

UNIVERSITY OF LONDON INSTITUTE OF EDUCATION

MOTHERHOOD IN 16-19 YEAR OLD WOMEN

Thesis submitted for the
degree of PhD

ANN PHOENIX



Declaration

The project on which this thesis was based was funded by the then Department of Health and Social Security as part of a programme of longitudinal work at the Thomas Coram Research Unit on **The implications of Diverse Family Lifestyles for young children and for the services they require**. Peter Moss obtained the funding to direct the programme. The programme consisted of two projects; the first being **The Day Care project** and the other the project on which this PhD is based.

Throughout the study Peter Moss, Ted Melhuish and Julia Brannen discussed weekly the development of the project and the measures devised. Four other fieldworkers also worked on the project at various times. However, my contribution to the project was substantial in that I wrote the literature review that led to the reformulation of the design of the study originally devised by Peter Moss. I took a leading part in the reformulation process. I played a substantial part in developing measures and in the conceptual development of the study, particularly with regard to the ways in which social construction and life course perspectives were used (see below for discussion of these). I conducted more interviews than any other fieldworker. I did nearly half of the in-depth interviews at the first round (47%; 37), 46% (39) at the second interview, 41% (28) at the third round and 40% (26) of the developmental tests. I was the only interviewer to interview respondents at all three contact points. I administered the day to day running of the project and did all the data analysis and writing up (apart from one research note; Melhuish, 1989) as the sole author.

I did all the analyses which inform this thesis and wrote the thesis.

*Checked by supervisor
Benjamin Tizard*

MOTHERHOOD IN 16-19 YEAR OLD WOMEN

Ann Phoenix

ABSTRACT

This thesis reports a study of women, living in London, who became mothers when aged 16-19 years, and of their children. The women and children were white and black and came from a range of ethnic groups. In late pregnancy 102, 16-19 year old women were given short interviews and 79 were given in-depth interviews. Data from 85 of these combined samples were analyzed when their children were six months old and from 68 when they were 21 months old. Sixty two of their children were given a developmental test 21 months after birth.

The study aimed to identify women's reasons for becoming pregnant and going on to have children; to get a good picture of how the women and their children fared over the course of the study and to consider intra-group differences that may have led some women to fare well and others to fare badly.

The findings suggest that mothers under twenty are not as problematic as they are generally believed to be. Most of the women were aware of the contraceptive methods available. They had become pregnant for a range of reasons. These included wanting a child; not minding whether they conceived; their male partners' reported lack of concern about contraception; contraceptive failure and chance. The majority of the women did not consider that childbearing should be inextricably linked with marriage and many reported negative views about the benefits of marriage for women. Nonetheless, most of the single women expected to marry at some time.

Most women and their children were faring well despite high rates of poverty. Good outcomes were partly mediated by the social support that women received (particularly from their own mothers who were generally more supportive than their children's fathers) and by the fact that their poor educational qualifications and labour market experiences meant that, for the great majority, early motherhood was not disruptive of their other life course careers.

TABLE OF CONTENTS

	<u>Page</u>
ABSTRACT	1
TABLE OF CONTENTS	2
LIST OF TABLES	8
LIST OF FIGURES	11
ACKNOWLEDGEMENTS	12
<u>CHAPTER 1:</u>	
	<u>Mothers under twenty and their children as social problems: Review of the literature.</u>
	14
1.1	Setting the scene
	14
1.2	The incidence of motherhood in the under twenties
	17
1.3	Antecedents of early motherhood
	18
1.3.1	Sexual relationships
	18
1.3.2	Contraceptive use
	20
1.4	Resolution of pregnancy
	23
1.4.1	Abortion
	23
1.4.2	Adoption
	23
1.5	The social and economic circumstances of mothers under twenty
	24
1.5.1	Marriage and early motherhood
	25
1.6	Outcomes of early motherhood
	27
1.6.1	Outcomes for children
	27
1.6.2	Outcomes for mothers
	30
1.7	Issues of 'race'
	32
<u>CHAPTER 2:</u>	
	<u>Methodological and theoretical issues in the literature.</u>
	33
2.1	Types of criticism of literature on early motherhood
	33
2.2	Explanations of the negative focus on early motherhood
	40
2.2.1	Ambiguity of adolescence as a status
	40
2.2.2	Moral reasons
	42
2.2.3	Socioeconomic characteristics of mothers under twenty
	45

		3
2.3	The intersection of social construction and research	46
2.4	'Race' and motherhood in the under twenties	48
2.5	Summary	55
<u>CHAPTER 3:</u>	<u>Aims, methodology, conceptual frameworks and</u>	
	<u>methods of analysis</u>	58
3.1	Research issues for the present study	58
3.2	The history of the project	60
3.3	Aims	61
3.4	Design	61
3.5	Areas of study	62
3.6	Methods	62
3.6.1	Finding the sample	63
3.6.2	Problems of sample recruitment and attrition	64
3.6.3	The interviews	65
3.6.4	The Bayley Scales of Infant Development	68
3.7	Conceptual underpinnings	69
3.7.1	Social construction	69
3.7.2	The life course perspective and the concept of 'career'	70
3.8	Analyses	72
3.8.1	Interpreting accounts from interviews	74
<u>CHAPTER 4:</u>	<u>The sample and the social context in which the</u>	
	<u>women conceived: Findings and discussion</u>	77
4.1	Description of the sample	77
4.2	The pregnancy interview	79
4.2.1	Women's orientations to pregnancy before conception	79
4.3	Previous conceptions as an influence on orientation to pregnancy	87
4.4	Influences on contraceptive use	88
4.5	Contraceptive failure	103
4.6	Summary	105
<u>CHAPTER 5:</u>	<u>After conception: Findings and discussion</u>	106
5.1	Initial reactions	106
5.1.1	Abortion and adoption	112
5.2	Reactions in late pregnancy	117

5.3	Satisfaction with life and ideas about the future	121
5.4	Summary	122
CHAPTER 6:	<u>Men and marriage: Findings and discussion</u>	125
6.1	The male partners of mothers under twenty	125
6.2	The marital career over time	128
6.2.1	Trends in marriage and cohabitation over the course of the study	128
6.2.1.1	During pregnancy	128
6.2.1.2	After birth	129
6.3	Reasons for being single, cohabiting or marrying	132
6.3.1	Attitudes to men and marriage	133
6.3.2	Reasons for marrying	139
6.4	Marriage after conception	142
6.4.1	Marriage and cohabitation during pregnancy	142
6.4.2	Marriage after birth	144
6.5	Economic factors associated with marriage or cohabitation	145
6.6	Summary	147
CHAPTER 7:	<u>Social networks and emotional support: Findings and discussion</u>	148
7.1	Social networks and social support	148
7.2	Whether women had lived with their birth parents throughout childhood	149
7.3	Women's social networks	152
7.4	Variations in network size over time	154
7.4.1	Monthly and weekly contacts in pregnancy	155
7.4.2	Monthly and weekly contacts six months after birth	155
7.4.3	Monthly and weekly contacts at 21 months	155
7.4.4	Example of fluctuations in individual social networks	156
7.5	Restricted and extensive networks and feelings of being supported	157
7.5.1	Restricted social networks and feeling supported	157
7.5.2	Extensive social networks and felt support	159
7.6	Inclusion of relatives in women's networks	160
7.7	Relationship between women's social networks and	

	feelings of being supported	160
7.8	Emotional support	164
7.8.1	Confiding and emotional support	164
7.8.2	Emotional unsupportiveness	171
7.9	Summary	173
<u>CHAPTER 8:</u>	<u>Housing and other material support: Findings and discussion</u>	
		174
8.1	Support with housing	174
8.2	Financial resources and problems	183
8.3	Feelings about contact with the Department of Health and Social Security	186
8.4	Knowledge of entitlement	188
8.5	Economic support from male partners	190
8.5.1	Feelings about men's financial contributions	194
8.6	Material assistance from parents and relatives	195
8.7	Summary	201
<u>CHAPTER 9:</u>	<u>Women's health, psychological state, reported feelings for their children and experiences of motherhood: Findings and discussion</u>	
		202
9.1	Maternal health, psychological state and opportunities for leisure	202
9.1.1	Illnesses and tiredness	202
9.1.2	Psychological state	203
9.1.3	Opportunities for leisure	206
9.2	Initial feelings for the children	207
9.3	Feelings for children over their first two years	210
9.4	Coping with childcare and motherhood	211
9.5	Dissatisfactions with motherhood	216
9.6	Women's reported assessments of motherhood	218
9.7	Summary	225

<u>CHAPTER 10:</u>	<u>Women's reports of their children's health and socioeconomic circumstances and researcher assessment of children's developmental status:</u>	
	<u>Findings and discussion</u>	226
10.1	Breastfeeding	226
10.2	The children's health	228
10.3	Caregiving arrangements	232
10.4	Material provision for the children	235
10.5	Beliefs about influences on children's development	239
10.6	Further children	241
10.7	Children's cognitive development	243
10.7.1	Results from the Mental Development Index of the Bayley Scales of Infant Development	244
10.7.1.1	The circumstances in which the testing occurred	244
10.7.1.2	Children's test scores	246
10.7.2	Independent variables which influenced children's Developmental Quotient on the Mental Development Index	248
10.8	Summary	251
<u>CHAPTER 11:</u>	<u>Women's employment and education from pregnancy to 21 months after birth: Findings and discussion</u>	253
11.1	Employment and education from pregnancy to six months after birth	253
11.2	Employment nearly two years after birth	259
11.3	Education 21 months after birth	268
11.4	Summary	271
<u>CHAPTER 12:</u>	<u>'Insider' perspectives on early motherhood and on being a respondent in the current study</u>	273
12.1	Maintaining positive identities as mothers	273
12.2	Too young to be mothers?	274
12.3	Marriage and motherhood	276
12.4	Motherhood, employment and children's needs	278
12.5	On being a respondent	280
12.6	Summary	286

<u>CHAPTER 13:</u>	<u>General discussion</u>	287
13.1	Introduction	287
13.2	Factors which led to conception and motherhood	287
13.3	Marital status over time	289
13.4	Social networks and social support	291
13.5	Children's care and development and women's feelings about motherhood	291
13.6	The women's experiences of employment and education after birth	292
13.7	Accounting for the findings	294
13.8	Limitations of the study	299
13.9	Issues for further research	305
REFERENCES:		308
<u>APPENDIX 1:</u>	Example of handouts given to respondents	326
<u>APPENDIX 2:</u>	The first contact interview schedule (pregnancy)	327
<u>APPENDIX 3:</u>	The second contact interview schedule (six months)	426
<u>APPENDIX 4:</u>	The third contact interview schedule (21 months)	532
<u>APPENDIX 5:</u>	The Mental Development Index of the Bayley Scales	584
<u>APPENDIX 6:</u>	Notes on developmental assessment: Form	589
<u>APPENDIX 7:</u>	Example of summary of contacts: Form	592

LIST OF TABLES

	Page	
1.1	British literature on mothers under twenty in the last two decades	15
3.1	In-depth interviews arranged and done in late pregnancy	64
3.2	When interviews were done	66
3.3	Numbers interviewed in pregnancy, 6 and 21 months after birth	67
4.1	Percentage of women in employment or education at the time of conception	78
4.2	Comparisons of Main, Subsidiary and Social Worker samples on four factors	78
4.3	Orientation to pregnancy at conception by age at birth	81
4.4	Orientation to pregnancy by marital status at conception	82
4.5	Orientation to pregnancy by living with parents at conception	83
4.6	Orientation to pregnancy by employment status at conception	84
4.7	Orientation to pregnancy by previous pregnancies	87
4.8	Orientation to pregnancy by contraceptive use at conception	103
5.1	Attitudes to adoption and abortion	113
5.2	Whether the women would ideally change anything about their lives	122
6.1	Age of women's male partners by women's ages in pregnancy	126
6.2	Change in women's relationships with male partners between conception and late pregnancy	128
6.3	Patterns of relationships from conception to 21 months for the sample interviewed 21 months after birth	130
6.4	Joint registrations of birth for single and cohabiting women	131
6.5	Reported relationships with male partners for women interviewed at six months and 21 months	131
6.6	Reported advantages/disadvantages of marriage for women	133
6.7	Reported advantages/disadvantages of marriage for men	134
6.8	Single and cohabiting women's intention to marry	136
7.1	Whether women's parents were still alive at the first interview	150
7.2	By whom brought up until 16 years	150
7.3	Periods separated from both parents	151
7.4	Time spent in residential care or in special boarding school	152
7.5	Network size, linkages and numbers of people seen weekly	154
7.6	Attitudes to confiding personal information	165
7.7	People in whom respondents would be prepared to confide	167

7.8	First person to whom pregnancy was disclosed	170
8.1	Changes in types of tenancy for the sample interviewed at 21 months	174
8.2	Changes in person holding tenancies for women interviewed at 21 months	176
8.3	Money problems experienced and expected	183
8.4	Women who reported difficulties living on available money	185
8.5	Dependence on supplementary benefit	185
8.6	Reported feelings about treatment by the DHSS in pregnancy and at six months	186
8.7	Married women's reports of who controlled their household finances at six months	194
8.8	Whether board money paid to parents in late pregnancy and at six months	196
8.9	Help in kind received six months after birth	197
8.10	Women who received money from parents and relatives	198
8.11	Who respondents would ask for particular types of help at 21 months	200
9.1	Women's reported episodes of indisposition/illnesses	202
9.2	Frequency of tiredness in the last month	203
9.3	Whether ever felt depressed in pregnancy	204
9.4	Reported psychological state after birth	205
9.5	Whether or not there were things that women enjoyed but could do only occasionally	206
9.6	Whether had enough time to self	207
9.7	Feelings for children from birth to six months	208
9.8	Sex preference for children	209
9.9	Whether child was reported to be easy or difficult to look after	210
9.10	Reported changes in relationships with children over the last year at 21 months	210
9.11	Maternal reports of whether other people believed they were coping well as mothers six months after birth	212
9.12	How women considered they were coping with childcare	212
9.13	Satisfactions/Dissatisfactions with motherhood	213
9.14	Whether last six months reported to have been easy or hard	214
10.1	Breastfeeding rates in the present study	227
10.2	Child immunisations done by six months	229
10.3	Children's contact with Child Health services between three and six months	230
10.4	Children's reported bouts of illness in the previous six months	231
10.5	Whether anyone else looked after child in the last week at 21 months	233

10.6	People other than the respondent who had done any childcare tasks in the last week a six months	234
10.7	Whether accommodation was always warm enough for the children in their first six months	237
10.8	Whether, at six months, mothers felt differently than before birth about spending money on themselves	237
10.9	Percentage of women who said that they would like things they did not have	238
10.10	Reported influences, at six months, on children's health and happiness	240
10.11	Further pregnancies by 21 months	242
10.12	Number of further children wanted in late pregnancy	243
10.13	In late pregnancy, when wanted next child	243
10.14	Distractions during the administration of the Bayley test	245
10.15	Mean, mode, standard deviation and range in Bayley test scores	246
10.16	MDI scores related to four independent variables	249
11.1	Employment status from conception to late pregnancy	253
11.2	Attitudes, in late pregnancy, to returning to paid employment	255
11.3	Employment and education from conception to 21 months after birth	261
11.4	Childcare arrangements at 21 months	264
12.1	Respondents' views on the first interview	281
12.2	Respondents' views on interviewers	283

LIST OF FIGURES

	Page	
5.1	Women's feelings about being pregnant	107
5.2	Other people's initial feelings about women's pregnancies	111
5.3	Other people's feelings in late pregnancy about women's pregnancies	118
5.4	Pathways to birth	123
7.1	Change in Jenny's social network from pregnancy to 21 months	156

ACKNOWLEDGEMENTS

This research depended on the help and co-operation of the young women involved, who often lived in straitened circumstances, but welcomed researchers into their homes. It would not have been possible to recruit a sample without the co-operation of the hospitals we used. I am very grateful to the obstetric consultants and the senior nursing officers for their help.

Peter Moss obtained the funding for the study. Thanks to him and to the Department of Health whose funding made the research possible. Gratitude is also due to the Institute of Education who gave me half a term's study leave so that I could write the thesis. I would also like to thank the other members of the research team who met consistently over the five years of the project to discuss both theoretical and practical issues. Their support enlivened the project and made the work enjoyable. They were Peter Moss, Julia Brannen and Ted Melhuish. The data collection for the project was sometimes onerous. The task was considerably lightened by the assistance of other interviewers. They were Liz Gould, Mary Baginsky, Gill Bolland and Ruth Foxman.

I am also grateful for the time that Bebb Burchell Yaa Asare, Kum-Kum Bhavnani, Reena Bhavnani, Ronny Flynn and Irma La Rose gave to discussing the project. The research undoubtedly benefitted from their input. Other people have read and commented on writing that has come from the research. In particular I would like to thank Chris Griffin, Angela McRobbie, Ann Oakley, Charlie Owen, Pat Petrie and Ian Plewis.

This thesis would never have been written without the encouragement of a number of people. Barbara Tizard urged me to register for a PhD and has been tolerant of the amount of time that I have spent working on the thesis rather than on anything else; Julia Brannen has always been very encouraging and Harry McGurk has, for years, said that I should do a PhD. He arranged for me to have study leave in order to facilitate its writing. Thanks are also due to friends and colleagues who encouraged me during the last stages of writing up when it seemed that the process was a never ending one. They are; Avtar Brah, Julia Brophy, Anne Harrop and Gail Lewis. I would particularly like to thank Charlie Owen for his support, patience, assistance with the numerous things that always seem to go wrong with word processing as well as the checking of my statistics. Thanks to him and to Aisha Phoenix for their tolerance and support over what (for other reasons) has been a difficult period.

As my supervisor, Barbara Tizard has been exemplary. She unfailingly read any work that I handed her (including the draft of the complete thesis) within 24 hours. Her suggestions have improved the clarity and the logic of the thesis. In addition I have been fortunate to have had discussions with

Barbara throughout my nine years at the Thomas Coram Research Unit. The opportunity to see at close quarters the thoroughness with which she always works and engages with ideas has been both beneficial and inspiring. I would like to express my gratitude to her.

CHAPTER 1: Mothers under twenty and their children as social problems: Review of the literature

1.1: Setting the scene

Since the beginning of the 1970s, hundreds of academic articles and popular reports have been published on 'teenage mothers' and their children. These articles come from a range of disciplines including demography, medicine, education, sociology, psychology, social policy and anthropology. Although some of the research in the area falls within specific disciplinary boundaries, most is eclectic being thematically organised and, often, descriptive rather than theoretical.

Relatively little research material on motherhood in the under twenties has been published in Britain in the recent past (See table 1.1 below). Most comes from the USA. This reflects the fact that more (both numerically and proportionally) young women become pregnant before they are twenty in the USA than in most other industrialised countries (Jones et al., 1986). The following table of British literature on mothers under twenty omits Office of Population Censuses and Surveys (OPCS) analyses of demographic trends which are published regularly in Population Trends, in OPCS Monitors and in Social Trends. It also omits PhD theses and one off theoretical papers.

Table 1.1: British literature focusing on mothers under twenty in the last two decades

Bury (1986)	Literature review and demographic data
Butler et al. (1981)	Analysis of the Child Health and Education Study data specifically focusing on the mothering given by those women who became mothers in their teenage years and its impact on their children.
Clark (1990)	Study of the housing needs of women who gave birth while teenaged.
Clark and Coleman (1991)	Follow up of residents of a residential family centre for vulnerable mothers under twenty.
Coyne (1985)	Study of mothers aged under 16 years.
Holly (1989)	Study of women in a young mothers' group.
Ineichen (1985/6)	Study of Bristol young women in pregnancy.
Ineichen and Hudson (1991)	Mainly based on experiences of the Bristol schoolgirl mothers unit.
London Hospital Study	Study of married pregnant women (including teenagers) attending the London Hospital antenatal clinic with follow ups for the women and their children until the children were six years old.
(Various papers by Wolkind, Chaves, De Salis, Hall, Kruk, Pawlby, Zajicek; 1977-1984)	
National Council for One Parent Families (1979)	Evidence to a working party on schoolgirl mothers.
Newson and Lilley (1988)	Nottingham study of young mothers' childrearing attitudes.
Newson, Lilley and Lalonde (1987)	Above study plus a study of 'young fathers'.

The above two papers are unpublished but some of the findings (unfortunately not broken down by age) are published in Newson and Newson's (1989) survey of parental physical punishment in the UK, which is based on their Nottingham study.

Phoenix (1991)	Uses the same data as the current study
Sharpe (1988)	Interviews with young women who had children in several areas in Britain.
Skinner (1986)	Study of young women after abortion; after giving birth and in contraceptive clinics.
Simms and Smith (1986)	Nationally representative study of young women four months and a year after giving birth and of some of their male partners.
Southwell (1985)	Study of a schoolgirl mothers unit.

The studies cited above have different foci and samples and cover different time periods with regard to when they were done and ages of the young women and their children. The information we have

on British women who become mothers before they are twenty and their children is thus limited. Since there are important differences in socioeconomic circumstances between British and USA which are relevant to a consideration of motherhood in the under twenties (Jones et al., 1986) the imbalance in the number of British, compared with USA published studies means that there is relatively little British information on motherhood in the under twenties. This is particularly the case since reviews and research done by people in the USA usually do not mention any British research or attempt to consider the relevance of the national context. For example a recent literature review Adolescent sexual behaviour, pregnancy and parenting: research through the 1980s (Miller and Moore, 1990) cites 158 references, but the only British work included is an epidemiological study of child abuse.

While British research is discussed consistently throughout this thesis, particularly in the data chapters, literature from the USA necessarily constitutes the major part of the two literature review chapters.

There are currently two competing types of literature on early motherhood.

1. The larger and better established literature is generally concerned with mothers under twenty and their children as social problems. This literature focuses either on attempts to understand why 'teenage pregnancies' occur, with a view to preventing them or attempts to document the adverse consequences of early motherhood in comparison with motherhood to older women (Field, 1980; Landy, 1981; Pittman, 1986). Action research (which, referred to as intervention projects, are common in the USA) generally aims to ameliorate the perceived negative consequences of 'teenage motherhood' and to reduce the incidence of births to teenage women. The few British studies that have been done have tended to start from a similar focus to that of this first type of USA literature.
2. The second type of literature on mothers under twenty provides meta-analyses of the first type of literature. This more recent literature questions the assumptions, methods and conclusions of the descriptive literature. The focus of this literature is the converse of that described above in that it argues against a social problem focus on mothers under twenty for two sets of reasons. Firstly, because negative findings have been erroneously treated as if they are 'true age effects' (Geronimus, 1987, 1990). Secondly, because there is no evidence that the majority of mothers under twenty and their children do fare badly (King and Fullard, 1982) often because of methodological limitations in the literature (Lamb and Elster, 1986).

With these two divergent approaches and with the large volume of research in the area it is not surprising that reviews of 'teenage pregnancy and motherhood' tend to be selective. Indeed it would be impossible to review all the books and articles published in a review chapter. This review chapter

will summarize research evidence on the social and economic circumstances of mothers under twenty and on the main themes that emerge in literature on mothers under twenty and their children. The next chapter will discuss the published theoretical and methodological critiques of research in the area.

1.2. The incidence of motherhood in the under twenties

The scale on which British and USA pregnancies and births to the under twenties occur is different in that both the numbers and the rates per thousand women in the age group who give birth, is higher in the USA than in Britain. In Britain over the last 30 years rates of births to women under twenty have increased then declined again (from 34 births per 1,000 15-19 year olds in 1960 to a peak of 51 in 1971, a low of 27 in 1983 and back to 32 in 1989). In 1990, the proportion of births to all women which were to teenage was 8%, the lowest it had been since 1960 (CSO (Central Statistical Office), 1992). In the USA the peak year for births to under twenties was 1957 when it reached 97 per 1,000 15-19 year olds (Jones et al., 1986; Furstenberg et al., 1987). Since then birth rates to the under twenties have fallen in the USA. In 1971 they were 64 per 1,000 women and in 1987, 51 per 1,000 women (Miller and Moore, 1990).

Part of the explanation for decreases in births to the under twenties lies in the availability of legal abortion. In Britain abortion was legalised in 1967. The first USA state legalized it in 1970, and it was ^{not} widely available in the USA until 1973. Therefore, it is only possible clearly to differentiate conception and birth rates after those dates. However conception rates to the under twenties in 1981 in the USA (at 96 per 1,000) were slightly lower than were birth rates in the 1950s. In Britain conception rates also declined between 1970 and 1980 in the under twenties (from 58 to 48). Francome (1986) suggests that a relatively small proportion of the decline in births to women under twenty can be explained by increases in abortion rates since conception rates have declined independently.

The decline in rates of births to the under twenties has led researchers to recognise that the much publicised claim by the Alan Guttmacher Institute in 1976 that there was an 'epidemic of teenage pregnancy' cannot be substantiated (Furstenberg et al., 1987; Willard Williams, 1991). However, in Britain there is current concern that conceptions and abortions to very young teenage women (aged under 17 years) are increasing (see CSO, 1992 for 1989 figures).

Nonetheless, there is an upward trend in the mean of age at childbirth so that, in Britain, the mean age at first childbirth is now 27.5 years (CSO, 1992). Women who become mothers before they are twenty are thus increasingly noticeable because they are having increasingly unusual.

1.3. Antecedents of early motherhood

1.3.1 Sexual relationships

The timing of sexual intercourse and its relationship to marriage has undergone rapid change in the last few decades. Whereas most young people used to delay first intercourse until they married, usually in their early twenties, most young people now have sexual intercourse for the first time while single and in their teenage years. By the time that they are twenty most young people in Britain, the USA and other industrialised countries will have had their first experience of heterosexual intercourse (Farrell, 1978; Jones et al., 1986; Francome, 1986). Over four fifths of 19 year olds (both young men and young women) interviewed in national USA surveys report that they have had sexual intercourse. One quarter of 15 year old young women and a third of 15 year old young men in the USA say that they have had sex (Miller and Moore, 1990). In Britain Breakwell and Fife-Schaw (1991a) conducted a study of a random sample of 2,171 16-20 year olds and found that 55% of 16-17 year old women and 54% of young men of the same age reported that they had experienced heterosexual intercourse, while 85% of 19-20 year old women and 84% of young men of the same age reported this. It seems that most young people first have sexual intercourse in their mid to late teens.

The partners of young people who first have sex in their teenage years are reported to be slightly older than the young people themselves. For girls this is an average of about three years older, while for boys it is about a year older. It is unusual for first sexual partners to be reported to be substantially older than the young people themselves (Zelnic and Shah, 1983).

The impact of biological maturation on the timing of first sexual intercourse is not clear. Dornbusch and his colleagues (1981) reported that individual levels of sexual maturation did not explain the variance in dating behaviour after chronological age was taken into account. Udry (1988) found, however, that for young men, levels of sex hormone did have a direct impact on the timing of first coitus. Whatever the relationship between biological maturation and timing of first sexual intercourse, however, biological factors can contribute only part of the explanation for reported increases in levels of sexual intercourse among teenagers. The fact that gender and racial differences in sexual behaviours have been reported in some studies (Miller and Moore, 1990) indicates that such factors also make an important contribution to whether or not, as well as when young people first have sexual intercourse.

