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[Vulnerability and Empowerment: Part II]

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# The Vulnerabilities of Teenage Mothers: Challenging Prevailing Assumptions

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### ▼ Abstract

The belief that early childbearing leads to poverty permeates our collective understanding. However, recent findings reveal that for many teens, mothering makes sense of the limited life options that *precede* their pregnancies. The author challenges several assumptions about teenage mothers and offers an alternative to the modern view of the unencumbered self that drives current responses to teen childbearing. This alternative perspective entails a situated view of the self and a broader notion of parenting and citizenship that supports teen mothers and affirms our mutual interdependence.

The belief that early childbearing results in life-long negative consequences, including poverty, permeates our collective understanding and fundamentally structures programs and social policy responses to adolescent parenting. Historically, however, adolescent childbearing was a common, nonproblematic feature of social life with well-established, coherent cultural traditions for guiding new mothers in the skills and meanings of parenting. 1 It was only with industrialization that adolescence emerged as a distinct life stage in which youth were prepared through formal education to select an identity from a range of opportunities. In the industrialized world, teenage childbearing is now believed to jeopardize the trajectory to adulthood by interrupting education, thereby curbing success in the labor market and ultimately leading to the persistent poverty associated with welfare assistance or low-skill jobs. Many politicians and policy makers contend that this downward course could be avoided by delaying teen sex or sanctioning teen mothers with reduced welfare assistance and mandated employment. 2 From this perspective, the sin that modern teen mothers commit is not the sin of desire but of not planning and rationally choosing their future, a sentiment clearly expressed by Bruce: "Adolescent childbearing in our culture is an offense against planning; it represents a dramatic neglect of the ability to judge the present in terms of a perceived future." 3<sup>(p77)</sup> This rationalistic understanding

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# Outline

Abstract

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in which goals are to be consciously chosen by the self irrespective of the social resources needed to attain them reflects the dominant and modern view of the self described by Taylor 4:

The first [notion] is the picture of the subject as ideally disengaged, that is, as free and rational to the extent that he has fully distinguished himself from the natural and social worlds, so that his identity is no longer to be defined in terms of what lies outside him in these worlds. The second, which flows from this, is a punctual view of the self, ideally ready as free and rational to treat these worlds-and some of the features of his own character-instrumentally, as subject to change and reorganizing in order the better to secure the welfare of himself and others. The third is the social consequence of the first two: an atomistic construal of society as constituted by, or ultimately to be explained in terms of, individual purposes. (P7)

For proponents of the modern self, the social world need not circumscribe one's life options because the self is capable of inventing and reinventing itself through rational calculation. Family practices and cultural norms that interfere with the individual's pursuit of rational goals are to be shed like a set of outdated clothing because they curtail one's ultimate freedom to choose and reach one's full potential. This view of the self fundamentally informs our practices and policies regarding teen mothers by targeting deficiencies located strictly in the self (eg, poor judgment, lack of planning, and lack of job and parenting skills) while dismissing the social sources of disadvantage that predispose teens to become parents in the first place. Consider the circumstances of disadvantaged youth, whose teen years are compressed into younger ages and who assume significant family and work responsibilities as young children. Aware of the limited educational and employment opportunities that await them as young adults, mothering offers many disadvantaged girls an unambiguous rite of passage to adulthood. 5-7

Although the myth of the radically free self is increasingly embraced personally and collectively and is writ large in the 1996 welfare reform legislation, 2 radical freedom is neither possible nor desirable. The illusion that the self can create a world on its own by consciously choosing one's attitudes, values, beliefs, and actions dismisses the ways in which the self is fundamentally a social entity and always situated in complex webs of relations and practices. These ties to the life-world organize what it makes sense to plan and hope for, in dramatic contrast to the utopian and ultimately nihilistic position in which the insular self chooses and manages the life course by shedding such ties.

