,500 grams) are five times more likely to die within their first year, and those with a very low-birth weight (less than 1,500 grams) are more than 100 times likely to die (Martin et al., 2009). Compounding the lower gestational weight gain for teenage mothers is the lower neonatal intake of nutrients. Both lower weight gain and vitamin deficiencies have been shown to contribute to the lower birth weights of babies born to teenage mothers (Jones et al 2009).

⁴² Mothers who receive no prenatal care are three times more likely to give birth to a low-weight infant, and five times more likely to give birth to an infant that dies within the first year. The March of Dimes reports that infants born to teenage mothers are more likely to die within the first year of life than infants born to women in their 20s and 30s. Again, this risk becomes more elevated for infants born to mothers under the age of 15 (Marchofdimes.com).

adolescent participants had iron deficiency anaemia; over a fifth had deficient foliate levels, and a third were vitamin D deficient (Baker et al 2009).

The link between prenatal substance use, poor obstetric outcomes, and many long-term developmental complications has also been firmly established, as has the higher rates of substance use amongst pregnant adolescents⁴³. According to Kingston's analysis of the Canadian Maternal Experiences Survey, for example, approximately 29% and 50.9% of adolescents smoked during and after pregnancy, respectively, compared with 23% and 33.9% of women in their early 20s, and 7.8% and 12.7% of women in their 30s (Kingston, 2009).

According to a study by Teagle and Brindle (1998), 49% of pregnant teenagers used at least one substance during their pregnancy. Their study is noteworthy, however, because it also found that 80% of their adolescent participants had used at least one substance in the six months prior to their pregnancy. While it is difficult to prove that substance use makes adolescents more likely to become pregnant, researchers are not only interested in the harmful effects of prenatal and postnatal exposure, but also in studying substance-use as an indicator for the likelihood of a teenage pregnancy. Research has established a connection between substance-use and early sexual activity as "risk-taking" behaviours, thereby also increasing the likelihood of pregnancy as risk-taking behaviour⁴⁴ (Dillworth, 2000).

⁴³ Cigarettes, alcohol, and marijuana lead as the most commonly used substances by adolescents throughout pregnancy. Research shows an increased risk for preterm delivery and low-birth weight, as well as such perinatal risks as: premature rupture of membranes, placental abruption, spontaneous abortion, stillbirth, intrauterine growth retardation, congenital malformations, and placenta previa. Associated risks throughout infancy and childhood also include growth deficits, impaired intellectual development, respiratory illness, attention deficit disorder, and sudden infant death syndrome (March of Dimes 2009).

⁴⁴ For example, sexually transmitted infections are routinely cited alongside adolescent pregnancy as a risk-taking behaviour cited.

Psychosocial Variables

Psychosocial risks and outcomes are another key focus of teenage pregnancy and childbearing research. Like the issue of substance use, studies concerned with psychosocial risks and outcomes approach the issues from several different angles. Psychosocial variables serve as indicators of both why teenage pregnancy and childbearing are problematic and undesirable for young women and their children, and why a teenage pregnancy is more likely to occur in the first place.

Dominant discourse implies that the developmental characteristics of adolescents (emotionally immature, irresponsible, risk-taking, rebellious, lacking in coping skills, ect.), not only make them more inclined to engage in behaviour that can lead to pregnancy, but also less likely to be adequately prepared or well-suited for pregnancy and parenthood at the collective level. At the same time, many researchers also acknowledge that factors beyond the timing of one's pregnancy and birth impact the risks and outcomes that young mothers and their children face.

Kelly's "wrong-girl" concept starts to come into play more clearly when thinking about the complex ways that teenagers are framed as ill suited for childbearing beyond their maternal age (i.e., interwoven narratives about class and race). For example, Gordon (1990) emphasizes the naivety and emotional immaturity of the adolescent mother: "her decision to raise a child is often determined by such egocentric desires as the wish to ...receive unconditional love from a dependent object, in this case, the baby" (p. 349). At the same time Schlesinger points out that these kinds of egocentric desires are not characteristic of just any adolescent girl. According to Schlesinger: "it appears the wrong girl is keeping the baby... unmarried teenage mothers from broken homes are keeping

their children while those from more stable backgrounds give them up for adoption” (Kelly in DeVitis and Lewis-DeVitis, 2010, p.143).

Some research, for example, points to external social and economic forces like systemic racism and poverty as important influential variables. Musick (1995) echoes both Schlesinger and Gordon, but offers a more straightforward recognition of class: “teen mothers are typically poor young girls who define themselves through motherhood... who see getting pregnant as less frightening than finishing school or getting a job.” (p. 6).

The different layers of this wrong-girl narrative (poor because they are unstable, and unstable because they are ostensibly poor) are woven throughout cultural discourse from service care providers like Planned Parenthood, to popular media. According to the Planned Parenthood Federation of America, for example, “Teenage mothers are typically poor, low-income teens who when faced with unintended pregnancy often view early childbearing as a positive, desirable choice...becoming pregnant with the misguided hope of improving their lives.” (Herman, 2008; MEE Productions, 2004). The *Daily Mail* echoes this narrative in a 2004 column: “The lack of love from their own parents leaves teenage mothers overwhelmed with desire for the unconditional love of a child. They want to create the happy family they never had” (March 7, 2004).

While some research points to external social and economic forces like systemic racism and poverty as important influential variables,⁴⁵ the fact remains that most young women from underserved communities do not become mothers as teenagers. This leaves researchers with the question, why do some young women jeopardize their already

⁴⁵ According to Schilmoeller and Baranowski (2001), for example, teenage mothers are less verbally responsive and stimulating, and more restrictive and punitive with their children than older mothers. When Schilmoeller & Baranowski revisited their findings and measured for socioeconomic variables, however, they found that middle class teenage mothers actually had similar childrearing attitudes, and a comparable knowledge of developmental milestones to older mothers.

precarious social and economic prospects by choosing early motherhood? In answering this question, the apparent poor decision making skills of the pregnant adolescent and teenage mother are seen to be the result of a combination of factors, which seem to culminate around the psychological instabilities and maladaptive psychological behavioural problems of individual young women (Kelly, 1997). Pregnant teenagers and teenage mothers are commonly portrayed as emotionally immature, as having low-self esteem, and the need for attention, which according to social science narratives, can manifest themselves in irresponsible behaviours like sexual promiscuity, poor academic performance, a lack of life ambition, or more pointedly, teenage pregnancy and childbearing (Furstenberg, 2006).

Revisiting Research Findings

I have argued in previous chapters that the failure to adequately account for young women's phenomenological experiences of pregnancy, childbearing, and motherhood plays a key role in producing an incomplete understanding of the issues. This absence of personal stories, self-interpretation, and expert knowledge of young mothers contributes to a lack of insight into the lives of young women and the needs of their children, and into the social variables that shape their experiences and the decisions they make (Ordolis, 2007, p.32). For these reasons, I ultimately take the position that social science research has a limited understanding of teenage pregnancy and teenage mothers. With this in mind, I examine the limitations of some of the research findings cited in this chapter, and also draw on some of my own autobiographical narrative as a means of providing an alternate reading of particular findings.

Revisiting obstetric, and psycho-social risks and outcomes

When Morris et al. (1993) revisited the subject of prenatal care and looked more closely at specific kinds of prenatal care, they found that neonatal outcomes for adolescent mothers were less conclusive than previous research suggested. Their study compared pregnant adolescents receiving no prenatal care to adolescents receiving care at a traditional clinic, and adolescents who received care at an adolescent pregnancy clinic. They corroborated some of the poor outcomes for infants born to adolescents, but also found that outcomes were partially influenced by the kind of care the adolescent mothers did or did not receive. For example, infants born to mothers who received no prenatal care fared significantly worse in all areas than the traditional clinic group, yet the outcome variables between the traditional clinic and adolescent clinic comparison groups yielded comparatively similar findings. Where findings differed, however, was in the initiation of prenatal care, and the overall number of clinic visits.⁴⁶ The adolescent clinic group actually had a higher number of total visits than the traditional clinic group. The adolescent clinic also had a significantly higher number of participants initiate prenatal care in the first trimester of their pregnancies (45.2%) than mothers in the traditional clinic group (19.5%), and when Morris et al. scored both groups using the Adequacy of Prenatal Care Index, 34.1% of the adolescent clinic mothers received a passing score, compared to only 17% of the traditional clinic group.

⁴⁶ They found that 8.7% of pregnant adolescents receiving care at the traditional clinic had preterm births, compared to 10.5% of pregnant adolescents attending the adolescent clinic, and 35% for those who received no prenatal care. The mean birth weight of infants in the first group was 3195 grams, 3169 grams for the adolescent clinic group, and 2834 grams for infants born to adolescent women who received no prenatal care. Lastly, the infant stillbirth rate for the traditional clinic group was 0.4%, 0.8% for the adolescent clinic group, and 2.8% for the no care group (Morris et al., 2012). The number of premature infants born to teenage mothers becomes statistically insignificant if only pregnant teenagers receiving traditional prenatal care in the study (8.7%) is compared to prenatal rates for mothers of all other ages (8.3%).

Morris' findings suggest that adolescent mothers are more inclined to seek prenatal care, and do so at earlier stages, in an environment that takes their specific needs into consideration. Indeed, in one of my earlier narratives I noted that I received no prenatal care until I was 8 ½ months pregnant. While this failure to pursue prenatal care is likely to be interpreted by some as evidence of emotional immaturity, irresponsible behaviour and poor decision-making skills, I interpret it as my overwhelming fear of being found out...the idea of giving birth by myself...in the middle of the night...on a golf course (which I recalled in my opening narrative), somehow seemed less frightening to me. The emotional immaturity and poor decision making-skills that went into such a bizarre plan are not insignificant, yet neither is the sheer force of fear and anticipated stigma that I felt. I suggest that traditional maternity health care services cannot help but place teenagers in the way of stigma.

Pregnant teenagers and teenage mothers are inevitably placed in the defensive position of having to defend who they are, and why they are in certain places (i.e., prenatal health clinics, prenatal class, maternity wards, ect.) where people do not expect them to be. In this sense it is not surprising that many young women choose to avoid health care services, not because they are irresponsible, but rather, as a strategy for avoiding and resisting the social stigma attached to teenage pregnancy and teenage mothers. It is a strategy that I revisit in detail in a later section on young women's personal narratives and coping mechanisms.

Like neonatal risks and outcomes, psychosocial risks and outcomes are more open to debate when variables beyond maternal age are taken into consideration. For example, research by Schilmoeller and Baranowski (2001) established that teenage mothers are less verbally responsive and stimulating, and more restrictive and punitive with their children

than older mothers. When they revisited their research and measured for socioeconomic variables, however, they found that middle class teenage mothers had similar childrearing attitudes, and a comparable knowledge of developmental milestones to older mothers. Indeed, while the research of Flanagan et al. (1995) into adolescent mothers' experiences found that chronological age provided some measure of developmental and parental capacities, he ultimately found it to be of little help to service care providers given the significant individual differences among young mothers.

Substance use is another key concern for researchers that warrants revisiting. While teenage mothers are shown to use substances at a higher rate than older mothers, Francoeur's (2001) research finds that pregnant teenager's substance use is largely on par with that of non-pregnant female adolescents. A study by Teagle & Brindle (1998) also found that while 49% of the pregnant teenager participants used at least one substance during their pregnancy, more than 64% discontinued substance use within the first trimester of their pregnancy.

The relationship between teenage mothers and neglect and child abuse is perhaps one of the most common associations in the public's eye. While many studies support these anxieties, Brown and Herbert carried out a discriminate function analysis of Milner's Child Abuse Potential Inventory, and found that in terms of indicators of potential abuse, a mother's age (less than 21 years at time of birth) ranked only 9th in order of importance (Reder, Fitzpatrick, 2003). Indeed, when family structure and socioeconomic factors are controlled for, young mothers do not appear more likely to abuse their children than other mothers (Sahler, 1980; Kinard and Klerman, 1980; Buchholz and Korn-Bursztyn, 1993).

Conclusion

It is clear that public discourse and social science research about teenage pregnancy and teenage mothers has undergone many shifts and transitions since the concept first emerged toward the end of the 1960s. Many researchers now have a growing appreciation for the complex social and economic variables that contribute to certain risks and outcomes. There is disagreement over the degree to which a teenage birth may or may not damage a young woman's life prospects,⁴⁷ and in light of these first two points, there are even arguments that teenage parenthood serves as an entirely practical and viable life option for adolescents from certain social groups.

Despite these shifts, I maintain that research about teenage pregnancy and teenage mothers remains fundamentally problematic. Nearly all of it continues to frame teenage pregnancy and early childbearing in terms of risks, costs, and outcomes, and with an eye toward prevention and intervention, and while some research attempts to measure for more complex familial, and socioeconomic variables, most fails to account for less measurable or quantifiable variables like societal attitudes, and stigma as a social force.