Various researchers have attempted to establish whether personality variables or problem behaviours are related to the onset of early sexual intercourse. Findings on this, however, are not clear because some researchers elide early sexual intercourse and early pregnancy and treat adolescent sexual relationships as if all adolescents are single, although a minority of under twenties are married. Thus the Miller and Moore (1990) review includes studies of pregnancy as well as intercourse when

discussing psychosocial antecedents of adolescent sexual intercourse. It would seem unlikely that a behaviour which is now so common that it is normative (sexual intercourse in the teenage years) for people in their late teens (and increasingly for those in their early teens) would be amenable to the identification of personality characteristics that differentiate those who have sexual intercourse from those who do not. It is not surprising, therefore, that Miller, Christensen and Olson (1987) found that young people who had experienced sexual intercourse could be divided into two groups with regard to self esteem. Those who believed that premarital sex was usually right had high self esteem, whereas those who believed it was wrong had negative self esteem. There is thus no unitary pattern.

Some associations have been found between adolescent sexual behaviour and family characteristics. Thus the more years of education completed by parents, the less likely young people are to be sexually active in their teenage years (Zelnik, Kantner and Ford, 1981). Children in lone parent households are also reported to be more likely to have sex in the teenage years than those in reconstituted families, who in turn have been found to be more likely to do so than those living with both non-divorced parents (Newcomer et al., 1984; Thornton and Campburn, 1987). In their literature review Voydanoff and Donnelly (1990) summarise such findings thus:

Despite this complexity, two clear patterns are evident in the research. The first is that young people with the fewest resources-those who are poorer, less educated, nonwhite, from the least stable families, and who have the poorest life chances-are the ones who are most apt to become sexually active when they are quite young (Voydanoff and Donnelly; 1990:41).

However, findings on the effect of family communication and permissiveness and affective relationships are inconclusive perhaps because different studies employ completely different methods of data collection (Miller and Moore, 1990).

There is no unitary pattern with regard to peer influences on early sexual behaviour. Gender and 'race' both differentiate apparent susceptibility to peer pressure. Young black people (females and males) in the USA have been reported not to be influenced by their friends' sexual behaviour, whereas young white people have been reported sometimes to be more influenced by their peers than by their parents. In a longitudinal study Billy and Udry (1985) found that young white women were more likely to begin to have sexual intercourse if they had sexually experienced friends than otherwise. Young white males seemed to pick their friends according to whether or not they had prior sexual experience. In an Italian study Zani (1991) found that adolescents were much more likely to report that they had talked to their friends rather than anyone else about sex. Regardless of peer pressure, the availability of sexual partners must also affect young people's opportunities to engage in sexual behaviour (Harrison, 1990).

Some studies find that young women are slightly less likely to report that they have experienced sexual activity in their teens than young men are (Miller and Moore, 1990). However, Zani found that 16 and 17 year old Italian young women were more likely than their male peers to report that they were sexually 'experienced' and both sexes reported that girls were likely to be sexually active earlier than boys. In a British study Breakwell and Fife-Schaw (1991a) reported no gender differences in age when young people first had sexual intercourse.

As well as these gender differences, there are differences in sexual activity according to socioeconomic status and 'race'. Young people of lower socioeconomic status and black young people are more likely than young people of higher socioeconomic status and than white young people to start having sexual intercourse early in life (Hogan and Kitagawa, 1985; Voydanoff and Donnelly, 1990). Furstenberg, Morgan, Moore and Peterson (1987) found that the increased likelihood of sexual activity in black, compared with white, young people is related to the degree of racial integration in their schools. Black young people in predominantly black schools are more likely than those in mixed schools to report early sexual intercourse. It is not clear whether this is because young black people who go to mixed schools are different from young black people who do not or if this is a school effect. Harrison (1990) suggests that greater sexual activity among black than white young people is partly due to more 'traditional sex-role attitudes' because this leads them to accept that if a male partner insists on sexual activity within a relationship, the female partner should acquiesce. Harrison (1990) also suggests that young black men have more permissive attitudes towards sexual relationships than young white men do. In a small scale ethnographic study of three neighbourhoods, however, Sullivan (1989) found no differences between poor blacks, poor Hispanics and relatively poor whites with regard to early initiation of sexual intercourse.

It is thus now normative for young people in industrialised societies to experience sexual intercourse for the first time before they are twenty. More than four fifths of USA males and females report doing so. It is thus a minority of young people who, by the time they are twenty, have not been 'exposed to the risk of pregnancy'. Various studies have attempted to tease apart the factors that lead teenagers to engage in heterosexual intercourse. Findings from these studies are frequently inconclusive and contradictory, but while some studies report biological and personality influences, it is clear that sociocultural factors are also important. Thus family, peer and structural (gender, 'race' and social class) as well as media messages are important influences. There are intra-group as well as inter group differences in factors associated with early sexual intercourse.

1.3.2 Contraceptive use

Since most young people have heterosexual intercourse during their teenage years yet only a minority become pregnant (6% in the age group in England and Wales 1990 and 11% in the USA in 1987)

many studies which attempt to explain why teenage women become pregnant focus on reasons for their failure to use contraception.

Research on contraceptive use typically finds that at least half of the under twenties asked report that they used no contraception when they first had sexual intercourse (Morrison, 1985). Most of those who report using contraception initially used 'non-medical' forms of contraception such as the sheath or withdrawal.

In a study of 15-24 year old women attending family planning clinics for the first time Mosher and Horn (1989) found that less than one fifth were attending family planning clinics before having sexual intercourse, another 10% were attending clinics in the month after first having had sexual intercourse and for nearly three quarters there was a time gap (usually of several months or even over a year (Zelnik and Kantner, 1981)) between beginning sexual intercourse and attending a family planning clinic. Of those who attend family planning clinics, the contraceptive pill is the most popular method of contraception used (Jones et al., 1986). There is, however, an indication that there has been an increase in condom use among young men during the 1980s (possibly as a result of AIDS education). Sonenstein et al., (1989) found that many more 17-19 year old men interviewed in 1988 than in 1979 reported using condoms. At first intercourse that increase was from 20% to 54% and when asked about most recent sexual intercourse it was from 21% to 58%. In 1988 40% of the young men said they and their partners had used no contraceptive method at first intercourse and 20% said they had used none when they most recently had sex.

The reasons for young people using or failing to use contraception are necessarily complex since the tasks involved in successful, regular contraceptive can be difficult for young people.

At the most basic level, the adolescent has to recognize that he or she is or will be sexually active. The young person also has to understand that sexual intercourse leads to pregnancy and that methods of birth control can prevent pregnancy. The possibility that pregnancy could happen has to be personalized, and the adolescent has to feel that pregnancy would be a negative occurrence. In addition, the social, economic, and psychic costs of obtaining and using a method of birth control must be weighed against the perceived risks and costs of pregnancy. The use of contraception may need to be negotiated with the partner. Moreover, this calculation must be repeated regularly, since most birth control methods require action on a daily basis or with every act of sex (Miller and Moore, 1990:1031).

A great deal of research effort has concentrated on establishing young people's knowledge of sex and contraception (Morrison, 1985). There is both British and USA evidence that schools are currently

inadequate to the teaching of sex education (Allen, 1987; Jones et al., 1986; Lee, 1983) and menstruation (Prendergarst, 1989). It is now well established, however, that most young people do have theoretical knowledge about both sex and contraception and that the 'contraceptive knowledge' theory cannot explain the incidence of pregnancy in the under twenties (Jones et al., 1986; Hanson et al., 1987). Current research is, however, inadequate to an explanation of the factors that lead young people to use or not to use contraception (Harrison, 1990; Miller and Moore, 1990).

Factors which have been identified as having an impact on young people's contraceptive use are; age (Brooks-Gunn and Furstenberg, 1989); high educational aspirations (Moore et al., 1986); parental acceptance of young people's sexual activity (Morrison, 1985); societal openness about sex and easy availability of contraceptive services which are accessible to the under twenties (Jones et al., 1986) as well as gendered power relations (Holland et al., 1990) and perceived control in sexual matters (Breakwell and Fife Schaw, 1991b). Of these factors, the process by which age and high educational aspirations affect contraceptive use have been most clearly defined.

Older teenagers are more likely than younger teenagers to use contraception and this seems to be because they have access to more money and so can buy some methods or pay their fares to clinics; are less concerned about their parents finding out about their sexual activity (Brooks-Gunn and Furstenberg, 1989); recognize that it is normative for late teenagers to be sexually active (Winter, 1988); are likely to be more sexually experienced and in longer established relationships and hence less embarrassed about obtaining and using contraception (Sonenstein et al., 1989; Cvetkovich and Grote, 1981). It has been suggested that black-white differentials in contraceptive use can partly be explained by the fact that white teens tend to initiate sexual activity later than black teenagers. In their late teenage years black and white teenagers tend to use contraception in roughly the same proportions (Sonenstein et al., 1989) but black teenagers are likely to start having intercourse earlier than white teenagers (Miller and Moore, 1990).

High educational aspirations and achievement have been found to be associated with high levels of contraceptive use (Bury, 1984; Brazzell and Acock, 1988). It has been suggested that this is because academically orientated young people feel that they have more to lose from pregnancy and are well equipped to understand and to obtain birth control. Yet, some young people who do not have high educational aspirations or good employment prospects also use contraception regularly. Little is known of their motivations for doing so, although parental and family influences as well as the accessibility of contraceptive services are reported to be likely to have an impact (Jones et al., 1986; Morrison, 1985; Hayes, 1987; Shah and Zelnik, 1981).

1.4. Resolution of pregnancy

The ways in which conceptions to women under twenty are resolved have undergone rapid change in both Britain and the USA in the last two decades. Two trends are important to note. Firstly there has been a marked increase in abortion rates for the under twenties since the introduction of legal abortion in both countries (1969 in Britain and 1973 in the USA) ^{which was not fully available until} although the proportion of abortions in Britain which are to the under twenties is declining currently and women aged between 20 and 34 years have the highest proportion of abortions (CSO, 1992). Secondly there has been a dramatic reduction in rates of adoptions of babies born to the under twenties.

1.4.1 Abortion

Some differences have been established with regard to the social characteristics of young women who become pregnant and go on to have children and those who have abortions. A major finding is that aborters are more likely than non-aborters to be doing well at school and to have high educational and occupational aspirations (Bury, 1984; Carlson et al., 1986; Phipps-Yonas, 1980). Once pregnant, black and white young women are equally likely to have abortions. The apparently higher rates in black young women are due to the fact that black young women have higher conception rates than white young women (Henshaw and van Vort, 1989).

There are other important influences on young women's decisions to have or not to have abortions. Younger teenagers are more likely than older teenagers to have abortions. In Britain the under 16s are slightly less likely to give birth than to have abortions, but this pattern shifts at age 16 and is reversed thereafter (CSO, 1992). Women who have religious affiliations (particularly fundamentalist ones) are less likely to have abortions (Henshaw and Silverman, 1989). Perhaps partly related to this is the fact that young women who have liberal attitudes to abortion are more likely to have abortions than those whose parents and social networks ^{dis}approve of abortion (Brazzel and Acock, 1988). Marriage also differentiates pregnant young women who have abortions and those who do not. Married teenagers and those who marry during pregnancy are less likely to have abortions than those who remain single (Cooper, 1991; Miller and Moore, 1990). There are also regional variations in both Britain and the USA in whether women have abortions or not (Francome, 1986).

1.4.2. Adoption

In Britain and the USA (as well as in many other countries) the introduction of legal abortion together with decreased stigma for lone motherhood have, together, combined to reduce the numbers and the rates of babies offered for adoption (Tizard, 1991a). In Britain adoption statistics are not broken down according to the age of the birth mother but USA survey data from the 1970s and 1980s suggest that for single white teenagers who gave birth, the proportion of babies offered for adoption fell from 18% in 1971 to seven per cent in 1982. Far fewer black teenage women gave their babies up for adoption

over that period. The comparable figures for black teenagers was two per cent in 1971 and less than one per cent in 1982 (Bachrach, 1986).

The little research evidence available on the adoption of children born to the under twenties suggest that they are single women, (and, at least for white women) tend to have more educational aspirations and to come from families which are economically better off than those who do not give their children up for adoption (Resnick, 1984; Voydanoff and Donnelly, 1990). The effects of placing a child for adoption are not clear although it seems that, in general, those who give their children up for adoption and those who do not report themselves to be equally satisfied with their decisions twelve months after birth (McLaughlin et al., 1988).

1.5. The social and economic circumstances of mothers under twenty

Women who become mothers before they are twenty are more likely than those who do not to have been separated from their parents at some time in childhood (Wolkind, Kruk and Chaves, 1976); to come from larger than average families of origin; to have mothers who themselves gave birth before twenty; to have parents who have separated; to have achieved few educational qualifications; to have few material resources available to them and to be single when they give birth. The fathers of their children generally come from similar backgrounds (Bolton, 1980; Bury, 1984; Pittman, 1986; Simms and Smith, 1986). Scott and Perry (1990) suggest that black women under twenty who live with both their parents are more likely than those who have been brought up with only one parent to delay pregnancy beyond their teenage years.

The well established association between poverty and early motherhood raises the question of whether early motherhood causes poverty or whether poverty tends to be the context within which teenage women are likely to give birth. It is increasingly being recognised that simply deferring motherhood would not necessarily improve the socio-economic circumstances of most women who become mothers before they are twenty. Data from economic demography suggests that women who are not affluent are more likely than those who are affluent to have children earlier in their lives. Using data from the Longitudinal Study (a one per cent sample of those enumerated in the 1981 British Census) Bruce Penhale (1989) found that women who were 17-19 years old and unemployed at the 1981 Census were much more likely than their employed peers to have a child in the following five years. Heather Joshi (1989) suggests that women who have relatively high earnings are likely to defer childbirth because childrearing would involve them in foregoing more earnings than women who earn less. Similarly, McCrate (1989) uses economic analyses to argue that, given their social situation in the USA, the deferment of motherhood is less effective for black than for white mothers under twenty. This may partly explain Scott Jones and Turner's (1990) findings that there were no differences between black women who delayed childbearing and those who did not.

With regard to education it also seems that for white women in the USA, early motherhood follows 'school dropout' rather than preceding it (Rhode, in press). However, black women may be more likely to stay in education for longer than their white peers (Edelman and Pittman, 1986). In Britain there is less focus on school drop out in early motherhood than in the USA because it is possible to leave school with minimal qualifications at 16 years, while in the USA it is more usual to stay on until 18 years to complete high school. In the context of findings such as these, Arline Geronimus (1987) suggests that early motherhood may be an adaptive strategy for specific groups of young women.

Drawing on these findings, one can suggest that in the United States and conditional on poverty-out-of-wedlock, teenage motherhood can be an adaptive strategy... Those teenagers believed to possess the skills necessary to overcome chronic barriers to achievement and upward social mobility are selected out of the peer group and are discouraged from bearing children during their teens. For those with less apparent chance of achieving upward mobility, early fertility may be one effective way to pursue personal and cultural survival and development (p.256).

Elster et al., (1989) performed secondary analyses of data from a national USA sample (the National Longitudinal Survey of the Work Experience of Youth). They suggest that there is a clear association between problem behaviour and early motherhood such that women who become mothers under twenty are more likely than their childless peers to have engaged in some antisocial behaviour.

1.5.1. Marriage and early motherhood

Over the last thirty years in Britain and in the USA there has been a marked increase in the proportion of births to the under twenties which are to single women. In Britain in 1961 19% of births to teenagers were to single (that is, not legally married) women. The comparable figure in 1989 was 78%, a fourfold increase (CSO, 1990) which is only partly the result of a reduction in 'shotgun marriages'. In the USA rates of births to single women under twenty stood at 15% in 1960 (Furstenberg et al., 1987) and also increased fourfold, to 64% in 1987 (Miller and Moore, 1990).

The context in which these increases have occurred is one in which there have been sharp rises in the overall percentages of births to single women of all ages in most western countries (Cooper, 1991). Cooper suggests that such increases can be related to a number of factors. These include; lower marriage rates; higher divorce rates and, therefore, a decrease in the proportion of married women of childbearing age; increased cohabitation; and hence joint registrations, at the expense of marriage and; a decrease in rates of marriage following conception. In Britain, General Household Survey data suggests that almost two thirds (63%) of births to single women under twenty are jointly registered with the fathers of the children. This compares with 71% of births to single women of all

ages. Of the joint birth registrations to single teenage women, two fifths (43%) are to women who report separate addresses from their children's fathers while three fifths (57%) are to those who report cohabiting relationships. For women of all ages 70% of joint registrations are to couples who report that they live at the same address (Cooper, 1991).

It follows from this that it is difficult to infer the nature of the relationships between mothers under twenty and their children's fathers simply from information that they are single. Yet, published material on single mothers under twenty tends to treat them as if they constitute a homogeneous group characterised by the absence of their children's fathers. This 'father absence' has been associated with a range of social problems, most notably economic disadvantage (Bury, 1984; Pittman, 1986; Robbins et al., 1985; Simms and Smith, 1986).

The data available on the benefits of marriage for young women is mixed. Furstenberg and his colleagues found that those 17 year old mothers who married and remained married until their children were aged 17 years were much more economically advantaged than were those who either did not marry or who divorced. There are indications that young women who are economically better off are more likely to marry than those who are not (Voydanoff and Donnelly, 1990). Furstenberg (in press) argues from this that it is important to devise strategies to encourage young men to participate in their children's lives. However, mothers who do marry have been reported to receive less support from their families than those who do not (Miller and Moore, 1990).

Marital status changes over time. Furstenberg et al., (1987) found that 17 years after first having given birth less than a sixth of their sample (14%) had never had a marital or cohabiting relationship lasting at least 6 months although, by then, only 16% were married to the father of their first child. Teenagers who marry are more likely than older people who marry to be divorced later on (Rimmer, 1981; Kiernan, 1989). This fact has generated some debate in the literature about whether social scientists should encourage mothers under twenty to marry. Chase-Lansdale and Vinovskis (1987) argued that social scientists must bear a large share of responsibility for the reduction in rates of marriage to 'teenage mothers' since, on the basis of findings that early marriage is likely to end in divorce, they have discouraged marriage among teenagers. They argue that marriage should not be discouraged for mothers in this age group since it can mitigate the negative consequence of early motherhood. In response, Furstenberg (1987a) pointed out that marriages to teenagers are less stable than marriages to older women and that mothers under twenty who marry are more likely to have male partners who are more economically secure than those who do not. As a result, he argued, marriage cannot be considered to be beneficial to most women who give birth in their teenage years. However, his argument failed to convince Vinovskis (1987) and Vinovskis and Chase-Lansdale (1987).

Although little work has been done on the reasons for young people who become parents to either

marry or not, some support for Furstenberg's (1987a) suggestion that teenage women are more likely to marry the fathers of their children if the men can make some economic contribution to wives and children is provided by Wilson (1987) and Sullivan (1989) who suggest that the poorer economic circumstances of young black USA men in comparison with their white peers is likely to lead young black women and young black men alike to eschew marriage when pregnancy occurs. This may be a partial explanation for the USA differences between rates of single motherhood for white (about 50%) and for black teenage women (over 90%).¹ Economic factors are, however, inextricably linked with cultural practices (Voydanoff and Donnelly, 1990; Sullivan, 1989).

1.6 Outcomes of early motherhood

More research attention has been paid to the impact of early motherhood on the children born to women in their teenage years than to its impact on the women themselves. Thus, although there are general findings about its impact on mothers, there is relatively little detail about them.

1.6.1. Outcomes for children

In comparison with children born to older women, children born to teenage women have been reported to fare badly in a number of ways. 'Teenage motherhood' has been associated with low birthweight and risks of perinatal mortality for infants (Butler et al., 1981, Wells, 1983; Bury, 1984). The children of 'young mothers' have been found to be at more risk of physical abuse and accidental injury than the children of older mothers, to do less well educationally than the children of older mothers (Alan Guttmacher Institute, 1981; Butler et al., 1981; Bury, 1984) and to be likely to start having children early in their life course (Furstenberg et al., 1987).

Later on in childhood, children born when their mothers were in their teenage years are reported to be more likely than children born to older mothers to be educationally disadvantaged; to be subject to parental miscare such as neglect or abuse; and to have accidents which result in injuries serious enough to require hospitalisation (Butler et al; 1981; Furstenberg et al., 1987).

The few studies (all done in the USA) which have followed children born to women under twenty into adulthood and reported their findings suggest that the gap between individuals born to younger mothers and those born to older mothers continues later in life. By early adulthood children born to mothers under twenty years of age are reported to have fewer educational qualifications and less desirable jobs than children born to older women. In addition they are reported to be more likely to start having children early in their life course, and to have more children than their peers (Furstenberg et al., 1987; Card, 1981).

¹These figures exclude Hispanics

This dismal prognosis for children born to young women has been linked with a variety of suggested causes. Young women's immaturity, inadequate knowledge of child development and how to bring up a child as well as economic disadvantage have all been blamed (Lamb and Elster, 1986; Card, 1981; Newson and Lilley, 1988).

Many are victims of child abuse at the hands of parents too immature to understand why their baby is crying or how their doll-like plaything has suddenly developed a will of its own. (Wallis, 1985).

Relatively little is known about the kind of parenting that children born to mothers who are under twenty years of age experience (Lamb and Elster, 1986). Several USA observational studies have, however, suggested that mothers under twenty years of age are less responsive to their infants than older mothers are (Landy, 1981; Crnic et al., 1983). By the time they are a year old Landy (1981) suggests that this lack of responsiveness results in children being insecurely attached to their mothers. In Britain, Wolkind (1984) found that the only difference between the mothering styles of mothers under twenty and those over twenty was that at four months postnatally younger mothers held and touched their infants less than did older mothers

Contrary to Wolkind's findings, mothers under twenty years of age have sometimes been reported to engage more in physical interaction, (including punishment) and less in verbal interaction with their infants than do older mothers (Field et al., 1980; Sandler, 1981). Lamb, Hopps and Elster (1987) observed the infants of 'adolescent mothers' at six months and gave them a 'Strange Situation' procedure at 14 months. They reported higher than expected levels of avoidant behaviour in the Strange Situation which they related to lower levels of maternal engagement with infants at six months. Differences in parenting style between mothers who are under twenty years of age, and those older have been considered to indicate:

That adolescents are less effective caregivers than adults in terms of providing a nurturant environment for their infants... environmental stimulation input to infants of adolescents is deficient in terms of frequency and stability of maternal contact, amount of verbal stimulation, need gratification, emotional climate, avoidance of restriction on motor and exploratory behaviour, provision of audiovisual and learning toys, and home characteristics indicative of parental concern with achievement. These findings strongly suggest that infants of adolescents may be at some developmental risk as a function of the postnatal environment typically available to them, insofar as that environment does not facilitate cognitive growth (Carlson et al., 1986: 10-11).

This profile of inadequate parenting in the teenage years has been attributed to several factors, including inadequate knowledge of child development (Epstein; 1980; Fry, 1985) and hence unrealistic expectations of their children (Wise and Grossman, 1980). However, in a British sample, Prendergarst and Prout (1980); Prout (1985) and Prout and Prendergarst (1986) found that teenage school girls had realistic knowledge of the practicalities of mothering and of antenatal care. In addition mothers under twenty are reported to be less tolerant than older mothers of their children once they pass early infancy (Lamb and Elster, 1986). In their review of the 'parental behaviour of adolescent mothers and fathers' Lamb and Elster conclude that:

There are several reasons for concern that the psychosocial circumstances of teenage parents may adversely affect the quality of their parental behaviour. Psychological immaturity, lack of parenting skills, economic stress, and stresses implicit in premature role transitions... (Lamb and Elster, 1986:103).

A British study of child abuse and neglect suggests that age of mother has a significant impact on the incidence of child abuse and neglect. Creighton (1985) conducted an epidemiological study of 5,000 families who had been reported for both abuse and neglect in Britain between 1977 and 1982 and found that just over a third (35%) of abused children and just under a third (30%) of neglected children had been born while their mothers were still in their teenage years. However, a major problem with this method is that it cannot eliminate the possibility that age of mother may be a factor that itself leads to differential reporting of child abuse.

Other evidence on whether women who become mothers under twenty are likely to be abusive of their children suggests that they are not. Bolton and Belsky (1986) report a study done for the Child Welfare League of America by Miller. Miller did not rely solely on officially reported cases of child maltreatment (as is usually the case), but also examined those dealt with by community agencies, but not necessarily reported. Miller found that 'adolescent parents' who abused their children in their teenage years were over represented by only three per cent. Those who gave birth in their teenage years, but abused their children in their twenties were over represented by about seven per cent. 'The expected "epidemic" of maltreatment perpetration by adolescent parents simply failed to materialize' (Bolton and Belsky, 1986: 125).

Another British study (Newson and Lilley, 1988; Newson and Newson, 1991) suggests that single mothers under twenty years of age living in Nottingham are no more likely to report that they smack their one year old children than older women are. The reporting of smacking is, however, mediated by class. Far fewer middle class women than working class women admit to smacking their children. But there are no significant differences between younger, single women and their married older

counterparts from classes IV and V. The London Hospital Study followed up white, working class mothers (a third of whom were in their teenage years when they gave birth) from birth until the children were six years old. They found no differences between the parenting received by children born to the younger mothers and those born to the older mothers on most measures (Wolkind, 1984).

Most mothers who are under twenty years of age are reported to be affectionate towards their children and not to neglect them.

Yet we found little evidence that most mothers neglected their children. On the contrary, the energy put into providing adequate care while they were in school or at work, the pride they take in their teens' accomplishments, and the strong feelings of love are evident from the interviews. Most mothers feel they have done a good job, in less than ideal circumstances... (Furstenberg et al., 1987: 104).

There were no group differences in feelings of love for the infant (Lamb and Elster, 1986:97 (reporting Mercer, Hackley and Bostrom, 1984).

The general picture that emerges is that of some nine out of ten teenage mothers being pleased with having their babies so young...when their babies have reached the toddler stage (Simms and Smith, 1986: from a nationally representative sample of British mothers under twenty).

The evidence on the effects of early motherhood on children born to mothers who are under twenty, is far from clear cut. Many published studies suggest that such children fare badly in a number of ways. Poor outcomes are said to partly result from parental characteristics, and partly from the parenting styles of women under twenty years of age. Yet the evidence available does not consistently support the belief that early motherhood is, in itself, detrimental to children's development.

1.6.2. Outcomes for mothers

Women who become mothers early in their life course are reported (at least in the USA and in Canada) to have a greater than average number of children than those who start childbearing later (Furstenberg et al., 1987). The association between early motherhood and larger than average completed family size, is not established in Britain (Bury, 1984). Early motherhood has also been reported to damage young women's educational and employment prospects (Chilman, 1980; Phipps-Yonas, 1980; Wells, 1983; Simms and Smith, 1986; Furstenberg et al., 1987).

