Teenage Parenthood:
What's the Problem?

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Challenging the irrational, amoral and anti-social construction of the 'teenage mother'

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On election to power in 1997, the Blair administration moved teenage pregnancy to a central position as part of its agenda to tackle 'social exclusion'. Unlike the past, teenage pregnancy was problematised in apparently amoral terms: the mother's age, not her unmarried status was emphasised, and her sexual behaviour was framed as negatively affecting her and her baby's health and life chances rather than threatening the moral standards of the nation. Although the 'social exclusion' agenda posed the problem as one experienced by the 'socially excluded', it also put forward the existence of the 'excluded' as a problem for the rest of society, threatening the economic and social standard of living of the 'included'. Within this context, teenage pregnancy and motherhood was cast as being bad for teenagers, bad for children and bad for society.

This chapter explores the construction of the 'teenage mother' in policy discourse, and brings to bear upon it the findings from a qualitative research project that investigated the contemporary experience of teenage motherhood. It will be argued that qualitative studies such as this challenge the recent policy construction of the teenage mother in two significant ways. First, qualitative evidence calls into question the redefinition and the expansion of the category of the 'teenage mother' as a social problem. Second, it forces us to reconsider the way in which young motherhood has been constructed as both a cause and an effect of various 'deficits' at the level of individuals: in familial relationships, in particular, conceived of as a deficit of 'parenting skills'; in the rationality and moral agency of teenagers who become pregnant; and in the ability of those resistant to policy intervention to acknowledge and ameliorate their 'problems'. These misapprehensions, it is argued, result in policy seeking to engage with young mothers as inherently inadequate and in need of intensive state intervention, to reconstruct them as competent parents. Teenage pregnancy policy is setting important precedents in labelling as 'inadequate' a growing number of parents, pathologising them as a threat to their own children and as

a cause of broader social problems. Such thinking is intolerant of varied family beliefs and practices, and dissolves the individual parent and child as subjects into mere embodiments of 'risk factors'.

Constructing the problem of teenage pregnancy

Expanding the category

A relatively unnoticed but significant feature of New Labour's teenage pregnancy strategy is the expansion of the category of 'problem young conceptions', from the under-sixteens to include the under-eighteens. Not only does this instantly inflate the perceived problem, it also redefines it. Older teenagers are far more likely to take a pregnancy to term, so the expanded category is very important in shifting the emphasis from the problem of girls experiencing unintended conceptions to the problem of young women pursuing their pregnancies to term and producing children. Although young, unmarried motherhood has a long history of moral condemnation, problematising pregnancy solely by virtue of the mother's young age is a more recent phenomenon. In current thinking, the mother's age is regarded as far more significant than her marital and relationship status.

So what does the age of the teenage mother signify? Within policy, claims are made that the category 'teenage' is strongly associated with measurable disadvantageous outcomes for young mothers and their offspring (Social Exclusion Unit 1999; TPSU 2005; NHS Health Development Agency 2003). The age of the teenage mother is argued to be significant because it is associated with inadequacy in her ability to care for the child owing to her lack of economic wherewithal, her emotional immaturity and her lack of education. While there has been a long-standing concern for the potentially negative impact of young motherhood on young women's lives, more recently thinking has shifted to a totalising narrative of harm to the child and an increasing problematisation of the young mother as a parent. The 'problem' therefore becomes expanded to include *all* teenage mothers and *all* of the children born to them. In recent years, critics have challenged these claims, arguing that the disadvantages associated with young motherhood are caused by the mother's socio-economic position, not her age (Ermisch 2003; Ermisch and Pevalin 2003, 2005).

The effect of a 'risk' framework

Another way in which the scale of the problem is expanded is noted by Dodds (forthcoming) in her article tracing the development of social exclusion policy.

Dodds illustrates how New Labour policy has shifted from concern with those who are 'excluded' from society's gains to a concern with those deemed to be 'at risk' of social exclusion. The influence of risk discourse within the context of teenage pregnancy has only recently begun to be explored (Dodds, forthcoming; Macvarish, forthcoming) but one of its effects is to expand concern from measurable, existing social problems to problems predicted in the future. In the case of teenage parenthood, this is embodied in the conceptualisation of babies born to young mothers as facing particular disadvantage through childhood and into adult life. This is evident in the 1999 Social Exclusion Unit report which launched the Teenage Pregnancy Strategy:

> Teenage parenthood is bad for parents and children. Becoming a parent too early involves a greater risk of being poor, unemployed and isolated. The children of teenage parents grow up with the odds stacked against them.
> (Social Exclusion Unit, 1999)