By treating teen pregnancy as a personal 'decision,' clinicians and policy makers fail to appreciate how mothering for many teens is not so much a failure of planning and rational choice but a tacit recognition of the limited possibilities available to them. Similarly, middle-class girls correctly 'read' and act on the opportunities for going to college that are routinely available in their social world. Disregarding the distinctive life-worlds of youth blinds us to the fact that for many teens, mothering makes sense of the social worlds they inhabit; their accounts also testify to how mothering can both empower and diminish the self. 8 A situated view of the self does not expect teen mothers to surmount their personal histories and social circumstances in the absence of responsive relationships, social supports, and sound social policy.

Research in which normative middle-class criteria are employed to catalog teenage mothers' failures and deficits has contributed to a decontextualized view of adolescent childrearing. 5,9,10 In comparing primarily disadvantaged Black teens with older mothers, early cross-sectional studies overstated the negative consequences associated with teenage parenting. Furthermore, conclusions drawn from studies of teens who gave birth in previous decades have questionable relevance to contemporary teen mothers, given major changes in welfare and access to education. Fortunately, the methodological limitations of earlier studies are now being addressed with innovative research designs and the use of national

surveys that permit more rigorous examination of the effects of early childbearing. In addition, a growing number of qualitative studies restores the missing perspectives of teenage mothers; their accounts detail how the self and parenting are socially embedded in ways that a science of probabilities overlooks.

After placing the declining birth rates for teens in historical and sociological perspective, three prevailing assumptions about teenage mothers are challenged to better understand the vulnerabilities and possibilities of young mothering. If taken seriously, this critique might contribute to the development of health care practices and social policies that embrace a situated view of the self and a broader notion of parenting and, indeed, citizenship.

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# TRENDS IN TEEN BIRTH RATES AND THE MEANING OF SEX AND PREGNANCY

Contrary to public opinion, the highest birth rates for teens in the United States occurred in the late 1950s and early 1960s when unintended pregnancies among both Black and White teens were largely concealed by 'shotgun' marriages. Although the teen birth rate declined in the late 1960s and early 1970s, the absolute numbers of births to teens increased dramatically as a result of the huge baby boom cohort entering adolescence. Black teens were also beginning to remain single during this period, a trend that was soon replicated among White teens and eventually among older women as well. 11 The recent decline in the rates of teen pregnancy and births is certainly welcome but should not obscure the grim fact that the United States continues to have one of the highest rates among industrialized countries. 12 Scholars attribute these differences in part to US policies that favor abstinence as opposed to sexual responsibility and to the substantial social inequalities faced by disadvantaged youth in the United States. 11 Although the vast majority of sexually active teens do not intend to become pregnant, 13 and teen pregnancies occur among all ethnic groups and social classes, disadvantaged teens are more likely to give birth and raise their children. Although associations for both Black and White teens exist for living in a tough neighborhood, dropping out of school, and bearing a child, these risks fall disproportionately on Black teens, who are more likely to grow up in dangerous communities with high unemployment rates. 14,15 The limited life options, pervasive health risks, and premature mortality prevalent in such neighborhoods shape expectations for the life course and the meaning of sex and pregnancy. 6,7,16,17 For example, less affluent teens often describe sex in terms of romance and intimacy, and they are less confident about their ability to prevent pregnancy, reflecting a traditional female route to fulfillment and the lack of alternative opportunities. More affluent teens are more likely to be White, to contracept successfully, and to abort, because their plans for college education and professional careers would be jeopardized by an early birth. In fact, goal-oriented and sexually active middle-class girls are more likely to describe sex in cool, calculated, rational terms while carefully avoiding pregnancy. 17

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### ASSUMPTION 1: CHILDREN RAISING CHILDREN

"Children raising children" is a phrase glibly applied to teen mothers to imply that they are inexperienced and incompetent parents 18 and raise their children on their own, with little or no involvement from partners or family members. Such views are disputed by classic ethnographies of impoverished Black families. 10,19 Geronimus' research, 6,20 confirming earlier findings, documents how varying cultural traditions shape patterns of family formation and family caregiving. For example, she found that White, more advantaged teens expressed more commitment to raising their children with a spouse or boyfriend. They also reported less child care experience and expected to assume full responsibility for raising their children, consistent with their nuclear family experience. In contrast, disadvantaged, Black teens reported substantial child care experience and intended to raise their children with the help of the extended family, much like low-income Latina teens. 21