Wells (1983) referred to the catalogue of ills associated with early motherhood as a 'gloomy adumbration'. Yet, many negative findings about early motherhood are now being questioned. There are suggestions, for example, that the late teenage years are biologically ideal, or at least not worse than older ages, for childbearing (Morris, 1981; Geronimus, 1987). Similarly it now seems that, even in Canada and the USA, women who start having children early in their life course are not likely to have a large number of children (Balakrishnan et al., 1988; Furstenberg et al., 1987).

Many of the negative consequences associated with motherhood in the under twenties seem more likely to be the result of the poor socioeconomic circumstances in which women who give birth before they are under twenty years of age live and of the fact that they are more likely than older mothers to be having their first child. If parity and various factors known to be correlated with social class are controlled for, the differences between younger and older mothers are greatly reduced (Butler et al., 1981).

Social support has been identified as an important influence on the lives of people of varied ages in a variety of circumstances (Gottlieb, 1981; Brannen and Collard, 1982; Belle, 1982; Riley and Eckenrode, 1986; Willmott, 1986). However, little attention has been paid to social support as a mediating influence on how mothers under twenty and their children fare.

In a now classic ethnographic study of black families living in a housing project, Stack (1974) found that single mothers (not necessarily in their teenage years) had a wide kin network, many members of which participated in childcare. Their children's fathers and fathers' kin also provided social support to the mothers. In a more recent ethnographic study, Sullivan (1989) found that single black fathers of children born to teenage women also participated in childcare, more so than did single Hispanic or white fathers. Linda Burton and Carol Stack (in press) and Willard Williams (1990) also found that various types of black kin network provided social support for mothers under twenty and their children.

However, Willard Williams (1990) and McGowan and Kohn (1990) both expressed dismay that the social networks of black mothers under twenty did not include 'officials'. McGowan and Kohn (1990) also differ from the other researchers on social support and black mothers described above in that they reported surprise at how little social support was available to the black mothers they studied. Cross (1990) reported 'race'/marital status interactions for the amount of social support available to mothers and how supported they felt.

Clark and Coleman (1991) have recently completed a follow up study of 50 women who had been resident in a project for 'vulnerable adolescent mothers' and babies between 1973 and 1988. Ninety per cent of the women reported that they had found the particular support they experienced from the

project extremely beneficial to good outcomes.

Few studies have focused on the ways in which teenage women who become mothers perceive their motherhood. Those that have generally find that most consider motherhood to be a positive influence on their lives (Ladner, 1972; Stack, 1974; Simms and Smith, 1986; Furstenberg et al., 1987; Speraw, 1987; Willard Williams, 1991).

1.7. Issues of 'race'

It will be apparent from the review above that one recurrent theme in USA literature on mothers under twenty is that there are differences between black mothers in the age group and white ones in incidence of early intercourse, early childbirth and single motherhood. The issue of 'race' and early motherhood is one that will be explored in chapter 2.

CHAPTER 2: Methodological and theoretical issues in the literature

The previous chapter reviewed the literature that has attempted to establish the causes and consequences of motherhood in teenage women. Most of that literature reports negative findings for mothers under twenty and their children. Wells (1983) referred to the catalogue of ills associated with early motherhood as a 'gloomy adumbration'. Yet, there is a more recent critical literature which questions the negative findings reported for early motherhood. This chapter considers the critical literature on early motherhood, firstly with a general focus and secondly with specific reference to comparisons of black and white mothers under twenty.

2.1 Types of criticisms of literature on early motherhood

The widespread assumption that 'teenage motherhood' is necessarily problematic is increasingly being challenged in three important ways.

1. Firstly, negative outcomes are not as common as is generally believed. It is, in fact, only a minority of 'teenage mothers' and their children who are reported to suffer such poor outcomes.

Some researchers suggest that the evidence on which the worrying conclusions described above have been based is rather weak and that negative aspects of early motherhood have been overstated (Furstenberg et al., 1987).

More recent studies which control for such factors as SES, nutrition, maternal age, race (white/black), and prenatal care reveal good obstetric and paediatric outcomes among adolescent mothers (Carlson et al., 1986).

A generalised negative orientation towards motherhood in this age group is, therefore, increasingly recognised to be inappropriate. For example King and Fullard's study of 14-19 year old US mothers led them to conclude that 'the most important conclusion for the present study is that sweeping condemnations of teenage mothers are no longer appropriate' (King and Fullard, 1982: p.345). King and Fullard suggested that individual differences between women who give birth in their teenage years need to be taken into account since many fare well. In their national study of British 'teenage mothers and their partners' Simms and Smith (1986) found that 11% of those they interviewed when their children were a year old reported that they were not pleased to have become mothers when they did (Simms and Smith, 1986). It is obviously far from ideal that more than one in ten of those they interviewed were regretful that they had become mothers but this finding needs to be put into context. Firstly, the majority of Simms and Smith's sample were satisfied at becoming mothers when they had. Only a minority were dissatisfied. Secondly some older women also fare badly in motherhood (Macintyre and Cunningham-Burley, in press) or find motherhood, whether in the first months or when

children are older, difficult to cope with (Boulton, 1983; Oakley, 1979).

With regard to how the children born to women in their teenage years fare, many studies which report deleterious effects of early motherhood find that developmental test scores of children born to mothers under twenty fall within the standardized normal range of scores. In comparison with the average scores of children born to older mothers, however, children of 'teenage mothers' have a lower average score (Carlson et al., 1986). In a British large scale national study Butler and his colleagues (1981) found significant differences between the test scores at 5 years of age of children born to mothers under twenty, and those born to mothers over twenty. The largest differences, however, were between children whose mothers were under 18 years and those whose mothers were over 30 years. Differences either disappeared or were vastly reduced if 18 and 19 year old mothers (who constitute the majority of mothers under 20) were compared with older mothers. When analyses of covariance were performed on the data, socioeconomic factors as well as a range of other factors accounted for more variance in children's test and behaviour scores than maternal age did.

These findings indicate that a division between teenage mothers and 'older mothers' is a relatively spurious one. Eighteen and 19 year olds have more in common with 20 and 21 year olds than they do with 16 year olds. It is the youngest teenagers (and hence teenagers who are least likely to become mothers) who are most likely to be dissatisfied with motherhood and whose children are most likely to show poor development. In addition socioeconomic factors are a critical influence on how mothers of any age group fare. It seems, therefore, that negative aspects of motherhood early in the life course have been overstated (Furstenberg, 1987b). Indeed there is evidence that the late teenage years are biologically well suited to childbearing (Morris, 1981; Geronimus, 1987). Furthermore it appears that in some ways early childbearing may be beneficial to women's health. For example, women who give birth in their teenage years are less likely than those who give birth later in life to suffer from breast cancer (Plesko, 1990).

2. This leads on to the second way in which assumptions that 'teenage motherhood' necessarily leads to poor outcomes have been challenged. Some researchers are now arguing that the continued focus on age as if it is the critical explanation for 'the problems of early motherhood' prevents recognition of the real causes of negative outcomes. They argue that the factors which are reported to be consequences of early motherhood may instead provide the context within which it becomes acceptable or desirable to give birth in the teenage years (Geronimus and Korenman, 1990; Kohler Riessman and Nathanson, 1986; Willard Williams, 1990). Geronimus (1987) used a combination of sociological, ethnographic and biomedical data sources on early motherhood to argue that the continued research assumption that there are 'true age effects' in early motherhood leads researchers to 'run the risk of missing more important determinants of neonatal mortality' (p.253). By

considering the whole reproductive age span rather than simply the teenage years, Geronimus found that there are greater black-white differences in neonatal mortality rates between 24 and 29 years of age than at any other time in the reproductive age span.

Geronimus argues that the explanation for black teenagers of 17 or more (who are more likely than white teenagers to become mothers) having better neonatal mortality rates than black first time mothers in their middle twenties is that teenagers have had less exposure to the negative effects caused by living in poverty and with the socioeconomic consequences of racial discrimination than have older black women. Thus a social policy approach that assumes 'true age effects' could recommend the deferment of black teenage childbirth and hence, potentially increase, rather than reduce, black-white disparities in neonatal mortality rates. In the USA dropping out of school has also been reported to be more likely to pre-date than to follow conception in teenage women, particularly for young white women (Edelman and Pittman, 1986; Rhode, in press). Crockenberg (1987a) suggests that research on the latest generation of 'adolescent mothers' and their babies has brought with it 'the recognition that adolescent mothers are not a homogeneous group. Some do quite well in their role as mothers, which suggests that age alone is not a sufficient predictor of maternal behaviour' (p.3).

In a similar way, Christ et al., (1990) concluded from their data that age of mother was spuriously related to child conduct problems because of the common associations between early motherhood, socioeconomic status and parental antisocial behaviour. Brickner Rothenberg and Varga (1981) also report that when background characteristics are controlled for, the children of teenage mothers are as healthy and develop as well as those of older mothers.

3. The third way in which the negative orientation to early motherhood in the literature is increasingly being argued to be inaccurate relates to methodology. Various reviews of the literature on early motherhood in the 1980s have pointed out its many methodological shortcomings (Chilman, 1980; Phipps-Yonas, 1980; Morrison, 1985; Carlson et al., 1986; Furstenberg et al., 1987; Miller and Moore, 1990).

...Methodological limitations are widespread. Control groups are often inadequate or unavailable and sample sizes are too small...Many of the study variables are highly correlated with teenage pregnancy, which makes it difficult to determine the extent to which each contributes to the problem... Heterogeneous groups...are all lumped together...Thus, it becomes virtually impossible to focus on antecedent variables or on outcomes or to generalize from one sample to others (Bucholz and Gol, 1986:357).

As a result some writers on early motherhood argue that despite the hundreds of studies and theoretical articles that have been done, we currently know very little about early motherhood.

Although this has become an increasingly popular area of research, our knowledge of adolescent parenting is still surprisingly limited. Among the problems accounting for this are methodological inadequacies (Lamb and Elster, 1986:89).

One of the methodological inadequacies that has received attention in the literature is the use of inadequate control groups. Research into early motherhood is often designed with a group of 'teenage mothers' and a comparison group. While some research reports refer to non-teenage groups as 'control groups', the women in them tend to differ from those who become mothers before they are twenty in more ways than those generally considered to account for differences between them.

For instance mothers who are under twenty are frequently compared with mothers who are over twenty. Age is not usually, however, the only factor which differentiates younger and older age groups of mothers. If the older group are having their first child they may well differ from the younger group on any of the following factors; class, education, employment histories, marital status, living accommodation and relationship with parents. If the older group are having a second or subsequent child, parity differentiates them since most mothers who are under twenty years of age are having their first child (Butler et al., 1981; Simms and Smith, 1986; Jones et al., 1986).

A comparison of 'young mothers' with their age peers who do not have children is equally unsatisfactory since the two groups are likely to differ on social characteristics other than motherhood. The use of comparison groups in early motherhood is, therefore, likely to confuse cause and effect because the groups chosen for comparison are likely to differ in unspecified ways other than the age at which they first become mothers. It is, therefore, difficult to establish whether differences found between the groups are the result of early motherhood, or of pre-existing social differences.

The imperfect fit between the comparison group and the research group makes it unsatisfactory to draw firm conclusions from the data. Some researchers are clearly aware that the comparison group they use falls short of a control group, but continue to use the apparently more scientific term:

For convenience, the comparison group in their twenties is referred to as a control group (Broman, 1980).

Comparisons can, in themselves, be problematic because they generally highlight and exaggerate

differences between groups while ignoring similarities (Archer and Lloyd, 1982; Scott-Jones and Nelson-Le Gall, 1986). Such exaggeration of difference would not be important if the groups being compared were of equal status. But women who become mothers in their teenage years have a devalued status in comparison with women who give birth later in life. Comparisons between mothers who are under twenty with those who are over twenty are thus likely to construct older mothers as the 'norm' and younger ones as deviant. In reality there are many similarities between some mothers who are under and some who are over twenty years of age when they give birth (Butler et al., 1981; MacIntyre and Cunningham-Burley, in press).

From their 17 year follow up of 'adolescent mothers', Furstenberg et al. (1987) echo Card's (1981) conclusions that early motherhood has some long term negative consequences:

Although the adolescent mothers in this study fared much better in later life (in terms of jobs, welfare, and subsequent childbearing) than many observers would have predicted, they unquestionably remained at a disadvantage compared to women who postponed childbearing (Furstenberg et al., 1987:133)

From a public policy standpoint this would be an important finding if it were indeed the case that there are unquestionable disadvantages for women who give birth before they are twenty in comparison with women who postpone childbearing. Methodological issues make it difficult, however, to be certain that this conclusion is as definite as claimed by Furstenberg et al. At their seventeen year follow up of teenage mothers and their children, Furstenberg et al. were unable to re-interview the matched comparison group they had recruited in 1976 and, instead, had to use data from four national large scale data sets in order to estimate how the Baltimore sample compared with their black age peers throughout the USA who had not become 'teenage mothers'. The absence of a directly comparable group of black women who deferred motherhood makes it difficult to establish 'true age effects'.

Other research findings contradict Furstenberg's et al's strong claim. Geronimus and Korenman (1990) used multivariate analyses to explore the relationships between early motherhood and women's socioeconomic status. A methodological innovation in these analyses was the inclusion of a comparison of sisters who had given birth at different ages. Geronimus and Korenman found that in comparison with their sisters who gave birth in their teens, the additional schooling experienced by women who gave birth after their teens had little positive impact on improving their family income. Their findings are confirmed in work by McCrate (1989) who used econometric analyses of the National Longitudinal Survey of Youth.

McCrate defines 'teenage mothers' as women of seventeen years or under on the grounds that these are the ages at which school (rather than motherhood) is supposed to be young people's major preoccupation. She used a human capital approach to argue that black women who become mothers in their teenage years accurately anticipate discrimination in the employment market. Because discrimination suppresses black people's opportunities in the employment market, young black women have less incentive to avoid teenage births than do young white women. As a result, births to teenagers are not as costly for black as for white teenagers. Some support for McCrate's ideas that, by themselves, educational qualifications do not give a precise indication of future labour market experience is provided by Sullivan's ethnographic work. Sullivan (1987) reports that, in comparison with their better qualified black peers, lack of qualifications had little impact on young white men's access to relatively well paid, secure employment.

In considering Furstenberg et al's (1987) conclusions, it is also necessary to ask whether relatively crude indices for comparison (such as class, colour and age) are sufficiently discriminating of the factors that lead some women to become mothers early in their life course. A major problem is that matching samples on 'race', class and age does not necessarily ensure their similarity in other important ways. People of the same class, 'race' and age differ, for example, on their attitudes to and experiences of education. Since educational attainment either before or after birth has some impact on whether women who become mothers before they are twenty are eventually self supporting, those differences are important ones. In addition social class is difficult to operationalise. It is, therefore, not entirely clear which factors need to be taken into account in studies of mothers under twenty which attempt to control for socioeconomic status (Butler et al., 1981).

The correlates of social class have been shown to differ for black people and for white people. In Britain black people tend to be better educated than white people who are within the same occupational groupings. Black people are also more likely to be unemployed than white people who have similar educational qualifications (Brown, 1984; Tizard et al., 1988). A similar situation exists in the USA (Edelman and Pittman, 1986). The existence of racial discrimination thus ensures that 'race' and social class are, to a large extent, interlinked.

A further way in which social class has an unacknowledged impact on findings on mothers under twenty relates to the developmental testing of children. Standardised assessments are a commonly used methodological tool in studies of the children of mothers who are under twenty. Having been standardised and extensively used, they are often considered to be useful diagnostic and predictive tools. In particular the Caldwell and Bradley (1980) Home Observation for Measurement of the Environment (HOME) inventory and the Bayley Scales of Infant Development (Bayley, 1969) have often been used in assessments of children born to mothers who were under twenty.

The HOME inventory has six subscales. Four of these are; 'avoidance of restriction and punishment' (subscale II); 'organisation of the physical and temporal environment' (subscale III); 'provision of appropriate play materials' (subscale IV); and 'opportunities for variety in daily stimulation' (subscale VI).

A good score on many items in the HOME scales is dependent on parents having a good deal of physical space, relaxed time and material resources. Similarly infants are likely to do better on the Bayley test if they have had the opportunity to practise the required skills on toys similar to those which form part of the Bayley kit. The tests are, therefore, biased towards middle class infants. Middle class parents who have the money to provide such toys are more likely to have children who do well on the Bayley test than are the children of working class parents.

Furthermore, developmental assessments need to be presented in standardised situations. If assessments are conducted in infants' own homes, middle class children are likely to be privileged over working class ones because middle class children are more likely to live in environments in which they can be tested without distraction. Given that women who give birth in their teenage years are predominantly from the working classes. It may well be that the numerous studies which report that the children of 'teenage mothers' fare badly on developmental tests are confounding age with class instead of obtaining a genuine age effect.

Butler et al. (1981) controlled statistically for various correlates of social class in their study of early motherhood. They found that controlling for socioeconomic variables greatly reduced the differences between mothers who are under twenty years of age, and older mothers. But they could not be sure whether they had included all possible correlates of class in their statistical manipulation.

The fact that the differences between teenage and other mothers were in general reduced by such attempts to control possibly confounding co-variables supports the view that there is little specific biological effect of maternal age that could not be explained by other intervening variables; we just haven't allowed for all the right ones (Butler et al., 1981, 2:63).

Just as the choice of comparison groups in early motherhood has frequently been unsatisfactory, so too has the choice of the target group. The use of the term 'teenage mother' to describe all women who give birth before they are twenty years of age allows researchers to study a disparate group of women without having to justify the choice of sample. Conversely it also means that researchers can generalise from particular sub-groups of early mothers (eg. black, single, or under 18 year olds are popular sub-groups for study) to all 'teenage mothers'.

The choice of subgroups of 'teenage mothers' (like those mentioned in the last paragraph) for study is often underpinned by value laden assumptions. Such choices often seem to be motivated by views about which sorts of 'teenage mothers' will yield the most dramatically poor results. Hence findings on single mothers under twenty are often reported as if 'single' is synonymous with 'young' (MacIntyre and Cunningham-Burley, in press). This confounding of age and marital status is not helpful to the understanding of early motherhood (Marsiglio and Scanzoni, 1990). In a parallel way, black 'teenage mothers' have been the focus of many studies of early motherhood in the USA. This would not be remarkable in itself if black mothers were routinely the subjects of research. However black mothers are often excluded from studies which are concerned with the process of 'normal' mothering or 'normal' child development (Phoenix, 1987). In this context a devalued group of mothers (black mothers) are only studied as representatives of a devalued category of motherhood ('teenage motherhood').

2.2 Explanations of the negative focus on early motherhood

The above sections discuss the ways in which negative interpretations produced in much research on early motherhood have^{ve} been challenged by some researchers for; overgeneralisation from the data available; misinterpretation of the evidence through assumptions that there are 'true age effects' and methodological limitations. Yet, despite these challenges, most literature on 'teenage motherhood' continues to assume that age becomes problematic when teenage women give birth.

This section will explore four ways in which early motherhood runs counter to expectations of ideal motherhood and hence continues to be negatively socially constructed.

2.2.1 Ambiguity of adolescence as a status

In many societies it is generally accepted that childhood and adulthood are qualitatively different. Adolescence is conceptualised as a developmental period of transition from childhood to adulthood (Coleman, 1976; Coleman and Hendry, 1989). The teenage years are considered to overlap with the period of adolescence, but adolescence is not well defined, and it is difficult to know when it can be said to have ended. There is, for instance, a disjunction between the age of biological maturity (the age of menarche for girls being about 13 years of age) and the age of social maturity which is not clearly defined, but is later than that of biological maturity.

As social and economic circumstances have changed over this century, the boundaries between adolescence and adulthood have become increasingly blurred. Longer compulsory education, and increasing participation in further education have kept teenagers in dependent status for longer and longer periods. The first pay packet used (at least for young men) to signal the start of financial independence. But with increasing rates of unemployment (particularly for young, working class men;

Unemployment Unit and Youthaid, 1991) many young men cannot signal their transition to adult status through gaining employment.

For young women, marriage was the equivalent status marker of adulthood. But women who are under twenty are less likely to marry than they were 20 years ago. In Britain in 1971, 9% of teenage women married for the first time, compared with 2% in 1986. Almost a third (31%) of all first marriages were to teenage women in 1971. But by 1986, this had reduced to just under a sixth (14%). Relatively few teenage women, therefore, achieve adult status through marriage. So although teenagers are, in many ways, encouraged to see themselves as adult, the signifiers of adult status are harder for them to achieve than they once were. This ambiguity of status has been exacerbated by the 1988 changes in British Social Security legislation. People who are under 26 years of age now cannot be assured of financial independence from their parents if they are dependent on Social Security.

If the status of teenagers is ambiguous, the status of mothers who are in their teenage years is even more so, because they have taken on an adult role, without it being clear that they possess the maturity necessary to it. The status of British mothers who are under 18 years of age is particularly ambiguous since from 1988 they have received less income support than the over 18s do and, as a consequence, are likely to be less financially independent than the over 18s.

While adolescence is perceived as a period of preparation for adulthood, adolescents are more likely to be thought of as children rather than adults (Murcott, 1980) because they are not generally expected to take part in many adult activities. As such they are conceptualised as needing to be in a state of innocence. Murcott argues that it is the conceptualisation of adolescence as a period of childhood which makes the status of women who become pregnant in their teenage years ambiguous. Pregnancy is a clear indication of sexual activity, and as such, of loss of innocence. Giving birth is also considered to be an adult activity. Because adult maturity and adolescence are both ill-defined social constructs and it is generally assumed that adolescence and the teenage years are coterminous it is not clear that women who give birth before they are twenty years of age are adult. Yet, the fact that the majority of women who give birth in their teenage years are actually 18 or 19 years of age makes it debatable, or at least an empirical question, whether most are actually 'adolescent' in terms of maturity.

Willard Williams (1990) conducted an interview study with 30 black mothers under twenty living in Boston. She found that they had maternal characteristics that are usually associated with mature motherhood.

The responsibility of parenthood emerged as a persistent theme. Contrary to conventional wisdom, these young mothers did not treat their babies as dolls or have unrealistic expectations about the love a baby was capable of giving them. Most of the mothers were responsible parents who put the needs of their children before their own convenience. Several of the thirty young mothers experienced motherhood as a maturing experience. They were proud mothers who frequently associated childbearing and educational achievement with happiness and self-esteem (Willard Williams, 1990:101)

Emotive concern about 'children having children' is exacerbated by beliefs that motherhood may disrupt the psychological work of adolescence. Adolescence has often been conceptualised as a period of 'storm and stress' marked by conflicts with parents and other figures of authority (Cohen, 1986), and as a time when identity development comes sharply into focus (Erikson, 1968). It is not, however, clear that adolescence is necessarily stormy or stressful (Coleman, 1976; Coleman and Hendry, 1989; Carnegie Council, 1990) and while many dramatic biological, emotional and social changes may occur in adolescence, development continues throughout the life course (see, for example, Salmon, 1987). Little is known about whether the psychological development which occurs in adolescence is qualitatively different from development at other times in the life course. Thus, while some writers have expressed concern that motherhood in the teenage years may arrest young women's psychological development at a crucial point (Bucholz and Gol, 1986) there is currently insufficient research evidence to confirm or disconfirm this view.

2.2.2 Moral reasons

Pregnancy and motherhood force public recognition of heterosexual activity and, as such, raise moral issues that many people find uncomfortable.

The subject of teenage pregnancy seems to raise almost every politically explosive social issue facing the American public: the battle over abortion rights: contraceptives and the ticklish question of whether adolescents should have easy access to them...Indeed, even the basic issue of adolescent sexuality is a subject that makes many Americans squirm (Wallis, 1985:30).

Controversies about the morality of sexual activity in young people are more common in the USA than in Britain, but are not restricted to the USA. In Britain, for example, in 1985 the High Court ruled (on a case brought by Victoria Gillick and later overturned by the Law Lords) that under 16 year olds (who are under the age of consent, which is 16 years in Britain) could not be prescribed contraception without parental consent. This ruling was later overturned. However, in 1988 the British government passed legislation designed to ensure that parents, not schools, were responsible for deciding what

constitutes appropriate sex education for their children. Teenage sexuality is clearly considered by some members of British society to be an area where parents should have the power to regulate their children's sexuality.

A higher proportion of pregnancies in the under twenties (nearly a half in the USA and nearly a third in Britain) are medically terminated than in any other age group of mothers (OPCS, 1988). Moral controversies about the easy availability of abortion are, therefore, particularly relevant to teenagers (Ineichen, 1986; Francome, 1986). The USA Supreme Court restrictions to the availability of abortion in July 1989 is likely, therefore, particularly to affect pregnant under twenty year olds. A likely, but unintended consequence will be an increase in the number of, and hence, concerns about early motherhood.

Despite widespread alarm in the USA about rates of early motherhood, motherhood was more common amongst the under twenties in 1957 than it is in the 1980s. Some of the decrease in rates of births to teenage women is accounted for by an increase in abortion rates following the legalisation of abortion. The decrease in rates is thus partly for a morally controversial reason (see for example Ineichen, 1986). There has additionally, however, been a dramatic increase in the rate of **single** motherhood to the under twenties. The high incidence of single motherhood is considered immoral by some writers on early motherhood because it breaches accepted wisdom about the importance of children being reared within a stable marital relationship and makes heterosexual intercourse outside marriage obvious.

Arney and Bergen (1984) describe shifts in the discourse of early motherhood over time. They argue that pregnant teenagers used to be thought of as a moral problem, and as such were punished and excluded from society. In the 1970s they came to be seen as a 'technical problem' requiring continuous analysis and enquiry rather than exclusion and punishment.

The power relations between 'young mothers' and society did not, however, change. Pregnant teenagers were seen as social, rather than moral problems, but were still considered deviant and problematic. The solution to the problem of 'teenage motherhood' also changed. Punitive exclusion gave way to supportive rehabilitation with young women being encouraged to control their own sexual behaviour (Arney and Bergen, 1984). In a Foucaultian (1977, 1979) sense, therefore, the collection and construction of knowledge about mothers became the means of regulating mothers under twenty. Prevention of early motherhood through self regulation with regard to sexual intercourse and contraception was advocated rather than retribution and deterrence through punishment of offenders.

According to Arney and Bergen, the end of the 1960s marked a shift in the terminology used in the

research literature. The concepts 'unwed mother' and 'illegitimate child' were much less used, and instead 'teenage pregnancy' came into popular usage.

"The change in terminology marks a shift in the kind of attention society shows the pregnant adolescent. Changes in terminology were accompanied by changes in patterns of care. We say care became more 'liberal' and 'humanized'." (Arney and Bergen, 1984:11).

Arney and Bergen's account is a useful one, but they present the conceptual shift too starkly. In reality the terms 'unwed/single/unmarried mother', 'one-parent-family' and 'illegitimate child' have continued in widespread usage at the same time as the term 'teenage pregnancy' has gained currency. Indeed, 'teenage mother' is frequently used as if it were synonymous with 'single mother'. It is often not clear whether married mothers who are under twenty years of age are included within moral concerns to do with early motherhood (Macintyre and Cunningham-Burley, in press; Luker, in press).