If we return to stereotypes about child abuse, for example, the force of this stigma starts to come into view. Narratives about teenage mothers and child abuse and neglect are questionable when family structure and socioeconomic factors are controlled for, yet become even more so when less quantifiable factors are taken into further consideration. For example, while teenage mothers do have more contact with child protective services⁴⁸

⁴⁷ Furstenberg's Baltimore Study the principle reason young mothers encountered problems was not because they wished to deviate from accepted avenues of success, were unaware, or indifferent to the costs of early parenthood, but rather, because they lacked the resources to repair the residual damage done by the timing of the birth (2010).

than older mothers, they are also more likely than older mothers to be reported for abuse in cases that turn out to be unsubstantiated (Buchholz and Korn-Bursztyn, 1993). The characterization of teenage mothers as neglectful and/or abusive towards their children, and other stereotypes about pregnant teenagers and young mothers, in and of themselves, cannot be discounted as playing a role in this.

Out of the gate, the characteristics associated with adolescence as a life stage, renders them poorly equipped to parent; they are “babies having babies”. Young mothers are stereotyped as emotionally and cognitively unstable⁴⁹, and thought to be vulnerable to abuse themselves. The teenage mother is misguided in her choices, and by virtue of getting pregnant and choosing parenthood, proves she is unable to make decisions in her own best interest, or that of her child, and this ultimately “entitles” others to make decisions on her behalf. Alternatively, teenage mothers are frequently portrayed as having their hand in the taxpayer’s pocket, as selfish, irresponsible, lazy, manipulative, and untrustworthy. Under either scenario health-care professionals, case workers, landlords, neighbours, and society as a whole, are encouraged to monitor and scrutinize the choices and behaviours of pregnant teenagers, adolescent mothers, and their children, in ways that encourage us to suspect and report young mothers for abuse and/or neglect.

Ultimately I argue that overall social science research about teenage pregnancy and teenage mothers displays a lack of insight and understanding into the subjects it studies. We largely attribute research findings to objectively defined demographic and social trends, without adequately accounting for, or contextualizing the many ethical,

⁴⁸ Kinard and Klerman suggest that because adolescent births and reported cases of child abuse are more common among families with low socio economic status, it is possible that poverty strongly affects both early pregnancy and child abuse reported cases (p. 137).

⁴⁹ For example, Sommer et al. (2000) cite low IQ as one of the four key characteristics of teenage mothers.

social, and phenomenological aspects of teenage pregnancy and mothering, and furthermore, for discourse itself. Most research simply approaches pregnant teenagers and young mothers with a model that deals largely in deficits, and which fails to recognize that studying pregnant teenagers and young mothers by what they are not, can only leave us with an incomplete and misleading picture of what they are (Wong, 2000).

A more comprehensive and ultimately useful understanding of the issues requires the voices, self-interpretations, and epistemic authority of pregnant teenagers and young mothers themselves⁵⁰. This failure to include young women's narratives contributes to a lack of insight into lives of young women, the needs of their children, and into the social variables that shape their experiences, and the decisions they make (Ordolis, 2007, p.32), and ultimately serves to reinforce the kind of normative power relations that are inadequately accounted for in most research (Kelly, 1996). Simply put, when researchers fail to attend to these conditions by subjugating young women's voices and knowledge they serve to construct, reproduce, enforce the very conditions and power imbalances that are harmful to pregnant teenagers, young mothers, and their children in the first place⁵¹.

In the following chapter I examine populist discourse about teenage pregnancy and teenage mothers, and within this, the complex, yet fluid relationship between populist

⁵⁰ I continue to wrestle with the following question, however: Are teenage mothers' experiences, and self-interpretations of their experiences more authentic, and more capable of transcending discourse to a new point of clarity? (Kelly, 1996) On the one hand, I accept that our narratives are always representations that are shaped, told, and interpreted within the context of existing ideologies. On the other hand, standpoint theory makes the compelling argument that the oppressed can claim epistemic privilege on account of having to navigate the perspectives of both the dominant and the oppressed. For example, Anderson (2009) argues that Black women have enough personal experience as insiders to know their social order, but enough critical distance to empower critique.

⁵¹ In the most sweeping terms, institutionalized knowledge is marked by qualities that give it the power to produce its intended effects, claims to truth and definition, and effectual methods. In this sense, the adverse risks and outcomes associated with teenage pregnancy and childbearing are no less independent of discourse, than young women's experiences of pregnancy and mothering are. This is simply to say that, discourse shapes and impacts young women's experiences and narratives of pregnancy and mothering, and with this, the adverse risks and outcomes that researchers seem to think they can objectively document.

and social science discourse. I also critique the lack of personal narratives in populist discourse, and raise questions and concerns about the consequences of this absence. In Chapter 6, I examine these questions and concerns in greater detail by focusing specifically on young women's experiences and self-interpretations of teenage pregnancy and mothering, and stigma. Central to this discussion are the narratives and strategies that young women use in order to cultivate and maintain positive maternal identities in the face of dominant, stigmatizing discourse.

— Mrs. Charles

I found myself directly involved with the Department of Community Services, shortly after leaving home with my daughter at age 16. The mother of my boyfriend at the time didn't like me much, and she definitely didn't like the fact that her son was able to spend time at my apartment unsupervised. In retrospect, I appreciate her position on the last point to a certain degree, having raised a teenager myself now. Looking back now, however, I am surprised by just how much my experiences and encounters with this woman make sense in the context of the narratives above.

Mrs. Charles thought I was a drug addict! And not like her weed-smoking-son variety either. She thought freckles on my arms were track marks! She demanded I show her my arms! The absurdity of this boggles my mind to this day. It has actually buffered any anger and resentment I might have had toward her following these actions, as I have always chalked them up to her being completely nuts. I'd lived four houses up the street from them prior to moving out, in an upper-middle class neighbourhood decent enough to have a golf and country club⁵², and I've never remotely gravitated toward any kinds of drugs.

Mrs. Charles reported me to community services for child neglect. In her defence, she did give me something of a fair warning. She didn't want her son at my house: she threatened to take pictures of his clothes on my clothesline, and report me to Community Services for breaching the "man in the house" rule⁵³. I guess upon failing this⁵⁴ she opted for child protection services, never even having set foot in my house. A welfare officer showed up on my doorstep unannounced and informed me I'd had been reported for child neglect, and had a file opened.

⁵² Obviously I appreciate that drug use and social stratification are multidimensional issues.

⁵³ In 1989, Nova Scotia single mom and activist Brenda Thompson, published the first Single Mothers' Survival Guide. Speaking about the "man in the house" regulation, her advice reads as follows: "If you are a single mom on 'welfare', you will find the Department of Community Services has put a number of rules and regulations on your sex life. There are people within the Department of Community Services, who check our houses or apartments to make sure that there isn't a penis over eighteen years old living with or even being friends with us. A neighbour could also be the one to call Community Services and tell on you if they don't like you or want to get even over something. So watch out" (p.31, 2005).

⁵⁴ The rule applied to men over the age of 18. Also, he simply stayed over several times a week.

The caseworker inspected my house, she checked for clues as to whether anyone else was staying with me; she checked my medicine cabinet for men's razors and shaving cream, specifically. She questioned me about my laundry and cleaning routines, about my daughter's hygiene (i.e., how often I bathed her, brushed her teeth) grocery lists and meal plans. Ultimately the caseworker dismissed the complaint, but not before leaving me with the parental-like advice to pick the clothes up off my bedroom floor.

She was sympathetic enough, but ultimately I'd consider this one of the most humiliating and demoralizing experiences of my life. It was a lesson in powerlessness. It was a lesson in insecurity, and in how much control society was entitled to over my life as a teenage mother. I was trying my best to learn how to be a good mom, to buy groceries, to cook more than pancakes and Lipton side noodles. It taught me to try harder for sure, but also to distance myself as far away from the idea of teenage mothers as possible, to pretend not to make missteps, or ask for help when I did.

CHAPTER 5

Populist Discourse

Introduction

In contemporary Western society, teenage pregnancy and teenage mothers fall decidedly outside of the parameters of normative fertility and motherhood. Although we conceptualize early childbearing as inherently problematic, undesirable, and in need of intervention, this research suggests that social anxieties about early childbearing betray a lack of understanding of the issues, and the context in which these anxieties have come to be understood. Throughout the following section, I examine concepts of teenage pregnancy and teenage mothers in the context of more contemporary populist cultural discourse.

Concepts of normative and transgressive fertility and motherhood have always reflected the values of the dominant classes. For example, the Industrial Revolution brought with it an increasingly popular urban-middle-class-family ideal of adolescence as a distinct life-stage, a perception that consequently delayed marriage and childbearing. The end of the Second World War ushered in a popular middle-class emphasis on female domesticity that saw more than one-third of women bear their first child before the age of 20 throughout the 1950s and 1960s. Indeed, when viewed through a historical lens, the designation of young mothers as problematic is a recent phenomenon of only the last 45 to 50 years.

On one hand, it seems straightforward enough to argue, as I have throughout my thesis, that young mothers transgress parameters that are rooted in white, middle-class,

patriarchal ideals. It also seems straightforward enough to say that society's anxieties about early childbearing are reasonably consistent when taken on their own terms. For example, if teenage mothers are more likely to live in poverty with their children, it is reasonable to suggest that teenagers are likely better served by delaying childbearing until their later years. On the other hand, the crux of this common sense argument is based on the assumption that age alone can account for any of the poor social and economic outcomes that teenage mothers and their children face, which, as shown in the previous section, is both a precarious and misleading line of reasoning.

Nonetheless, the middle-class concept of pregnancy and motherhood remains an ideal starting place for examining discourse about teenage pregnancy and childbearing. Ultimately it is this ideal that reveals the many inconsistencies, contradictions, and false assumptions that are embedded in (social science and populist) discourse about teenage pregnancy and teenage mothers. As a starting place, the middle-class ideal allows me to tease apart complex anxieties about shifting gender roles, and the breakdown of the "traditional family", alongside equally complex anxieties about an increasingly globalized and competitive market economy and work force.

Such an approach will allow me to demonstrate that social anxieties about teenage pregnancy and teenage mothers are better understood in the context of a paradoxical (white) middle-class ideal of fertility and motherhood that simultaneously relies on the concept of the universal worker and the traditional patriarchal family, and moreover, to demonstrate how anxieties about teenage pregnancy and teenage mothers serve to subvert and transform these competing tensions.

Challenges

Throughout this section I unpack, and critically analyze, narratives from popular discourse about teenage pregnancy and teenage mothers in order to challenge the broader ideological underpinnings embedded in discourse. I do this by demonstrating both the ways and the extent to which scapegoating pregnant teenagers and young mothers serves to transform broader, and more complex social anxieties into a singular narrative about fertility and childbearing, as well as the political expediency in doing so. One of the key challenges of this goal, however, lies in discerning what actually bothers society most about teenage pregnancy and mothering.

Indeed, in much the same way that a genealogical historiography precludes a linear account of teenage pregnancy and childbearing, the exercise of unpacking and analyzing particular narratives and ideologies demonstrates the challenge of trying to assign distinct qualities to distinct narratives, or ordering these in any sort of meaningful hierarchical way. For example, while there is an almost uniform agreement across the political spectrum that teenage pregnancy and mothering are problematic, the origins, and appropriate solutions and strategies, are often perceived in almost oppositional terms. In fact, the strategies prescribed by one end of the political spectrum are often seen as having caused the problem in the first place, by the other end of the political spectrum (i.e., the conservative-leaning “wrong-family” narrative) those who adhere to the more liberal-leaning “error in timing” narrative) The abstinence-only versus comprehensive sexual health education debate illustrates this above point well. For example, proponents of abstinence education, like former UCLA campus psychiatrist Dr. Miriam Grossman, and journalist Faye Weldon, blame sexual health education for having done “too good a

job”. In the June 2010 Sexual Health Education, Information & Knowledge newsletter, Grossman argues:

“If ‘sex educators’ priority is our children’s health, they must focus on fighting herpes and syphilis, not sexism and homophobia... they must grow up, shed their 1960s mentality, and enter the 21st century. Then they must respond to this catastrophe by declaring war on teen sexual behaviour—yes, war, just as we’ve declared war on smoking, drinking, and trans fats”.

Similarly Weldon blames what she deems the unacceptably high rate of teenage pregnancies in Britain on the Labour Party’s comprehensive sexual health initiatives:

The Government says it has tried everything to stop pregnancy rates rising - from school matrons to a blizzard of sex education, to free condoms and morning-after pills. Yet nowhere is the message that having sex at such a young age is just plain wrong. No one ever turns around and says: 'Danger ahead. Desist.' After all, that might be infringing their teenage rights. (www.dailymail.co.uk, February 8, 2008).

On the other side of the debate, proponents of comprehensive sexual health education and greater access to contraception view abstinence education as not only futile but also counterproductive for preventing teenage pregnancies. For example, Le Coz makes the case for comprehensive sexual health education in a 2012 *Huffington Post* piece with her profile of an uncharacteristically young teenage mother by the name of Artasia Bobo: “The 16-year-old Mississippi teenage mother and high school sophomore, was only 12 when she got pregnant and doesn't recall receiving much in the way of sex education”. Le Coz cites a 2012 study by the Guttmacher Institute, which found that teenagers who received comprehensive sex education (including instruction on birth control) waited longer to have sex and had lower rates of pregnancy, before leaving readers with what

might have been: “That might have been the case for Bobo, but such a course wasn't offered when she got pregnant. Nor will it be offered this year, since her district chose an abstinence-only policy” (August 26, 2012).