In the ensuing policy literature, a repeated claim has been that babies born to teenage parents will remain within their parents' social circumstances, held back by the stunted educational career of the mother and living within the limited economic opportunities of the community into which they are born. Additionally, the children of teenage mothers are cast as biologically 'vulnerable': a relationship is drawn between young maternal age and low-birth-weight babies, higher rates of infant mortality, a higher likelihood of being exposed to 'risky' antenatal behaviour such as unhealthy diets and smoking, and lower rates of breastfeeding. Thus the body and the brain of the baby are constructed as 'at risk'; it is claimed that low birth-weight (in fact only associated with the very youngest mothers) is associated with low-IQ (Bamfield 2007). Young mothers are also claimed to be more prone to post-natal depression, which is said to undermine maternal bonding and, in turn, claimed to affect the baby's neurological and emotional development. In this strongly deterministic framework, the baby is constructed as inherently disadvantaged at conception by virtue of its mother's age. The teenage mother is therefore posed as a risk to herself and to her baby. These apparently individual, privatised risks are 'socialised' through predictions of the mother's dependence on welfare and the multiple disadvantages which will render her child socially costly and potentially a threat to social order.

Such is the strength of the idea that young parenthood is inherently disastrous for mothers, babies and society, that at times policy has seemed to verge on a 'zero-tolerance' position on teenage pregnancy. In 2006, Minister for Children, Families and Young People, Beverley Hughes, took the unusual step of publicly responding to research claiming that some teenage pregnancies were planned and that teenage parenthood could have positive outcomes (Cater and Coleman 2006). A lengthy ministerial rebuttal was circulated and Hughes gave statements to the media:

> This is an unfortunate study which, on the basis of a very small and carefully selected sample, suggests that teenage pregnancy can be a positive option for some young people. We reject that view completely. There is overwhelming evidence that, overall, teenage parenthood leads to poorer outcomes both for teenage mothers and their children.
>
> (Beverley Hughes, BBC News Online, 17 July 2006)

In this way, on the basis of 'the evidence', policy asserts that all teenage mothers and their children are problematic.

The teenage mother as lacking in rationality or moral agency

Although the teenage mother is constructed as both parentally and socially 'risky', she is not held to be morally culpable for her behaviour. Because the teenager occupies the awkward position of being both adult and child, her autonomy or agency is often characterised as 'risky'. The teenage mother is a particularly potent symbol, therefore, of this 'risky' subject, who is not capable of exercising moral or rational autonomy, but rather, in her actions, expresses the influences upon her from her environment or her past. Rather than making 'wrong choices', teenagers deemed 'at risk' of teenage pregnancy are constructed as being 'vulnerable' to the impacts of environmental and, increasingly, parental factors (NHS, 2003). As Castel points out, the new strategies of governance formed around the concept of 'risk', 'dissolve the notion of the *subject* or concrete individual and put in its place a combinatory of *factors*, the factors of risk' (Castel, 1991: 281).

Some aspects of risk discourse tend to emphasise 'raising awareness' and the dissemination of information so that individuals can make 'informed choices' based on an assessment of the risk. However, teenagers are not commonly constructed as working well with knowledge or as capable of acting rationally

in their own best interests. High profile stories of very young teenagers having babies exacerbate prejudices that teenage parents are generally feckless, ignorant and immature. Knowledge of risk, which might be accepted as of advisory benefit to older populations, is less confidently held to produce the desired outcome among teenagers. Unplanned teenage pregnancies are blamed primarily on a lack of knowledge about sex and contraception or inadequate skills in negotiating sexual relationships. Planned teenage pregnancies are attributed, amongst other things, to naïvety about the demands of parenthood, or dysfunctional families and communities where traditional gender roles, a 'benefits culture' or low expectations thrive (see Arai 2003, 2005, for a critique of such claims).

The second half of the chapter draws on evidence from qualitative research to call into question the assumption that the teenage mother is inherently 'vulnerable'. The findings also challenge her construction as lacking in moral or rational agency, and challenge the tendency for policy discourse to reduce her to a mere embodiment of 'risk factors' and dysfunctions.