In any event, the fact that it is now more usual for mothers who are under twenty to be single than to be married when they give birth means that they fail to conform to dominant constructions of reproductive ideologies. These constructions suggest that children should be reared by parents who are married to one another and that conception should follow marriage and a period of setting up home (Busfield, 1974; 1987).

Central to the notion of marriage preceding motherhood are the functions that society (represented by legislative structures of family law, welfare provision and pronouncements by politicians and public figures) expects parents to fulfil. These functions are financial, social and developmental, and are expected to be divided between mothers and fathers. Fathers are expected to provide adequate financial support for their wives and children while mothers are expected to care for their children in such a way that their social, emotional and intellectual development are fostered. This model assumes that mothers will be economically dependent on their husbands, and that provision for all children's needs will be a private family affair, independent of state intervention (Antonis, 1981).

For most women who give birth in their teenage years, there are two problems with the model described above. Firstly mothers who are under twenty years of age are much less likely than older mothers to be married when they give birth. But even married teenage women cannot guarantee that the fathers of their children will be able to provide economic support for them.

With regard to sexuality, marital status and provision of care for their children, mothers under twenty thus continue to be seen by some people as posing a moral challenge to social norms.

2.2.3. Socioeconomic characteristics of mothers under twenty

The previous chapter discussed the well established association between poverty and motherhood in the teenage years. Early motherhood is more common in teenage women who come from backgrounds that are not considered ideal for childrearing and are considered to be socially problematic in many ways. 'Young mothers' are thus frequently women from devalued groups behaving in ways which do not meet with social approval.

The relatively high levels of 'welfare dependence', poor educational achievements and poor employment prospects of mothers who are under twenty have led some researchers to suggest that teenage women who can least afford to, are the ones who are most likely to have children (Bolton, 1980; Pittman, 1986; Simms and Smith, 1986).

The men who father children with women in this age group are more likely to experience unemployment than their age peers (Simms and Smith, 1986; Lamb and Elster, 1986). In addition they are similar to the women with whom they have children in mainly coming from larger than average, working class families which can provide few material resources to the children young men produce. Relatively few male partners of mothers who are under twenty years of age are, therefore, likely to be able to support women and children economically.

Since most young women and their male partners are unlikely to be able to make financial provision for their children they are likely to be dependent on welfare provision. They therefore fail to fulfil the expectation that parents will make independent provision for their children. With increasing commercialisation of childhood there are pressures on parents to provide expensive toys and clothes for their children, as if children were private luxury goods. Most mothers who are under twenty years of age are unlikely to be able to buy such toys and clothes. Mothers under twenty therefore come to public attention as deficient parents, whose inability to make material provision for children is seen in individualistic, rather than structural terms.

It is generally recognised that young women's and their male partners' material circumstances would not necessarily improve if they deferred motherhood (Bury, 1984; Pittman, 1986). Yet 'illegitimacy' and 'welfare dependence' continue to be one of the major concerns expressed in literature on early motherhood because both threaten the moral-ideological framework in which children are to be reared, and are potentially costly to the state.

The socioeconomic characteristics of mothers under twenty and their male partners thus make them socially distant from, and hence often enigmatic to, the researchers who study them. This raises the question succinctly put by a referee to a book on early motherhood which is to be published by Yale

University Press (in which I have a chapter).

To what extent is the panic about teenage pregnancy an instance of the middle class attempting to legislate norms, values, and practices (regarding sexuality and fertility timing) that are consistent with their world-view, experiences, and opportunities, but possibly at odds with those of members of other classes (where teen childbearing is more typical)?

Evidence about how 'young mothers' and their children actually fare is largely irrelevant to moral concerns about early motherhood. By their very existence 'teenage mothers' constitute a moral, and hence a social, problem. But what happens to women who become mothers before they are twenty years of age and to their children is, of course, also taken into account by those who feel that early motherhood is a worrying phenomenon. Moral and outcome concerns are often not clearly separable.

2.3 The intersection of social construction and research

The negative social construction of early motherhood provides the context within which early motherhood is discussed and studied. It is perhaps not surprising, therefore, that most research literature has assumed that early motherhood is problematic, and best prevented if possible. Research findings thus tend to reinforce popular beliefs that early motherhood is a social problem.

A lot of research on 'teenage mothers' is published in academically 'respectable' journals, and as such is considered to be scientifically objective. It, therefore, has the power to produce accounts of early motherhood which are widely accepted as valid (although accounts produced by other groups of professionals, eg. medical practitioners may also become accepted as 'common sense' knowledge).

In recent years there have been various challenges to the uncritical acceptance of social science research as scientifically objective and value free (Stanley and Wise, 1983; Henriques et al., 1984). These challenges have been partly based on demonstrations that social scientists 'have failed, on particular occasions, adequately to transcend the "folk knowledge" or "lay understandings" to which they as ordinary social participants are privy' (Kitzinger, 1987:13).

As members of society researchers are necessarily influenced by dominant social constructions. In addition much social research aims to benefit society by attempting to contribute to the understanding and hence hopefully to solving particular social problems. In order to obtain research funding for the study of early motherhood, and for research findings to have some impact it is usually necessary to relate the research to early motherhood as a pre-identified social problem.

It is therefore difficult, even for those researchers who do not endorse the view of motherhood as a

social problem, to avoid using the negative social construction of 'teenage motherhood' as a starting point for research.

The purpose of this study is to identify risks to mother and child associated with adolescent pregnancy...(Broman, 1980).

The objective of this study was to assess the degree to which teenage parenting, a caretaking casualty risk factor,...might contribute to developmental delays of infants...(Field et al., 1980).

This book describes a study that attempts to cast some light on the determinants of teenage pregnancy in the United States, and the means to prevent it...(Jones et al., 1986).

This study, then, sought to investigate whether,...teenage pregnancy is as harmful a phenomenon as is widely believed, and if it is, what steps might be taken to mitigate it and to help other teenagers postpone or avoid it (Simms and Smith, 1986).

Because the social construction of early motherhood is a negative one the very existence of 'teenage mothers' is considered problematic. As a result, as the pattern of early motherhood has changed, the focus of concern about it shifts, but the concern remains. Thus researchers use increases in the numbers of single 'teenage mothers' to justify the importance of early motherhood as a study topic even when rates of motherhood in the under twenties are decreasing. It is not uncommon for concern about a 'social problem' to be expressed when that phenomenon is becoming increasingly rare. For example, expressions of moral and professional concern with perinatal mortality in the 1970s coincided with a steady decline in rates of perinatal mortality (Oakley, personal communication). Similarly, Davis (1989:22) points out 'that at the very moment when we (Americans) have become most concerned about black teenage pregnancy, it has started to decline.'

Since early motherhood is now less common than it was in the 1970s, the importance of the topic is more frequently legitimated in terms of the increase in 'illegitimacy' than in birth rates per se (Ineichen, 1986).

Like researchers, demographers are exposed to dominant views of 'teenage motherhood'. Demographic trends in pregnancies and births to the under twenties are provided and attract attention because they are considered problematic.

Demography is not a neutral enterprise; inevitably it is socially located. Issues are identified as worthy of focus prior to, and beyond demography. Teenage pregnancy...already has significance socially. (Murcott, 1980:11).

In recent years reported studies of early motherhood have more frequently than formerly noted the structural context of poverty in which mothers who are under twenty years of age live. Thus employment prospects, educational backgrounds and poverty are sometimes mentioned as factors which may influence young women to become mothers (Bury, 1984; Ineichen, 1986; Simms and Smith, 1986; Jones et al., 1986).

However, relatively little account is taken of women's material backgrounds in analyses of their lives and behaviour, or in decisions about how best to deal with 'teenage motherhood'. Thus researchers from the Children's Defense Fund state 'there is evidence...that the teens who find themselves unmarried, unemployed, dropout parents...would be unmarried, unemployed, and uncredentialed even if parenthood had not occurred' (Pittman, 1986). Yet the stated aim of preventing 'adolescent pregnancy' in order to 'ensure each child a **successful** adulthood' (my emphasis) takes no account of the fact that poverty may prevent some children from having 'successful' adulthoods.

The net result of failure to take full account of structural considerations in early motherhood is the individualising of the problems associated with motherhood in the under twenties. Rather than being viewed as a phenomenon related to social factors, early motherhood has progressively come to be seen as the result of individual moral failing (Arney and Bergen, 1984). 'Blaming the victim' is not an uncommon phenomenon once a social problem has been identified. Early motherhood is merely one instance where a social problem is identified and it is then assumed that '...the individual is not only the culprit, but also the proper focus of social intervention...' (Seidman and Rappaport, 1986).

2.4. 'Race' and motherhood in the under twenties

In both British and USA societies 'teenage motherhood' and black families are considered to be problematic (Lawrence, 1982; McAdoo, 1988). It is perhaps not surprising, therefore, that black mothers under twenty have been subjected to more negative attention than have white mothers under twenty. This is particularly the case when they are single (as most are). Black mothers under twenty thus provide an example of the intersection of three negative social constructions (of black people, of 'teenage mothers' and of female headed households). Similar arguments can be applied to women from other minority groups (for example Hispanic women) who are also considered to pose problems with regard to early motherhood. The discussion presented here, however, uses black women to consider whether the focus on 'race' which is commonly taken in USA research on teenage motherhood assists understanding of the causes and consequences of motherhood early in the life

course.

In the USA (where statistics are routinely broken down by colour) it is clear that early motherhood is more common among young black women than among young white ones (Jones et al., 1986). Comparable information about black and white rates is not yet available in Britain. However, using data from the Longitudinal Study of one per cent of the British population enumerated at the 1981 census, Penhale (1989) suggests that women of Caribbean origin are more likely to become mothers early in life than other young British women. In their analyses of data from the Child Health and Education Study of women who gave birth in Britain in one week in 1970, Osborn and Milbank (1985) found no differences in the proportions of European, Afro-Caribbean and Indian/Pakistani women who gave birth in their teenage years.

Many of the problems associated with black people are considered to result from the pathology of black families.

The point implied in much of the literature is that a lot of the culturally 'abnormal' behaviour of minority groups can be traced back to supposed family deficiencies. Additionally, the problematic black family background is often implicated in explanations for unrest, decay and violence in the inner cities (Brittan and Maynard, 1984:134).

Public concern about single black teenage mothers in the USA thus developed in a context in which black family structures had already been defined as problematic by some writers:

The intellectual history of this problem (lone black mothers under twenty) begins not with teenage pregnancy, which only became a public concern around 1970, but with worries about black family structure that began in the 1960s with the Moynihan Report (1965). (Willard Williams, 1990:1).

Although eugenic beliefs and policies are now not officially sanctioned, most western societies are concerned to influence the quantity and quality of children produced (Phoenix, 1989). In societies such as Britain and the USA which are permeated by racial discrimination and racist ideologies against blacks and other minority groups, fears about 'race' and reproduction serve to focus public attention on devalued groups of black mothers and make them a potent political issue while ignoring similar white groups. Thus while black mothers and children are frequently omitted from research studies when 'normal families' are being studied there are many studies which focus exclusively or predominantly on black, lone and/or teenage mothers (Phoenix, 1987; 1988a).



Ward (1989) interviewed professionals working in the field of 'adolescent pregnancy' in Louisiana. She suggests that black and white professionals use different models to inform their interests in and concerns about 'adolescent pregnancy'.

Many leading black professionals state their views that population policy, certain economic policies, and programs for adolescent pregnancy are, in fact, a 'hidden white agenda' In private interviews, the fears of genocide are openly discussed... At the regular conferences and task force meetings held on the subject, white leaders will go to elaborate lengths to dissuade their black colleagues that genocide is not the population policy of either the U.S. government or the state of Louisiana... (p.151)

The white social-structural model is built on the ideal of 'the quality of urban life'. At the conservative end of the spectrum, the concrete concerns are crime, the cycle of poverty, or the availability of trained and willing workers... The liberal end of the spectrum will emphasize the rates of infant mortality..., good prenatal care and the now voluminous documentation about the relationships of age at first pregnancy, family size, educational achievement, career development and social mobility (Ward, 1989:p.152).

Ward suggests that both black and white proponents of 'this socio-structural model' consider that early motherhood is caused by, and causes, a variety of social ills. It is perhaps to be expected that black professionals would additionally be concerned about the possible eugenic underpinnings of state interest in black motherhood in the under twenties. There have been instances of 'sterilization abuse' on black women in the USA (Davis, 1981) and interest in black 'teenage mothers' occurs in a context where racial discrimination is common.

The concentration specifically on black mothers in much work on mothers under twenty could be considered to be simply benign; an example of scientists attempting to understand social problems in order to help alleviate them. However recent research (which is not on early motherhood) influenced by the work of the French philosopher of science, Michel Foucault, would suggest the possibility of another interpretation.

The sciences claim to describe a population in order that they can better be governed. The rise of sciences therefore is not simply about academic disciplines, but, as we shall see, it is about the development of specific practices through which families, mothers, children, might be 'known' in order better to regulate them... However, as in all struggles for power, this knowledge is constructed out of an uneasy compromise... Regulation is not neutral, but is about a knowledge which suppresses and silences other knowledges in producing its own vision. What always has to be regulated is the threat of uprising, the bid for freedom of the

oppressed (Walkerdine and Lucey, 1989:34).

Many writers and researchers on 'teenage pregnancy' in general and 'black teenage pregnancy' in particular are explicit about their aim of reducing conceptions and births to the under twenties. Researchers' aims of regulating births to the under twenties is often clearly inspired by good intentions of improving the life chances of young women from lower socioeconomic groups and/or the black population. Nonetheless the focus on black family forms as responsible for black people's problems within British and USA society focuses attention on black cultural forms and deflects attention from other explanations. The ways in which racial discrimination intersects with social and economic factors as well as with household organizations, therefore, receives less attention than it otherwise might and than it deserves.

Qualitatively different types of explanations for the incidence of 'teenage motherhood' have generally been advanced to explain conceptions in black and other minority women than in white women. Sociocultural explanations have generally been advanced for the incidence of pregnancy in young black women, and psychological ones for the occurrence of early pregnancy in white women (Phipps-Yonas, 1980). Despite the absence of national statistics there is also a similar tendency in Britain (Phoenix, 1988b).

Assumptions that black and white young women become pregnant for different reasons have served to obscure rather than aid understanding of trends in early motherhood. It is worth highlighting two ways in which this is the case.

1. Rates of single motherhood in young white women have vastly increased in the USA so that while young black women still have a much higher rate of single motherhood than young white women the differences in the rates has been reduced. "...Blacks may simply have been the pacesetters for the population at large" (Furstenberg et al., 1987:p.5). Furthermore white teenage women in the USA now have a higher rate of births than women in the same age groups in most other industrialized countries, whether (as in Britain) those countries have sizeable black populations or not (Jones et al., 1986). Early childbearing in single women can no longer, therefore, be considered simply to be a black cultural issue.

2. Rates of single motherhood in black teenage women have not always been high. In the 1950s it was exceptional for black mothers under twenty to be single when they gave birth (Benjamin, 1987). But marriage among black teenagers in the USA has virtually disappeared (Wilson, W.J 1987). In 1960 nearly a third of all 18 and 19 year old black women in the USA were married compared with less than 3% in 1984 when 89% of births to black teenagers were to single women (Furstenberg et

al., 1987). There have thus been parallel changes in childbearing patterns for white and for black teenagers. High rates of early childbearing in black women cannot satisfactorily, therefore, be explained simply by reference to black/white cultural differences in factors such as attitudinal and family functioning or group relationships. Cultural factors can provide only part of the explanatory framework for reproductive differences between black and white teenagers (Franklin, 1988).

For these reasons it is important to establish rather than to assume that there are differences between black women and white women under twenty and if differences are found, to explain them rather than assuming that 'race' is automatically a proxy for cultural differences or other inherent racial differences.

It is not that there are no differences between black and white mothers under twenty, or that differences between them are not important. USA data consistently shows that young black women are more likely than their white peers to engage in sexual activity early, to become pregnant and to have children while remaining single ((Franklin, 1988; Furstenberg et al., 1987). Those differences are well documented (although Sullivan found that young white, Hispanic and black men from roughly comparable backgrounds were equally likely to have sexual intercourse) (Sullivan, 1988). It is, however, less clear how those differences can be accounted for. Some writers have sought explanations in attitudinal factors while others have concentrated on socioeconomic differences between blacks and whites. Attitudinal factors are clearly important to an understanding of motherhood in the under twenties. Yet the fact that black people in USA (as well as British) society are more likely than white people to experience poverty must also be taken into account. Davis (1988) for example attempted to isolate the effects of race on adolescent pregnancy and infant mortality. He concluded that:

'The key to this entire process is the relationship between poverty, teenage pregnancy and LBW (low birth weight). Race is important only because it affects poverty...In general, and relative to its direct effects on infant mortality, the strongest effect of race seems to be by way of poverty, not teenage pregnancies.' (Davis, 1988:906).

It is commonplace for black as well as white writers to express concern that the preponderance of black over white single teenage childbearing is likely to be generally deleterious to black people (Benjamin, 1987). Yet it is generally acknowledged that marriage rates in young black women have diminished as unemployment in young black males has increased. William, J. Wilson (1987) suggests that contrary to some reports that the provision of welfare payments encourages lone parenting "among blacks, increasing male joblessness is related to the rising proportions of families headed by women" (p.83) as well as a shortage of marriageable males (Davis, 1989; Edelman and Pittman, 1986). Staples suggests that commitment to marriage has not diminished among young black people, but

that structural constraints prevent them from marrying (Staples, 1988).

William Wilson (1987) considers that a separate factor explains the increase in white female headed households; namely women's increasing financial independence. Yet there seems no clear reason for postulating different explanations for black and for white single motherhood. Most white women who become mothers in their teens, for example, are unlikely to be financially independent and, as in Britain there has been a large increase in single parenthood among all mothers under 20. There may thus be fewer black-white differences between 'teenage mothers' than between other age groups of mothers.

The undoubted structural differences between black people and white people may give the impression that their behaviour necessarily has different aetiology, but the automatic presumption of different influences may impede understanding of the common factors underpinning apparently different behaviour. Furstenberg provides a clear example of how black teenage women and their white peers may have the same motivations for marrying or staying single but be impelled in different directions by structural factors.

For whites, marriage operates as a major recovery route, offering an alternative or, at least, an important supplement to their own earning ability. Low education and restricted job opportunities, therefore, are not quite as costly as they are for black young mothers. On the other hand, the advantages of delaying parenthood are not so great for blacks as well... The cruel fact is that for blacks delaying childbearing has a relatively low payoff. They are damned if they do and damned if they don't. (Furstenberg, 1987b:396-397).

Furstenberg et al.'s 17 year longitudinal follow up of black mothers who had been 17 years old when they had their first child similarly found that marriage did not increase most young black women's economic advantage.

We also must report that marriage per se contributes little to a woman's economic chances... Only those who married early and remained married escaped economic disadvantage, and as we saw earlier, many of the early marriages quickly dissolved... (Furstenberg et al., 1987:67).

In fact 'only 26% of the sample were in a first marriage; just 16% had remained married to the father of the study child' (Furstenberg et al., 1987:31).

Since mothers under twenty generally have male partners who are poorly qualified and unskilled

(Simms and Smith, 1986) increasing rates of unemployment among young, unskilled males (Unemployment Unit and Youthead, 1991) may largely account for the dramatic increases in the proportion of young women who are single rather than married when they give birth (Ladner, 1988). Four fifths of British mothers under twenty are now single when they give birth.

The invoking of cultural differences to explain differences in patterns of behaviour sometimes leads to simplistic theorising of culture as a concept. Yet because cultural practices are dynamic and are not independent of the societies in which they occur it is possible for people who were once culturally distinct to share features of their cultural practices. Recent British work on youth cultural practices demonstrates how a minority of white British young people, for example, take on black youth cultural forms and go to great lengths to do so (Hewitt, 1986). In Britain (but less so in the USA) a simple bipolar black/white distinction is increasingly likely to fail to reflect the complexity of 'race' in British society since an increasing number of young people are of mixed parentage and some researchers now argue that some children of mixed parentage see themselves not as black or as white, but as distinctively mixed (Anne Wilson, 1987).

Sullivan (1987) provides a useful way of conceptualising culture so that a focus on cultural differences does not ignore the structural circumstances in which people live. Sullivan conducted an ethnographic study of three groups of young men living in Brooklyn who fathered children with teenage women; poor blacks, poor Hispanics and poor whites. He found no differences between the young men in reported early sexual activity but marked differences between them in terms of attitudes to abortion, marriage and fathering. Hispanics were most disapproving of abortion with blacks ambivalent and whites most likely to approve; whites and Hispanics were more likely to marry after conception than blacks, but unmarried blacks were more likely than any of the other two groups to have continuing contact with their children and to provide direct childcare when with them. The context in which these responses to fathering children occurred were ones in which half the black young men stayed longer in full time education than either of the other groups and got clerical or service-sector jobs with better prospects for upward mobility than their Hispanic peers, but less money than their less qualified white peers. For the white youths decent jobs and housing were available through social network contacts, so that those who married were able to support their families and obtain housing without having educational qualifications.

A study like Sullivan's is important in pointing out the inextricable linking of 'structural economic factors, culture, and social ecology in shaping processes of family and household formation' (Sullivan, 1987:57). The distinctive range of responses to early pregnancy in each of the three ethnic groups was affected by the resources that were available within their communities. Blocked access to decent jobs, for example, was an important influence on responses in the two minority communities. Thus

cultural values were not 'unchanging, primordial entities but rather as collective responses of people with distinctive group histories to different and changing structural positions in society' (p.57). Equally importantly, there were similarities as well as differences between some individuals in the different neighbourhoods. Blocked opportunities caused by poor experiences of the labour market or through drug dependence occurred in all the neighbourhoods (but on different scales). Men with these experiences did not tend to marry the mothers of their children.

The argument here is that while there are likely to be important cultural influences on black and white 'teenage mothers' and their partners, cultural differences need to be demonstrated rather than assumed. Sullivan's small scale study is able to provide indications of cultural differences and commonalities between blacks, Hispanics and whites because he uses detailed ethnography which lends itself to the examination of cultural practices. Commonalities in the social constructions and experiences of blacks and whites clearly exist but hitherto have been given little recognition. An example of similarities in the social constructions of blacks and whites is provided by a British study of young women moving from the labour market to un/employment. Griffin found that teachers held similar views of white working class and black young women.

Teachers tended to attribute the problems of working class students to their supposedly 'deviant' families rather than to material conditions such as unemployment or poverty... Catholic families were particularly likely to be seen as problems. 'They shouldn't have so many children if they can't afford it,' as Ms Ryman told me... White teachers also referred to black students' family lives as a potential source of 'problems' (Griffin, 1985:p.46).

Just as there are similarities between different racialised groups, there are also differences within groups. Black people do not constitute an essential, unitary category any more than white people, women or different social class groups do (Westwood, 1991; Phoenix, 1987). Yet comparisons of blacks and whites frequently treat 'race' as unitary and as a proxy for cultural differences while constructing whites as the norm and blacks as deviant (Scott-Jones and Nelson-Le Gall, 1986). However, in the case of early motherhood, evidence from the USA makes it clear that early motherhood cannot be accurately considered to be a 'black problem' (Furstenberg, 1987b; Marsiglio and Scanzoni, 1990).

2.5. Summary

This chapter has discussed literature which argues that 'teenage motherhood' is not a widespread social problem but that it is a minority of 'young mothers' and their children who fare badly. The attention that early motherhood evokes is partly because negative outcomes are generally highlighted in research reports, but is also the result of an interrelationship between moral concerns, the status

ambiguity of adolescence, concerns about high levels of state dependence in 'teenage mothers' and the social distance between young women who become mothers under twenty and the professionals and researchers who study them. This social distance raises the question of whether most of those who write on 'early motherhood' are implicitly assuming that behaviour that is well suited to white middle class life styles would be equally well suited to the different circumstances of mothers under twenty (few of whom are from the middle classes).

Once an issue (like 'teenage motherhood') has been defined as problematic, that definition gains its own momentum. Thus negative findings from a minority of individuals are overgeneralized to include the whole group and individuals within the group are considered only in relation to their problem status. The cause of the problem is couched in individualistic terms which result in 'victims' being blamed for causing the perceived problem (Seidman and Rappaport, 1986). Not surprisingly, therefore, researchers in the area of 'teenage motherhood' (who in terms of social class and sometimes colour and gender tend to be socially distant from their respondents) generally start from the assumption that motherhood in the teenage years is problematic, and highlight negative findings.

Many of the negative consequences seem more likely to be the result of the poor socioeconomic circumstances in which women who give birth before they are under twenty years of age live and of the fact that they are more likely than older mothers to be having their first child. If parity and various factors known to be correlated with social class are controlled for, the differences between younger and older mothers are greatly reduced (Butler et al., 1981).

The major problem that mothers under twenty face is economic, but early childbearing does not cause poverty. Low socio-economic status generally predates pregnancy and motherhood in this age group. There is currently little conclusive evidence about whether some mothers under twenty would fare better if they deferred motherhood. However, a consideration of the economic effects of early childbearing needs to be located within debates about socio-structural influences. A narrow focus on age and marital status is insufficient to provide the necessary answers.

This chapter has further suggested that a good understanding of 'teenage motherhood' cannot be fostered by simple assumptions that black and white mothers are culturally different. The interpretation of black/white differences in reproductive patterns that have been recorded requires recognition of commonalities in black women's and white women's reasons for becoming mothers early in their life course, and for remaining single when they do so. These commonalities are related to structural factors such as higher rates of unemployment. Such factors economically disadvantage black people in comparison with white people and hence influence different patterns of behaviour. Further work needs to be done to detail the ways in which culture, social structure and neighbourhood

factors intersect to have an impact on black and white mothers under twenty and their children.

CHAPTER 3: Aims, Methodology, Conceptual frameworks and Methods of Analysis

The literature described in the previous two chapters provides some insight into issues associated with early motherhood that need to be addressed. Despite the extensive nature of this literature, there are still many issues that require investigation in order to aid the understanding of motherhood in the under twenties. In addition, there is very little published research on early motherhood which is British rather than from the USA. Yet there are important social differences between Britain and the USA (for example in social security systems and even in rates of early motherhood). Most of the research literature on early motherhood that exists is thus of limited relevance to the British context.

This chapter starts by discussing the research issues thrown up by the reviews of the research literature, that are investigated in the present study. It then describes the aim of the present PhD study and the methodology to which it gave rise. It ends by presenting the analytic framework of the study.

3.1. Research issues for the present study

1. Young women's own perspectives on early motherhood

Most of the research reports produced on mothers under twenty are from 'outsider' perspectives. Little note is taken of what young women themselves feel about the fact that they have become mothers and how motherhood fits into their lives. A major absence in the literature is, therefore, young women's viewpoints on themselves as mothers and on their children.