White teen mothers have not traditionally relied on family members for support to the same degree as Black 22 or Latina 23 teens. However, these ethnic differences in family support appear to be dissipating as White teens increasingly remain single and continue to reside in their parents' households. 24 Although the teen mother's reliance on her family enhances her well-being and contributes to high school completion, 25,26 family support can also introduce conflicts, particularly when child care assistance and advice are unsolicited or intrusive. 25,27 Because the majority of teen mothers reside with their parents after the birth, the teen's practical knowledge and parenting practices develop largely in the context of family relationships and caregiving traditions. Although it has long been known that disadvantaged teens look to their mothers for parenting advice more often than do middle-class women, 28 most research has focused on teen mothers' attitudes, knowledge, and behaviors without attention to how these reflect family and cultural meanings and practices. A notable exception is a study of infant feeding practices by low-income, Black teen mothers. 29 This intergenerational study showed how teens rely on their mothers' experience and advice in feeding babies solid foods well in advance of recommended guidelines. Other studies have described variations in how families incorporate the mother and baby into the household. 30-32 Whereas some grandparents informally adopt the teen's child and assume all care of the baby, others mentor, share, or supplement the teen's care of the baby in ways that cushion the new mother from the full demands of parenting. In still other households, grandparents resolve to provide little child care, perhaps reflecting and perpetuating family resentment.

Because these variations profoundly shape teenagers' care of their babies, this author's recent research has examined family processes and the development of family relationships and caregiving practices over time. A small group of diverse families was observed over a period of 8 years. Two patterns of family caregiving were initially identified by closely examining coping and caregiving episodes by the teens and their parents. 33 Families with adversarial caregiving practices took over care of the child, thwarting maternal skill development and deepening the teenager's ambivalence about mothering. These mothers tended to either withdraw from caregiving or to move out of the home to escape parental criticism and interference. Families demonstrating an ethic of responsiveness eased the teenagers' transitions to mothering by enabling them to learn to respond to their babies as active participants in caregiving. Grandparents exemplifying this pattern attended to the baby and the mother without taking over, positively regarded the young mother's capabilities, approached conflicts through dialogue, and shared caregiving responsibilities in a highly fluid manner.

These patterns were not immutable, as was discovered 4 years later when families were reinterviewed to explore the young mother's life course and the further development of family relationships and caregiving practices. 34 Although continuity in family relationships was evident in most families over the 4-year period, a few families unexpectedly told of repairing earlier adversarial relationships and developing new, more responsive caregiving habits that fostered the teen mother's engagement with her child.

Eight years after the initial interviews, study participants were again reinterviewed to examine a recurring theme in the young mothers' narratives-how they extended, rejected, or modified the family-of-origin's caregiving traditions in their quest to become the mothers they wanted to be. 35 Mothers who appraised their own parents as good parents relied on and extended their family's caregiving practices with little conscious reflection. In contrast, mothers who rejected their parents as a model for raising their own children were more deliberate and reflective in their attempts to develop responsive parenting practices. They were more successful in becoming the parents they wanted to be if they had examples of responsive parenting within their social networks to guide them, and they were not overwhelmed by the daily demands and humiliations of severe poverty.