The problem of 'poor parenting'

The 'social exclusion' agenda increasingly explains 'exclusion' as the product of dysfunctional interpersonal relationships, in particular the relationship between parent and child. In the past three years, 'poor' parenting has become a key component of political explanations for the perpetuation of poverty and inequality. What Furedi (2001) has termed 'parental determinism' has come to dominate articulations of concern and shaped proposed solutions to an expanding range of problems. New Labour Health Secretary Alan Johnson stated to a conference of the relationship counselling charity Relate in 2007:

> Crucially, the quality of a child's upbringing plays a *colossal* role in determining what heights he or she will eventually be able to scale. At its *best*, a family's love and encouragement will provide a child with the confidence and self esteem to succeed. At its *worst*, and for a small minority, the experience can leave lasting scars … Parenting outstrips every other factor: including social class, ethnicity or disability—in its impact on attainment.   (Johnson, 2007, emphasis in original)

In teenage pregnancy policy, the teenage mother's 'exclusion' is frequently explained by her own parents' attitudes and behaviour. For example, it is claimed that teenage motherhood is inter-generationally transmitted from mother to

daughter or is a response to paternal absence. Parents are also said to lack the skills to communicate with their children about sex. In 2005, the Minister responsible for the strategy to reduce teenage pregnancy announced that the time had come to 'put parents at the heart of the teenage pregnancy strategy' (Hughes, quoted in *The Guardian*, 26 May 2005), admitting that its targets were unlikely to be met because there is no 'magic bullet from the government side and local authority side and all the partners on the ground' capable of making 'another substantial step forward'. She went on to say, 'we really need parents to now see themselves as making an absolutely unique and vital contribution to this issue … It is a contribution that I don't think anyone else can actually make' (op. cit.).

While this attempt to pass the responsibility for future policy success onto parents seems to flatter them as having a unique role, it can also be read as an attempt to blame parents for policy failure and as a statement of intent to target 'inadequate' parenting with policy interventions. Indeed, the Minister's words take a didactic turn when she suggests that, 'parents could start by asking their youngsters about sex education lessons at school, or perhaps discussing peer pressure about fashion, or talking about their friends' (op. cit.).

The implication of these ministerial statements is that the UK's 'shameful' (Blair in SEU, 1999) rate of teenage pregnancy can be explained by high numbers of parents neglecting to talk to their children about sex and relationships. This ministerial interview is also exemplary of policy defensiveness towards accusations of 'the nanny state' and 'old-fashioned' moralising. As the *Guardian* journalist writes, 'Ministers stress that they will not present parents with a 'birds and bees script' to run through with their teenagers, nor encourage parents to advocate abstinence' (op. cit.).

However, by moving away from rationales that are perceived to lack legitimacy, policy moves into the even more intimate terrain of how parents talk to their children about intensely private matters. The tendency for working-class teenagers to exhibit higher rates of parenthood than their middle-class counterparts is attributed to the inadequacies of their own parents' 'emotional literacy'. The solution is governmental intervention to improve the 'skills' and 'increase the confidence' of parents to enable them to talk to their own children. There is no evidence that teenage pregnancy is 'caused' by parental emotional 'illiteracy' and our findings will show that teenagers who become pregnant have often had very open and frank discussions with their mothers about sex and contraception. Reducing the explanation for teenage pregnancy to the level

of intimate family relationships obscures the proven patterns that have much more convincing structural explanations and which demand political and economic solutions (Arai 2003, 2005; Lee et al. 2004). Blaming parents also 'opens up' people's personal lives to experimental state interventions in intimate relationships.

The teenage mother as evidence of 'family breakdown'?

A narrative that further underpins the shift in focus to parental inadequacy characterises the contemporary parent as being particularly isolated because of an alleged falling away of familial support. This decline is attributed to a number of factors including geographical mobility, women moving into the workforce, changing family forms, the burden of caring for elderly relatives and changes in the context of parenting, for example, due to technological developments (Every Parent Matters 2007). The construction of family life as being subject to unprecedented levels of strain is one that has become a 'commonsense' cultural truth. According to the government's Every Child Matters and Every Parent Matters reports, this has led to unprecedented need and demand for state and professional advice.:

> Government needs to consider carefully its role in enabling all parents to play a full and positive part in their children's learning and development. We want to create conditions where more parents can engage as partners in their children's learning and development, from birth, through the school years and as young people make the transition to adulthood. We are pushing at an open door here—75 per cent of parents say they want more help.
> (Alan Johnson, cover letter to the launch of Every Parent Matters report, 15 March 2007)

If parenting is more difficult in general then logically it must be even more difficult for teenage parents who must be particularly lacking in the resources and emotional maturity to cope.

Edwards and Gillies (2004) argue, however, that although some parents express the view that family support has lessened relative to the past, the policy perception that profound social changes have undermined family practices to such an extent that they need to be reconstituted via a 'pedagogical relationship' between parents and state agencies is out of step with the views of most parents.