2. Issues of data interpretation

The lack of consensus on the consequences of early motherhood for young women and their children is partly accounted for in the critical literature as problems of data interpretation. In particular three sets of interpretive problems can be identified.

- i. Writers on early motherhood often fail to consider 'young mothers' lives in their social context. This often results in insufficient account being taken of the fact that young women, their parents and male partners frequently experience poverty and poor employment prospects before conception occurs. The consequence of this is that the impact of socioeconomic status on early motherhood is not adequately theorised and negative effects are individualised.
- ii. A further interpretive problem concerns the analytical orientation of much literature on early motherhood. The usual analytical assumption is that there are negative effects of early motherhood. Research designs and analyses then assume and look for poor outcomes rather than treating possible negative effects as empirical questions which require testing.

iii. An issue which is interrelated to the other two is the assumption of essential differences between black and white mothers under twenty. This leads to sociocultural explanations of black early motherhood with less emphasis on sociocultural influences on white early motherhood. It also allows inadequate theorisation of assumed differences and lack of recognition of similarities between 'young mothers' of different colours.

3. Inter and Intra-group differences

In order to establish the consequences of early motherhood most studies use comparison groups of either older mothers or age peers who do not have children. The critical literature has drawn attention to the methodological problems associated with the use of inadequate comparison groups. The focus on differences between women who become mothers in their teenage years and those who do not has served to deflect attention away from variability within the group of young women who are studied together as a group because they have children within the same age span. The question of the extent to which they actually constitute a group is not usually addressed.

4. Effects on children

Current literature is divided as to the consequences of early motherhood for children. Despite the fact that much attention has been devoted to studying how the children of 'teenage mothers' fare, methodological problems, problems of interpretation, contradictory findings and a concentration on simple 'snapshots' have contributed to a lack of clarity in the research literature. In addition scarcely any attention has been paid to the ways in which women who became mothers in their teenage years construe the impact of early motherhood on their children as well as how they feel about their children.

5. Longitudinal perspective

Much of the research literature interviews, observes or tests young women and their children at one time or age period. This overreliance on 'snapshots' makes the status of 'outcome' measures somewhat doubtful in that processes that may lead to change in developmental status, for example, cannot be recorded. There is a need for more longitudinal studies of early motherhood.

6. Social support

The literatures on social support and on early motherhood have not been sufficiently related together. Increasing attention has been paid to the importance of social support as a mediating factor in social support. Yet most studies of early motherhood continue to study 'young mothers' in isolation from their social networks. The social networks of mothers under twenty and the effect of social support on this age group of mothers need further documentation and analysis.

7. Marriage

The fact that it is now normative in Britain and in the USA for women who give birth before they are twenty to be single rather than married when they give birth has received much attention in the literature. Little of that attention has been on women's own views about men and marriage or on examinations of the circumstances in which 'young mothers' either marry or remain single and whether these contribute to the decrease in rates of early marriage.

3.2. The history of the project

The project was funded by the then Department of Health and Social Security as part of a programme of longitudinal work at the Thomas Coram Research Unit on **The Implications of Diverse Family Lifestyles for young children and for the services they require**. Peter Moss obtained the funding to direct the programme. The programme consisted of two projects; the first being **The Day Care project** and the other the project on which this PhD is based.

My contribution to the project was substantial in that I wrote the literature review that led to the reformulation of the design of the study and took a leading part in the reformulation process. I also had a substantial role in developing measures and in the conceptual development of the study, particularly with regard to the ways in which social construction and life course perspectives were used (see below for discussion of these). I also did more interviews than any other fieldworker. I did nearly half of the in-depth interviews at the first round (47%; 37), 46% (39) at the second interview, 41% (28) at the third round and 40% (26) of the developmental tests. I was the only interviewer to interview respondents at all three contact points. I administered the day to day running of the project and did all the data analysis and writing up (apart from one research note; Melhuish, 1989) as the sole author.

The focus of the project changed over time. It was originally intended to focus on different age groups of women who gave birth without following the normative prescription of marrying first. The design was changed before I joined the project. At that time it was intended that the study should follow a common research format and compare a group of 'indigenous' mothers under twenty and an age-matched group of 'West Indian' mothers. That revised design was altered for reasons discussed in chapter 2 and in sections 3.4 and 3.7 below.

The project eventually focused on a study population of women who gave birth to their first children when they were aged between 16 and 19. It aimed to document the histories of the mothers and their children over the transition to motherhood and in the first three years after birth and to assess the developmental status of their children.

3.3. Aims

There were five main aims of the study which arose from the research issues listed above:

- 1) To contribute to the understanding of early motherhood in the current British context with regard to both the women and their children.

- 2) To gain a greater understanding of the processes which lead to pregnancy and motherhood in this age group, particularly in the context of the increase in rates of births to teenage women who are single when they give birth.

- 3) To gain an understanding of the processes that lead to mothers in this age group and their children either faring well or badly.

- 4) To gain an understanding of intra-group differences, particularly between those who fare well and those who do not.

- 5) To gain an understanding of young women's own perspectives on their early motherhood.

3.4. Design

This study was designed to be descriptive and longitudinal. It studied both the sample of women who gave birth in their teenage years and their children, with contact points in late pregnancy, six months after birth and 18 months after birth. It was designed to obtain descriptions of how women and their children fared over the period from late pregnancy to the end of children's infancy and a retrospective picture of women's lives prior to conception and during early pregnancy. The main method of data collection was maternal report but children's developmental status was assessed on a standardised developmental test at the end of the study.

The usual design of studies on mothers under twenty is one in which they are compared with a control or comparison group either of older mothers, or of their age peers who have not become mothers, or where black mothers under twenty are compared with white ones. Yet, the choice of comparison groups in many studies has been criticised because the two groups compared tend to differ in many ways other than age. Comparisons of black and white mothers under twenty have also been criticised because they are often underpinned by assumptions that there are essential differences between whites and blacks without these differences being theorised (see chapter 2 for discussion of these issues)

For these reasons and because of the heterogeneity between women who give birth in their teenage years, the present project was designed to focus mainly on intra-group differences and did not use

a comparison group. Similarly black-white comparisons or cultural-religious comparisons were made only where there was a clear theoretical reason for them. Examples of this were to do with experiences of racial discrimination in employment or cultural reasons for marrying.

3.5. Areas of study

The project focused on a number of subject areas:

1. Women's life histories were recorded in order to get a good picture of the context in which women lived, and hence in which they became pregnant and decided to keep their children. Thus women's educational, employment, marital, housing histories, as well as their family backgrounds, social network and the extent to which early motherhood was common in their social networks were investigated. This information was important in order to contextualize the findings from the study.
2. The background to the pregnancy and of the factors contributing to conception and to women's decisions to continue with their pregnancies and to keep their children were investigated. Questions were asked about contraceptive histories and reproductive ideologies (including contraception, abortion and adoption) as well as about the reactions of people in women's social networks. The aim was to get a more in-depth picture of these issues than is usually presented in the literature ^{to the mothers to be}.
3. The social support available to women and their children. The availability and effect of social support for this age group of mothers is an area in which little work has previously been done. Both formal (from the services) and informal (from friends, children's fathers and relatives) sources of support were investigated in order to see whether social support is a mediating factor which affects how mothers and their children fare.
4. The broad picture of how women and their children fare. The physical health of both mothers and children were investigated together with women's reported satisfactions and dissatisfactions with motherhood and with life in general. The children's developmental status was also investigated. The aim here was to avoid assuming that early motherhood is necessarily a negative experience for women and children (as is generally assumed in the literature) but to allow the identification of any women and their children who fared well together with any who fared badly.

3.6. Methods

The study began in 1983. It consisted of interviews with 16-19 year old first time mothers in late pregnancy, six months after birth and twenty one months after birth. (The full interviews can be found

in appendices 2-4). At the twenty one month contact children were given a developmental test; the Mental Development scales of the Bayley Scales of Infant Development. It was decided not to use any self completion measures (like the General Health Questionnaire) to measure depression or to ask the respondents to keep diaries about themselves and their children. This was for two reasons. Firstly, because some of the women themselves mentioned that they were not very literate and, secondly, in order not to make them feel overburdened with tasks related to the study.

3.6.1. Finding the sample

The study was a London based one. It was decided to recruit women from hospital antenatal clinics since almost all pregnant women in Britain attend such clinics by late pregnancy and it is difficult to find sufficient ^{numbers of} 16-19 year old women in late pregnancy by other means such as through GP practices, schools, employers or even by door to door sampling. Twenty women for the pilot study were recruited from two large inner city hospitals with births in excess of 2,000 each year. It was, however, decided to use two other large hospital antenatal clinics in London for the main study. Although all four hospitals drew on a cross section of London's population of pregnant women, they were organised in slightly different ways. One of the pilot hospitals, for example, separated the under 17s into a different antenatal clinic from the over 17s. It was not possible to invite 16-19 year olds to be in the study at the same clinic and the recruitment process would, therefore, have taken much longer than had been envisaged. The other antenatal clinic did not allow access to records of clients' ages. The recruitment process was, therefore, dependent on harassed receptionists remembering to point out potential respondents. In addition that clinic was used by more women from bed and breakfast hostels than was usual for that time in London.

The two hospitals eventually used in the main study had undifferentiated ante-natal clinics, allowed access to records so that lists of potential attenders who fitted the sample criteria could be given to receptionists and identified when their names were called out. Both hospitals drew on groups of pregnant 16-19 year olds who lived with their families and in their own homes as well as in bed and breakfast accommodation. Both drew on inner as well as outer London populations.

Women were recruited into the study if they were aged 16-19, spoke sufficient English to be able to complete the interview (since no money had been obtained to pay for translation) and either had no previous live births or their previous children had died or been adopted. Women of any colour or ethnicity were recruited into the study if they fitted the sample criteria.

Table 3.1: In-depth interviews arranged and done in late pregnancy

Women approached	Appointments made	Interviews done
212	162	79

Two hundred and twelve women were approached at antenatal clinics (see table 3.1 above). Of these 25 did not fit the study criteria, mostly because they already had a child but occasionally because their ages had been incorrectly recorded and they were not in the correct age group. Relatively few women who fitted the study criteria actually refused to take part in the study when approached at antenatal clinics (N=25). Some further women expressed uncertainty either about taking part in the study or in being at home sufficiently often in order to be interviewed but agreed to make appointments (N=25). However, many more than these 25 were not at home at the time they had suggested for initial interview appointments. Eighty three women altogether when interviewers called at the appointed time and were out for subsequent appointments (see table 3.1 above).

3.6.2 Problems of sample recruitment and attrition

A major problem in securing further appointments when women were out was that most women did not have telephones. Further appointments had to be made in person and this proved immensely time consuming. Initially women were dropped from the study after two unsuccessful appointments. It was soon obvious that it would not be possible to collect a sufficiently large and fairly representative sample unless more time was spent securing interviews. Subsequently, seven attempts were made to interview women if this proved necessary. Fifty-eight women were unsuccessfully visited at least 7 times. Seventy-nine women were eventually given tape recorded interviews which lasted between one and a half and six and three quarter hours and were fully transcribed. Many women who were finally successfully interviewed at home also required several visits before an interview could be done.

For the last four months of the 16 month period in which the sample was recruited the design of the study was altered in order to overcome the problems of attrition caused by the difficulty of finding women at home. In addition to recruiting respondents in the antenatal clinics, members of the research team visited antenatal and postnatal wards each week. While there they interviewed women who fitted the sample criteria and agreed to be interviewed and who had not already been given in-depth interviews. Altogether 102 women were interviewed in this way. This included two women whose husbands interpreted during interviews (one from Turkish and the other from Bengali). The Turkish speaking woman was subsequently able to take part in the two further interviews in the study without translation being necessary.

Over the three contacts of the study it took on average more than 3 visits for each successful

interview, and more than 4 visits for each unsuccessful interview. These figures mask the fact that some women interviewed only needed to be visited once, while others required more than ten visits (with a record of 18) to complete a successful interview. In a few cases interviews were started but never completed. This was because it was often necessary to snatch opportunities to start interviews, even if it was obvious that there would not be time to complete them. In some cases it was not possible to complete some sections of interviews at one sitting because the crowded households in which some women lived made it difficult to ensure privacy for the interview. In late pregnancy more than a fifth of the women interviewed had at least one adult in the room for part of the interview and sometimes people in other rooms could overhear the interview. Since interviews required the disclosure of personal information, this sometimes caused difficulties. In one instance, for example, a respondent's father came into the room and demanded that I stop asking questions about himself and his wife. In other cases male partners were clearly annoyed about what women said about them (although sometimes this was not evident to interviewers until subsequent interviews). In other instances interviewers made further appointments in order to ask questions they felt should not be asked in front of other people.

In these circumstances it was easy to begin thinking of the sample as 'difficult' in themselves because they were difficult to study. Difficulties in contacting women and finding them at home for interviews which had been arranged were however, at least partially, reflections of the circumstances in which women lived. Many women lived in accommodation which was cramped, sparsely furnished and expensive to heat. Many could not afford to spend much money on food. They often spent most of their days visiting relatives and friends and window shopping in order not to have to stay at home. In addition they mostly did not keep diaries. Interviewers' visits were not so important to them that they either remembered them accurately or felt any incentive to stay at home if they had anything else to do. However, broken appointments did not necessarily indicate that women did not want to be in the study. Women who were successfully interviewed after more than ten visits generally reported that they had really enjoyed the interview. High attrition rates are not unusual for mothers in this age group and are not specific to London samples. For example, Osborn and Milbank (1985) point out that for the nationally representative British Child Health and Education Study mothers under twenty were more likely than were older mothers not to be re-interviewed. (Appendix 7 provides an example of the forms on which researchers recorded the number of visits they made to each prospective respondent).

3.6.3. The interviews

Women were interviewed on three occasions. The original intention to have contact points within two weeks of children becoming six months and becoming 18 months had to be adapted to take account of the difficulty of finding women and their children at home. A strict timetable would have resulted

in more attrition than was the case. The contact points were, therefore, late pregnancy, roughly six months after birth and approximately twenty one months after birth. In each case more than a third of the sample were seen at the time originally intended (see table 3.2 below). In the rest of this thesis '6 month interview' and '21 month interview' are used as shorthand for the periods in which the second and third interviews were done. The original aim of having a fourth contact point at 36 months was dropped in favour of putting more energy into recruiting and keeping the sample over three contacts. The recruitment period eventually lasted well over a year, from September 1983 to February 1985 (when the second contacts were already in progress).

Table 3.2. When interviews were done

	Pregnancy (in weeks)	6 months (in months)	21 months (in months)
Mean	34	7.68	21.82
Mode	36 (N=11, 14%)	6 (N=32, 38%)	21 (N=22, 34%)
Range	23-42	5-16	18-28
SD	4.23	2.56	1.91
N =	79	85	68

Short interviews were given in late pregnancy at antenatal clinics and covered basic socio-demographic data and served two functions. Firstly, because few women were missed, it enabled an assessment of how the main sample compared with other 16-19 year olds using the two antenatal clinics from which women in the main interview sample came. Secondly, short interviews provided a 'pool' of women which could be used to replace women who proved difficult to interview at subsequent stages of the project. The short interviews lasted between 20 and 30 minutes. The questions asked were the same as those designed to establish background information on the women at the beginning of the first long interview (see appendix 2).

In addition social workers at one hospital (who routinely saw pregnant women under twenty) were asked to keep basic records on 16-19 year old mothers over the course of a year. They recorded information on 257 women. Twenty two women in the correct age group that they approached refused to take part in the study. The information they provided together with data from the short interviews served to reassure us that women in the main interview sample were not dissimilar from other women in the same age group who attended the same antenatal clinics (see chapter 4).

The long interviews, given in late pregnancy and at both contact points after birth were semi-structured, in-depth interviews that explored the areas described above. They were not conversations in that respondents were asked questions and encouraged to talk, in detail, about their feelings and experiences. Interviewers did not volunteer information about themselves, but responded if asked. At both the first and the second contacts long interviews ranged in length from one and a half to over six hours. The third interview was designed to be shorter than the previous two interviews in order to allow time for the Bayley Scales of Infant Development to be presented. However, women tended to answer the questions asked in as much length as they had the previous two interviews. Methodologically, it appears that shorter interviews given after respondents have become accustomed to longer ones are unlikely to be perceived as short. The third interviews ranged in length from one hour to over four hours. At each interview respondents were given a handout outlining the study (see appendix 1 for an example of this).

Table 3.3: Numbers interviewed in pregnancy, 6 and 21 months after birth

	Pregnancy	6 months	21 months
Main i/v	79	87 (85)	76 (68)
Short i/v	102	--	--
Child developmental test	--	--	62

Note: Figures in brackets refer to the number of interviews which were computer coded.

Six months after birth, 87 women who had been interviewed in late pregnancy were given interviews. Sixty-four of them had been part of the main sample interviewed in pregnancy. The remaining 15 women from the main sample could not be contacted, either because they were consistently not available or had moved without trace. Twenty three mothers who were in the short interview sample in pregnancy were also interviewed at contact two. Data from two of the 87 women were not computer coded because the interviews were not sufficiently complete (see table 3.3 above). The women were interviewed when their children ranged in age from five to 16 months. Six children (seven per cent) were over 12 months of age when their mothers were interviewed. The mean for the second interview was 7.68, the mode 6 months and the standard deviation 2.56 months (see table 3.2 above).

The third interview was done when children were about 21 months old. Since so many women were difficult to find at home it was decided that they should be interviewed at any time between 18 and 24 months that proved convenient to them. Table 3.2 (above) shows that the eventual range was from 18 to 28 months. However, the mean was 21.82 months, the mode 21 months and the standard deviation 1.91. Five women (seven per cent) were interviewed when their children were over 24 months of age. At the third contact 76 women were interviewed. Sixty-eight of them were given in-

depth interviews which were sufficiently full to be computer coded. The other eight women were caught just before they were going out and there was no second chance to complete the interview. Sixty two children were given developmental assessments. In 14 cases children's developmental tests could not be done on the same day as the maternal interview and it proved difficult to find the women and children at home again. Altogether 50 women received in-depth interviews at all three contacts (63% of the original in-depth sample). In some ways, therefore, the study is best viewed as cross sectional, with some longitudinal elements.

3.6.4 The Bayley Scales of Infant Development

In order to have information about the children's development from a source other than the children's mothers, it was decided to use the Mental Scale of the Bayley Scales of Infant Development (Bayley, 1969). The Bayley Scales are a frequently used measure of infant developmental status in both studies of 'adolescent' and older mothers. They provide a relatively quick and easy method of collecting data on children independently of maternal report. Furthermore, the standardised norms mean that it is unaffected by collecting data on children who are not exactly the same ages. These factors made it prudent to use a standardised measure with the sample in the current study.

The tests were conducted in children's own homes in order to avoid difficulties of getting women to keep yet another appointment for the study by bringing their children into a uniform testing environment. Horner (1980) found that whether children were tested in their own homes or in laboratories made no difference to children's test scores. However Horner's sample consisted of 48 infants of 'middle- and upper-middle-class socioeconomic status' (p.752) and 'In the home, the infant was examined at a table located in a quiet examining room' (p.752). The socioeconomic status and home circumstances of infants in Horner's study and in the current study were, therefore, vastly different (see chapter 10) and may mean that infants in the current study were more likely to be distracted when doing Bayley tests at home than were Horner's sample. After administering each Bayley test interviewers made notes of the circumstances in which the test had been done on a standard form (see appendix 6).

Prior to the administering of the Bayley test, each tester did ten practice tests, observed by a psychologist experienced in Bayley test presentation. Ratings were always checked by another tester. The Mental Developmental Index of the Bayley tests was assessed for 62 of the children 21 months after birth. Six children whose mothers were interviewed were not tested. The reasons for this were either because children were not available at a time when mothers were found at home or that it was not possible to do the test on the occasion of the third interview (either because of time constraints or because children were not in a fit state) and mothers were not subsequently found at home. In one instance a mother refused to let her child be tested because she was worried about her hearing and

wanted her to have a hearing test before being subjected to any other tests. The items included in the Mental Development Index of the Bayley Scales used in the current study are included in appendix 5.

3.7 Conceptual underpinnings

The theoretical orientation of the study was informed by both social constructionism and by a life course perspective. These provided the analytic framework for the study and for the analysis of findings.

3.7.1 **Social construction**

Social construction is concerned with the ways in which ideas, and hence our experiences of the world are dynamic, multiple and highly complex constructions which are specific to the period of history and the society in which they are produced. Ideas are not, therefore, static, unitary entities (Henriques et al., 1984; Gergen, 1985; Kitzinger, 1987). For example it is possible to identify many (sometimes competing) ideas about motherhood in modern western societies. These are produced in different contexts and serve varied functions. Considerations of the language and discourses used about motherhood allow analyses of current social constructions of it. According to social constructionists, interpretations of discourses will vary according to who is doing the interpreting and their political perspective (Potter and Wetherell, 1987).

Manning (1987) argues, for example, that both the Left and the Right have used social constructionist views of social problems to serve different ends. Such analyses of the ways in which discourses are socially constructed allows recognition that knowledge is not value-free and objective (Henriques et al., 1984); that people occupy different positions of power within society and that their experiences are structured by their differing relationships to power and hence their different political interests (Potter and Wetherell, 1987). As such it allows the deconstruction of both existing knowledge about people and about society and the production of radically different forms of political knowledge (Kitzinger, 1987).

This deconstruction of existing knowledge is important to the field of early motherhood because it allows a fresh and critical look at the evidence produced on 'young mothers' and at the reasons for the overwhelmingly negative focus discussed in the previous chapter. A social constructivist approach also allows recognition that the dominant negative constructions produced in most literature on early motherhood are not the only possible perspectives, but may be contradicted by constructions from people who occupy different social positions. There are competing, alternative ways of constituting experience and subject positions. Thus young women who are themselves mothers may well have a different perspective on early motherhood than do researchers. As chapters 1 and 2 indicate,

researchers also have differing perspectives on early motherhood.

3.7.2 The life course perspective and the concept of 'career'

There is an extensive literature on life course perspectives in the USA although interest in the concept is rather more recent in Britain (Cohen, 1987). The term 'life course' is used in preference to 'life cycle' because 'life cycle' suggests that there are fixed points in the life of an individual and that subsequent generations of individuals go through the same fixed points in the same way. In other words it takes no account of changes within social structures over time or of the ways in which people of the same ages are differently positioned with respect to social structures because, for example, of their 'race', gender and/or social class.

A life course perspective relates biographical and subjective experiences to broader social structures in society. It gives recognition to the dynamic nature of relationships between household members and between the household, the wider economy and society. It is thus a perspective which captures change in both individual lives and in society, and which recognises the importance of theorising the intersection of individual and societal change over time (Hareven 1974; Elder, 1986). It thus fits with social constructivist approaches because it situates lives in their social contexts and hence accounts for the different positions that people occupy with regard to power.

The concept of 'career' is central to a life course perspective (Elder, 1978) because life span development is not conceptualised as following a single life path. Instead, each individual is viewed as having a number of life paths or 'careers' throughout their lives. These careers are multiple, independent pathways from birth to death. '...Career refers to a sequence of activities or roles through social networks and settings ...a career line is equivalent to an individual's life history in each role domain such as marriage, parenthood, consumption and worklife' (Elder, 1978). Career lines, therefore, intersect and overlap with each other. Their intersections can be experienced as either harmonious or conflictual.

A major advantage of the career concept is that it recognises that people's lives are complex. Each aspect of a person's life is conceptualised as dynamic rather than static, that is, they can be characterised by periods of flux and activity rather than orderly progression. This is crucial to the analyses of influences on pregnancy and motherhood because it means that the processual, dynamic nature of feelings about and responses to, pregnancy and motherhood can be recognised and hence analyzed.

By recognising that there are several, intersecting life pathways, the career concept can also reflect the fact that those life careers which influence pregnancy and motherhood are not necessarily

contingent on the pregnancy and motherhood careers. While the intersection of the pregnancy careers with other life careers leads to changes in those careers, they do not only come into existence at the point of intersection.

Unlike the concept of 'role', the concept of 'career' does not assume that individuals step into pre-existing scripts. Instead it recognises that individuals can '...alter the course and substance of their lives' (Elder, 1978), and that a common experience such as pregnancy early in the life course can have different effects on, and meanings for, different people. It, therefore, attempts the difficult task of taking individual subjectivity into account. Because it does so, it can encompass the notion of potential (rather than actual) careers. This makes it possible to account for the fact that the motherhood career begins many years before women actually become mothers.

The concept of 'career' does not only focus on the individual. It also takes account of structural forces because it locates individuals within their particular historical and socioeconomic contexts. As a result, it recognises that groups of individuals who share the same historical period and similar socioeconomic positions can have similar as well as divergent life experiences. It is partly this recognition of the importance of structural process that lends the life course perspective its dynamism. As a result, it is an approach that has more 'ecological validity' (Bronfenbrenner, 1979) than, for example, Waddington's (1957) epigenetic landscape or some phenomenological approaches.

According to Waddington, an individual's life course development can be likened to the trajectory of a ball rolled through a landscape. Genetic inheritance gives individuals the particular impetus which makes them start life with a certain velocity. As a consequence, different individuals encounter different parts of their genetic landscape and, therefore, have different trajectories. Waddington's conceptualisation is still a useful one. The career concept, however, recognises that the landscape itself is dynamic and that 'trajectories are formed through the influence of early childhood on subsequent life chances' (Elder, 1986), as well as by structural forces and later events.

Phenomenological accounts which concentrate on the individual as being the centre of an individualised phenomenal field also fail to take account of the structural effects of material conditions on individual lives.

At the heart of the concept of 'career' are the twin notions of 'transition' and 'turning point'. Entry into particular career paths are marked by transitions into or out of, particular life paths. These transitions then affect other career lines and, in turn, mark turning points on them.

The concept of life careers is thus a useful theoretical construct since it provides a framework for

understanding the complexity of the factors which have an impact on subjectivities. In this it can be consistent with post structuralist approaches which theorise subjectivity as historically constituted, multiple rather than unitary as well as 'precarious, contradictory and in process, constantly being reconstituted in discourse each time we think or speak' (Weedon, 1987:33). The usefulness of the concept in reflecting reality explains its increasing use by researchers (for example, Elder, 1986; Cohen, 1986; Furstenberg et al., 1987).

According to a life course perspective then, conception and birth are important points in the process of becoming a mother. Conception is not, however, the beginning of this process. Instead it is a process which, for many girls, starts early in life when they begin to play at being mothers, to think about whether or not they will have children and how many they will have. This process continues after birth when the transition to motherhood has actually occurred. Other careers such as employment, education and social network careers exist simultaneously with the motherhood career and run in parallel or intersect in ways which may signal turning points on each career.

3.8 Analyses

With the exception of the Bayley Scales of Infant Development, the material produced in the study is based on detailed, semi-structured interviews which have been transcribed and computer coded. In the current study both qualitative and quantitative analyses have been conducted with slightly more emphasis given to qualitative analysis. The study aimed to provide an account of women's experiences of motherhood and their reasons for becoming pregnant and having a child in their teenage years. It therefore required an analysis of women's accounts. The longitudinal element of the study was not as strong as had originally been hoped since there is detailed information only on 50 women.