These studies dispel the notion that parenting practices originate de novo with each new parent, and that parenting is primarily, or even ideally, a rational,

cognitive activity. Rather, parenting is fundamentally a highly relational, situated, and *arational* practice in which parents nonreflectively take up and modify family and cultural norms and practices. Parenting becomes a highly rational, self-conscious effort only when positive parenting legacies from the past are lacking, or when caregiving practices are devalued or overwhelmed by oppressive social arrangements. Teenagers' highly reflective accounts of mothering point to their desire to create habits that contrast with the way they were raised *and* the difficulty of reinventing parenting on their own without support and concrete examples to emulate. 33-35

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# ASSUMPTION 2: TEEN MOTHERING LEADS TO POVERTY AND JEOPARDIZES THE TEEN'S DEVELOPMENT

Erikson's 36 developmental theory, in which identity is predicated on autonomy, is often cited to highlight how becoming a mother jeopardizes a teen's development. From this theoretical lens, a moratorium from adult responsibilities provides youth with the freedom and opportunities to differentiate from one's family, to develop a career, and to eventually form intimate relationships. The shift from concrete to formal operational thinking that occurs during adolescence allows for more accurate differentiation of one's thoughts and for the detachment and reflection that are considered desirable for parental reasoning and rational choice. 37 From this perspective, combining the tasks of adolescence with mothering is considered detrimental not because of the social disadvantage that precedes many teen births, but because of the teen's failure to first achieve autonomy and become a rational thinker. Furthermore, feminists have argued that the focus on autonomy and differentiation distorts female identity and overlooks the ways that development is inherently relational. 38,39 Unfortunately, researchers have been slow to investigate teen mothering from a relational perspective, perhaps because mothering has traditionally been viewed by many feminists as a source of oppression and self-sacrifice. 40 This rejection of mothering has inadvertently helped to silence the voices of the very women who are most oppressed by the current social order, and it fails to see the ways in which they struggle, cope, and challenge modern assumptions of the self and society.

Also, much of the research to date has focused not on the teen mother's development and her views of identity, but on the long-term socioeconomic effects of childbearing. Although teen mothers *are* less likely to complete high school, have less stable marriages, and earn less income than those who delay childbearing until their 20s, 11,41 it is widely assumed that the life course of disadvantaged girls would substantially improve if they delayed parenting until their 20s. However, studies comparing earlier and later childbearers of similar socioeconomic status, using standard variables such as family income and educational background, have overlooked background factors that predispose teens to become pregnant. According to Hotz and colleagues 41:

The assertion that teenage childbearing is the *cause* of the poor socioeconomic outcomes ... implies that a teenage mother was on the same upwardly mobile life course as her counterpart who did not have a child as a teenager but, by having her first birth as a teenager, altered the remainder of her life in very detrimental ways. For these two groups of women to be comparable, teen mothers and the women with whom they are being compared would have to have virtually identical socioeconomic and background characteristics prior to the age at which teen mothers had their first children. In fact, this is not the case. (p64)

Studies that better control for unknown background factors are confirming subtle differences between early and later childbearers. Using national data sets, several researchers 42-44 have designed studies using sister pairs in which one sister gave birth before age 20 and one did not. Hotz and colleagues 41 compared teen mothers with teens who miscarried and therefore gave birth at an older age. A third approach compared teens whose first birth was to twins with those who

gave birth to one child. 45 These studies suggest that the socioeconomic outcomes of early childbearing are less negative than previously thought. In fact, women are only slightly worse off by having a baby as a teen; deferring parenthood would not greatly improve their job prospects or their future economic circumstances.

While social scientists debate the opportunity costs of early childbearing, 2,11,46 some teens describe mothering in a very different way-as a powerful catalyst for becoming more mature and redirecting their lives in positive ways. 7,47,48 Their accounts portray how mothering potentially anchors the self, fosters a sense of purpose and meaning, reweaves connections, and provides a new sense of future. In exploring teenagers' transitions to mothering as members and participants of families and communities, it was discovered how teens reappraised the past, present, and future from their new perspective as mothers. 9,49 For the most disadvantaged and alienated teens in the sample, having a baby epitomized the hope of escaping a desolate past for an illusive future, which eventually came to mirror their prepregnancy despair. The profile of this group of mothers seems consistent with the conventional wisdom that mothering alters young women's lives in negative ways, but the conventional view includes little appreciation for how their lives and sense of future were compromised well in advance of their pregnancies. A second group of teens similarly described an empty prepregnancy future that was transformed by becoming a mother. For this group, mothering reversed the downward trajectory of their lives and offered a corrective experience as they reorganized priorities around the identity and practices of mothering. For example, these teens often reported getting off drugs, returning to school, distancing themselves from risky friendships, and reevaluating their earlier, often destructive behavior. A third group of teens embarked on mothering with greater family and social resources. Their prepregnancy plans to pursue education or employment before starting a family exceeded the expectations of other teens. These plans remained viable options because of the family and community support they received after giving birth. Their plans and priorities were complicated and strengthened by mothering as they strove to create a future for themselves and their children by drawing upon the resources of a more generous social world.