Their study found that while most parents (with the notable exception of minority ethnic parents) viewed the state rather than family and friends as the most appropriate source of financial support and housing provision for those in need, the family was seen as most appropriate for providing child care, emotional support and advice about child health and behaviour. Interestingly, middle-class families were more likely to view the family as having become more fragmented (Edwards and Gillies, 2004: 643).

> Family, followed by friends, are (still) regarded as the people to turn to for most childrearing issues, with 'experts' only providing practical help and advice about long institutionalised areas of children's lives.
>
> (Edwards and Gillies, 2004: 627)

When we turn to the findings of our qualitative study, these viewpoints are echoed in the evocation of family support as overwhelmingly important in coping with young parenthood.

The qualitative challenge to the policy construction of the 'teenage mother'

So far we have discussed the way in which the teenage mother is conceived of in policy discourse. Qualitative research throws up a more complicated picture of the reality of life as a young parent. It brings to light alternative meanings attached to motherhood by young parents and their families that challenge those prevalent in policy discourse. The findings question the policy version of teenage motherhood in a number of significant ways, each explored in turn below. First, the very construct of a coherent category of the 'teenage parent' is disputed by the teenagers' diverse circumstances and their own self-definitions. Second, the picture of the peculiarly 'isolated' and 'vulnerable' teenage parent who requires intensive professional support is contradicted by descriptions of familial involvement both before and after the baby's birth. Finally, the portrayal of the teenage parent as the passive embodiment of 'risk factors' rather than being a moral and rational agent in her own right is also challenged by the young mothers' accounts of their decision-making regarding contraception, proceeding with the pregnancy and becoming parents.

Young parents were interviewed across the county of Kent in the South-East of England between December 2004 and March 2006. Pregnant teenagers aged between thirteen and eighteen were recruited, primarily via midwives, during the

final trimester of pregnancy. Seventeen of the original thirty-five respondents were then followed up and re-interviewed around the time of the child's first birthday to gain information about their experiences of postnatal support and care. Male and female interviewees were sought, but most respondents were single females. All of the respondents were 'white-British' and most had lived in Kent since birth. The material discussed below is drawn from both the antenatal and postnatal wave of interviews with young mothers. The interviews with young fathers will not be discussed here because the chapter focuses on the particular policy construction of young mothers. However, many of the views expressed by young mothers were echoed by their partners. The age indicated in brackets following each quotation is that of the mother at the time of interview.

The 'teenage mother' as a homogeneous category determined by age

Young parenthood may be associated with particular socio-economic and educational circumstances over a broad population, but qualitative studies such as this one uncover the heterogeneity of individual lives. The pathways into teenage parenthood among our respondents were diverse and complex, and therefore very difficult to comprehensively capture and explain. The ways in which young parenthood was dealt with by individuals and their families were also varied, with few patterns formed along the lines of maternal age. Most displayed considerable fortitude in coping with a multitude of issues and seemed content with a minimal level of formal support, while some were more enthusiastic about state-provided services. All valued straightforward guidance with practical and financial matters such as benefits and, housing, but even here, some prided themselves in finding their own way through bureaucracy while others felt let down by inefficient assessment procedures. While some of the mothers were keen to return to education or work either for reasons of sociability or for financial independence, others were protective of their time at home with a young child in the early years.

Some respondents found peer support groups targeted at young parents very useful in making them feel more normal and less judged, while providing practical, experiential advice. Others did not identify with other 'teenage' parents at all, challenging the value of emphasising a homogeneous identity and experience:

I didn't really go to that because I felt like, you know, I'm eighteen, I'm not that young if you know what I mean. I can do it myself because I'm quite independent … I don't know, I didn't really take much interest. I thought young and pregnant support would be like young people, like fourteen. You're eighteen years-old, you're older and you're more … not everybody's the same, but like you're more aware rather than when you're fourteen years-old. Some people know what they're doing and some people don't, I suppose but when you have a baby it all comes natural. No matter how much people tell you, you never do what they say. You end up doing it your own way anyway.   (18 years, antenatal)

Given the dominant political and cultural problematisation of teenage parenthood, there seemed to be a strong rationale for the mothers distancing themselves from rather than identifying with the category. For one girl, 'coping well' offered a refutation of belonging to the category of 'too young' for motherhood:

I think if you're able to cope with it then I wouldn't say I was young. I mean I've obviously … I think I cope well and I've been able to look after her and give her everything she needs so … you know?
(16 years, postnatal)

Being 'lumped together' with thirteen and fourteen year-olds was also perceived as infantilising and conflicted with familial and community beliefs that cast young parenthood as something normal rather than deviant.