While the sample is larger than those usually used in qualitative studies, it is too small to allow a great deal of statistical analysis. Thus, once the sample was divided into analytical categories there were frequently insufficient people in each group to warrant statistical testing, and for most purposes the unit statistician advised the avoidance of 'statistical tokenism' (Plewis, personal communication). Statistical analyses were mainly done for the data produced by the Bayley Scales of Infant Development and for the analyses of social network numbers and ties. Most of the analyses presented are quantitative in a simple way (in that they rely on the comparison of percentages of the sample in different subgroups) and qualitative in that they are based on detailed analyses of accounts.

Qualitative analyses involved identifying themes that emerged from the verbatim transcripts of all the interviews and then arranging the data thematically and by case in a way the Social and Community Planning Research calls 'charting and indexing'. Large sheets of paper were used. Case numbers

were arranged vertically and themes horizontally. Thus, for each area of analysis the frequency with which themes emerged could be quickly identified. Quotes from specific individuals could then systematically be picked out to illustrate specific themes so that the danger of selective quoting could more easily be avoided. In the analyses which inform this thesis quotes are inserted throughout the text to help flesh out the issues being discussed and as a reminder that the raw data being used is based on the colloquial expressions of respondents rather than the assumptions of the researcher. Quotes are, however, designed to illustrate analyses rather than to 'stand alone' since the aim of the study is not simply to 'let the respondents speak for themselves' but to provide analytic insights.

For some purposes (eg the examinations of contraceptive histories, how women came to be pregnant and to give birth, their marital careers and feelings about childcare and motherhood) each interview was qualitatively analyzed. There were too many interviews for this to be possible for all issues. For most purposes, therefore, quantitative data was used to group respondents and particular interviews were picked out for qualitative analyses because they were representative of analytical subgroups in the sample.

Further analyses used rating scales devised for issues such as 'openness in relationships' and 'satisfaction with motherhood'. Inter-rater reliability was checked in each case. In the case of 'openness in relationships' this consisted of my constructing the rating scale and agreeing the rating for each respondent with a second rater (Peter Moss). Agreement was, therefore, total. In the case of 'satisfaction with motherhood' I devised the rating scale, trained Mavis Collins in it and we independently rated each case. Inter-rater reliability was high (consistently over 80%). For the Bayley Scales of Infant Development Ted Melhuish checked the presentation of a sample of the tests and each score sheet.

The conceptual framework described above informed the analyses performed on the data collected in the current study. For example, the life course perspective used in the study allowed the examination of the intersections of a number of careers in the women's lives. In particular contraceptive, education, employment, marriage, social support and childrearing careers were the focus of the analyses. The life course perspective allowed analyses of the fact that careers can be conflictual and can be salient when they are potential rather than real and that all these careers are potentially available to young women. This is not to suggest that individuals actually see their own lives as a series of dynamic, interdependent careers. However, people do frequently talk about the anticipated as well as real effects of events on their lives, and the career concept reflects this.

The emphasis on social construction meant that accounts could not be considered to be simple reflections of reality that can be abstracted from answers to questions. Instead, the accounts themselves require to be seen as arising from the women's social positions and experiences. It follows from this that both the women's social positions (structural and personal) and the accounts they give are included in the analyses which form the major part of the reported findings in this thesis.

Women's accounts are thus used to generate analytical concepts. The sample size was too large (see above) for a complete reliance on qualitative analyses. Quantitative analyses were, therefore, also used. The answers to some questions were pre-coded and to others post-coded. In addition ratings were also coded and computer analyses were done on the resulting quantitative data. This proved useful in both charting (organising data by theme) and indexing (organising it by case) the material for qualitative analysis.

The qualitative analyses were mainly cross-case analyses. Analyses from several respondents were grouped so that different types of responses could be analyzed and patterns and themes identified. These were both inductive (emerging out of the data) and generated from the computer analyses. Direct quotes from the women's accounts are used throughout the thesis to illustrate the themes discussed. These thematic, cross-case analyses give little flavour of the longitudinal nature of the data collected because what happens to each individual over time is largely invisible. Since the quantitative analyses were not longitudinal (because the sample size was too small for this) this means that the longitudinal element of the study is given little emphasis in this thesis.

One potential solution to this loss of longitudinal information would be the use of in-depth case studies presenting data from each interview for each women studied. This is obviously impractical for a sample as large as the current one (see above for details of the sample size). An alternative approach could be to pick out cases that typify particular kinds of early motherhood or particular changes over the three contact points of the study. However, one aim of the current study was to identify both differences and similarities between members of the sample. This approach was, therefore, rejected since, to a large extent, the construction of typologies obscures differences between people included within the same type. Instead, a few short case studies were used to illustrate specific instances where detailed description of a respondent could illuminate the ways in which she was exceptional, rather than typical. In the current study, this exploration of specific cases was done for the issues of social support networks and dissatisfactions with motherhood. However, there is a further longitudinal element in the analyses since, where relevant, the tables presented either cover the three interview contacts or two of them.

The focus on women's accounts both as important sources of data, and as data in its own right (see,

for example, chapter 12) is not consonant with the use of many standardized psychological measures. Partly for this reason (as well as for more practical reasons, see chapter 9) standardized inventories of depression were not used in the current study although they are common in studies of motherhood in general. However, the Bayley Scales of Infant Development were used within the study (see chapter 10). This was partly because the children in the study were too young to give their own accounts and the Bayley Scales of Infant Development provided an indication of the children's development which could be used in conjunction with maternal reports. The use of the Bayley Scales also allowed direct comparability with the data from this study and from much other literature on the children born to mothers under twenty. In the current study the results of the Bayley Scales of Infant Development were related to analytical constructs generated from the women's accounts.

In the current study problems caused by forcing respondents into bipolar ethnic/colour categories that do not necessarily reflect their cultural practices or origins were avoided. For example, young black people of African Caribbean origin are predominantly British born and have parents who come from a range of countries. Intra-group cultural homogeneity and inter-group differences cannot, therefore, be assumed.

Furthermore women of mixed parentage or with mixed parentage children (who constituted about 10% of the sample) cannot easily be dichotomised into one cultural group or another except if racism rather than cultural practices is being studied. For reasons such as these it was decided not to conduct routine black-white analyses.

Black-white analyses were, therefore, only conducted for issues where there is evidence or theoretical reasons for believing that colour, upbringing and/or religion might make a difference to young women's experiences. In this way the problems of obscuring whole group processes caused by assumptions of cultural differences (discussed in chapter two) were avoided. Some of these analyses are published elsewhere (Phoenix, 1988b). However, there is no discussion of them here since their inclusion would have made this thesis too lengthy.

3.8.1 Interpreting accounts from interviews

The study is largely dependent on the interpreting of accounts from interviews. Yet, while this is a much used method of data collection and analysis, it is not an undisputed one. Kagan (1984) argues that it is unsatisfactory for researchers to accept respondents' accounts at face value because they are likely to give biased accounts. According to Kagan, interview data is unreliable data.

It is perhaps worth remembering that just as researchers (with their social distance from respondents who became mothers in their teenage years) may have difficulty interpreting women's accounts, so too may respondents have difficulties interpreting what particular questions mean and what interviewers really mean by asking particular questions. Basker (1986) reported that when she asked women if their pregnancies were 'planned', they replied as if she was asking whether they were 'wanted'. This probably reflects respondents' perceptions that researchers equate 'planned' with 'wanted', and their belief that the question is thus value laden. Similar processes of interpreting what researchers mean probably occur when white interviewers ask some black respondents particular questions or even just want to include them in research (Edwards, 1990). The potential for two way misunderstandings further complicates the process of interpreting accounts.

Another problem with the analysis of interview data is illuminated by discourse analysts. Potter and Wetherell (1987), for example, argue persuasively that work on attitudes within social psychology has typically made three types of errors 'presupposing the existence of the "attitudinal object", making translations from unexplicated participants' discourse, and treating utterances as indicators of the presence of enduring, underlying attitudes' (p.46). Potter and Wetherell (1987) suggest that accounts should not be taken to be maps or charts of private, subjective, mental experience and that hence the issue of accuracy or inaccuracy is irrelevant. Rather, the focus should be 'exclusively on discourse itself: how it is constructed, its functions, and the consequences which arise from different discursive

organization... a radically non-cognitive form of social psychology' (p.178). Potter and Wetherell suggest that, for discourse analysts, it is important to analyze context, to examine the variability (and hence contradictions in accounts) and to recognise that attitudes cannot be read off from accounts.

Yet, for studying most of the topics which constitute this study, there are no ethical and short term (as opposed to ethnographic and prospective studies) alternatives to relying on women's retrospective accounts. In addition, women's accounts are, in themselves, an invaluable source of data since they provide an insight into women's own perspectives at particular times in their lives. As such they can provide a foil to researchers' perspectives which, are themselves social constructions.

One way of dealing with objections that accounts may not represent the 'truth' was that used by Celia Kitzinger (1987). Kitzinger argued that the truth value of her respondents' accounts was irrelevant to her analyses because she was interested in their social constructions and, therefore, did not have to examine whether they were telling the 'truth'. An acceptance of postmodern positions on subjectivity would, in fact, not permit such a focus on truth values since the theorisation of a decentred, fragmented, contradictory subject (Weedon, 1987; Henriques et al., 1984; Harvey, 1987) also makes the notion of a unitary, logical, true or false account irrelevant. This does not, however, remove the responsibility from researchers to attempt to verify the deductions they make in qualitative studies by investigating a range of possibilities and by considering how the context and the range of findings fit together (Strauss, 1987) or indeed by recognising when alternative interpretations of the data cannot be ruled out.

In this study an attempt is made to avoid imposing the negative social construction of early motherhood that most researchers in this area do. Thus the structural factors that affect 'young mothers' are analyzed as part of the context in which young women with children become the subjects of research and recognise the reasons for research interest in them. The context as social position is also examined. Thus the ways in which young women's differing social positions lead them to call on different discourses is examined. Contradictions in accounts are also examined and differences between young women who are classified as being in the same social position by virtue of the age at which they give birth is also examined.

However, young women's own accounts are taken seriously in analyses of their perspectives. Their accounts are not dismissed as simply being inaccurate retrospective reconstructions of their experiences but accepted as social constructions that give insights into their subjective experiences.

In addition to the fact that some topics can only be studied through respondents' own accounts, there are other some positive features of using retrospective accounts. For some of the significance of

particular events can only be grasped when subsequent events make the consequences clear (Freeman et al., 1986). This is not to deny that, as Wendy Hollway (1989) demonstrates, processes of repression mean that respondents' motives and feelings are not always open to them. This is, however, where analysis (including of the particular discourses chosen, silences and contradictions) rather than simple acceptance of accounts at face value can provide invaluable insights into subjectivity. This is particularly the case since the choice of particular words and phrases can illuminate life stories that are not being overtly told (Burgos, 1991). The analyses presented here are too numerous to be as detailed as would be required in either discourse or life story analysis. However, the current study uses insights from discourse analysis and life story analysis to aid the qualitative analyses.

CHAPTER 4: The sample and the social context in which the women conceived: Findings and discussion

4.1 Description of the sample

Overall the main interview sample (N = 79) came from large families of origin, were poorly educated and had experienced high rates of unemployment before they became pregnant. When they were employed, it was usually in poorly paid jobs requiring low levels of skill. Their male partners and parents were frequently in similar economic circumstances to the women themselves.

In line with national statistics most women (70%) were 18 and 19 when they gave birth and, again in line with national trends most (67%) were single when they gave birth. The majority of women (86%) were born in Britain or the Republic of Ireland. The other 14% came from S.E Asia, Europe, Cyprus, the Caribbean and Australia. A half (51%) had parents who were born in Britain or Ireland, a quarter (26%) had one or both parents who came from six Caribbean islands. The other 23% had parents who came from Turkish Cyprus, Bangladesh, India, Sri Lanka, Nigeria, Malaysia, Europe and South Africa. At the third interview, colour of children (which was not always the same as that of their mothers) was noted so that analyses of the Bayley Scale data could use children's colour as an independent variable. One third of the children (23) had at least one black parent (of Asian, African or African Caribbean ancestry).

Just over half the women (55%) lived with one or both parents in late pregnancy. They came from larger than average families of origin; 65% having three or more siblings. Nearly half had left school with no qualifications whatsoever. Only a fifth had at least one 'O' level grade (equivalent to the top grades of the GCSEs that replaced 'O' levels). Eighty three per cent had experienced at least one period of unemployment and over a third (36%) had never been employed despite the fact that only 17% were still at school or at college doing 'O' levels when they became pregnant. Table 4.1 (below) shows that at the time they conceived only 29% of the sample had proper, full time jobs (job training schemes were entered because women could not find permanent, adequately paid full time jobs). Such low rates of 'real employment' are not unusual for unqualified young working class women (Unemployment Unit and Youthaid, 1991).

Table 4.1: Percentage of women in employment or education at the time of conception

In education	17%
On job training schemes	5%
Part time jobs	4%
Full time jobs	29%
Unemployed	44%
	N = 79

The women interviewed in the main interview sample seem to have been fairly representative of the population of mothers under twenty served by the two hospitals from which the samples were recruited. Table 4.2 (below) shows that the characteristics of women who were given short interviews, as well as those interviewed by social workers in one of the study hospitals, were similar to those in the main interview sample in late pregnancy.

Table 4.2: Comparisons of Main, Subsidiary and Social Worker samples on four factors

	Main Sample	Subsidiary Sample	Social Worker Sample*
<u>i. Percentage of sample at each age</u>			
Age			
16	11	3	15
17	19	21	22
18	29	32	35
19	41	44	28
<u>ii. Percentage in each marital Status</u>			
Married	22	33	22
Cohabiting	11	13	14
Single	67	54	64
<u>iii. Educational Qualifications: % with at least one 'O' level</u>			
	22	24	10
<u>iv. Percentage living with own parents in late pregnancy</u>			
	56	33	53
N =	79	102	257

* Basic demographic details were collected over a 15 month period of the study by social workers in one of the two study hospitals.

4.2. The Pregnancy interview

By the time that they are twenty most ~~women~~ will have had their first experience of heterosexual intercourse (Farrell, 1978; Jones et al., 1986; Francome, 1986). Only a minority become pregnant, and fewer still go on to become mothers. In most industrialised countries pregnancy does not inevitably lead to motherhood. Once young women are pregnant they have opportunities to disrupt the process of becoming mothers by either having abortions or by giving up their infants for adoption.

The interview given when women were in late pregnancy addressed issues of contraception, abortion, adoption, reactions to conception (women's and others) and the process of women's coming to terms with having a baby in the teenage years. This chapter discusses the period prior to conception while the next considers what happens after conception but before birth. Figure 5.4 at the end of chapter 5 summarises women's reproductive pathways from the period prior to conception through to birth.

4.2.1 Women's orientations to pregnancy before conception

Two pervasive and conflicting stereotypes of how 'teenage mothers' come to be pregnant will probably be familiar to many people. The first is that teenage women become pregnant 'accidentally', because they have been too ignorant or indigent to use contraception properly. The second is that young women become pregnant in order to get council housing (in Britain) or welfare benefits (in both Britain and the USA). It is not, of course, simultaneously possible to become pregnant accidentally and to 'plan' to become pregnant for material gain. The logical inconsistency between these two social constructions of 'teenage mothers' has not prevented both from gaining widespread currency and hence being the subjects of research investigations.

It might be assumed from interest in young women's motivation for becoming pregnant that in contrast to women under 20 all women beyond their teenage years 'plan' their conceptions. Yet some women who give birth in their teenage years report that they 'planned' to become pregnant (Simms and Smith, 1986) while some older women report that their pregnancies were 'accidental' (Oakley, 1979; Brannen and Moss, 1988).

With regard to the popular assertion that young women become pregnant for material reasons, Simms and Smith (1986) report (on the basis of data from their national survey) that 'occasionally the desire to have a baby had an ulterior motive' (p. 12). They quote one young woman who said that she wanted to have a baby in order to obtain council housing. In the current study, however, no-one mentioned such an ulterior motive. Nor did they in Clark's (1989) study of 38 teenage women with children. When asked directly if they had become pregnant in order to obtain housing many 'expressed derision or disbelief...It seemed laughable and tragic to them that anyone would 'use' a baby to get a flat or house' (p.11).

Wilson and Neckerman (1987) reviewed studies of family structure and poverty in the USA and concluded that women do not seem to become pregnant in order to get welfare benefits because births to young women living in poverty (particularly those who are single) do not increase and decline in line with changes in welfare policies and payments.

Nonetheless, the findings from Ellwood and Bane's impressive research and the inconsistent results of other studies on the relationship between welfare and family structure, and welfare and out-of-wedlock births, raises serious questions about the current tendency to blame changes in welfare policies for the decline in the proportion of intact families and legitimate births among the poor (Wilson and Neckerman:81).

While young women do not have children in order to obtain welfare benefits, their individual circumstances obviously influence their decisions to enter or to defer motherhood. An analysis of British data (the OPCS Longitudinal Study which studied 1% of the population enumerated in the 1971 Census) showed that 17-19 year old women who were unemployed at the 1981 Census were twice as likely as their employed age peers to go on to have a child within the next five years (24% cf 12%) (Penhale, 1989). This effect was independent of factors like social class and housing tenure which (as would be expected from previous studies) were also related to early motherhood.

When interviewed in late pregnancy, women in this study were asked a series of retrospective questions about how they had felt about the possibility that they might conceive. Only 18% (14) said they had been 'trying' to become pregnant (see table 4.3 below). The majority (82%, 65) had not 'planned' to become pregnant, but their attitudes to possible pregnancy (their preconceptual orientations) and hence their reasons for not having used contraception varied.

Table 4.3: Orientation to pregnancy at conception by age at birth

<u>Age</u>	Wanted to conceive	Did not mind	Not thought about it	Important not to conceive	Total
16	0	2 (22%)	2 (22%)	5 (56%)	9 (11%)
17	3 (20%)	4 (27%)	4 (27%)	4 (27%)	15 (19%)
18	5 (22%)	4 (17%)	5 (22%)	9 (39%)	23 (29%)
19	9 (28%)	10 (31%)	3 (9%)	10 (31%)	32 (41%)
Total	17 (22%)	20 (25%)	14 (18%)	28 (35%)	79 (100%)

It was possible to identify four pre-conceptual orientations to pregnancy which had a bearing on whether women had used contraception or not (see Table 4.3 above). Some women had wanted to conceive (22%, 17), some had not minded whether or not they conceived (25%, 20), others had not thought about the possibility that they might conceive (18%, 14), and the largest group (35%, 28) had considered it important not to conceive when they did.

1. Women who had wanted to conceive

Women who had wanted to conceive cannot be said either to have become pregnant accidentally, or to have failed to have used contraception properly. But since early motherhood is socially stigmatised why did they feel ready to have children when they did? Had they used contraception regularly when they first started to have sexual intercourse? Or did they start having sex after they had decided to try to conceive?

Although many researchers consider it reasonable to ask why women who are still in their teenage years should want to have children, it is difficult to establish why women of any age want children (see Dowrick and Grundberg, 1980).

People do not have clear motives so far as having children is concerned; few organise their lives according to some overall plan. The subject of having children provokes ambivalent feelings, so that 'planning' is a euphemism for allowing one particular feeling or pressure to gain an upper hand... Despite its complexity, the question 'did you want/plan a baby?' may

be easier to answer than the parallel question 'why did you want a baby?' This taps a vast minefield of unexplored or half-explored motives and reasons. Some women have never asked themselves this question, or when they do the answer is framed in terms of 'always' having wanted a baby: others describe a long process of critical self-examination (Oakley, 1979:32-33).

In the study reported here most women had always wanted to have children, and did not perceive their age to be a limiting factor. While only 29% felt that they were having children at an age they considered ideal, only 21% considered that the ideal age was more than a couple of years older than their current age. Early motherhood was common in the women's social networks, and their own mothers had similarly had their first child earlier than average. Forty per cent of the mothers of the women in the sample had their first child while they were still in their teens, and only 18% had their first child after 25.

Table 4.3 (above) also shows that women who had wanted to become pregnant were more likely to be older (18 and 19 years old) than younger (16 and 17 teenagers). Only three women were under 18 when they conceived. All were 17 when they gave birth (although one had been 16 at conception).

Table 4.4: Orientation to pregnancy by marital status at conception

	Wanted to conceive	Did not mind	Not thought about it	Important not to	Total
Single	4	12	13	24	53 (67%)
Cohabiting	4	2	1	2	9 (11%)
Married	9	6	0	2	17 (22%)
Total	17 (22%)	20 (25%)	14 (18%)	28 (35%)	79 (100%)

They were also more likely to be living with male partners than to be single (see Table 4.4 above). At conception nine were married, four were cohabiting and four were single. Just over half the married women in the study had wanted to conceive, while less than a tenth of the single women had.

Table 4.5: Orientation to pregnancy by living with parents at conception

	Wanted to conceive	Did not mind	Not thought about it	Important not to	Total
<u>Lived with parents</u>	6	6	10	22	44 (56%)
<u>% of each orientation</u>	35%	30%	71%	79%	
<u>% of all who lived with parents</u>	14%	14%	23%	50%	56%

Women who lived with their parents were less likely to report either that they had wanted to become pregnant or had 'not minded' becoming pregnant (see Table 4.5 above). A third of those who had wanted to become pregnant or had not minded doing so were living with their parents when they conceived compared with 79% of those who had considered it important not to become pregnant. Six women (all married) were living in their own mortgaged homes when interviewed. Four of them had wanted to have children, one had not minded whether she conceived or not, and only one (who owned her house jointly with her siblings) had felt that she was not yet ready to have a child.

Age, marital status and living with parents were interrelated. Older teenagers were more likely to be married, and less likely to be living with their parents than younger women were. They were the women who were most likely to have 'planned' their pregnancies or to have no objections to becoming pregnant.

Some women who had wanted to become pregnant were living in circumstances which (apart from age) are constructed as ideally suited to the rearing of children; being either married or cohabiting, living in their own homes (whether council or mortgaged) and having employed male partners. Only one married woman and two cohabiting women who had wanted to become pregnant had male partners who were unemployed. One married 18 year old with an employed husband and an owner-occupied house expressed this as 'I've done things the right way'. Other women were not concerned that they were, for example single or living with their parents. Single women did not necessarily consider marriage to be necessary to the rearing of children. Neither did they consider that being single confined them to raising their children single handedly. All except two women had made the decision to conceive jointly with their male partners.

Q. Were you trying to get pregnant? (Section 12c, page 71, first interview).

A. Yes... When I used to work in the nursery I used to take like 3 children home on

my weekends... and he loves kids as well, so we used to... babysit for 'em - play mummy and daddy sort of thing, and then we decided it would be best to have our own instead of taking other people's kids, cos I used to feel a bit sad you know when I had to bring 'em back. So we decided to have our own. (19 year old single women).

Those who lived with their parents expected to be rehoused by the council after their children were born. In one case a 17 year and her partner had 'planned' the pregnancy in order to be allowed to marry, and in another case a 19 year old married woman was on the brink of buying her own home.

Table 4.6: Orientation to pregnancy by employment status at conception

	Wanted to conceive	Did not mind	Not thought about it	Important not to	Total
Employed	8 (31%)	4 (15%)	7 (27%)	7 (27%)	26 (33%)
On MSC scheme	0 0	1 (25%)	2 (50%)	1 (25%)	4 (5%)
Un- employ	9 (26%)	13 (37%)	2 (6%)	11 (31%)	35 (44%)
At F.E	0 0	0 0	0 0	5 (100%)	5 (6%)
At school	0 0	2 (22%)	3 (33%)	4 (44%)	9 (11%)
Total	17 (22%)	20 (25%)	14 (18%)	28 (35%)	79

Table 4.6 shows that none of the women who were in training or education became pregnant because they had actively wanted to. Being in employment did not, however, prevent women from wanting to become pregnant. Roughly equal numbers of women who wanted to become pregnant were employed as were unemployed. The group of women who had wanted to become pregnant was the

only one in which no-one was in any form of education, or on any government training schemes.

2. Women who did not mind whether or not they conceived

At first sight it may seem irresponsible for women to claim that they are indifferent about whether or not they bring another person into the world. But women who had not minded whether or not they conceived definitely wanted children at some time and did not feel that early childrearing would be particularly disruptive of their lives. The answers which follow are in response to question 5.12e, page 71 of the first interview; 'Was it important to you not to get pregnant?'

'I don't think I was really bothered to be honest because I didn't have any immediate plans for the future'.

(17 year old single woman)

After we got married I thought I'm going to go in for a baby but I just didn't know when, and then I said to myself - well I don't care if I fall or not now because I'm married. I don't care what people think (19 year old married woman)

I just stopped taking the pill because I'd been taking it for such a long time - one and a half (years) is a long time -and my husband said if it happens it happens. We didn't exactly say we want a kid. He said if you get pregnant you get pregnant (18 year old married woman).

I didn't mind. Not once I turned 16 I didn't mind. (16 year old single woman)

The phrases 'I wasn't bothered' and 'I didn't mind' were common for this group of women, as indeed it was for a minority of Simms and Smith's (1986) interviewees. 'Not being bothered' and 'not minding' seemed to indicate that young women would not be upset if they did not immediately conceive, rather than that they were indifferent to having a child.

In some ways women who did not mind whether they became pregnant were similar to women who wanted to become pregnant. More of them were 18 and 19 year olds than were 16 and 17 (Table 4.3 above) and a minority lived with their parents (Table 4.5 above). They were more likely to be married than women who either did not mind, or had not thought about the possibility of becoming pregnant (Table 4.4 above). But in comparison with those who reported that they had wanted to become pregnant fewer were married at conception. Only two of the husbands of women in this group were employed, and no cohabiting male partners were. This was also the group with the highest proportion of unemployed women.

Women's perceptions of their employment prospects influenced their orientations to pregnancy. Many had experienced difficulties in obtaining jobs and most (83%) had experienced unemployment at some time. It is not surprising then that even women who were employed before they conceived did not feel that they had employment careers which would be damaged by childrearing. As a result both employed and unemployed women considered that there was no good reason for them to actively defer motherhood.

Q. Were you trying to get pregnant? (Section 5.12c, page 71, first interview).

Yes I sort of planned it...I was thinking that if I do - I'm not definitely going out of my way to get pregnant, but if I do get pregnant well, I'm happy and I'm keeping it because I love kids and I couldn't see myself waiting until I'd eventually settled down and that because it seemed a long way off...because I seemed to be having it difficult by not finding jobs easily like I used to before and, you know, everything. So I was thinking, I might as well I'd get settled down now. (19 year old single woman who had not minded if she became pregnant).

Similarly, an unemployed married woman whose husband was long term unemployed had been trying to become pregnant because 'We had no reason to wait'.