Many qualitative studies confirm that mothering fosters teenagers' aspirations to become more responsible and mature. 7,47,50 Unfortunately, their new priorities are often unrecognized, 51 perhaps because their circumstances differ from middle-class norms and experiences. For example, Black, disadvantaged teen mothers describe new priorities that include avoiding financial dependence on unreliable fathers and staying on welfare rather than working at unreliable jobs. 50 Although such actions may clash with middle-class criteria for success, they accurately reflect the life-worlds of many impoverished teens.

Disadvantaged teen mothers do not escape the legacies of their pasts or overcome their social circumstances by sheer will, motivation, or rational thought, as our views of the atomistic self would suggest. Their stories demonstrate how the gains and difficulties they experience as mothers reflect the opportunities, constraints, resources, and contradictions of their social worlds. As Bergum 8 notes from her study of older mothers, mothering can simultaneously empower and diminish the self.

For many women facing the responsibility of the child, the move to mother in the economic, political, and social sphere can be either empowering or disenfranchising-and in some sense, may be both. At the same time as a woman may feel blessed by a child in her life, by the very fact that she is a mother, she may be even more oppressed.... While they move toward a responsibility that transforms (in their responsiveness to ... the child), they are continually faced with the reality of their own "other"-ness ... in our patriarchal culture.  $8^{(p85)}$ 

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ASSUMPTION 3: TEEN MOTHERING CREATES HUGE PUBLIC COSTS

From teenagers' perspectives, mothering is clearly not the unmitigated disaster that the public takes it to be. But what of the public costs that are routinely reported by the press and by politicians? Findings from the miscarriage study cited earlier 41 suggest that the tax burden usually attributed to early births may be greatly exaggerated. These researchers found that although teen mothers earn less initially, they earn more over their lifetimes than later childbearers from similar backgrounds. Although delaying parenthood would reduce initial welfare expenses, the early public costs are offset by the teenagers' life-long income tax contributions, with the unexpected result that government spending would actually increase by \$4.0 billion if teens were to delay parenting.  $41^{(p83)}$  Harris' 52 reanalysis of longitudinal data confirms that many teen mothers rely on welfare for relatively short periods and eventually work, very much like their older counterparts. Moreover, many teen mothers continue their education well into their 30s and 69% complete at least 1 year of college. 53 Although the public costs of teen parenting need to be confirmed with new cohorts of teen mothers, these findings are provocative, because young mothers are often portrayed as economic pariahs and long-term welfare dependents undeserving of public support. Unfortunately, the mandated work requirements of welfare may curtail the longterm educational progress of teen mothers, hindering their ability to gainfully support their families and improve their circumstances over time.

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### **Reweaving Connections**

In spite of counter evidence, the conventional wisdom-that teen mothers are children raising children, are condemned to a life of poverty as a result of an early birth, and are economic pariahs who drain the public coffers-is likely to retain a strong grip on the public imagination both for ideological reasons and because of our commitment to the modern self and the "good" (ie, atomistic) society. In succumbing to the vision of the insular self, health care practices and social policies tacitly require teen mothers to be radically free and to surmount the constraints and contradictions of their social worlds by their individual efforts. A relational view of the self, however, recognizes how teen mothers' behavior and future prospects reflect the social arrangements that perpetuate poverty and the dominant ethos that then blames them for their plight. Viewing the self as a social entity that is fundamentally enacted and developed through relationships leads to reframing our rationalistic understanding of teen mothers and to refocusing on rebuilding connections and reweaving the social fabric. Rather than abandoning or blaming teen mothers, consider how our relationships with them as clinicians and citizens empower or diminish them.