The 'teenage mother' as the product of inadequate familial relationships

As discussed earlier, in policy and broader public discussion, teenage pregnancy is represented as a symptom of family or social breakdown and inadequate parent-child communication, particularly concerning sex. Our findings challenge both of these conceptualisations.

Parental communication about sex

Our research found a surprisingly high level of maternal intervention in the sexual development of the young mothers. In many cases, mothers had proactively encouraged their daughters and their sons to use contraception and

in some cases had taken them to sexual health clinics or GPs once they thought their child had reached an age when sexual experimentation was likely:

> Well my mum said about me going on to the pill … (*Int*: Were you in a relationship at the time?) No, she just thought it was the best time, at the age of fifteen, in case I did decide to have sex or whatever and then she would feel happy about herself by helping me by getting on the pill instead of just letting me get on with it and going through all that stuff too early. (18 years, antenatal)

Some mothers seemed highly motivated to be open about sex from a young age:

> My mum is quite open about stuff like that because her mum never told her anything … So she wanted to make sure we were all informed and that … She was showing us a book and she was trying to get us to read it with her but we were laughing too much because we thought it was too funny … I was about seven. (18 years, antenatal)

Some of the girls' mothers had been pregnant as teenagers themselves and were concerned to prevent their daughters from following a similar path:

> She said that she didn't want me to go the same way she did … I think my mum was the one that explained it the best, because you can relate to your parents, can't you? (18 years, antenatal)

In the case of a girl who was estranged from her natural mother, her step-mother played an equally supportive role:

> I've spoke to like my step-mum quite a lot … I wouldn't feel embarrassed to talk to her if I had a question or something … I would ask her general stuff but when I started having sex I would tell her as well. (16 years, antenatal)

Perhaps surprisingly, grandparents could also be important sources of advice, whether instead of a parent or as well as a parent. This seemed to be so in families where grandparents had been very involved in the teenager's life:

My mum was a young mum herself … So she's more like my older sister and I don't go to her about anything because I'm too embarrassed. So I ask my nan. And my nan was the one that came to family planning with me … she said, "right, we'd better get you on the pill" and she took me down the hospital and that was it.   (18 years, antenatal)

Family support during pregnancy

One of our key findings from the antenatal interviews was the centrality of family support to the decision to proceed with a pregnancy and the ability to cope with becoming a young parent. In most cases, this support had continued, although by the time of the second interview many young parents were making the transition to greater independence. Families tended to normalise the pregnancy experience, creating a protective and supportive shield to buffer the negative stereotypical image. Many of the young parents described relationships with their parents as improving following their pregnancy:

With my mum, it's made us closer because I mean before I even moved out, we hated each other … not hated each other but we just really did not get along. Everything was an argument. We could never talk to each other. When I moved out it got easier. I fell pregnant and I think it got easier. But as soon as I had her we were like best friends—you can't separate us now!   (16 years, postnatal)

McDermott and Graham (2005) also found that the experience of pregnancy and motherhood often helped to repair mother-daughter relationships which had previously been fraught and conflictual.

During the pregnancy, mothers often played a vital role in calming the girls' fears and reassuring them from their own experience that things were progressing normally. Many of the girls anticipated their mothers playing a very active role in helping them care for the new baby, whether or not they were living together:

I normally phone my mum … and say 'look, you know, the baby's not moving'. And mum will be like, 'you're alright' … Because obviously, you know, you get told everything by loads and loads of people but you only really listen to your mum's advice.   (17 years, antenatal)

Having lost her mother at a young age, one girl's older sister was a vital source of support and affirmation even though she had initially tried to encourage her younger sibling to have a termination:

> She quite likes to come to the midwife and hear the baby's heartbeat. She loves hearing the baby's heartbeat, just to make sure she's all right ... My sister loves babies ... She can't wait to hold my baby. She keeps shouting at my belly saying, 'come out now, I want to give you a cuddle'. She felt her kick for the first time the other day.   (16 years, antenatal)

In the antenatal interviews, family was overwhelmingly cited as the most helpful source of support during the pregnancy and was anticipated to be essential to coping after the birth. Parental support and that of the wider family, including witnessing other family members at close hand cope with young parenthood, seemed to normalise the experience and make it seem viable.

Family support in coping with parenthood

Financial dependence on their own parents was a strong feature of many of the young mothers' lives, whether in the provision of housing or material support to supplement welfare payments. Grandparents were more often a source of financial support than the father of the child. There were descriptions of families being very unhelpful, but these were the exception. For example, one girl's mother and sister were violent alcoholics and she moved out early on in the pregnancy. However, she was taken in by her boyfriend's family who were extremely supportive. Another girl, whose mother had died and who had been caring for her chronically ill and sometimes violent father was supported by her siblings in getting re-housed away from him once she became pregnant. Her relationship with her father subsequently improved and he was pleased about becoming a grandfather. Very few teenagers were left without any family support.