What is clear from the above example is that competing sides of the abstinence/comprehensive sexual health education debate utilize anxieties about teenage pregnancy and childbearing to advance their respective agendas. Both start from the position that teenage pregnancies are problematic, and ultimately stigmatize and alienate pregnant teenagers and young mothers by invoking teenage mothers as warning stories to support their arguments, and refute those of their opponents.

Throughout this section I demonstrate how economic, political, cultural and social interests manipulate anxieties about pregnant teenagers, young mothers, and the children of young mothers, to advance their respective agendas. What the example of abstinence/comprehensive sexual health clearly illustrates, however, is the challenge of trying to tease apart interests and agendas that are at once competing and interlocking. In this sense, this section is as much an exercise in teasing apart and challenging discourse, as it is in teasing apart and challenging the usefulness of dichotomizing discourses: of attempting to analyze discourses about teenage pregnancy, childbearing, and motherhood with the same kind of linear or chronological approach.

Moving Forward: The Wrong Girl/Wrong Family

Despite the challenges of examining and dichotomizing discursive concepts of teenage pregnancy and childbearing, there is merit in examining presumptions about certain fault lines. Throughout the following section, I examine some of the similarities

and contrasts between the idea of early childbearing as a moral problem, and a more technical problem of timing.

At first glance Kelly's "wrong girl" and "wrong family" conceptual frameworks appear to break down along socially liberal and socially conservative lines. For social conservatives, teenage pregnancy and childbearing is largely rooted in the individual's lack of personal responsibility and character, and in the broader sense, a society that allows individuals to continue making poor choices with the support of social programs like welfare, and subsidized housing (Mead, 1997). Essentially teenage mothers are framed as refusing to participate in the school system and the paid labour market, with the expectation that their "poor choices" will be supported by a generous welfare system. The most immediate solution, according to this narrative, is to remove any potential rewards and incentives.

Social conservatives have typically responded to moral problems like teenage pregnancy with practices of social exclusion. Unlike other conservative causes like opposition to same-sex marriage, or access to birth control and abortion, which have tended to find limited support beyond their traditional base, however, conservative discourse about teenage pregnancy and childbearing resonates loudly with the public, and perhaps no more so than when articulated through themes of welfare dependency (Luker, 1996). Indeed, it is the teenage mother as an "irresponsible-drain on society" narrative that seems to most resonate with politicians, bureaucrats, and the general population. For example, in 2008 *The Sunday Times* published the following article, "Teen pregnancy pact has town reeling in shame":

Fewer kids would be having kids if the laws were tougher... no government subsidy, no cheap daycare, no food stamps, no welfare, no Medicare... monitor

them... and if they do not provide for their kids in the first 6 months, have CAS (Children's Aid Society) step in and put the kids in mandatory adoption with parents who can! (Toronto, Canada, 2008)

An article in the *New York Post* conveys a similar theme:

Ban welfare for teenage mothers

Ninety percent of teen births in the city are paid for by Medicaid or other taxpayer-funded programs... Now add to that free housing, welfare payments and food stamps — and you're not only imposing a great cost to the taxpayers, but an incentive program for children to have children... Stop rewarding bad behaviour. Let them . . . see how difficult it is to support a child or children while working full time and having to worry about paying your bills.... Making them take responsibility for their actions and choices is the only way to end this problem.

(Staten Island Borough President James Molinaro, 2013)

A summary view of socially conservative and liberal discourse about teenage pregnancy and childbearing suggests that the former emphasizes a moral deviation from the natural order, and the latter a technical deviation from this same order. Where the moral transgression typically prescribes practices of social exclusion (appearing punitive, judgemental, and indifferent to individual hardship), the technical prescribes interventionist measures and a compassionate perspective, which appears to take the best interests of the individual into consideration. Both nonetheless presume the fundamental basis of a natural order, and within this, the premise that fertility, motherhood, and mothering are “natural” social activities with universal characteristics of the “ideal” or “good” mother. I argue that despite their ideological differences, both narratives

ultimately position the ideal activities and characteristics within a middle-class model of fertility and motherhood. Ultimately it is through critically examining the similarities, incongruencies, and nuances within this model, that I am able to challenge discourse about the problematic nature of teenage pregnancy and childbearing.

With this in mind, I suggest that discourse about welfare offers a particularly interesting and complex angle from which to examine middle-class values about fertility and childbearing. Indeed, though it is tempting to continue comparing and contrasting narratives, I suggest that it is more useful to think about teenage pregnancy and childbearing, and concepts like moral and technical discourse, as a negotiation of tensions inherent in a liberal welfare state that is simultaneously based on principles of interventionism and individual autonomy and self-governance.

Welfare Discourse & Neoliberalism

According to Spicker (2008), model liberal welfare states are distinguished (in varying degrees) by individualism and the valuing of private over public solutions as being most appropriate to social welfare issues. In the following section I argue that the ascendance of neoliberalism over the latter part of the 20th century has played a key role in further amplifying these tensions,⁵⁵ and particularly so where concepts of normative and deviant fertility and childbearing are concerned.

According to Harvey (2005), a basic understanding of neoliberalism is the belief that individuals achieve optimal well being when entrepreneurial freedoms and skills are

⁵⁵ Thorson & Lie (2009) point out that the concept of neoliberalism suggests a particular account of the development of liberal thought. “It suggests that liberalism was at one point in time an influential political ideology, but that it at some point lost some of its significance, only to revive itself in more recent times in a new form” (p. 3). Instead, they explore the concept of neoliberalism in the broader context of classical and modern liberalism.

liberated within an institutional framework characterized by “strong property rights, free markets, and free trade.... Where the role of the state is to create and preserve an institutional framework appropriate to such practices” (p. 2). The move toward neoliberalism has produced many profound changes in political and economic practices and thinking, and particularly so where concepts of the “deserving” and “undeserving poor” are concerned.

One of the central tenets of neo-liberalism is the belief that everyone who can compete in the market economy should do so. At the same time, social welfare discourse and social program eligibility have shifted away from guaranteed social security and citizenship rights, towards the residual viewing of social benefits as temporary and on an on-needs basis⁵⁶. Thus, under the auspice of neoliberalism, social welfare is only viewed as appropriate when understood as a last resort, and only for temporary or emergency assistance (Wong, 2000). The move towards stronger property rights, open markets, free trade, and this notion of the “universal worker” has translated into a growing gap between the haves and have-nots in an increasingly competitive economy, and within this, an increasingly narrow model of fertility and motherhood characterized by more and more distinct concepts of normal and problematic fertility and motherhood⁵⁷.

In Canada and the United States the surge in neoliberalism coincides with the levelling off of baby-boom childbearing rates throughout the 1960s, 70s and 80s. While it is true that the baby boom represents somewhat of an anomaly in terms of fertility trends; economists hypothesize that Industrialization played a major role in inducing declining

⁵⁶ Residualism maintains that assistance should only be provided when traditional means of meeting daily needs (e.g. family or the labour market) fail to satisfy the minimum requirements of life.

⁵⁷ For example, earlier social welfare programs like mothers allowance allowed for concepts of the deserving poor, where contemporary welfare discourse almost exclusively views the poor as undeserving.

fertility rates (U.S.) beginning as early as the 1850s (Wanamaker, 2010), neoliberal mechanisms have significantly increased the social risk of childbearing, and created a downward pressure on fertility⁵⁸. In the face of economic uncertainty women and men hoping to aspire to the middle class ideal are delaying entry into the paid work force, marriage, and childrearing, in order to pursue increasingly higher levels of education, professional training, and unpaid internships for example⁵⁹. These pressures are reflected in historically low fertility rates: fewer women are having children, and those who do are having fewer of them, and having them at a later age⁶⁰.

While it is true that women's movement into the paid work force, and greater control over their fertility has encouraged more women to delay childbearing, the influence of economic uncertainty on fertility and childbearing patterns can be seen just by looking at the most recent economic recession. For example, in the United States fertility rates have fallen sharply since the nation went into recession in 2007, hitting the lowest rate ever reported in 2011 and staying there in 2012. According to the Centers for Disease Control, there were 63.2 births per 1,000 women ages 15 to 44 in 2012, down from 69.3 births per 1,000 women in that age range in 2007.

⁵⁸ Such pressure has resulted in below replacement fertility in many countries around the world, reaching lowest low levels of 1.3 and below and with modest if any ability to recuperate.

⁵⁹ For example, increasing numbers of women and men alike are also manoeuvring the narrowing playing field by remaining at home with their parents in order to pursue progressively advanced education. In 2006 Statistics Canada data found that 42% of young adults aged 20-29 lived with at home with their parents (Statistics Canada, 2006).

⁶⁰ The average age of mothers at the time of birth in Canada jumped from 23.5 years toward the end of the 1960s, to 26.7 years by the middle of the 1970s. By 2011 this age of first-time mothers had climbed to 30.2 years. Indeed, in 1974, only 20% of births in Canada were to women aged 30 and over, compared to over 50% in 2009 (Women's Issue Branch: Equity Profile, 2012; Statistics Canada, 2011). American numbers parallel Canadian trends.

What is clear is that not all women are waiting. Delayed childbearing is an economic tactic of the middle-classes, and those who aspire to this particular model of success. For women with limited access to higher education and economic resources there are simply fewer incentives for delaying childbearing. Given that poorer people and minorities are more likely to die younger, they may actually damage their prospects by delaying childbearing until their later years by limiting the amount of family support available to them.

Ultimately, the neoliberal ideology that everyone who is able to work for pay should do so has had profound implications where concepts of normative and deviant fertility and childbearing are concerned. It not only reinforces a classist, but also a racist and patriarchal model of fertility and childbearing whereby motherhood becomes a privilege that is “secured through the labour market, either in the form of high family earnings or employment rights” (Orloff, 2002, p. 112). When poor women fail to meet the basic social preconditions listed above they are in a sense disqualified from legitimate motherhood.

Gavigan & Chunn (2007) note that in Canada, and other jurisdictions, “the reformation of the laissez-faire form of state from the late nineteenth to the mid-twentieth century has been both discursive and material” (p. 751). I argue that pregnant teenagers and young mothers have played a central role on both fronts, and in broad strokes, that the problem of teenage pregnancy and teenage mothers has helped to shift attention away from the growing social tensions, inequalities, and incompatibilities that are inherent in the neoliberal model. I contend that a host of interlocking and often competing interests (i.e., comprehensive sexual health/abstinence-only proponents) employ this strategy, and they are most successful in doing so when teenage pregnancy and mothering are framed

around issues of poverty, welfare dependency, and taxpayer savings. Politicians, for example, have been particularly successful at gaining support for cuts to social spending (which might otherwise be considered too severe or inequitable) by invoking teenage mothers as examples of the undeserving poor. For example, throughout the 1980s and early 90s in the United States, Republican administrations under Presidents Ronald Reagan, and George Bush Sr., believed they had a political mandate to cut social welfare spending. They positioned teenage pregnancy prevention as a logical starting point. Reagan's strategy, for example, was two-pronged in that his platform targeted social welfare spending, but also progressive sexual health initiatives, which included slashing funding to agencies serving the educational needs of pregnant adolescents by over 50%, and refiguring the Office of Adolescent Pregnancy to provide information on, and support to, the promotion of abstinence as official policy (Pillow, 2004).

According to Pillow, Reagan's increased focus on, and funding for teenage pregnancy prevention through abstinence education accomplished two things: it affirmed society's moral concerns about who should and should not be having sex, and it situated the problem of teen pregnancy and illegitimate childbearing within welfare discourse, and the kind of political climate where punitive measures could continue to be taken against teenage mothers. In the following years, both Reagan and Bush were able to gain support for steep spending cuts by targeting the middle-classes with negative images of teenage mothers and the promise of taxpayer savings, not only, with "the reduction of the amount spent directly on teenage mothers, but also monies saved by actively discouraging others from becoming teenage mothers who would feel entitled to make a claim on the state's resources." (Kelly, 2000, p. 55)

Personal Responsibility & Work Opportunity Reconciliation Act, and The Ontario Works Program

We want to talk about teen pregnancy because it is a moral problem...because it has reached such proportions that it is a very significant economic and social problem for the United States...we have to make it clear that a baby doesn't give you a right and won't give you money to leave home and drop out of school. (Bill Clinton, The President's Radio Address)

In 1992, Bill Clinton campaigned on the election promise to end welfare, as Americans knew it. He achieved this in 1996 with the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA). Clinton and PRWORA warrant a certain level of consideration and critique in the context of my research for several reasons. First, Clinton's administration represents one of the most significant changes in political and economic practices and thinking with respect to concepts of the "deserving" and "undeserving poor". Second, he drew support for his plans for decentralization, broad cutbacks to social programs, and the tightening of eligibility requirements from the general public, and Democrats and Republicans alike, in no small part, by invoking and capitalizing on the 'crisis' of teenage pregnancy and childbearing. Indeed, like Reagan and Bush before him, Clinton directly appealed to the middle classes by positioning teenage mothers as examples of the undeserving, and unmanageable poor.⁶¹

⁶¹ Clinton took punitive provisions against teenage parents, specifically. These include requiring teenage parents to either be married, or living at home with their parents or in an adult-supervised setting to qualify for assistance. Teenage parents are also required to remain in school and/or participate in training programs in order to qualify for assistance. These measures beg several questions. For example, if teenage mothers are framed as victims of dysfunction and instability, does it not seem counterintuitive to force them to remain in the same unhealthy environment? Moreover, if the concern lies with perpetuating intergenerational dysfunction, is it not counterintuitive to then assure that the children of teenage mothers are then subjected to the same environment?