3. Women who had considered it important not to become pregnant

Women who had considered it important not to become pregnant formed the biggest group in the study (35%). They were mostly single and living with their parents (Tables 4.6 and 4.7). More than half the 16 year olds were in this orientation, but a third of 19 year olds also were (Table 4.5). The majority of women who were in full time education had not wanted to become pregnant when they did. Fourteen women in the study became pregnant while using contraception. Most of them (11) had been using contraception because it was important to them not to become pregnant when they did. (The other three had not minded becoming pregnant). Two women who had considered it important not to become pregnant conceived the first time they had sexual intercourse.

The main reason that women did not want to become pregnant was either because they had no independent living accommodation or because they lacked money. Only one woman (a single 17 year old) who had not yet had a job mentioned employment as a limiting factor 'I really wanted to have my working life...before I wanted to have a child. A single 19 year old felt she 'wanted to go out' instead of having a child and a married 19 year old (of Italian origin) had only had a registry office wedding, and knew that her father would be furious if it became apparent that she had sex with her husband before she had her white Italian style wedding.

4. Women who had not thought about the possibility of conception

Most women who had not thought about the possibility of becoming pregnant had conceived early in their sexual careers, but one woman became pregnant when she briefly resumed her relationship with her boyfriend, and another when she started to cohabit and sex became less frequent. Roughly equal proportions of 16, 17 and 18 year olds, but relatively fewer 19 year olds had not thought about the possibility that they might become pregnant (see table 4.5). This group were more likely than any other to be in employment. From the findings of the current study it is not possible to say whether this was just coincidence or whether not thinking about the possibility of pregnancy is related to employment in this age group of women.

4.3 Previous conceptions as an influence on orientation to pregnancy

If women had previously been pregnant, they generally wanted to have a child.

Table 4.7: Orientation to pregnancy by previous pregnancies

	Wanted to conceive	Did not mind	Not thought about it	Important not to	Total
Previous abortion	0	1	1	1	3
Previous miscarr	5	0	0	0	5
Previous adoption	1	0	0	0	1
Total	6	1	1	1	9
% of orientation	35	5	7	4	11

Table 4.7 shows that nine women in the study had been pregnant before, and that two thirds of them had been trying to become pregnant this time. Three were 19, two 18 and one 17. Only the 17 year old was neither married nor cohabiting when she conceived this time. None of the 6 had ever had abortions. Five had miscarried, and one had given her child up for adoption. An interesting methodological point is that the adoption was not revealed at first interview when previous conceptions were specifically asked about. At the second interview the respondent asked me to turn off the tape recorder and then told me the story and showed me photographs of her son. This gives a small indication that for some respondents increasing trust and confidence is built up over the course of a longitudinal study and 'difficult' topics are more readily dealt with after first visits.

Previous abortions did not appear to increase women's desire to become pregnant, while it appeared that previous conceptions that had been 'resolved' in other ways did. None of these nine women had been married or cohabiting when they had conceived for the first time, and when they had initially started having sexual intercourse, none had been using contraception. Their sexual and reproductive

careers were not, therefore, qualitatively different from those of single pregnant women who were a year or two younger when they conceived. The numbers of women who had been pregnant previously are too small, however, to give more than indications of its possible importance.

4.4. Influences on contraceptive use

Those who had felt that it was important for them not to become pregnant were the most likely to have been using, and to have considered using contraception when they conceived. While the majority of those who reported contraceptive failure were in this group, most women (61%) who had felt that it was important for them not to become pregnant did not use contraception. Yet two thirds of the sample (52) had used contraception at some time before they became pregnant. Only 12 women had, however, used contraception regularly from when they first had intercourse until they either became pregnant or decided they wanted to have a child. Four were married when they conceived, and eight were single. None were 16 year olds, although two 16 year olds and a 17 year old were intermittent users of contraception throughout their sexual careers.

Two fifths (7) of those who had wanted to become pregnant had used contraception when they first started to have sexual intercourse. Only four of them had, however, used contraception regularly early in their sexual careers. Three of them had sex for the first time after they married, and had been advised by their relatives or GPs to start taking the pill before their weddings. The other was a 19 year old single woman who had decided to take the pill on her own initiative. These four had all continued to use contraception regularly until they decided to become pregnant. For some women, however, the change from not wanting a child to wanting one was not marked by any change in contraceptive behaviour.

'The decision to use contraception is not an absolute one - it is not a decision that is taken once and for all' (Bury, 1984:41). Women moved in and out of contraceptive use during their sexual careers in response to changes in their circumstances or changing attitudes to particular methods of contraception. The following sections will consider what influenced women to use or not to use contraception at particular times.

1. Contraceptive knowledge

Most women in the study (88%, 67) had received some contraceptive education. However of those who had, only two thirds had found their discussions about contraception useful. Most of the sample (72%, 57) had received some contraceptive education from school. Only 29% (22) said their mothers had discussed contraception with them. However women tended to be less happy with school coverage than with their mothers' discussion of contraception. A third (35%, 7) of those whose mothers had discussed contraception with them did not find it useful. This compares with half of

those who received contraceptive education at school. Many had been embarrassed to discuss contraception in large, sometimes mixed sex, groups and often giggling and general merriment had disrupted classes.

Q. Where did you learn about contraception? (Section 5.6b, page 63, first interview).

A. My mum was the best source. School did it, but you know what it's like. (What..?) People were really silly about it. (In the class?) Yeah. It wasn't very good. The teacher just gave up in the end. (18 year old)

Well they (school) tried on numerous occasions, but every time they came with sex education I mean it was such a big laugh that we didn't learn anything anyway because everybody was messing about and they tried putting the guys out. You couldn't get on with the lesson because they kept interrupting trying to see and hear and things like that so they just gave up... (18 year old)

Despite the unsatisfactory nature of school sex education, most women knew which contraceptive methods were available. In answer to the question 'Which contraceptives do you know?' 90% mentioned that they knew the pill, two thirds mentioned the IUCD and nearly three fifths named the sheath. The cap, however, was only mentioned by a third of women and only 1 in 20 mentioned withdrawal. It proved difficult to persuade women to itemise all the methods they knew, and this descending incidence of mention reflected the order in which contraception tended to be mentioned (as well as its popularity with the sample).

A few (7%; 5) of the sample refused to itemise any contraception and simply said that they knew all methods. This **may** partly have been because respondents found this section of the interview embarrassing to discuss. But some other, equally embarrassing issues were discussed without the same diffidence. It may therefore be that many women could not be bothered to answer 'examination' type questions.

The fact that most teenagers have adequate contraceptive knowledge is now well established (at least in the USA; Morrison, 1985). However, Faulkenberry et al. (1987) argue that the USA students they studied had poor basic knowledge of fertility, contraception and sexually transmitted diseases. Similarly, Ineichen (1986) reported that his Bristol based sample of mothers under twenty also lacked adequate knowledge of contraception. In the current study women were asked if they felt they had needed more information or advice on sex and contraception. Three quarters of the sample (73%) said they had not. Although the women had not become pregnant because they were unaware of the existence of contraception there was evidence that a minority lacked specific details about how particular contraceptive methods were to be used. Some women became pregnant while taking low

dosage contraceptive pills (12 women). They showed some confusion about how low dosage pills should be taken and how efficient they were (see the section on 'contraceptive failure' below). In addition a few women gave accounts which indicated that they thought that the cap had to be inserted hours in advance of sexual intercourse.

2. Attitudes to the methods available

Two thirds of the women interviewed had used contraception at some time before they became pregnant. Most had taken the pill (although 4 women who had taken it had not used it for contraceptive purposes). Only 3 women (4%) had ever an IUCD fitted, and 19 women (24%) had been in relationships where male partners had used the sheath. Many women reported themselves to be worried about the potential side effects of taking the pill or using the IUCD. 34% (26) said that they did not like the pill as a contraceptive method, and 44% (33) did not like the IUCD. Concerns about side effects of contraceptive use have been noted in other studies of teenage women (Furstenberg et al., 1969; Herold and Goodwin, 1980; Jones et al., 1986).

Reluctance to use the contraceptive pill or the IUCD was sometimes because respondents knew women who had, or had themselves, suffered side effects with these forms of contraception. The quotes in the rest of this section are responses to questions about experiences of contraception on the first interview schedule (section 5.6, page 63).

I had to go to hospital because it was disorganising my organs. I was sick and coughing up blood...and it was too strong. They gave me a too strong tablet. I decided from then I'm not taking it. (19 year old single woman who had been trying to conceive, and whose side effects while on the pill may have been caused by her sickle cell disease).

I was taking the pill and it didn't agree. That's what they reckoned caused it (lump in her breast)... When I discovered the lump in my bust they took me off it so I didn't use anything since then. (19 year old cohabiting woman who was trying to become pregnant).

Other reasons cited for discontinuing pill use were weight gain; headache; nausea; being scolded by clinic staff for not having taken the pill properly; the end of a relationship and having taken the pill for 'long enough' given that it could cause ill effects.

The three women who had been fitted with IUCDs had all had them removed for medical reasons. Two single 19 year olds developed infections, and a married 19 year old had experienced continuous, debilitating pain.

I was on the pill but then I stopped because it used to make me feel sick...Before I got married I had the coil fitted for about five months but I couldn't sit down - I used to have terrible stomach aches (19 year old ~~worried~~ woman who had not minded if she became pregnant).

Concern about IUCDs was not usually based on first hand experience. But some women had relatives or friends who had been adversely affected by IUCDs:

Some of them (contraceptives) are all right but... when you have the coil and things like that I don't approve of that 'cos my cousin had the coil and later on it affected something so she had to have her womb taken out (16 year old)

The sheath had been more widely used than the IUCD. However 11 of the 19 women whose partners had used the sheath expressed disapproval of it. Nine further women (11% of the sample) had no experience of the sheath but also disapproved of it. Most women who mentioned the sheath as a contraceptive method they knew of said that their partners either did not like to, or would not use it and that they did not like it either. A few women questioned its reliability as a contraceptive method.

We did try that (sheath) together. At the clinic they gave me some for the meantime - but it doesn't feel the same. I don't think it's very fair (19 year old married woman).

Oh! Great big caps they look horrible. The durex (laugh) they busted up. They're no good...Wasn't worth it (laugh). Just gave up in the end (18 year old ^{18 year old} ~~cohabitee~~ who had wanted to become pregnant).

The sheath was generally only used for short periods, early in women's sexual careers, or at the start of new relationships. Only one woman's male partner had used it continuously (but not on every occasion) from the beginning of her sexual career (at 14) until she became pregnant (at 16). Her male partner was the oldest in the study (at 38 years of age) and this may have had some effect in that he may well have been more confident about using the sheath than were younger male partners.

The current study was done before government campaigns on AIDS stressed the importance of using the sheath as protection against HIV infection. However, it is by no means certain that there has been a large increase in young people's use of the sheath since then (see, for example, Breakwell and Fife-Schaw, 1991b and Holland et al., 1990).

The women's reports indicated that the cap was the least favoured contraceptive method (together

with the safe period). Only 32% of the sample (24 women) mentioned the cap when asked to itemise contraception, and 75% (18) of them disapproved of its use. No-one had actually used one, although one woman was considering its use after birth. Apart from stating a general aversion to barrier methods as being 'messy', most women were not very forthcoming about why they did not like the cap. However some considered it to be as invasive of the body as the IUCD, and referred to both as 'things you put inside you' while others considered it unattractive and inconvenient.

They say that now you've got to put it up and after 24 hours, or is it 12 hours you're meant to take it out and then I think of all the horrible you know what I mean - washing it and then you've got to put it away and keep it clean just in case if you put it back in you it's not clean then you get an infection. That's why I'd just rather use the pill... (19 year old cohabitee who had been having fertility checks).

There were indications that some women mistakenly believed that the cap had to be inserted several hours before it was used and was thus an impracticable contraceptive choice.

Well, you can't work by an appointment system. And if you've got to put it in 8 hours before - ! (19 year old single woman who had considered it important not to become pregnant, and had been taking the pill).

With the cap you have to put it in a certain amount of hours before you have intercourse. And with my boyfriend he doesn't say 'well in two hours time Sheila, be in bed'. It's impulse. It's something he wants at a second's notice. I can't do that you're joking! Put it in every night. That is it! (18 year old single woman who had considered it important not to become pregnant).

In reality the cap can be used fairly flexibly because it can be inserted either just before, or **up to 8 hours** before intercourse occurs. It does, however, have to be kept in place for 8 hours following intercourse. Women who made comments like those above had, therefore, either not fully understood what health workers or health information leaflets^{and the} media said about the cap or had been misinformed by friends, partners or relatives. As a result they did not have sufficient information to make informed choices about which contraceptives to use.

Dislike of barrier methods may be linked to social class and age (Skinner, 1986). Older, middle class women may be more likely to use them than younger, working class women. However young women may be averse to barrier methods because the health professionals they encounter are not positive about them. Many GPs, for instance, do not fit the cap and do not consider that young people will

be sufficiently motivated and organised to use the sheath. Since many GPs are negative about the use of barrier methods, it is not surprising that few women are enthusiastic about their use. The women interviewed in the current study were not necessarily different from older women in their attitudes to barrier methods of contraception. OPCS data on contraceptive use (from the general Household Survey) indicates that only one per cent of women report that they use the cap and 16% that their male partners use the sheath (CSO, 1992). It is however possible that, in the future, there may be an increase in the use of the sheath by the under twenties as a direct result of publicity about AIDS and 'safe sex' (Carroll, 1988).

3. General attitudes to contraception

Worries about or dislike of particular contraceptive methods did not make the women in the current study feel generally opposed to contraceptive use. Asked what they thought about contraception in general most replied that they approved of it and considered it to be useful and a good idea. Only 13% (10) were opposed to the use of contraception. For five of them (4 Catholics and one Jewish woman) this opposition was for religious reasons. However, worries about particular methods may have influenced their feelings about using contraception.

In late pregnancy some women who knew they did not want further children in the next few years were already wondering which contraceptive methods to use after birth. There was some feeling that the disadvantages of most methods left them little real contraceptive choice.

Q. Are there any methods of contraception you wouldn't use? (Section 5.6e, page 63, first interview).

Well it (contraception) will be used in the future, Because now I know I can make a baby and that it could happen again. And I don't want it to happen again in the near future. (So are there any methods you wouldn't use?) I don't think I'd use the pill for a long time. It's OK for a while but after a while you get side effects...It doesn't seem right having something inside you all the time (cap and coil). (She had not thought about the possibility of pregnancy because she thought she was infertile. She had started to cohabit in pregnancy)

A. The pill, they say it can affect you with cancer and that. And you don't know what to do. That's the safest one, the pill. But the coil - my sister fell pregnant with the coil this time, so they're not really that safe, them things. So I really don't know what to go on after. It frightens me a bit. The doctor can give you a weak pill, but is it strong enough? The coil - I wouldn't use that because it's dangerous. And the cap and the creams I wouldn't use those. (557)

A. ...And then the coil. I hear that's meant to give you heavy bleeding and pains and that. My mum had it and she had...very bad pains and heavy bleeding and she had to have it taken out of her...The only thing I wanna use is the pill. I mean that's what I've got to sort out after I have the baby because if it's gonna affect me again then I don't know what I'm gonna use 'cos if he won't use the sheath then - and I won't use the coil or Dutch cap and I don't want to fall pregnant again. So therefore something has to come to an arrangement (19 year old cohabitee who had been having fertility tests).

4. Relationships with male partners

Attitudes to, and use of, contraception were influenced by women's feelings about and experiences of heterosexual intercourse as well as by their relationships with their male partners. At the pilot stage of the current study respondents were asked questions about their sexual experiences and whether they had been enjoyable. However, this was one point in the interview when the women became noticeably more reticent and it was decided to drop that sequence of questions in order not to damage the longitudinal element of the study. Holland et al. (1991) found that many of the young women they interviewed reported negative experiences of heterosexual intercourse. However, this study cannot shed light on this issue.

Many women said that their own male partners considered that contraception was 'up to the woman', and wouldn't use it themselves. This effectively rules out the sheath for these women's partners. Holland et al., (1990) also report that condom use (recommended in the 'safer sex' campaign) can only be understood if gendered power relations and the contradictions and tensions of heterosexual relationships are taken into account. In their study very few young women seemed to be prepared to negotiate condom use, particularly in the face of their male partners' opposition to condoms.

In the current study, seven of every 10 women said that they thought that men were less concerned about contraceptive use than women, while only 3% (2) thought they were more concerned. This compares with four in every five who considered that responsibility for contraception ought to be equally shared. Women's reports of male concern about contraception differed by age. Eighteen and nineteen year olds were more likely than 16 and 17 year olds to say that men were concerned about contraceptive use. This may be because older teenagers were more likely to be married and to have relationships which had lasted longer. Some married women, however, also felt strongly that men are not as concerned about contraception as women are.

Q. Whose responsibility do you think contraception should be? (Section 5.9b, page 67, first interview).

A. Women... Because if you leave it down to the men half the time they would say they're using contraceptives, but they're not really. You really don't know (085, married woman who did not mind whether she became pregnant or not).

In this study young men were not interviewed about their attitudes to contraception. However, the findings of an American study indicate that young women may be accurate about young men's attitudes to contraception. Finkel and Finkel (1975) found that over half of the 421, 12-19 year old males that they studied felt that only women should use contraception. Over half of the women in this study had partners who were twenty one or over, but younger women were equally likely to have relationships with men who were over 20 as with men who were under 20. One 16 year old's male partner was 38, and the only married 17 year old was married to a 26 year old.

Many girls still grow up expecting that they will not initiate sexual intercourse or take a lead during its course. In order to continue to see themselves as 'nice girls' rather than 'slags', sex has to be something which is not pre-planned and which happens to them, for which they take no responsibility (Crabbe, 1983; Lees, 1986). Holland et al., (1991) found that nearly a quarter of their sample of 150 women aged 16-21 years old reported that they had been pressured into having unwanted heterosexual intercourse at some time in their sexual careers. Lack of control over whether and when sexual intercourse occurs poses a dilemma for young women who are not 'trying' to become pregnant. Using contraception defines them as pre-planning sex, yet not using contraception may result in their becoming pregnant. Griffin (1985) found the same contradictions between the desire for spontaneous sexual intercourse and planning to use contraception. These contradictions make young women reliant on their male partners use of the sheath. Since the sheath is reported to be generally unpopular with men as well as with some women the chances are that young women will sometimes have 'unprotected intercourse'.

Q. Were you using contraception at the time you became pregnant? (Section 5.12b, page 71, first interview).

A. First time we went out we used that (sheath). Nothing happened... Then after he never used it... (19 year old single woman who had not minded becoming pregnant).

A. I didn't really think. I just listened to (boyfriend) but he just thought about himself (16 year old who had not thought about the possibility of pregnancy).

Age and marital status are relevant here. Younger women are more likely to be sexually inexperienced than older women. It is probably more difficult for women who are just beginning to have sexual intercourse to have the confidence to insist that their partners use sheaths, for example, than it would

be for more sexually experienced women.

Skinner (1986) found that young women in what she calls 'integrated relationships' with their boyfriends are more likely to use contraception than those in less 'committed' relationships. Bury (1984) similarly suggests that young women are least likely to use contraception at the start of a new relationship. This is probably for two reasons to do with the nature of male-female relationships. Firstly, women can more readily admit that sexual intercourse is likely to occur in established relationships. If they do not want to become pregnant, this facilitates use of the pill or the IUCD. Secondly, increasing confidence about sexual activity is likely to facilitate use of methods like the sheath and the cap which require situational control.

Q. Whose responsibility do you think contraception should be - mainly girls, mainly boys or both? (Section 5.9b, page 67, first interview).

A. I think it's an easier thing to go on the pill. For me to take it rather than to use anything else. Especially when... you don't know someone like I know (him) now. It's less embarrassing I suppose. (19 year old single woman who had been on the pill because she had considered it important not to become pregnant).

In addition men in such relationships may feel more committed to ensuring that pregnancy does not occur before they have both decided that it should (even if this is only for fear of censure from friends and relatives). Less than half the women who were married when they became pregnant had used contraception when they first had sex. Seven had used it regularly and one intermittently. Eight women had not had sex before they married. Four of them had used contraception regularly at first, and one sometimes. Polit-O'Hara and Kahn (1985) studied 83 heterosexual couples where the woman was aged 15-18. They reported that it was rare for contraception to be discussed by couples prior to first intercourse and that one quarter considered that it had never been adequately discussed. Contraception was least likely to be regularly used where it had not been adequately discussed.

The difficulty of using contraception in a new sexual relationship places young women in a paradoxical situation. At the time in the life of the relationship that it is most important to prevent pregnancy it is also most difficult to take active precautions against it. Young women who have taken the pill in one relationship are likely to stop taking it once the relationship ends, and so are unlikely to be using contraception when they start new relationships (Bury, 1984). In that situation women in their late teens may become unintentionally pregnant as readily as younger teenagers.

Q. Were you using contraception at the time you became pregnant? (Section 5.12, page 71, first interview).

A. I just stopped taking it because I wasn't going with anyone at the time then I just forgot about it and just threw them away and that was it. (18 year old single woman who had considered it important not to become pregnant).

Two sexually experienced women who had not wanted to become pregnant conceived early in new relationships. One had previously taken the pill following an abortion. She stopped taking it when her relationship ended but conceived the first time she had sex with a new boyfriend. The other had been taking the pill, but stopped taking it when she stopped seeing her boyfriend. She became pregnant when they (briefly) resumed their relationship. Luker (1975) suggests that women weigh up the costs and benefits of contraception against the unknown risks of pregnancy. With gender relations as they currently are, the start of a relationship is generally a time when contraceptive use is, for some women, socially more costly than running the risks of pregnancy.

5. Chance as an influence on conception

The difficulties inherent in the management of early sexual intercourse explain why substantial numbers of young women use no contraception when they first have sexual intercourse (Skinner, 1986; Johnson, 1986). The sheath is the form of contraception most likely to be used in early intercourse (Zelnik and Shah, 1983). Young couples are unlikely to use contraception at first intercourse if male partners are opposed to using the sheath.

Two thirds of the women in the present study used no contraception when they first had sexual intercourse. Nineteen year olds were the year group most likely to report having used contraception when they first had sexual intercourse. A higher proportion of women who used contraception in early intercourse were married than single. Having used contraception initially was no guarantee of future use. Two women (both single 19 year olds) who had used contraception early in their sexual careers had later become pregnant and had abortions.

Some women who did not use contraception when they first had sexual intercourse then went on to use contraception regularly until they wanted to become pregnant. For this reason it is unsatisfactory to dichotomise women who become pregnant as either contraceptors or non-contraceptors. Chance alone may have prevented some 'non-contraceptors' from being 'contraceptors'. If they had not become pregnant when they first started to have intercourse they may well have become regular contraceptive users. Four women (all single) became pregnant the first time they had sex. One was 17, two 18 and one 19 years old. Two had thought it was important for them not to become pregnant, and two had not thought about the possibility that they might become pregnant. The following two responses are in answer to the question 'Did you use contraception when you first started having intercourse?' (Section 5.12a, page 71, first interview).

The thing what happened is - the first time that we ever did have sex I got pregnant, but I didn't know. So that was it. And I said, 'Let's stop. I don't want to do it any more...until I actually go...(to the family planning clinic). (16 year old)

Most women who did not initially use contraception did so later. Two thirds had used contraception at some time, even if only for a short period.

Q. Why didn't you use any contraception when you first had sex?

A. I don't know. I was stupid really, but I just didn't think of it.

Q. Were you aware you were taking chances?

A. In a way, but I had gone so long without using anything - you know with the withdrawal method that I wasn't worried about it. I thought it was quite safe. Like we didn't use anything for six months and everything was all right. I never dreamed I'd get pregnant really.

Q. Why did you start taking the pill then?

A. Just in case I *did* fall - I suppose you could make mistakes. That's why. (Married 18 year old who had been trying to become pregnant).

The above respondent had then taken the pill regularly for two years before deciding to try to become pregnant.

If women did not become pregnant after a period of sexual intercourse in which they had not used contraception, they often thought that they were unlikely ever to become pregnant. They were then unlikely to start using contraception.

Q. Did you believe you could get pregnant or did you have reason to think you wouldn't? (Section 5.12d, page 71, first interview).

A. Because I went for two years with not getting pregnant I thought that I wouldn't. At one point I was worried - I thought that I couldn't have children - I couldn't fall for any. And then this one come along. (18 year old)

A. First time we went out we used **that** (sheath). Nothing happened. We used the sheath. Then after he never used it. So nothing happened. It was like, you know, I still saw my periods so I thought well, nothing can happen, so (laugh) just carried on using nothing. (19 year old)

This is similar to Oskamp and Mindick's (1983) finding that nearly a sixth of the pregnant teenagers

they interviewed agreed with the statement 'If a girl has intercourse for a month or so without getting pregnant, this means she probably isn't likely to get pregnant for a while'.

It is not unusual for women who do not become pregnant after a period of sex without contraception to worry about their fertility and for some to deliberately test it (Bury, 1984). The invisibility of the reproductive system and of the process of fertilisation together with the knowledge that it is possible to be infertile can also generate curiosity, and sometimes fear in women. Uncertainty about whether they are physiologically able to become pregnant may lead some women to want to test their fertility without necessarily wanting a child at that point (Pines, 1978; Luker, 1975). Similarly women who do not necessarily want to have a child can gain some happiness from knowing that they are fertile (Bury, 1984).

Q. Can you remember how you felt when the pregnancy was confirmed? (Section 7.6a, page 87, first interview).

A. I didn't know whether to laugh or cry because I was happy because I felt like I could actually produce a child of my own and that, and I was actually having my own.
(19 year old)

Prior to pregnancy more than a fifth (17) of women said that they had thought that they could not become pregnant. Kantner and Zelnik (1973) found that more than a quarter of their national probability sample of US 15-19 year olds had not used contraception because they thought they could not conceive. The reasons Kantner and Zelnik's respondents gave for this belief included infrequency of intercourse and being too young. The reasons given by respondents in the present study were related to their experience/knowledge of their reproductive system^{rather} than to general beliefs. These reasons included irregular periods (1 woman) tubal infections (2 women) and failure to conceive after a period of intercourse without contraception (9 women). Four women said they 'just thought' they would not become pregnant and a married 19 year old said that she had erroneously thought that it was necessary to try and try to become pregnant. Belief that they are infertile or subfertile particularly affected young women for whom it was important not to become pregnant since it prevented them from taking seriously the use of contraception.

Q. Did you believe you could get pregnant? (Section 5.12d, page 71, first interview).

A. It used to worry me a lot (being infertile) and I used to talk to Joe about it, and he used to say that it didn't matter...It was him that persuaded me to go and see someone (gynaecologist) about it (irregular periods) (19 year old single woman who had considered it important not to become pregnant).

A. I didn't know you could get pregnant so easily. I thought you had to try and try to get pregnant. And it was so quick (19 year old married woman for whom it had been important not to become pregnant).