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# Strengthening health care practices

Unfortunately, the assumptions described above make it difficult for clinicians to respond to teen mothers on their own terms. 9 Clinical practice is further compromised by short hospital stays at delivery and limited home visiting follow up that make it difficult to tailor nursing care to the teen's situation and experience. These health system constraints exert pressure on clinicians to train teens in parenting skills based on clinical protocols or middle-class standards, without eliciting their concerns, experiences, and aspirations. The clinical focus on teaching abstract knowledge of parenting and infant care, however, is at odds with how each mother learns the practical skills of mothering by responding to the particularity of her own baby. 54 As Wynn 55 points out, learning from the baby also provides a powerful opportunity for the mother to learn about herself, which resonates with teen mothers' descriptions of becoming a responsive self as they strive to become the mothers they want to be. 35

A growing body of research with inner-city teens and young mothers in nonDhealth care settings confirms the feminist claim that the self grows through connection, and recognition by others is empowering. 38,39 These studies 56-58 suggest that programs that are insensitive to teenagers' neighborhoods, families, and school contexts contribute to their alienation and dependence. Conversely,

programs that engage teens in respectful relationships validate their struggles, strengths, and aspirations. These findings argue for strengthening relationship-based health care practices as a crucial aspect of broader, comprehensive efforts to support families and rebuild communities.

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### Rebuilding the social fabric

Our cultural blindness to the strengths and vulnerabilities of teen mothers stems from our allegiance to an atomistic society that deems parenting to be a personal choice and private duty that is independent of the public world and the body politic. This myth is increasingly challenged by neighborhood studies that describe how parents' efforts and children's future prospects are contingent on the community's social capital and public resources. 56,59,60 Families of all backgrounds depend on community assets and public expenditures to protect and nurture their children's well-being. Unfortunately, many families encounter the demands of parenting in the face of diminishing social supports, particularly as lengthening work hours limit adult involvement in civic and community life, and community ties are weakened. Parents in neighborhoods decimated by crime and drugs and suffering from poor schools and high unemployment rates must make heroic efforts to protect their children from the dangers of the streets and to ensure access to opportunities. 59 Unfortunately, this means that young mothers' aspirations to become good parents, to pursue education, and to become selfsupporting are often undermined by the social erosion that contributes to poor schools, unsafe housing, neighborhood disorganization, and serious environmental health threats. In privileging autonomy over interdependence, social policies that aim to correct or punish teen mothers fail to reorganize the schools, neighborhoods, and the larger social order so that real alternatives to teenage parenting exist.

Rebuilding the social and political resources on which all parents depend would address the many inequities and difficulties that teen mothers face while promoting their strengths and aspirations to become good parents and citizens. These policies are all the more critical in light of welfare time limits, employment mandates, and an economy that requires an educated workforce and almost all mothers-single or married-to become employed to support their families. As Skocpol 61 persuasively argues, universal health insurance, subsidized child care, access to paid family leaves, and improved education and training for workers will not only reweave the social fabric but improve family and child well-being across economic levels.

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# CONCLUSION

Nurses have a long legacy of providing health care to pregnant and parenting teens. Unfortunately, nurses may believe that deferring parenthood will dramatically improve the life chances of disadvantaged girls and decrease the personal and social costs of poverty. These assumptions, however, deny the farreaching effects of disadvantage that are difficult for youth to surmount without incredible talent or the presence of responsive adults, good schools, safe neighborhoods, and vital communities. Many interventions presume that arming youth with knowledge about life options, job training, and sex education will improve their life chances dramatically without a need to rebuild the social resources and the web of relations that families and children require to thrive. Reweaving connections, redesigning health care, and building social capital ultimately will strengthen families and communities so that youth believe they have a future and real alternatives to parenting as well as the resources to become the good parents they want to be.

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