PRWORA's sweeping reforms were designed with the purpose of ending welfare as an entitlement program, and ultimately signalled a dramatic shift in both the method and aim of federal financial assistance to the poor. Its three-tier strategy for ending welfare as an entitlement program was based on the promotion of job preparation, work, and the formation and maintenance of two-parent families⁶².

These strategies are particularly important in the context of this research because they offer a clear picture of the contradictions inherent in contemporary welfare practices and discourse. For example, PRWORA echoes early mother allowance and social welfare legislation in that it supports the traditional two-parent family as the ideal family, and within this the idea that the single mother headed family model is inferior and less deserving of support. Both early assistance programs and PRWORA required and require that recipients establish the paternity of their children in order to receive benefits based on the assumption that men are ultimately responsible for supporting their families (Lessa, 2006).

Where PRWORA (and other contemporary welfare legislation) diverge from earlier programs like mothers allowance, however, is in the simultaneous expectation of the traditional patriarchal family model and the universal worker (Lessa, 2006). As Gavigan and Chunn (2007) point out, mother-recipients were less discursively constituted as charity cases, and more as government employees on contract, who were charged with the responsibility of raising "good" citizens (p. 751). They point out that in keeping with this, efforts were also made to avoid stigmatizing recipients via public exposure (i.e., cheques were mailed out as opposed to requiring recipients to collect their cheques at a

⁶² Recipients are required to begin paid work within 2 years of receiving benefits, and limited to a maximum of 60 months of benefits within one's lifetime (some states have instituted shorter periods).

public welfare office). While not without its own complications and contradictions, earlier legislation recognized "unpaid, family-directed labour" where present-day legislation has effectively erased the concept of the deserving poor⁶³. Under PRWORA, poor mothers are ultimately stigmatized as irresponsible and idle examples of the undeserving poor, and their children framed as barriers to their labour force participation (Ehrenreich, 2001).

In Canada, Ontario Premier Mike Harris's Conservative government led an equally sweeping initiative to redefine and restructure the nature and scope of public assistance under the Ontario Works program. Like PROWRA, Ontario Works is a workfare program that promotes the downsizing and downloading of services: the program not only involved immediately cutting allowances by 21.6%, but also changing a host of rules that disqualified tens of thousands of people from benefits, and the implementation of provincial anti-fraud hotline encouraging citizens to report alleged welfare cheats (Gavigan & Chunn, 2007). Ontario Works also mirrors some of PRWORA's measures aimed directly at teenage mothers. For example, in March of 1999, Harris' government introduced Learning, Earning, and Parenting (LEAP) as part of the larger Ontario Works program. While teenage mothers are not required to live at home with a parent or guardian under LEAP, the program does require that adolescent parents attend mandatory schooling and parenting courses in order to receive their welfare benefits. While Jenkins (2001) praises the program for attempting to "break the cycle of welfare dependency that traps many young parents" (p.9), others such as Gavigan & Chunn have argued that, like other workfare programs, the core of LEAP is mandatory

⁶³ Gavigan & Chunn (2007) point out that in Canada there was a general prejudice against wage earning mothers, yet legislation that both implicitly and explicitly implied that poor women receiving mothers allowance were expected to generate supplemental income (p. 749).

compliance, which ultimately creates the opening for teenage mothers and their children to be kicked off welfare altogether.

While the principles of welfare reform throughout the 1990s continue to be debated by the more political elite, their acceptance into mainstream culture endures in present-day discourse. Examining welfare discourse in particular provides the opportunity for teasing apart and collapsing narratives about teenage pregnancy and teenage mothers on multiple levels. For example, whether or not one argues in favour of abstinence-only education, or for increased access to birth control and comprehensive sexual health education, the underlying theme in both narratives is that of poverty and poverty reduction. Both moral and technical narratives about teenage pregnancy and teenage mothers operate on the presumption of a natural order, and of fertility, motherhood, and mothering as “natural” social activities within this; we universalize the “ideal” characteristics of the “good” mother, yet ultimately locate these activities and characteristics within a middle-class ideal of fertility and motherhood.

In terms of differences, technical narratives (i.e., wrong-girl, error in timing) appear less condemnatory than moral, or social conservative narratives about teenage pregnancy and teenage mothers. Technical narratives are more inclined to recognize and address the wider implications of certain familial and socio-economic factors with various targeted interventionist measures, or to recognize that early childbearing, in and of itself may not necessarily cause poor outcomes⁶⁴. What technical/interventionist narratives do imply, however, is that preventing disadvantaged teenagers from getting pregnant and becoming mothers better positions them for achieving the middle-class ideal; that if they

⁶⁴ For example, the correlation between teenage mothers and school dropout rates often overlooks that some teenage mothers leave school before becoming pregnant. One study found that as many as one in three had already dropped out of school before becoming pregnant (Maynard, 1995).

just hold off, they too can achieve the same markers of success that their middle-class peers aspire to.

In this sense, the wrong girl narrative articulates a view of self-determinism that is actually quite in keeping with social conservatism. The wrong girl who does not have a teenage birth is no less the wrong girl if she still fails to avoid perpetuating that same cycle of poverty, dysfunction and disadvantage. For example, in a Canadian Press article University of Toronto professor of Social Work, Ben Schlesinger, expressed concern that, “unmarried teenage mothers from broken homes are keeping their children while those from more stable backgrounds give them up for adoption...It appears the wrong girl is keeping the baby...It’s babies having babies”. Essentially, she is the wrong girl because she is the wrong girl. The poor choices that lead to a teenage pregnancy and birth and decision to parent are emblematic of the broader conditions of her unsuitability. On the other hand the girl who perseveres and triumphs over this instability and adversity (obviously avoiding teenage motherhood along the way) demonstrates the right individual qualities and characteristics for motherhood.

In many ways the wrong-girl narrative seems considerably more complex, inconsistent and contradictory than the wrong-family narrative. Social conservative discourse brings questions about inequality of race, class, and gender into view more clearly insofar as it more readily acknowledges, and fails to apologize for the position that poor people should not have children. For example, in 2008, Louisiana’s Republican State Rep John LaBruzzo introduced a proposition aimed at “reducing the number of people going from generational welfare to generational welfare.” (Waller, *The Times-Picayune*, 10/24/08). Concerned that individuals receiving government aid were reproducing at a faster rate than the better educated, and affluent (whom he argued paid

more in tax revenue), LaBruzzo proposed paying poor women \$1,000 for permanent surgical sterilisations, while offering college educated, more affluent couples, tax-incentives to have children.⁶⁵

LaBruzzo's proposition is an interesting example exactly because of the controversy it created outside of the most conservative of support bases. Many felt it smacked of backdoor eugenics, and public outrage ultimately cost LaBruzzo his leadership position. ACLU called the proposal a "mean spirited attempt to eliminate the poor", while Planned Parenthood representative Julie Mickelberry called it "bribery", and advised LaBruzzo to "go back to addressing issues of education about unintended pregnancy and opening healthcare access" (*The Times-Picayune*, September 24th, 2008, online).

Curiously, the public's unease with the morality of paying poor women money not to reproduce fails to extend to paying poor teenagers not to reproduce. For example, in 1989 Planned Parenthood sponsored a program that paid teenage mothers a dollar-a-day for avoiding consecutive pregnancies, and continues to offer similar financial incentives to avoid teenage pregnancy today. The Planned Parenthood of the Rocky Mountains' website describes the program as follows:

The Dollar-A-Day program helps High School age females who have never been pregnant before avoid unintended pregnancy by providing the necessary and accurate information on the importance of healthy responsible sexuality in a group support setting. It is an incentive-based program with a community service

⁶⁵ Similar initiatives in the United States have also included paying welfare recipients to use long-term birth control implants like Norplant. Kennedy (2008) has argued that initiatives such as these demonstrate that while society widely rejects the premise of early 20th century eugenics, it continues to target young women, (particularly those in poor, non-Anglo, and urban settings), as the key to preventing "degeneracy" (p. 25).

component and serves as a national model for similar incentive-based pregnancy prevention programs. Currently, Dollar-A-Day is only offered in select locations in Colorado (<http://www.plannedparenthood.org/rocky-mountains>)

The example of LaBruzzo's proposition and Planned Parenthood's Dollar-A-Day program speak to the complexity of the ideologies embedded in discourse. Planned Parenthood's Dollar-A-Day programs target "select locations", where initiatives like LaBruzzo's state upfront: poor women should not have children. In both instances, teenage pregnancy and mothering is cited as a major social problem, in large part because of its association with poverty, and more specifically, social welfare payments (Luker, 1996), yet technical narratives seem decidedly less able to recognize the existing doctrines, social bias, and power relations that inform how we think and do not think about teenage mothers, and ultimately, who should and should not be having children. Simply put, one allows us to chalk the problem up to an error in timing, where the other confronts us with unequal power relations and deeply unsettled questions about race, class, gender, and sexuality.

Conclusion

Examining the middle-class ideal of pregnancy and motherhood reveals the many inconsistencies, contradictions, and false assumptions that are embedded in social science and populist discourse about teenage pregnancy and teenage mothers. Throughout this chapter, I have argued that narratives about teenage pregnancy and childbearing speak to broader anxieties about the middle class ideal; about shifting gender roles, and the breakdown of the "traditional family" within this, and equally complex anxieties about an increasingly globalized and competitive market economy and work force. By looking at

welfare discourse more specifically, I have argued that teenage pregnancy and teenage mothers draw attention to the paradox of an ideal of fertility and motherhood that simultaneously relies on the concept of the universal worker and the traditional patriarchal family.

From a theoretical perspective the goal has been to clearly demonstrate how social anxieties about pregnant teenagers and young mothers subvert and transform these competing tensions. From a more phenomenological perspective, however, it is important for me to ask what this might actually mean for young women. What does it mean to be stigmatized as the “wrong girl” or the “wrong family”? In the following chapter I examine young women’s narratives of teenage pregnancy and mothering, and pay particular attention to the complex experience of discourse about teenage pregnancy and mothering within these narratives.

— Park Avenue Christmas Party

I remember being invited to a Christmas cookie decorating party in my neighbourhood when Allison was in grade 4, I think. I stressed a great deal about going to this party. I was surprised to be invited, but also suspicious of why⁶⁶. In the end, I dressed both of us in our finest clothes, and went because I felt like I should be grateful for having been invited. I remember being so much more anxious in my efforts to fit in, than eager, and ultimately I hated that party, and I hated those mothers. They seemed entirely engaged in trying to out mom one another with their cookies, and scheduling conflicts (gymnastics, soccer, ballet, piano, French camp, band camp, and... blah, blah, blah).

I remember being particularly pissed off when one of the mothers brought up an incident with my daughter several days before. A boy in grade 6 had bullied Allison on her way home from school. In front of several of the other mothers, she pointed out: “you may not have noticed, but we walk our children to and from school”.

When I left the party, I did so even more self-conscious than when I’d showed up. As much as I’d felt singled out and embarrassed, however, I also felt incredibly defiant. I had absolutely noticed the other mothers walking their children up the hill and through the park to school. I had noticed one particular mother walking her 12 year-old daughter Ariel to and from school every single morning, lunch, and afternoon, and this girl... always several steps behind her mother, seemed utterly resigned. I was furious that this boy had pushed my daughter down on the ground, but I also wanted her to know that she could pick herself up, dust herself off, and walk to school independently! I wanted my daughter to be resilient and feisty! I wanted her to know that she had as much right to walk home safely as any boy! I wanted her to be defiant like me, and I considered myself better than all of the other older, boring, middle-class, stay-at-home, helicopter mothers for it.

⁶⁶ This reminds me, again, of young women avoiding traditional maternity health care services, insofar as teenagers are in a defensive position of having to defend who they are, and why they are in certain places people do not expect them to be. To complicate this however, a teenage mother might also be stigmatized because she is, simultaneously, exactly where other people expect her to be.