From providing a welcoming reaction to the news of the pregnancy to passing on second-hand baby equipment, the wider family can be very important to young parents' sense that they will be able to cope in the future. Like Speak (1995), we found that young mothers spent a large amount of time in their parental home even after getting independent accommodation. We found families providing childcare assistance, child-rearing advice, emotional support, financial assistance, housing and transportation. Most of the young parents described feeling indebted to their families, especially their mothers. Support

was often forthcoming not just from the maternal grandparents but also from the paternal grandparents, who could also act as mediators between estranged or antagonistic young parents. Support was substantially material—especially providing housing and additional financial support, but also practical in providing childcare, freeing the girl to return to education or work, or offering respite from the pressures of being a parent:

> It's like my grandparents were so made up by him … they bought the carpets for us.   (16 years, postnatal)

> I mean we've had a lot of support from my family and … from members of his family and they have helped us out a lot. And my mum has been paying for me to have driving lessons … And she's paid for my car … So really it's just been family members that have helped us. We've had no real help from like the council or the state and it was really hard to get information about stuff we were entitled to.   (17 years, postnatal)

Another important role of family was in providing experience of babies and young children. Some of the respondents had siblings who were much younger than themselves and those who did, felt that parenthood was less frightening because of their direct experience of caring for small children:

> My mum's got five children but like I've got three sisters and a brother so I would ask her, my mum, things about it and she would just tell me her past experiences like through her pregnancies and what happened.
> (18 years, postnatal)

Others saw family members cope with pregnancy and parenthood, often at a young age. One girl's observation of her cousin positively influenced her self-confidence as a future parent:

> Looking at how she copes has given me ideas on how I'm going to cope … Because I was thinking, oh how am I going to do it? I've got my own responsibility now at the end of the day. What am I going to do? But actually seeing her cope has made me think yeah, think positive, you can actually do it. If you put yourself down obviously you're not going

to be able to do the things, but seeing her do it has made me a lot more confident.   (18 years, antenatal)

The following respondent's brother became a father at a very young age, but speaking to him had confirmed the positive meanings to be found in parenthood:

> I mean seeing my brother bring up a baby, it was difficult, you could see it was … Well his girlfriend was actually fourteen and he was fifteen so … And when I first told him I was pregnant he said it is hard but he said at the end of it it's worth it … It is going to be hard but I think because we're both young we're going to be able to enjoy it more, seeing them grow up and doing the things that we want to do with the child … I'm not gutted that I'm pregnant this young but it would have been nicer to do it in a few years time.   (16 years, antenatal)

For most of our interviewees, professionals were looked to only to fill the gaps in expertise in the family network, usually identified as medical expertise, specific pregnancy and baby advice, and accessing welfare state benefits. In a review of the literature on teenage parents, McDermott and Graham (2005) found that young parents consistently make use of families and their own 'personal capacities'.

The 'teenage mother' as lacking moral and rational agency?

Pathways into pregnancy

Many of the young mothers spoke of being far more proactive in seeking contraceptive precautions than the policy picture presents:

> I put myself on the pill when I was 15 … I only put myself on the pill because I had read in these little books that it helped with your periods, like stops them being so heavy and stuff so … I went to my doctor and asked to be put on to the pill.   (18 years, antenatal)

> When you're like fourteen or fifteen years-old you see boyfriends and whatever and I thought I was quite sensible getting on the pill … I was

seeing a boyfriend at the time ... Although we wasn't intimate or anything like that, still it's better to be safe than sorry.   (18 years, antenatal)

I was worried about getting pregnant most of all actually, because I really didn't want it to happen. So I used to go ... and find out, and places that I could go to find out and talk to someone about it and they told me like all the things I needed to know.   (15 years, antenatal)

From these responses, a complex picture emerges of how pregnancy occurs which suggests that in their levels of knowledge, sexually active teenagers who get pregnant may not be so different to those who avoid pregnancy or who have abortions. Surprisingly high levels of contraceptive use were reported, but because this was not consistent over time, the risk of pregnancy was still high. Other studies (for example, Luker 1996) have shown that it is not ignorance or an unwillingness to use contraception that leads to pregnancy, but rather changing patterns of use within relationships and through different relationships, bound up with the complicated social and emotional vagaries of adolescent intimate life. Luker writes that use of contraception tends to be 'relationship specific' and sexual activity may be sporadic and unpredictable, making contraceptive use more difficult (Luker, 1996).