Chapter 6

The Stigma is Wrong

Whether we are talking about “wrong-girl”, “wrong-family”, or even, “wrong-society” narratives, approaches to teenage pregnancy and teenage mothers are overwhelmingly paternalistic in nature. Young women’s voices, self-interpretations, and expert-knowledge are subjugated in favour of the authoritative knowledge of institutions and professionals, who instead, profess to speak on behalf of young women, their needs, and the needs of their children. I argue that this absence of young women’s voices can only contribute to a lack of insight into their needs, to the needs of their children, and into the social variables that shape their experiences, and the decisions they make. We need to ask what young women’s narratives might tell us that is not otherwise articulated in dominant ways of conceptualizing and speaking about teenage pregnancy and mothering. (Kelly, 1996)

I also assert that teenage mothers hold complex interpretations of their experiences, which inevitably run up against and into discourse about teenage pregnancy and parenting. This last point is paramount if we wish to better understand young women’s narratives and experiences of pregnancy, childbearing, and mothering. Dominant discourse about pregnant teenagers and young mothers is overwhelmingly disparaging, and grounded in as many contradictions as it is agendas. At the same time, young women inevitably draw from, and interpret their experiences through discourse. If social, economic, and political relations shape discourse, what role does negative discourse play in shaping what stories young women tell, and in how they are interpreted?

Throughout this chapter I examine these tensions, and the different mechanisms that young women use to resist, challenge and transform dominant discourse. In doing so, I run up against the following inevitable questions: is it possible for pregnant teenagers and teenage mothers to counter dominant discourse, and if so, what might this look like?⁶⁷

Negotiating representations, identities, and stigma

That [newspaper] lady totally twisted what we said because she wanted it to sound worse. I wrote her a letter and said, “If you weren’t going to write what we said, why did you waste your time and our time? You might as well have just sat home, made up the story yourself- not even bother us if you weren’t going to use the facts -Molly, age 17 and mother of one (Kelly, 1996, p. 421).

One of the key arguments that I wish to make clear throughout this thesis is that there is a notable lack of young women’s voices in discourse about teenage pregnancy and mothering, and that this absence of personal narrative is problematic on many levels. First, it leads to a profound lack of understanding of the decisions that pregnant teenagers and young mothers make, of the complex variables that shape and constrain these decisions and choices, of how these variables shape the outcomes of pregnant adolescents, young mothers, and their children and, last but not least, how discourse itself, shapes the choices, decisions, and outcomes that are available to young women and their children.

The following section is thus focused on young women’s first-hand experiences and self-interpretations of pregnancy, mothering, and discourse. Here it is important to

⁶⁷ Examining the tensions and questions demonstrates why it is so important to change the dialogue, but does not easily answer the question of how such change might come about.

recognize that, like older mothers, the experiences of teenage mothers are far from homogenous. In order to acknowledge these differences in perspectives, I draw on a range of examples and resources, including ethnographic studies by feminist scholars Deidre Kelly, and Claudia Marianne Mollidor; the grassroots online support group GirlMom.com, and Jessie's Centre (a feminist-based service provider for pregnant teenagers and young mothers in Toronto); and lastly, from my own autobiographical narrative. The common theme throughout each of these experiences is the challenge that pregnant teenagers and young mothers face in negotiating positive maternal identities⁶⁸.

Here it is important to revisit my understanding of my positionality within the research. Although the initial focus of my research was popular culture, this shifted toward academic discourse in part because of a growing appreciation for just how authoritative “expert” research about teenage pregnancy and mothering can be in terms of informing broader culture. Within this research I was both surprised and discouraged by just how little credence is paid to young women's personal narratives and self-interpretations. Ultimately, I regard this marginalization of pregnant adolescents and young mothers in scholarly literature as a reflection of the wider marginalization and stigmatization of pregnant teenagers and teenager mothers in society as a whole.

This absence of representation has shaped my thesis in complex ways, and particularly so, when it comes to my own narrative of teenage pregnancy and childbearing. In retrospectively re-examining the thesis, it is impossible not to appreciate the degree to which feelings of anger and marginalization have motivated and shaped it. While these motivations were deep-seated to varying degrees throughout the process, the

⁶⁸ In 2007 Leanne Levy and Sandra Weber also produced an important media arts project with teenage mothers in Montreal, Quebec entitled, Project Teen M.O.M. (www.teenmom.ca)

exclusion of young women's voices in academic discourse has shaped and shifted the research in several ways. It gradually brought my own feelings and awareness of stigma and social exclusion into sharper focus. Moreover, it amplified this anger and awareness. My pursuit of university has always been driven by a desire to prove myself as something more than a "teenage mother". To come to see that academia widely participates in the same stigmatizing discourse and marginalization of young women's voices was like salt in a wound, given my idealization and pursuit of academia. It is not entirely surprising, given the defensiveness of this starting position, that I chose personal narrative as my methodological tool. While it has certainly developed into more, in some sense, it has served as a methodological weapon with which to hit back, or level the playing field so to speak.

Although I can only speak to my own experience, I do think the complexity of my feelings and motivations speak to the power of discourse, and to just how pervasive and damaging stigmatizing social discourse about teenage pregnancy and teenage mothers can be. Indeed, for all of my attempts to manoeuvre my way out of identifying with teenage mothers, I remain emotionally fettered to a stigmatized identity of a teenage mother. It is a paradox that I explore throughout the remainder of the thesis using both my own personal narrative, and research by the aforementioned feminist scholars and grassroots organizations as my points of entry.

I suggest that the paradox has much to do with the challenge that young women face in trying to cultivate and maintain a positive maternal identity. Despite the pervasiveness of negative messages about teenage pregnancy and mothering, young women's experiences are in fact often quite different than how we typically perceive them in dominant discourse. Unlike the rest of society, teenage mothers are less inclined to

interpret their decisions, or view their children, as representations of their truncated lives, or barriers to their happiness and success. Instead, they are likely to view becoming a mother through a lens of self-empowerment, citing qualities like personal growth, maturity, stability, responsibility, assertiveness, sensitivity, and patience (Kelly, 1996). What they are tasked with then, is cultivating and maintaining a positive maternal identity in the face of discourse that says otherwise. In this sense, dominant discourse manages to shape young women's narratives both implicitly and explicitly in a myriad of complex ways.

Kelly's research (perhaps more than anyone else's I have drawn on), demonstrates the challenges teenage mothers face in negotiating positive identities. For example, in 1996 Kelly conducted an ethnographic study, which followed twelve high school playwrights throughout the process of writing and publicly performing a play about their lives as teenage mothers. In doing so she observed three consistent messages that the young mothers wished to convey. First, the young mothers became pregnant for a variety of reasons. Second, they supported a young woman's right to choose, or not choose, motherhood based on their individual circumstances. Lastly, they saw motherhood as a challenging, yet ultimately positive and rewarding experience.

Despite the cohesiveness and clarity of these principles, the young mothers felt their messages, and the intentions behind them, were largely diluted by the end of the process. Kelly attributed the young mothers' challenges to several factors. First, she noted that while the play's adult sponsors and director wished to give voice to the young mothers, they ultimately meant to use the exercise as a platform for teenage pregnancy prevention by drawing out warning stories. Often this meant being encouraged to emphasize certain challenges and hardships by the director. Kelly also noted that the

playwrights found it difficult to challenge certain stereotypes about teenage mothers without feeding into or reinforcing others, that they had a challenging time building one representative story from twelve evolving lives, and finally, that the audience interpreted the play through prevailing social attitudes, which tended to misinterpret, or misunderstand, the young mothers' intentions.

Despite these challenges Kelly ultimately concludes that exercises such as these have the potential to be very meaningful and beneficial for young women. The young mothers may have had difficulty articulating their individual stories into one coherent statement, capable of displacing opposing ideologies, yet the exercise (particularly the script-writing process) helped them to articulate their concerns and collectively theorize about their experiences. While I agree with Kelly on this point, the frustrations experienced by the playwrights in her study speak to the inherent paradox teenage mothers face in trying to cultivate a positive maternal identity, which I continue to explore throughout this chapter. Ultimately they are a stigmatized group attempting to challenge their stigma within its confines, and with the tools of this stigma.

Claudia Mollidor's (2013) ethnographic study "I Deserve Respect Because I'm a Good Mum" is another important source of young mother's first-hand experiences and self-interpretations that speaks to this challenge. Mollidor's work was particularly interesting for me in terms of exploring questions of social representations, stigma, and the potential for change. Mollidor carried out interviews and focus groups with both teenage mothers and service providers and, like Kelly, found that teenage mothers are intensely aware of the representations of teenage motherhood as problematic, and of the societal judgment and stigma directed towards them because of this characterization. She also found that young mothers actively produced and shared representations that

challenged society's negative stereotypes of them. Mollidor's study focuses on the different techniques that the young mothers employ as a means of resisting the internalization of the stigma (from service providers, family members, and society as a whole), and particularly where more subconscious or peripheral representational elements of stigma and identity are concerned⁶⁹.

According to Mollidor, one important peripheral element⁷⁰ against the internalization of stigma for the young mothers in her study was their ability to represent themselves as good mothers, and the experience of teenage motherhood as challenging but enjoyable and rewarding. Not surprisingly, most teenage mothers chose to view themselves differently from the typical teenage mother stereotypes (i.e., stupid, lazy, manipulative, tragic, abused, victim, etc.). This strategy, though entirely logical, and seemingly innocuous, actually presents a glaring catch-22 for young mothers. Daaneen (2009) points out a fundamental paradox in trying to challenge stigma: In order to challenge stigma, the stigmatized are forced to actively create an identity of who they are against the stigmatized identity of who they are not. Where then does this leave pregnant teenagers and young mothers?

Teenage pregnancy and childbearing are pathologized as problematic, undesirable, and in need of intervention. This places pregnant teenagers and young mothers in the position of having to self-identify as members of a target group stereotyped

⁶⁹ Gennaro (2008) explains this concept as the phenomenological claim that, in "addition to our frequent focused (or attentional) awareness of outer objects, we also have peripheral (or inattentive) conscious experience at the "edges" of consciousness. Gennaro argues that some kind of peripheral conscious awareness accompanies our focal consciousness" (p. 139).

⁷⁰ Peripheral in the sense that teenage mothers are both acutely aware of representations of teenage mothers as problematic, and aware that this informs the stigma they face. I understand Mollidor's argument to mean that teenage mothers also experience stigma at a more subconscious level, and thus, use more subconscious techniques in resisting this stigma.

as deviant or, alternatively, demand that young mothers distance themselves in opposition, and in turn, share in the core representation of teenage mothers as problematic. Essentially, pregnant teenagers and teenage mothers are forced to participate in their very stigmatization in order to challenge it.

The paradox remains even when services and programmes attempt to account for social stigma through targeted supports for pregnant teenagers and young mothers specifically. On the one hand, programs like the adolescent prenatal clinic cited in my literature review, or alternative education programs like the one provided by Hamilton, Ontario's Good Shepherd Centre attempt to meet pregnant adolescents and young mothers on their own terms. On the other hand if we consider Becker's (1963) theory of labelling, it may be that attempts to address stigma and social exclusion place pregnant teenagers and teenage mothers in just as much of a double bind⁷¹. Becker developed the concept of labelling theory and self-fulfilling prophecy in order to explain the relationship between deviant behaviour and stereotyping (which he understood to mean the reactions of outsiders to a perceived social target-group), hypothesizing that when a person becomes what they are labelled, their behaviours change in ways that are consistent with the perceiver's expectation⁷² (Merton, 1976; Jussim, 1990).

⁷¹ For example, the New Directions Charter High School in New York City draws contrasting opinions. Jacquelyn Wideman, who submitted the charter application for the school, points out that many teenage mothers face a great deal of stigmatization when they return to the regular school setting. According to Wideman, the school's goal is for young parents to "perform at the same optimum level as regular high schools." On the other hand, Benita Miller, the executive director of Brooklyn Young Mothers Collective argues: "I don't think that we should be creating schools that segregate young women or men based on their parenting status... We don't need them to graduate as good mothers — we need them to graduate as educated young women who can head to college". (February, 4, 2011, <http://nypost.com/2011/02/24/school-of-hard-knocked>).

⁷² It is important to note that the meaning of the labels themselves can change over time or in varying contexts.

Here again, pregnant teenagers and young mothers are in the position of having to self-identify as members of a target group stereotyped as deviant. Does acknowledging this “otherness” force young women to identify with the perceived failures of this “social kind” (Wong, 2000), or actively participate in their own stereotyping? Is there a way forward that does not put young women in the position of having to internalize this stigmatization, or a way out of constructing our own social exclusion?

This attention to stigma at the more subconscious level has been particularly revealing and challenging for me both on a personal level and as a researcher. Attempting to represent myself as a good mother by defining myself as “not like other teenage mothers” has certainly been an important part of my personal narrative for many years. With this in mind, the motivations for this research become especially complicated, convoluted, and challenging for me when contemplating this seemingly straightforward strategy of “the good mother/not like other teenage mothers”, in broader theoretical and political terms. Becker and Daaneen’s concepts of stigma, and Mollidor’s attention to young women’s focused awareness, and peripheral experiences and strategies, and my own autobiographical narratives, raise challenging and even uncomfortable personal questions for me, and clearly raise complex questions about young women’s experiences of pregnancy, childbearing, and motherhood. In continuing to explore these different challenges, I will now focus my analysis on grassroots organizations before turning my attention toward more personal narrative and autobiographical writing.

Jessie’s Centre & Project Girl-Mom

“The feminist approach of respect for teenage women and encouragement enables them to achieve self-worth and independence...which, happens also to be the most effective

way of helping their babies thrive...It provides what young moms, what all moms, need: friendship, information, relief". (June Callwood, founder of Jessie's Centre) (Cited by Kelly in Checkland & Wong, 1999, p. 61).

Grassroots organizations also reveal the struggle that teenage mothers face in trying to inhabit a positive maternal identity. For example, Jessie's Centre is a feminist-based organization that aims to establish an alternative to politically produced discourse, by providing services to pregnant teenagers and young parents in a non-stigmatizing environment. One of the major challenges that Jessie's Centre faces in providing such an environment, however, lies in the pervasive perception that being supportive and respectful of pregnant adolescents and young mothers, equates to endorsing, or at least, encouraging teenage pregnancy and motherhood. This of course is the same perception that I ran up against with my vice-principal in high school. Jessie's Centre relies on funding from such diverse donors as the United Way, the Public Health Agency of Canada, CIBC, and even MacDonald's, and must therefore walk this same tenuous political line between their guiding principles, and the dominant discourse, which they aim to challenge⁷³.

In 2011 I contributed part of a chapter to an anthology entitled *The 21st Century Motherhood Movement*. I examined an online support group/activist organization of and for pregnant teenagers and young mothers called girlmom.com. The mission statement as outlined on Girl-Mom's homepage reads (in part) as follows:

⁷³ A similar argument may be made with respect to academic research on the subject. The emphasis on academic research in public policy and programming creates even more of an impasse insofar as funding might be more readily available for research focused on fixing the problem (reinforcing the dominant discourse), as opposed to research which challenges the status quo.

Teenage pregnancy is not a ‘crisis’ or ‘epidemic’, like so many people would like us to believe. The only true epidemic associated with teen pregnancy is the overwhelming and universal lack of support available to young mothers. The only true crisis is the denial of the fact that teenage girls can be, are, and always have been, both sexual and maternal beings, with the capacity to love, procreate, and nurture. We love our children fiercely. We protect and care for them like any mother, of any age, would. Through Girl-Mom, We hope to slowly show that to the world.

Much like Kelly and Mollidor, I found the group members’ experiences of pregnancy and motherhood, and their interactions with society, to be challenging and complex. First, the young women involved with Girl-Mom are obviously well aware of discourse that stigmatizes them, and actively challenge this stigma by their very membership in the online community. They fundamentally support a woman’s right to choose or not choose motherhood based on their individual needs and circumstances. They also acknowledge the challenges that teenage mothers face, as well as the rewards. They do not view themselves as victims or their children as burdens; they view themselves as having taken responsibility, and matured, and having done so, as deserving of respect and recognition. They also point out that young mothers, like all mothers, thrive when they are confident in their abilities, have supportive networks in place, and a community of peers with whom they can share their experiences. Essentially, they saw each other as their best support system (May, 2011).

If we revisit Daaneen’s theory of stigma, one of the challenges to consider is whether Girl-Mom might be somewhat paradoxical as an organization and political project. Girl-Mom stands as a testament to alternative models of mothering largely

because of young mothers' experiences of exclusion. Teenage pregnancy and teenage mothers fall decidedly outside of accepted social norms where fertility and motherhood are concerned (norms rooted in white, middle-class, patriarchal models of fertility and motherhood), yet it is unclear as to whether *Girl-Mom* means to challenge these standards of "legitimate" motherhood, or simply dispute their exclusion.

This tension can be seen, for example, in the writing of *Girl-Mom*'s creator and publisher, Bee Lavender. Lavender explains her motivations for starting *Girl-Mom* in a piece for the *Guardian* newspaper in 2007: "I realized that the one element missing from my early life was a group of peers, people making hard choices but moving forward. I started *Girl-Mom* to create a safe space where young mothers could give each other support, advice and advocacy" (March 31st, 2007). On one hand there is little reason to doubt the sincerity of Lavender's motivations and intentions, yet, on the other, even the title of the article, "Young, gifted, and pregnant", suggests a deeply entrenched and self-serving personal narrative that Lavender has of herself as exceptional, as both a teenage mother, and as an advocate for other teenage mothers. Indeed, the details Lavender drops throughout the article are not unlike my own need to remind readers of my middle-class upbringing throughout this thesis.

In this respect *Girl-Mom* is complex and challenging for me in much the same way as my own research and research motivations. Is insider/outsider positionality a contradiction in terms that can be reconciled, and if so, how do *Girl-Mom*, and my own research mean to do so? Here it may be useful to return to Kelly's earlier ethnographic study. In many ways Lavender and *Girl-Mom* (and my own work) run into the same challenge of trying to challenge stereotypes about teenage mothers without feeding into others. Indeed, it is difficult to see how young mothers might displace opposing ideologies

when even the seemingly straightforward, “I am a good mother” narrative seems to demand reinforcing stigma and stereotypes. At the same time, I cannot imagine what it would have meant for me as pregnant teenager and young mother if I had ever had access to this kind of resource and space. I had no friends or acquaintances in my community in my age range with children, and I had nothing in common with older mothers that would have allowed me to facilitate relationships with them. I can only presume that access to a resource such as Girl-Mom would have made for a far less isolating experience. These kinds of spaces and exercises clearly have the potential to be very meaningful and beneficial for young women; to help young women articulate their concerns and collectively theorize about their experiences, but to also help them find comfort, recognition, community, psychic identification, and much more.

In the following section I explore key strategies (and the tensions within these strategies), that pregnant teenagers and young mothers use for providing positive self-representations. Before doing so, however, I will leave readers with the closing lines of former Girl-Mom member, Allison Crews’ moving essay “When I Was Garbage”⁷⁴:
"Girls like me have raised presidents. We've raised messiahs and musicians, writers and settlers. Girls like me won't compromise and we won't fail."

-Allison Crews (1982-2005)

Strategies for providing positive self-representations

Taking Kelly, and Mollidor’s ethnographic research, Jessie’s Centre, Girl-Mom, Allison Crews, and my own autobiographical narratives into consideration reveals certain

⁷⁴ Crews’ full essay “When I Was Garbage” can be found at <http://www.girlmom.com/features/when-i-was-garbage-allison-crews>.

collective experiences and patterns of interpreting and responding to these experiences. While young women's experiences of pregnancy and motherhood are unique and complex, there is a collective experience for teenage mothers that, in large part, come from being collectively stigmatized. The narratives used to stigmatize teenage mothers can vary greatly depending on one's social resources and capital, but ultimately, the underlying point remains consistent: teenage pregnancy and teenage childbearing are problematic, undesirable, and in need of intervention.

A key strategy the young mothers actively use in constructing identities is positioning themselves as good mothers. According to Mollidor's study, this also often meant positioning themselves as better mothers. They elevated themselves above other mothers by highlighting the importance of full-time motherhood, or by drawing attention to their willingness to make personal sacrifices (i.e., freedom and youth, education and career) for their children. Often this also meant drawing attention to the shortcomings of other mothers, and in particular, those of their own mothers/parents. These criticisms were likely to be directed at older mothers and other teenage mothers alike. For example, my disdain for older mothers in an earlier narrative, "Park Avenue Christmas Party", echoes Allison Crews' tone when discussing the adoptive mother chosen for her son in "When I Was Garbage". Contemptuously only referring to the woman as the "lovely wife" throughout the essay, Crews writes:

"OUR baby" became his name while she talked to me on the phone. She gave me weekly reports of how the nursery was coming along (complete with a 2,000 dollar classic Pooh mural, which I am sure would make a world of difference to a newborn), the hundreds of dollars they were spending on clothes, how excited

their family was, and how much they loved "our baby" already.

(www.girlmom.com)

As discussed earlier, young mothers will also seek to cultivate positive maternal identities by comparing themselves favourably against other teenage mothers and stereotypes about teenage mothers. They may achieve this, for example, by positioning themselves as the exception to the rule, or by employing an against the odds narrative, which sees them persevere and achieve something positive despite the negative prerequisites, consequences or views about their social group. At first glance, the two strategies above seem to mean the same thing. They may very well mean the same thing in certain contexts, or something entirely distinct. For example, at first glance, I have tended to employ the idea of exceptionalism as a strategy in my own life as opposed to the “against the odds” narrative. The exception is not that I made it against the odds, but rather, that I was the exception to begin with. I was not as disadvantaged growing up as I’d imagined other teenage mothers to be, and this allowed me to construct an identity for myself where I was not as much of a teenage mother as other teenage mothers. I was really only a teenage mother in terms of my young age. On the other hand, it occurs to me that the “against the odds” narrative has actually served the same purpose for me. I am the against the odds teenage mother who still managed to take her place in that middle-class ideal (i.e., university educated, husband, house, car, dog, etc.); to be able to still say, against the odds, see, look I am like you...was there ever any doubt!

Another important strategy that young mothers have available to them is actively choosing their sources of support. This might mean countering patronizing professionals and the rejection of their expert knowledge. For example, Mollidor notes that some young mothers were discontented and mistrusting of certain services and service

providers because of the stigma and judgment they felt they faced. However, rather than internalizing this stigma or placing the fault on themselves, the young mothers projected this stigma back onto the service provider by attributing faults and errors to the service provider or stigmatizers. They depicted stigmatizing professionals as old fashioned, and ignorant. They disengaged from stigmatizing services, and ultimately rejected expert knowledge as useless compared with their own lay knowledge. Mollidor notes that while young mothers saw adequate, non-judgmental care for themselves and their children as the highest priority, they did not, overall, view professionals as key people in their lives. She concludes that, while this can restrict mothers' support networks, it ultimately enables them to see themselves as active and knowledgeable agents in charge of their lives (p. 98).

While my attitudes toward professionals have varied over the years depending on the profession in question, this is not a tactic that I relate to entirely. It is true that I avoided health care professionals when I was pregnant, but this was largely on account of not fully grasping the implications of being pregnant. My approach to dealing with health care professionals over the years has in fact, very rarely ever been dismissive, but instead reverential. It is true that I have been frustrated, and insulted on many different occasions, yet my narrative has always centred on "I am not like other teenage mothers". My approach then, was to always try and match their knowledge and wits, to arm myself with as much knowledge as I needed to defend myself and counter. Whenever this tactic failed, I tried avoidance. Allison's teachers for example, were never professionals I felt comfortable around. I also never felt that my ability to help her academically was impacted by being able to impress her teachers by spouting off the philosophy of Jean Piaget. Instead I avoided them for fear that they'd see through me.

The above narrative echoes those of the young mothers in Kelly, and Mollidor's studies, as well as the Girl-Mom members. It is a rejection of a stigmatized identity of someone who is not coping with motherhood. It is the replacing of the image of an overwhelmed teenage mother, a baby with a baby, with the identity of someone who is coping extremely well, even with the additional work; of drawing energy and pride from experiences which demonstrate a high level of coping regardless of whatever disadvantages one faces (i.e., age, juggling education and motherhood, being without a partner, etc.) (Mollidor, p. 98) The message is: we have not screwed up despite other people's fatalistic expectations and perceptions of us.

Autobiographical Narrative

Personal reflections on my own and other young mother's narratives and strategies

This thesis takes the position that teenage mothers are collectively marginalized as a social group; that it matters very little if one stays in school, is gainfully employed, married to the father of their child, or if they happen to be... a very good mother (Kessler, 2008). At the same time, I also recognize that my experiences of teenage pregnancy and mothering are not representative of other young women's experiences of pregnancy and motherhood. There are many complex differences between young mothers, which not only influence how they might be stereotyped and stigmatized, but also, how they interpret and respond to the different stigmas. For example, similar to the teenage mothers in Mollidor's study, my attempts to forge a positive maternal identity have also relied on not only defining myself as a good mother, but as a better mother. Because the target of my disdain was more likely to be older middle-class mothers (as

opposed to other teenage mothers or older working class mothers), I was inclined to view full-time motherhood with a level of contempt, where those in Mollidor's study viewed mothers who worked outside of the home unfavourably.

Implications of stigmatizing pregnant adolescents and young mothers

Sociologists have studied the effects of stigma on individuals and identity development widely (Fessler, 2008), yet its effects on pregnant adolescents and teenage mothers remain largely overlooked⁷⁵. Adolescents are actively engaged in developing their early sense of self, and many professionals (sociologists, child-psychiatrists, teachers, health-care practitioners, etc.) have pointed out the struggle that adolescent women face with issues of self-esteem at puberty, as they “learn cultural meanings about gender, particularly negative discourses about women’s bodies and female sexuality that cause them to feel devalued” (Martin, 1996, p. 121). At the same time, we know that new mothers are also actively engaged in developing their sense of maternal self and maternal efficacy (Özkan and Polat, 2011).