The transition to parenthood

There were varied reactions to discovering the pregnancy and this variation continued in the way the mothers came to terms with the situation. Some embraced it as a positive experience very early on, while for others there were continued feelings of regret about the timing of the pregnancy, mixed with excitement about the future. Few of the girls regarded the timing of their pregnancies as ideal. Although they did not regret having a baby, many did regret becoming pregnant at a young age:

It's just stupid getting pregnant at a young age. I wish I'd never got pregnant, I didn't want kids but when you know you've a person growing inside you, you don't want to get rid of them.   (16 years, postnatal)

One of the couples admitted during the interview that they had planned to have a baby but had not dared to tell anyone else this because they assumed

they would be thought of as foolish and irresponsible. Although most of the pregnancies were not described as planned, some respondents were still excited and pleased, seeing the pregnancy as an opportunity to change their lives:

> I didn't want to get rid of it. I don't know why. It's just a strange feeling but I just wanted to keep the baby so ... at the time I was only eighteen and I thought people would be like well you're only eighteen, you're not old enough to have a baby, you're not mature enough. But I was just ... I didn't really care at the time. I wanted to prove to myself, and prove to other people, that I could do it. (18 years, postnatal)

The meaning of parenthood to young parents

A strong current running through the interviews was optimism that parenthood could provide a 'new beginning' and would allow the teenager to make the transition to adulthood in a way that might meet with approval from others. Even if getting pregnant was seen as an unfortunate accident, proceeding with the pregnancy was generally seen as a good thing by those surrounding the teenagers, and a number of them had clearly experienced affirmation that had not been available to them during their sometimes troubled adolescences. It was important for the girls to be able to see themselves as having made the right decision to proceed. Disavowing abortion and accepting responsibility for their 'mistake' allowed them to transform the pregnancy into something positive. These findings are in accord with those of McDermott and Graham (2005), who found that motherhood was an opportunity to enter into adult status and to take on the affirmed moral identity of the 'good mother'.

A number of the respondents described embracing the pregnancy and the prospect of parenthood as an opportunity to transform themselves and their lives. For some this was described as a transformation in their identity from 'bad girl' to 'good mum':

> I just think over the past like seven months I have grown up so much ... everybody has said to me you know you've grown up so much. You've got a beautiful place. You've got a lovely boyfriend who would do anything for you. You've got a baby on the way ... We're all really proud of you. And it's nice to be praised for that instead of going, 'you're out of order. You're all wrong. You do this and you do that'. (17 years, antenatal)

I've got life in a different perspective altogether now, I've changed my attitude totally. I used to be a little bastard before I fell pregnant. Proper naughty, mouthy, always in trouble, just naughty. Just getting myself in trouble, going out fighting all the time … and now I've got pregnant I've changed my mind totally, it's like turning your life around, when you've got a baby it's not like a part-time job is it, it's like a full-time thing you have to do really when you've got a baby. You have to have a straight head … you have to look after the baby yourself if you decide to keep it.

(16 years, antenatal)

For others, having a baby promised to bring a more internal sense of meaning and purpose to their lives:

Because I wasn't really doing a lot with my life … and I thought to myself to have a child would give me something to have and you know to … not live for but you know what I mean? So that was one of the reasons … well one of the main reasons. And yeah I just … we just decided that's what we wanted.

(18 years, postnatal)

Although strongly rooted in systems of meaning about babies and parenthood and, in most cases, supported by family networks, for most of the interviewees, independence was highly valued and was most commonly understood as being demonstrated by autonomous problem-solving, 'coping well' or in producing a happy, 'well-behaved' baby:

I like to be independent. I always have. I would rather myself go without than have to ask someone … I always have been … I would rather do something on my own than have someone help me. I've always been like that.

(16 years, postnatal)

One young mother had been living at home in the early months after birth but had then moved into a flat of her own. She attributed her desire to breastfeed in part, to her need to draw a boundary around herself and her baby, marking the child as her own:

I loved living with my mum. I loved it … But I like my independence so I like being on my own as well … they seem to just take over and now

I'm on my own it's me and her so we get bonding sort of thing. I think that's why I breast fed as well, because everyone seemed to take over but I knew they couldn't take that over … Me and my mum are very close so it was just like she thinks she's one of hers basically but I was just like she's mine!