While not explicitly focused on stigma, DeVito's (2007) study explores adolescent mothers' feelings about becoming a parent. She investigates the significance of “role identity, social support relationships, and developmental perspectives” for adolescent mothers as they “adapt to the demands of parenting” (p. 3). She finds that having “dependable social support relationships, feeling confident, and being satisfied in her role as a mother” (p. 4) greatly influence an adolescent mother's positive self-perception of parenting. DeVito concludes: “Self-perceptions of parenting are important because how

⁷⁵ This absence may simply reflect society's reluctance to remove stigma under the false pretence that to do so causes, or at least encourages, adolescents to get pregnant and bear children.

mothers perceive themselves and whom they can depend on may influence the type of parent they become” (p. 17).

Mollidor suggests that negative feelings about teenage motherhood are predominantly an external projection on young mothers rather than an internal experience. She points to an exercise where all of the young mothers were able to draw on examples of themselves as good mothers, and their good parenting, despite social stigma. Indeed, the Christmas Cookie narrative above does this as well. Mollidor, Kelly, Girl-Mom, and my own narratives, clearly demonstrate that young mothers resist, challenge, and transform discourse that stigmatizes them.

What it also demonstrates, however, is that young mothers do not have entirely dependable social support relationships that enable them to feel confident in their abilities to parent. Obviously, different teenage mothers have different resources and varying degrees of support within these. But again, these variables exist in the context of discourse, which overwhelmingly conveys negative messages about teenage pregnancy and mothering. Therefore, if we accept that we are individually and collectively discursively constituted, what (if any) representational and political alternatives exist for young mothers to gain support from? (Cherrington; Breheny, 2005). Is it even possible for young mothers to challenge stigma and stereotypes without feeding into others?

While I hope to add to the discussion with this research, I am not sure that I find myself in any position to answer the above questions with it. Foucault (1981) argued that for every social discourse engaged with a politically produced truth-claim, counter discourse exists in order to challenge its legitimacy. Daaneen’s explanation of stigma reminds me, however, that if one’s experiences are filtered through discourse, so too is the capacity, and the parameters for resisting and challenging discourse.

Dominant discourse stigmatizes and marginalizes teenage mothers, as victims of abuse and poverty, promiscuous, love starved, childish, emotionally unstable, neglected and neglectful, ill informed, welfare dependent, and so forth. Ultimately, I can only speak for myself, yet it seems to me that the mechanisms young women have for rejecting stigma are problematic and paradoxical, when they are examined beyond themes of empowerment. On one hand, the stigma is just plain wrong: girls like me; like Allison Crews, “have raised presidents... messiahs and musicians, writers and settlers” (2001). Teenage mothers are entirely capable of raising well-adjusted human beings; I have one to prove it!

Nonetheless, there seems to be an inevitable cost that stigma and the rules for resisting stigma and marginalization, extracts. I isolated myself from other teenage mothers because I needed to believe I was better than them. I isolated myself from older mothers, who on some level I wanted to emulate, because I also needed to believe I was better than them. I avoided my daughter’s schools, not because I didn’t care, but because I felt so woefully out of place: “How nice, your sister came to pick you up!” or when they did realize I was her mother, it explained any difficulty she might be having. Allison went to French immersion; a decision I know I made deep down because I wanted her to be better than what was expected of me, even though I, without a doubt, lacked the skills and support she needed to succeed in such a program.

I isolated myself from my family as well. I spent years dreading how I would feel when my sister finally became a mother; when everyone in our lives would be happy, and I would feel sorry for myself, and angry that my daughter got the short end of some proverbial stick. At a glance the good mother is...my sister. My sister is in her mid 30s, and married to a lovely man. He is a banker, and she a grade-one public school teacher.

They live in a very nice house three streets over from our childhood house in a middle-upper class neighbourhood in Dartmouth. I'm sort of amused by this...somehow I find these details equally endearing and eye roll worthy.

More than anyone else, my sister was afraid to tell me that she was pregnant, and not without reason. Dread is too strong a word, but I'd been nervously anticipating this day for years. When she called to tell me she was pregnant (with her now two year-old daughter), I congratulated her enthusiastically and wholeheartedly. I can't really encapsulate the mixture of emotions that followed into any obvious verbs though. Sad, happy, excited, mournful, resentful...frustrated that I couldn't simply just be happy, and frustrated that she couldn't either.

In some ways, I spent far more energy than I needed to worrying about this. After I'd gotten the news that she'd had the baby I was relieved and happy, but actually thought, "well, that's that. She won't have much need for me in her life now that she's a mother. I have nothing to offer, except lessons in what not to do". She called me at five in the morning her first night home from the hospital, to tell me she couldn't have any more respect for me; that she just couldn't fathom how I'd done it without a partner, let alone in grade eight. I cannot really articulate what her words meant to me.

At the same time, my anxiety was not without merit. The other phone call that I received from my sister, which stands out in my memory, is Trisha, upset with herself and apologizing to me for telling people, yup, this is the first grandchild, because she didn't want to have conversation after conversation about me being a teenage mother if they were inclined to do the math. I've watched both of my parents, and grandparents reply, yes this is my first grandchild/great grandchild; a slideshow for my grandfather's 80th birthday two years ago, with pictures of my sister, her husband and daughter, yet my

Aunt didn't think to include a single one of Allison and me together; a family tree on my grandparents' basement wall with a big fat blank next to my name for the twenty-years.

Written down, these oversights can feel like small grievances on my part; after all, I know that many were unintentional, and that certain relatives would even be quite apologetic. Still, it doesn't make them sting any less; in fact, it's what makes them sting more. What they also remind me of is that whether or not I was able to convince myself otherwise, I was always a teenage mother, and that despite my age today, I still carry around so much of this stigmatized identity.

I haven't had any more children because I so completely internalized that I wasn't supposed to (have more babies, that's what stupid teenage moms do, and I am not, a stupid teenage mom); I continue to toil away at a thesis that is at its heart designed to prove that I, like every other teenage mother, am the exception. Lastly, I continue to place expectations on my daughter that are grounded in me wanting her to be better than what I was seen to be. I am the exception because she is the exception; she is the exception because I am the exception.

Thinking about teenage mothers' narratives has been a challenging process for me in so many ways. It has demanded that I essentially dismantle a self-identity, and the conscious and subconscious strategies I have used in terms of constructing and maintaining this identity. In looking at other young mothers' narratives it has become quite obvious that I am not some anomaly teenage mother. Whether or not I am brilliant, or earn a PhD might make me exceptional in one sense, but it is the same strategy at play: I was, and still am, a teenage mother trying to convince myself I am a good mother because I am not like other teenage mothers. I simply have some different tools at my disposal. It is difficult for all teenage mothers to challenge stigma, or move beyond it,

because doing so demands that you share in the core representation of teenage mothers as problematic. The cost of doing so is reinforcing dominant discourse, and without even realizing it, undermining your own self-worth along the way.

Alternative possibilities for stigma

“There is a crack in everything, that’s how the light gets in”

-Leonard Cohen

As pessimistic as many of these conclusions seem, there really are some very positive and meaningful implications for me personally. When I think about my overall experience of mothering, it is obvious that I do so with many complex feelings and insecurities. I have certainly felt socially marginalized and stigmatized, and I have played an active role in creating and entrenching these interpretations and insecurities in myself. However, in writing down and reflecting upon these experiences within a broader social and political context, alternative interpretations start to become possible. The parameters and capacity for resisting and challenging discourse simply cannot be as deterministic as I take them to be.

It has taken me a long time to begin to appreciate the possibilities that come from standing outside of the margins of motherhood. I hinted at this with an earlier narrative about cookies and helicopter mothers, but did so from much more of a place of self-defence. I do believe however, that my experience of being so much younger and poorer than the mothers I wanted to be included by, did offer me a kind of freedom. It precluded me from many of the unrealistic expectations placed on these mothers. Even when I was expected to conform, I had more freedom to not conform. As much as I may have wanted to be perfect, I had a license from everyone else not to be. This is a paradoxical

argument to make with respect to social exclusion, yet I cannot dismiss the possibility that it did offer freedom not available to the mothers I felt looked down on by; mothers who, when I reflect on this now, seemed pressured to ‘perform’ motherhood with unrealistic social expectations of themselves.

I recognize that the outsider narrative above is as much conjecture as it is a part of my own personal narrative. Still, I was the mother my sister called when she was exhausted from no sleep, exasperated and in tears trying to get her new born to breastfeed. I bought a plane ticket to Halifax totally taken aback that she would need my help for anything. She’d basically spent her entire life preparing to be a mother; she read all the books, started the education fund in advance, ate the right foods, took the right vitamins and supplements as she prepared to join the rest of her friends with babies, Masters degrees, husbands, big houses, RRSPs, and \$800 strollers. But, she did need my help. She didn’t need it because I necessarily had any more answers for her than the public health nurse, her friends, our mother, or her mother-in-law, but rather, because she didn’t feel vulnerable being overwhelmed with not knowing and trying to figure it out. I am that mother for a reason, and that is such a gift.

Conclusion

Whether we are talking about “wrong-girl”, “wrong-family”, or even, “wrong-society” narratives, approaches to teenage pregnancy and teenage mothers remain ultimately paternalistic in nature. Young women’s voices, self-interpretations, and expert-knowledge are subjugated in favour of the authoritative knowledge of institutions and professionals who, instead, profess to speak on behalf of young women, their needs, and the needs of their children.

I argue that this absence of young women's voices contributes to a lack of insight into their needs, into the needs of their children, and into the social variables that shape their experiences, and the decisions they make (Ordolis, 2007, p. 32). Researchers like Kelly and Mollidor, and grass roots organizations like Jessie's Centre and Girl-Mom have explored these questions by challenging dominant discourses about teenage pregnancy and teenage mothers by including young women's narratives. It is an important body of work that needs to continue expanding counter discourse and alternative positions.

Simply put, to continue subjugating young women's knowledge is to continue constructing and reproducing normative power relations that are harmful to pregnant teenagers, young mothers, and their children. Instead, we need to ask: what can young women's narratives tell us that is not otherwise articulated in dominant ways of conceptualizing and speaking about teenage pregnancy and mothering?

I have attempted to expand on this work, while also contributing new, and unique knowledge in several distinct ways. First, there are significant gaps in feminist research about teenage pregnancy and teenage mothers. In fact, there is shockingly little research given the attention feminist scholars have paid to wider debates about the meanings of concepts like maternity, success, and power (Hirshman, 2005).

Ultimately, it is my position that adolescent pregnancy and mothering present an especially paradoxical and difficult set of questions for feminists. Although feminism's failure to engage with questions of adolescent pregnancy and childbearing is too complex for the scope of this project, it is a direction that I am interested in pursuing in future research. The goal of this particular research has been a contribution to an oppositional body of work about teenage pregnancy and mothering through a feminist lens.

The most obvious contribution my research makes is my researcher-subject positionality. To my knowledge there is no other research by a teenage mother in this vein. For this reason, there are practical limitations of the feminist research that does exist. For example, Kelly, Fessler, and Mollidor have all made important research contributions, but the young teenage mothers in their research are just that; they are young and they are stigmatized, and this cannot help but put them at an incredible disadvantage in terms of the researcher-subject power dynamic. It is an imbalance that is just too extraordinary for any researcher to overcome in my opinion, yet it is a dynamic that has many implications.

Kelly, Fessler, and Mollidor have all concluded that teenage mothers actively engage in resisting stigma by creating positive maternal identities for themselves. It stands to reason that the teenage mothers involved in previous research would continue to carve out these identities, and perhaps even more so in the presence of highly educated women who are sympathetic to their cause, and are ultimately looking to draw attention to more positive narratives about teenage mothers. Again, while it is extremely important, the emphasis placed on themes of empowerment and the “stigma is wrong” narrative in this research is far more complicated than has been explored.

It is unlikely that teenage mothers would be particularly comfortable expressing their doubts to researchers, but even more than this, it is unlikely that young teenage mothers would have the ability to articulate the complex contradictions of their narratives, which puts a researcher in the position of trying to identify and interpret variables that are entirely outside of their realm. I am not arguing that a teenage mother does not have the ability to contextualize and articulate the broader theoretical

implications of her experiences, motivations, identities, but rather, that her ability to do so is simply going to be limited by her age.

For example, when I was a young teenage mother I honestly felt that there were some benefits to mothering on the fringes, yet I was only able to filter my experiences through feelings of anger and exclusion. I would never have been able to articulate this to a researcher though. I could never have articulated my complex reasons for enrolling Allison in an immersion program that I was entirely unprepared and unable to support her through. She struggled so much more than she needed to in school, but I wanted this child of mine to be exceptional because I needed her to be. I would never in a million years have admitted this to a researcher (I was trying to show I was a good mother too), because I could never have admitted it to myself.