(18 years, postnatal)

The lived experience of young mothers that emerges from qualitative research such as this, challenges many of the fundamental claims of policy. It calls into question the very category 'teenage mother' by revealing variations of experience and circumstance. Simplistic models of 'ignorance' or 'vulnerability' fail to capture the young mothers' complicated descriptions of their pathways into parenthood. The picture painted by young mothers of their familial relationships is very different from the policy one of family breakdown and 'inadequate parenting'. The meanings attached to the baby and to motherhood by young mothers and their families are not only absent from policy but actively denied by policy-makers.

Conclusion

In policy terms, the teenager who is 'at-risk' of pregnancy is the victim of 'low self-esteem', 'low aspirations' and 'inadequate parenting'. There is little space in policy for the idea that some individuals may simply wish to have children young or, if they find themselves accidentally pregnant, may value the child's life over their own adolescent fulfilment and gratification. Policy has a problem with finding meaning in teenage pregnancy and motherhood other than the acting out of dysfunctions and risk factors. As the findings of many qualitative studies show, however, whether planned or unplanned, and while difficult, parenthood offers hope of profound meaning to individuals, some of whom will be young.

The exercise of choice in the pursuit of a liveable moral identity, albeit in circumstances of limited real opportunity, suggests that for some young people, young parenthood is an effective way of achieving an adult social position, of fulfilling certain ambitions to create or enrich a loving family, and to move them on from a position of stasis in relation to formal education and the labour market. Many recent qualitative studies of teenage parenthood have found similar 'positive' experiences. In addition to the contributions to this book, Seamark and Lings (2004) found that becoming a mother during the teenage years was associated with an increased focus on career and life satisfaction. Coleman and Cater's (2006) study of planned parenthood found that having children was experienced as a source of satisfaction and fulfilment rather than as a cause

of social exclusion. Wilson and Huntington (2005) question whether young parents themselves feel excluded, positing that it is more likely that they see themselves as being integrated into society by having children.

An alternative way of understanding young parenthood amongst working-class teenagers is offered by Bynner et al. (2002), contextualising it within a dual framework of 'fast' and 'slow' lanes to adulthood. Middle-class adolescents follow a slow, linear path with assumed progression from school, through higher education and into successively better-paid employment, while working-class adolescents are typically in a fast lane, without the mediations of progressive stages and without the surety of 'career' and improved circumstances as time passes. Geronimus (1997) suggests that for young people from poor backgrounds, having children young makes sense because they can still rely on intensive familial support; they have no guarantee that should they postpone parenthood they will be in a more secure financial position. This is not to suggest that amongst our sample, any more than a few of the pregnancies were planned. However, taking contraceptive risks that made pregnancy more likely, and deciding to continue into parenthood once the pregnancy was discovered, were choices shaped by a broader awareness of life's options, familial support and the young person's assessment of their own ability to cope.

The strengthened symbolic presence of the 'teenage mother' in policy and public discourse in recent years owes much to her dual status as both child and parent at a time when anxieties about both are peculiarly heightened (see chapter nine). The 'teenage mother' is both pitied and blamed, identified with and stigmatised because symbolically, she has come to embody a number of powerful contemporary concerns. The anxieties of our age which lend particular power to the problematisation of younger motherhood include: a concern with the role of the 'parent' and their ability, spontaneously, to rear the next generation; a concern with the particular vulnerability of twenty-first century childhood; a widespread concern with social disorder and moral decline and a recognition that past forms of social and moral ordering have an alienating rather than a cohering effect; and a need to legitimise state intervention at a time of low expectations of real socio-economic progress.

The existing literature on contemporary policy developments relating to 'teenage mothers' has engaged with some but not all of these trends. In particular, critiques have focused on the tendency within policy to devolve responsibility for social inequalities and associated social problems to individuals. Commentators of the category 'social exclusion' have argued that the 'neo-liberal' agenda is driven

by sectional (capitalist) interests to deny the roots of social problems in socio-economic structures and to blame individuals in disadvantaged circumstances for the problems they face (albeit in sympathetic language). Consequent policy solutions tend to be non-economic and non-structural. These academic critiques have provided important insights into recent policy developments, in particular in challenging the decline in social understandings of the relationship between individual circumstances and larger social structures.

There is another dimension to contemporary policy that has been paid less attention in critical circles; the decline in social thinking has developed alongside a decline in the conceptualisation of the individual as a moral or rational agent, rooted in real social relationships. It has been argued here that policy concerned with the 'problem of teenage motherhood' clearly exemplifies this development. A less one-sided critique requires an exploration of how contemporary policy thinking largely constructs the individual as both abstracted from social relationships and alienated from their own capacity to be rational or moral agents.

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