The ability to articulate these complexities is just not something that is going to be available to researchers, no matter how brilliant and insightful the teenage mother they happen to come across is. It has taken me over 20 years to understand so much of this, and I am not convinced I would have ever grasped even half of it, had I not spent every single day of the last 6 years battling to articulate these feelings and experiences for this thesis. There is a reason this has been so challenging. It has demanded painfully dismantling an identity I have needed to survive: to be a good mother. I struggled to write this thesis because of this, but perhaps even more so, because I simply could not see or appreciate the value of my own experience, and everything that it has to offer.

CHAPTER 7

CONCLUSION

“There is no influence so powerful as that of the mother.”

Sarah Josepha Hale, American writer

“The Mother is the most precious possession of the nation, so precious that society advances its highest well-being when it protects the functions of the mother.”

Ellen Key, 19th century Swedish writer

Teenage pregnancy and teenage childbearing are understood as problematic and undesirable within Western society, and have also increasingly come to be conceptualized as needing intervention on a global scale. Our willingness to embrace the idea of early childbearing as inherently problematic is paradoxical for several reasons. First, the concept itself has a relatively short history. Prior to the late 1960s or early 1970s, virtually no literature exists on teenage pregnancy and childbearing. Up until this point in history, transgressive fertility and childbearing had largely been defined by a woman’s marital status as opposed to her age. Second, teenage childbearing rates peaked in the 1950s and 1960s in the United States, and 1960s and 70s in Canada. For the better part of the last half-century teenage pregnancy and childbearing rates have, by and large, steadily declined to their present-day historic lows. Essentially, the point at which anxieties about teenage pregnancy and teenage mothers began to arise coincides with the point at which rates actually began to decline.

Finally, society's assumptions about the dismal effects of early childbearing are increasingly at odds with more optimistic research findings. Teenage childbearing is typically considered problematic because of its association with poverty, yet a growing body of longitudinal research suggests that early childbearing is far less costly than previously thought, not only for individual women and children, but also for the taxpayer (Furstenberg, Brooks-Gunn, Chase- Lansdale, 1989; Kelly, 1999; McKay, 2012). What is more, some studies (Hotz et al, 2006; Myrskylä Fenelon, 2011) show that teenage mothers from underprivileged socio-economic backgrounds are actually better positioned in later life than women from comparable backgrounds who wait until their 20s to have children.

DISCOURSE

In order to tease apart these contradictions, I focused on discourse about teenage pregnancy and teenage mothers as my key site of inquiry. I examined discourse as the mechanism by which society frames teenage pregnancy and teenage mothers as problematic, and asked how society employs this mechanism in various ways. I situated teenage pregnancy and childbearing within the broader context of fertility, childbearing, and family formation, ultimately examining the issues alongside key social developments and events including the Industrial Revolution, the Great Depression, World War II, the Baby Boom, the public availability of the birth-control pill, the widespread movement of women into the labour market, and the growing social acceptance of divorce, and out of wedlock childbearing.

Doing so revealed decidedly more complex questions: on the one hand, the social boundaries of normative and deviant fertility and motherhood are fluid and unstable; on the other, they are consistent insofar as the dominant social forces continue to shape and

reinforce these boundaries. The research raises challenging questions about systemic social inequalities, in terms of whom society deems most fit, less fit, and not fit, for childbearing and motherhood. Ultimately I have argued that controlling women's reproductivity is critical to maintaining and reproducing these dominant social forces.

Dual Purposes

On the one hand, the purpose of my research was to critically examine the underlying power dynamics imbedded in discourse about teenage pregnancy and teenage mothers. I examined a significant number of political, popular culture, and scholarly texts in order to challenge taken-for-granted assumptions about adolescent pregnancy, early motherhood, and young mothers. My motivations for doing so, however, ultimately lie in my own experiences and interpretations of teenage pregnancy and childbearing.

A key voice missing from conversations about the 'problem' of teenage pregnancy and childbearing is that of teenage mothers themselves. I argue that this absence of young women's narratives leads to a lack of understanding about the actual lives of young mothers, about their needs, about those of their children, and about the decisions they have made. I argue that it is crucial that we give particular attention to young women's phenomenological experiences of stigma as a social force.

In contemporary Western society, teenage pregnancy and childbearing fall decidedly outside of the parameters of normative fertility and motherhood. This research has argued that stigmatizing and marginalizing pregnant adolescents and young mothers for transgressing social norms has consequences that are not only counterproductive but also harmful to young women and their children.

Drawing on several feminist studies, as well as psychoanalytical theory and autobiographical narrative, I have explored the role that discourse itself plays in shaping and impacting young women's experiences of pregnancy and mothering, and moreover, what its role is in shaping, and compounding many of the obstacles that pregnant adolescents and young mothers already face.

First, pregnant teenagers and young mothers are acutely aware of the social stigma they face. Second, young women do not passively accept their stigmatization, but instead, employ a variety of techniques for resisting and challenging it. Examining the interplay between these two points has been a key focus of my research, insofar as the strategies that young women have available to them for resisting stigma, quite often serve to reinforce the very same stigma.

Avoidance

One strategy that teenage mothers use for resisting stigma is simply to avoid it. This strategy and its implications are far from simple, however. Because the pregnant teenager and teenage mother finds herself in certain places where others do not expect her to be (i.e., a prenatal health clinic, prenatal classes, the maternity ward, playgroups, her own school, her child's school, and so forth), she inevitably finds herself in the position of having to defend who she is and why she is there. From the start this puts young women in a position of self-defence, and quite logically, many choose to forgo this.

For instance, on one level I hid my pregnancy for close to 8 ½ months, in part, because of my inability to fully grasp the situation at age 14, but also because on some other level, I also knew it was just plain bad, and I was afraid of what people would think. When I did finally receive prenatal care, the attending doctor bluntly told me that I

should have kept my legs shut. When I returned to school following the secret birth of my daughter during summer vacation, I also began the first day of grade 9 with the predictable name-calling of slut and whore.

The young woman who fails to pursue prenatal care, or avoid this kind of stigmatizing school environment, is not likely to be seen as engaging in resistance, or attempting to develop or maintain a positive identity. Her actions are likely to be interpreted, rather, as evidence of her unsuitability for parenting, of poor decision-making skills, of her selfishness, and irresponsible behaviour. I have argued that the feelings of insecurity and mistrust that come with this kind of stigma and outsider positionality cannot help but put pregnant teenagers and young mothers at a disadvantage (Stewart, 2009). The result is the reinforcing of negative stereotypes and stigma, and intensified feelings of mistrust and insecurity, and further social exclusion. At the same time, it is also important to take Becker's concept of labelling theory and self-fulfilling prophecy, and Daaneen's work on stigmatized identities, and especially young women's voices into consideration, when questioning whether attempts to address stigma with targeted services and programming for pregnant teenagers and teenage mothers are any less problematic. For example, to what extent do services and programming directed toward pregnant teenagers and teenage mothers place them in the position of having to self-identify as members of a pathologized target group or, alternatively, demand that young women distance themselves in opposition? Does acknowledging this "otherness" force young women to identify with the perceived failures of this "social kind" (Wong, 2000), or actively participate in their own stereotyping? Is there a way forward that does not put young women in the position of having to internalize this stigmatization, or a way out of constructing our own social exclusion?

The Good Mother

It goes without saying that young mothers do not use avoidance as a strategy in any sort of uniform way. Many continue their education in traditional school environments, seek out prenatal care promptly, and participate in their communities in any number of ways. One strategy that teenage mothers use quite uniformly in resisting the internalizing of stigma, however, is carving out positive maternal identities for themselves. Again, while this seems like a logical and straightforward strategy, it too presents certain challenges for young mothers.

Dominant discourse starts from the position that teenage pregnancy and childbearing are problematic, undesirable, and in need of prevention and intervention. We frame this demographic in terms of their deficits, and it is, thus, not surprising that most young mothers prefer to view themselves outside of such a negative model. Drawing on Daaneen, I have argued that the dilemma in carving out a good mother identity for teenage mothers lies in their need to distance themselves from the label teenage mother, and the different negative connotations this label implies (i.e., stupid, lazy, manipulative, tragic, abused, victim, etc.). I have also argued that, by extension, this strategy requires teenage mothers to share the core representation of teenage mothers as problematic, and ultimately, to participate in their very stigmatization by resisting and challenging it.

Challenges

If nothing else, the years it has taken me to complete this thesis speak to its challenges for me as both the researcher and subject. From a theoretical perspective, one of the major challenges was in simply trying to tease apart what troubles society most about pregnant adolescents and young mothers. On one level, the research was a process

of making sense of where particular discourses fall along the political spectrum. For example, for social conservatives, teenage pregnancy and childbearing tend to represent society's declining moral standards. This may mean sexual health education is seen as encouraging teenagers to have sex, as opposed to abstaining before marriage. It may mean men shirking their moral responsibility for their children, or women shirking their responsibility as sexual gatekeepers for preventing a pregnancy in the first place. Where conservative discourse is more likely to espouse the virtues of self-reliance, liberal discourse is much more likely to recognize the value of varying levels of state intervention; be it more sexual health education, easier access to contraception, or other social programming.

The process of unpacking and analyzing particular narratives and ideologies revealed the challenges inherent in trying to assign distinct qualities to distinct narratives, or in trying to order these in any sort of meaningful, or hierarchical way. My attempts to move beyond dichotomizing discourses via a historical analysis did not prove any less challenging.

Despite grounding my research in critical theory from the very beginning, I set my sights on, and pursued a kind of coherence that my theoretical framework was, ultimately, not prepared to give me. It proved to be a significantly more challenging process than simply separating the discursive contradictions and false assumptions from one another; than arguing that teenage mothers provide an alternative to simply saying poor women should not have children; than reaching some definitive conclusion that young mothers transgress parameters of fertility and childbearing rooted in white, middle-class, and patriarchal ideals of success.

While I certainly do not dismiss the arguments above, I suggest that many of these theoretical challenges were, in part rooted in my proximity to the subject matter. If the defendant who represents herself in court has a fool for a lawyer, I am not sure where that leaves the researcher who takes herself on as a research subject. It is certainly not for the faint of heart. While I examined my reservations and frustrations with trying to position myself within my research in the earlier methodologies chapter, it remains a challenging and ever-evolving process.

In the end, the challenge of reconciling my dual role of researcher and subject lies in a personal narrative that is entirely in keeping with teenage mothers strategies for resisting and challenging stigma and marginalization. If I wanted coherent research findings, I wanted them as a shield. For me to ever finish this thesis, however, I needed to unpack the research itself in the context of my personal narrative; my investment in not wanting to be like other teenage mothers, in being exceptional, and ultimately, in being a good mother. At the most conscious level, I just did not want to do this. Somewhere underneath that, I did: I would not have chosen this project otherwise, and I certainly would not have continued with it for this long.

By examining the relationship between discourse and young women's phenomenological experiences of pregnancy and motherhood, it is clear that framing pregnant teenagers and young mothers, and their children as undesirable and problematic has harmful consequences that further compound the many challenges already faced by this social demographic. Previous ethnographic studies with younger mothers clearly demonstrate this, and my own research shows that these effects have the potential to remain long lasting, and ricochet in many different directions throughout the lives of young mothers and those of their children.

We need different language and different concepts for thinking and speaking about adolescent sexuality, pregnant teenagers, and young mothers and their children. We need to move beyond stigmatizing and marginalizing young women and their children through a prism of statistics, stereotypes and deficits, to move beyond focusing on flaws and limitations, and beyond simplistically setting young mothers against older mothers. Teenage mothers are not unlike older mothers: they too are much more likely to thrive when they are confident in their abilities, have supportive networks in place, and a community of peers with whom they can share their experiences (May, 2011).

Future Research

I continue to reflect upon my interpretations and representations of early motherhood and stigma, but do so also contemplating the significance of the theoretical tools and language I used for thinking and speaking about my research. Throughout my research, I struggled to make sense of my personal experiences and self-interpretations within a decidedly relativist theoretical framework. Ultimately the process revealed unique and valuable insights for me personally, and will hopefully provide useful insights for others interested in studying teenage pregnancy and teenage mothers.

In thinking about future research on teenage pregnancy and childbearing, discourse and stigma, I suggest that young women's phenomenological experiences, and self-interpretations of teenage pregnancy and mothering outside of a Western context, might offer valuable insights into thinking about young mothers in less stigmatizing ways here. At the same time, in considering extending my analysis beyond a Western scope, I am left to question how useful, or even relevant the theoretical tools I have drawn on for this project, might be outside of the Western intellectual tradition. For example, would

such theoretical values be useful, or even appropriate for analyzing teenage pregnancy and young mothers in a country like South Africa, or for providing insight into the complex tensions between 'traditional' cultural values, neo-colonialism, and international family planning initiatives? Moving beyond the cultural, and into the broadest philosophical sense, however, childbearing is ultimately a social ritual that provides humans with purpose, affirmation, significance and meaning, like no other. In this sense, examining the dynamics of women's sexuality and reproductive powers, and the complexities of motherhood as a social activity (perhaps through an analysis of teenage pregnancy and motherhood) is as expansive or specific an endeavour as one's inquisitiveness, imagination, theoretical tools and limitations allow for.

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