Two women who had both been trying to conceive for over a year were so worried about the possibility of being infertile that they had initiated the process of fertility investigations. One of them became pregnant between having a fertility test done and starting treatment:

Q. Did you believe you could get pregnant? (Section 5.12d, page 71, first interview).

A. I didn't get pregnant for about a year and I had some tests done and they said I wasn't releasing any eggs. (18 year old)

Young women do not necessarily ovulate when they first menstruate. Lack of ovulation may account for the fact that some do not conceive when they are first having heterosexual relationships but not using contraception. Teenage women may, therefore, become convinced that they are infertile, and need never use any contraception. In reality, however, they are only temporarily infertile or subfertile and are likely to become pregnant if they continue not to use contraception.

5. Obtaining and storing contraception

Once women have decided that they wish to use contraception, they have to get contraceptive supplies from chemists, GPs or clinics. Contraception is available free of charge in Britain and young women can obtain it without having to inform their parents. The process of obtaining contraception is, however, frequently difficult and sometimes daunting for young women, as the following two respondents make clear:

Q. Have you ever considered using contraception? (Section 5c, page 63, first interview).

A. I dunno. I think I sort of feel a bit embarrassed as well going to the chemist or going to the doctors. I wouldn't be able to say a thing. (17 year old)

Q. How did you feel about going to the clinic? (Section 5.8a, page 65, first interview).

A. I didn't wanna go innit. I felt kind of embarrassed, but I still went.
(18 year old)

Nearly a third of the 20 women who had attended clinics and the 31 women who had consulted GPs for contraception were unhappy about the treatment they had received. This was frequently to do with the manner in which they were treated, but was sometimes, as in the following example, because of what was actually said. The following two examples are responses to questions on feelings about the

GP or clinic attended for contraceptive services (section 5.8b, page 65, first interview).

She was saying like - 'how old's your boyfriend?' And I told her. 'He's a bit in the baby woods' she said and it was nothing to do with her, and I was answering. I was telling her everything ... I was really upset.

(17 year old single woman)

In the above example the woman, on her mother's advice changed her clinic, but some other women who were unhappy with the way they were treated never collected further contraceptive supplies:

But I stopped going up there because she told me off for not taking the pill properly. (18 year old single woman)

More than half (56%) the women were living with at least one parent (more often their mothers than their fathers) when they became pregnant. Some single women living with their parents felt reluctant to use contraception like the pill or the sheath which have to be stored somewhere. They worried that parents would find their contraceptives and be displeased to learn that their daughters are sexually active. This finding differs from that in other studies which suggest that parental attitudes towards contraception 'have little impact on adolescent's contraceptive use' (Morrison, 1985). In the current study parents influenced their daughter's contraceptive behaviour indirectly because living with parents was felt to be a constraint on storing supplies of contraceptives. One woman for example reported that she had obtained supplies of the contraceptive pill long before she became pregnant, but had never taken them because she was worried that her mother might find them.

In trying to ensure that young women had sufficient contraceptive supplies Family Planning Clinics were sometimes insensitive to the problems of storage and embarrassment that some young women may face. This is made graphically clear in the following description.

Q. Why did you stop going to the clinic? (Section 5.7b, page 65, first interview).

A. ...He said 'what about the sheath?' And I didn't really know about them then. And he said 'I'll give you some of them and you can see if you like it'. So he gave me a card and I went to the reception area where you get your tablets and things. And there were all these men sitting there with their girlfriends and things, and they gave me 100 boxes of Durex! Oh God, I nearly died on the spot. I could feel my face going bright red. So I shoved them into a carrier bag and put my pill in, and I walked out and felt such a clot. I felt, I can't take 100 Durex home, my mum will go mad! So I slung 'em. And a bloke behind me picked them up and said, 'I think you've lost these!' I quickly shoved them back in a bag and ran like mad,

then dumped them in a dustbin when I got further down the road. (572, 18 year old single woman).

Some parents' (or parent substitutes) had actively encouraged their daughters to use contraception rather than risk pregnancy. Almost one women in every six reported that someone (usually but not always their parents) had put pressure on them to use contraception. If women wanted to use contraception they welcomed encouragement to do so.

Q. Has anyone ever put pressure on you to use contraception? (Section 5.11, page 69, first interview).

A. ...Because they (parents) thought we (respondent and her older sister) should go onto it last year...and we took notice and we went on it. (175; single woman who became pregnant while taking the pill, and who had thought it was important for her not to become pregnant).

A. Well I was (living) with my nan and like I spoke to her once and I said - because my mum had me very young (at 16) and I said to my nan I don't want to ever fall pregnant and she said well you're not going to because you haven't got a boyfriend and she took me to the clinic and she said she's not going out with anyone at the moment but she wants to have the pill... (19 year old married woman who had not minded whether she became pregnant or not).

It should be noted, however, that some young women felt uncomfortable or even angry at suggestions from their mothers that they should use contraception when they were not yet sexually active.

A. At first I felt funny because I was going out and she thought that I was doing things and I wasn't (17 year old single woman who had not minded whether she became pregnant).

A. Oh she told me to go on the pill (laugh). Anyway I told her I wasn't doing anything so I don't know what she's talking about...Because she knew I had a boyfriend she...just used to jump to conclusions...I goes to her 'What do I want the pill for? Am I doing anything?'...She went out and she flung the slippers at me... (This episode then developed into a full blown physical fight). (18 year old cohabitee who had been trying to become pregnant this time, but who had miscarried the previous year after becoming 'accidentally' pregnant).

Three women received domiciliary contraceptive services (arranged by their mothers) and were very satisfied with this method of obtaining contraception.

4.5. Contraceptive failure

Francome (1986) found that over a third of the women (of mixed ages) in his abortion survey reported that they had been using contraception regularly when they conceived. One fifth of Simms and Smith's (1986) nationally representative British sample of mothers under twenty also said that they had been using contraception when they conceived.

Table 4.8: Orientation to pregnancy by contraceptive use at conception

Wanted to	Did not mind	Not thought	Impt. not to	Total
0	3 (4%)	0	11 (14%)	14 (18%)

Most pregnant women interviewed in this study had not been using contraception when they conceived, but nearly two fifths of those who had considered it important not to become pregnant said that they had been using contraception when they conceived (see table 4.8 above). Four of them had not always used the contraceptives as directed to by the manufacturers, and therefore felt that they had run the risk of becoming pregnant. One had relied on her male partner's use of the sheath and the other three had been taking oral contraception.

Q. Were you using contraception regularly when you became pregnant? (Section 5.12b, page 71, first interview).

A. I used to take it before I went to work ... One morning - oh I'm late for work and I just rushed off - you tend to forget about it by the evening time with all the people you see - I just forgot about it (17 year old).

The other ten women who had been using contraception when they became pregnant reported that they had always used it correctly. Nine of them had been taking the pill, and one had been using the sheath regularly (although not with spermicide). While it is theoretically possible to separate contraceptive failure from failure to use contraception as recommended, in practice it is difficult to distinguish them.

For example two of these ten women became pregnant the first month after intra-uterine contraceptive devices (which were causing them problems) were removed. Both women were then prescribed low dosage contraceptive pills which failed. Since low dosage pills are unreliable in the first two weeks of use, it is possible that these women had not stringently followed manufacturers' recommendations on use. They could also however, have been misinformed or not informed about those recommendations and not been able to understand manufacturers' leaflets. It is apparently not uncommon for the contraceptive pill not to be taken in strict accordance with manufacturers'

instructions. Finlay and Scott (1986) found that between one fifth and one third of their sample made various errors in the way they took contraceptive pills. Some did not start taking it on the recommended day, while others missed pills and varied (erroneously) the times of day in which they took pills.

In any event the two women mentioned above were absolutely certain that they had taken the pill properly. One was furious with her doctors for not telling her that the antibiotics prescribed to clear up the infection caused by her IUCD could make the pill less effective. The rest of the quotes in this section are in response to the question, 'When you became pregnant were you using contraception regularly?' (Section 5.12b, page 71, first interview).

And they took it (IUCD) out, and gave me the pill and an antibiotic. And the antibiotic counteracted the effects of the pill and thanks to the doctors I ended up pregnant! I mean they never said anything to me. They just gave me the pill... (19 year old single woman who had considered it important not to become pregnant)

The period of transition from one type of contraception to another, or from one type of pill to another, seems to be when contraception is more likely to be reported to have failed and also to be less effectively used (Francome, 1986).

She gave me a different pill and it turned out to be a weaker dose and that's why I got pregnant. (19 year old)

I was watching some programme on TV about the pill and cancer. So I went to the doctor to change the pill to get another pill - it was a lower dosage and when I was changing onto that I was mixing myself up and that's when I fell pregnant. This pregnancy was in between changing pills. (18 year old)

Women who reported that they had been using the pill regularly were angry that they had become pregnant. They felt that their doctors had omitted to give them necessary information about oral contraception:

I didn't know there was any different dosages you know what I mean? And when I went for the pregnancy test I went to a youth advisory centre, and I went to see a doctor there for the first appointment and she said to me 'What pill were you on?' And I told her, and she said, 'I have had so many people, so many girls in here that have been on that pill and have come to me in here pregnant'. I couldn't believe it. I was so angry because I'd been careful.

(18 year old)

Whatever the reasons that women conceived while using contraception, some who were taking low dosage pills felt puzzled about why they had become pregnant. They needed more information than they had apparently been given about how the pill works, and when it should be taken. This is unfortunate since, despite fears about its safety, the contraceptive pill was the most popular method of contraception with the women in this study.

I don't know how it (pregnancy) happened. My doctor said it was a low dosage pill and it hadn't got into my system, which is probably why. (19 year old who had considered it important not to become pregnant).

4.6. Summary

Most women knew which contraceptive methods were available, and many had used contraception at some time. They had not conceived because they lacked knowledge about the existence of different types of contraception. However, there was evidence that a minority may have benefitted from more detailed and accurate knowledge about the cap and the pill. No-one in the sample reported that she had wanted to become pregnant in order to get housing or welfare benefits. Contraceptive use and non-use depended on a number of complex factors, and women sometimes had conflicting feelings about it. Factors which deterred women from regular contraceptive use included fears of potential health risks; of breaching socially accepted gender relations; of parents finding out that they were sexually active, and queries about their fertility. Some women had good reason to believe that they were infertile. However, since none of the women in the current study were infertile, these beliefs were particularly unhelpful to women who had considered it important not to become pregnant.

Most women had not been 'trying' to become pregnant. But nearly one in five reported that they had been 'trying' to become pregnant. These women together with those who said that they had not 'thought about' the possibility of becoming pregnant as well as most of those who were 'not bothered' whether or not they became pregnant did not perceive contraceptive use to be relevant to them.

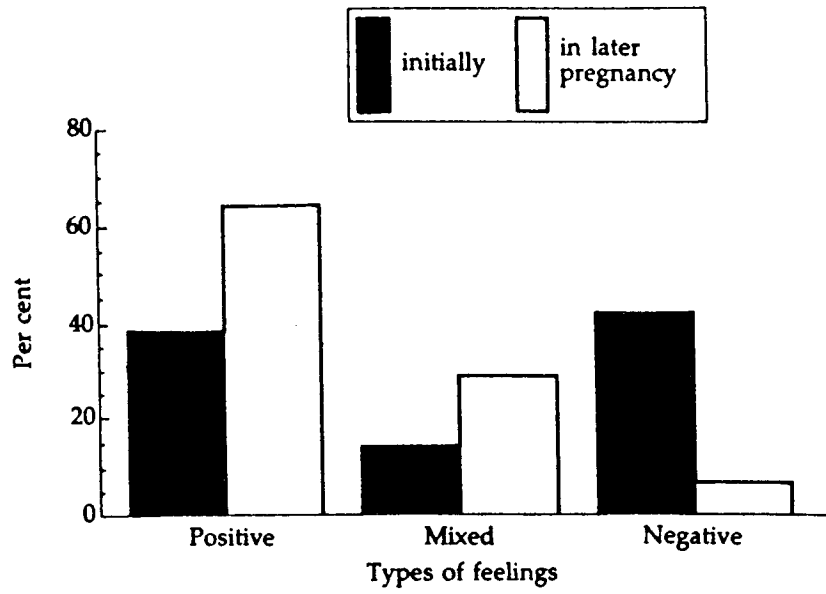
Chapter 5: After conception: Findings and discussion

Once women realise that they are pregnant they either have to go ahead with their pregnancies or decide to have abortions. If they give birth they can keep their children or give ^{them} up for adoption. These decisions are affected not only by how women feel about being pregnant and about abortion and adoption, but also by the reactions of significant people in their lives. Since the study reported here is of women who all gave birth and kept their children the discussion of decisions made after con-ception does not apply to women who decide to terminate their pregnancies or to give their children up for adoption.

5.1. Initial reactions

Figure 5.1 (below) shows women's reactions when they first realised that they were pregnant. Initially nearly two thirds of the women (39%) reported that they were happy to be pregnant. Twenty eight per cent reported only positive feelings. A further 11% had a few small misgivings but were predominantly positive. Women who had wanted to become pregnant were most likely to report positive feelings. But women from the other orientations described in chapter 4 ('did not mind'; 'had not thought' and 'important not to') also said that they had felt positive. The 15% of women who reported mixed feelings about being pregnant came from all four pre-pregnancy orientations.

Figure 5.1. Women's feelings about being pregnant



Women who were unhappy to be pregnant were mainly those who had considered it important not to become pregnant. Two fifths of the sample (42%) said that they felt miserable once they realised that they were pregnant. Twenty nine per cent felt nothing but misery, while 13% were mainly miserable. They described feelings of upset, anger, misery, negativeness and fear. None of the women who were married at conception described their initial feelings in this way.

Studies of 'teenage mothers' often treat ambivalent or negative feelings on discovery of pregnancy as if they are worrying indicators of poor outcome for the mothers and their children. Yet ambivalent and negative initial reactions to pregnancy are common in any age group of mothers. Indeed pregnancy itself is a time of rapid developmental change characterised by emotional lability.

The psychological work which takes place is not necessarily conscious, although it is well known that during pregnancy there is a tendency for women to become more introspective. Pregnancy is a time for reassessment of the past and for thoughts about the future...Imbalance and disorganization often precede times of greatest change. And so in pregnancy a woman may feel that her world is being turned upside down... During the first months of pregnancy a woman has to come to terms with being pregnant. Even when planned, the decision to have a baby and the conception, whether immediate or not, are followed by conscious or unconscious misgivings. These first months are filled with doubts, confusion, regrets, anxieties and disbelief. (Birksted-Breen, 1986:23)

A married woman pregnant with her first child should be 'absolutely thrilled'. But many have far more complex reactions... So strong is this cultural imperative to be overjoyed at the news of pregnancy that a woman who reacts differently may puzzle the professionals and be labelled abnormal... Cultural images of pregnancy portray such (mixed/negative) reactions as abnormal. Yet many women, who become ordinary loving and caring mothers have them... (Oakley, 1979:40-41).

Women's initial reactions to pregnancy were related to their personal circumstances. Most women were affected by their perceptions of how their male partners' and parents would react. It was rare for women in this study to worry that their employment prospects would be adversely affected by early motherhood.

Q. How did you feel when you suspected that you were pregnant? (Section 7.3a, page 85, first interview)

A. I didn't really want to be because when I thought of all the things you know. How it would

set me back in my career (as a clerical officer) and things like that you know I was a bit upset about that...At the time it didn't enter my head. It was afterwards I started thinking 'Oh my God, what have I done?' (18 year old single woman who had not thought about the possibility that she might become pregnant).

A. I really wanted to have my working life...before I wanted to have a child (17 year old single woman who had been unemployed when she conceived).

A. It did matter to me because of my work (as an accounts clerk)... (19 year old single woman who considered it important not to become pregnant, but became pregnant the first time she had sex).

Single women who lived with their parents sometimes seemed more concerned about how their parents would feel when they learned of the pregnancy, than about how they felt about it. Such concern was not surprising since some parents had the power to make their daughters homeless. Only one woman was eventually made to leave home (and go into a mother and baby home) by her father, but fear of a harsh reaction made some women reluctant to tell their parents that they were pregnant.

Q. Can you remember how you felt when your pregnancy was confirmed? (Section 7.6, page 87, first interview).

A. I wasn't sad and I wasn't happy. It wasn't a shock to me. I was just scared about what might happen at home. That's what I was fretting about. (16 year old single woman who had considered it important not to become pregnant, and whose father did make her leave home).

A. Alright. A bit scared, but I got over it...Scared at first of telling my mum... (Cohabiting woman who had wanted to become pregnant and was living in her mother's house, 16 at conception; 17 at birth).

A minority of women mentioned that they had feared a more adverse reaction from their fathers than from their mothers.

Q. Why didn't you want your dad to know that you were pregnant? (Section 7.5d, page 87, first interview).

A. I thought he'd kick me out straight away, hit me. (17 year old single woman who had not minded whether she became pregnant or not, but had been on the pill).

A. I thought my dad would hit my boyfriend and beat him up. (17 year old who had been on the pill and had considered it important not to become pregnant).

While women who lived with their parents were more likely than not to be anxious about what their parents would say, some were not perturbed that their parents did not like the idea of them having a child and a few knew that their parents would support them whatever happened.

Q. Looking back, was it important to you that you did not get pregnant or were you not particularly concerned? (Section 5.12, page 71, first interview).

To me it wasn't (important). But to my parents it was. (021; 18 year old single woman who had not thought about becoming pregnant).

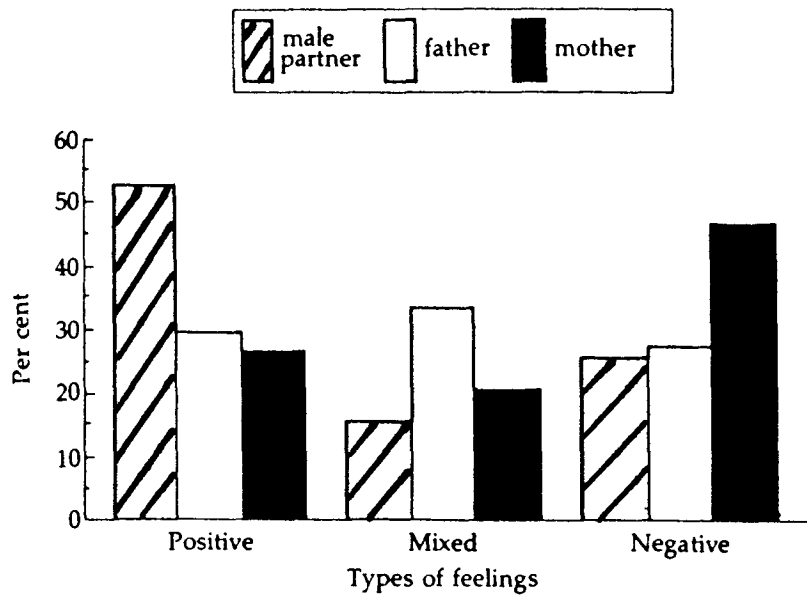
A. It wasn't really bothering me if it happened. I always knew I'd have support from my family. (005; 19 year old single woman who had not minded whether she became pregnant or not).

Initially women reported that only just over a quarter of parents (27% of mothers and 30% of fathers) were pleased that their daughters were pregnant while nearly a half of mothers (47%) and almost 3 in 10 fathers (28%) were reported to express nothing but displeasure (see figure 5.2 below). Most other parents apparently took news of the pregnancy calmly, but were not delighted that their daughters were pregnant. There were marked age and marital status effects. Parents of older, married teenagers were more likely to be pleased that their daughters were pregnant than parents of younger, single women were. But some parents with older, married daughters living in circumstances socially constructed as ideal for the rearing of children thought their daughters should have waited until they were older to become pregnant. The following quotes come from section 7.11, page 93 of the first interview, Reaction to pregnancy.

She said I was very silly to let myself get pregnant, and how could I want to have a baby when I was this age - I had no life, you hadn't done anything together. She was quite upset for quite a while actually. (055; 19 year old married woman who had wanted to become pregnant, and who, unusually for this study was an owner occupier).

Everybody wasn't as enthusiastic as I thought they'd be at first meaning parents and parents-in-law...My father kept saying you should have waited a while...(022; 18 year old married woman who had been having fertility checks, and owned her own house).

Figure 5.2. Other people's initial feelings about women's pregnancies



Older, married teenagers were more likely than younger, single ones to report that their male partners (like parents, and like the women themselves) were pleased that they were pregnant. But male partners were more likely to be pleased that they had fathered a child than women or their parents were (see figures 5.1 and 5.2 above). Over half (53%) of male partners were said to be pleased when they first learned that women were pregnant, and only just over a quarter (26%) were reported to have had no feelings of pleasure at first.

Women who lived with their male partners were keen that they should be pleased, but those who lived with their parents often felt more concerned about how their parents would take the news than how their male partners would.

Q. How did you feel when you first suspected that you were pregnant? (Section 7.3, page 85, first interview).

A. What was my mum going to say! (Laughs). I wasn't really worried about him (boyfriend) knowing. It was my mum, mainly, and my dad. Because my mum had her son when she wasn't married, and she just always said how hard it was bringing him up herself, and things like that (515; 19 year old single woman who had not thought about the possibility of pregnancy).

5.1.1. Abortion and adoption

Women who are immediately pleased to be pregnant and whose families and male partners are also pleased are unlikely to want either to have abortions or to consider giving their children up for adoption. However, women who are unhappy to be pregnant or who have mixed feelings about it may consider abortion or adoption. Alternatively women may be persuaded into having abortions by their parents or male partners.

The design of the current study precluded interviews with women who actually had abortions because the sample were selected in late pregnancy. It is unlikely that women would have agreed to be in the study if they were intending to give up their children for adoption. One woman approached at antenatal clinic gave this reason for refusing to be in the study. Various studies indicate that young women who become pregnant and have abortions differ on various characteristics from young women who go on to have children. They are likely to be of higher social class, have better academic records, and to be more ambitious than those who go on to have children (Phipps-Yonas, 1980; Bury, 1984).

The discussion of abortion and adoption presented here relates to a group of women who did not either have abortions or give up their children for adoption. They cannot, therefore be claimed to be

similar to women who made different decisions. Nonetheless a tiny minority of women had previously had abortions and one had given up a previous child for adoption. In addition some women reported that they had thought very hard about whether to have abortions or to give their children up for adoption during their current pregnancy.

Table 5.1 Attitudes to adoption and abortion (in percentages)

	Completely opposed	Mostly opposed	Mixed feelings	Mostly in favour	Completely in favour	N
Adoption	35	6	12	33	14	66
Abortion	58	20	7	7	9	76

When asked about their general attitudes to adoption and abortion it became clear that neither were generally attractive to the women in the current study (see table 5.1 above). Opposition to adoption was not as vehement as was opposition to abortion. Less than half the sample (41%) reported that they had some opposition to giving up children for adoption. Yet few women gave serious thought to the possibility of having their children adopted. Only five women (6%) had considered that they might have their children adopted, and only one (who was 16 at conception and 17 at birth) actually got as far as asking a social worker about adoption (see below).

One woman (who was 17 and single and had wanted to conceive this time) had, three years previously, had a child adopted. On that occasion her family had handled her pregnancy by hiding it. The woman was still hoping that she could get her son back at some time. Three women interviewed had previously had abortions. Two were 19 and one 18 when they conceived this time. The 19 year olds were single, but the 18 year old was cohabiting. One 19 year old had had two previous abortions, but had not minded whether or not she became pregnant this time. She had been having difficulty finding jobs and saw no reason to defer motherhood. The other 19 year old became pregnant the first time she had sex in a new relationship, when she had not yet thought about the possibility that she might become pregnant. The 18 year old cohabiter had been taking the contraceptive pill because she considered it important not to become pregnant while living in her boyfriend's parents' house. Only the woman who had not thought about the possibility of becoming pregnant was not immediately pleased when she realised that she had conceived, but none of these three women considered abortion or adoption as possible courses of action during this pregnancy.

Most women interviewed reported that they were opposed to abortion except in specific circumstances, such as if a fetus was known to be affected with a disorder, or if a woman had been

raped. More than four fifths expressed some opposition, and nearly three fifths claimed that whatever the circumstances, they could not condone abortion (see table 5.1 above).

Q. People vary a lot in their views about abortion - what do you think about it? (Section 7.8a, page 89)

A. I just don't think it's right killing a baby. It's like killing yourself. Getting pregnant and then killing the baby is not right. It's not worth you having sex. If you have sex you know you're going to get pregnant. What's the sense killing it... (557; 17 year old single woman who had considered it important not to become pregnant).

Women who have strong anti-abortion feelings are unlikely to terminate even pregnancies they are unhappy about. However, some women who reported that they were opposed to abortion did consider having one. Twenty two women had considered having an abortion when they first realised that they were pregnant and 13 had actually gone along to their general practitioners or clinics to get information and advice about abortion. As would be expected from the national trend for pregnant teenage women who are pregnant to give birth rather than having abortions, only single women had considered abortion. Most women who had considered having abortions were 16 and 17 year olds. Their consideration of abortion was often inspired by parents. Some parents actually suggested abortion to their daughters but some daughters considered abortion because they feared their parents' anger.

Q. Did you consider having an abortion at any time? (Section 7.7.1, page 89, first interview).

A. Well my mum said to me (suggested abortion). She doesn't like them at all. She's against it really, but where I was so young - she thought - she was in two minds... and she did decide to leave it up to me but I don't think I could do that. (You said no?) I wanted to say 'no' straight away but it...weren't just for my sake it were for my mum and dad's sake as well as for me to live here, but they said to me 'look if you don't want one we'll stick by you' and everything. But I didn't want one really. (175; 17 year old who became pregnant while taking the pill, and had considered it important not to become pregnant. Her older sister became pregnant 2 months before she did).

A. No we went there (to the abortion clinic) but I wasn't going to have it (the abortion) anyway... My mum hadn't told my dad, so I was a bit worried about him finding out...but then I just came back and said, well I don't want it (abortion) and she said all right. Told my dad and my dad just said we were a bit mad and that was it... (17 year old who had had a previous child adopted and who had become pregnant in order to persuade her parents to allow her to marry. She did marry in late pregnancy).

Other women were also prepared to show themselves willing to accommodate their parents' feelings by considering abortion if necessary. In most cases parents left it up to their daughters to decide whether to have abortions or not, and given the option most women did not have abortions.

One 16 year old came close to having an abortion. She was actually anaesthetized and taken to theatre, but then not aborted because the doctors estimated that she was too advanced in pregnancy. She said that her parents had told her that it was up to her whether she had an abortion or not, but that she herself was against it. This apparent inconsistency of views and behaviour was because she believed that although her parents were not insisting that she had an abortion, they would prefer it if she did. She said 'I was doing it for them' and reported herself to be relieved when she found that she could not have an abortion. Her parents were opposed to her having the child adopted so when abortion proved impossible the whole family began preparing for her child to be born.

Some women reported that abortion was suggested to them at hospital antenatal clinics. The following two examples illustrate how if clinics suggest abortion, young women can use delayed disclosure of pregnancy to ensure that they are not pressurised into having abortions they do not want.

Q. Did anybody suggest that you should have an abortion? (Section 7.7.5, page 89, first interview).

A. I was just in there having a check up. This was about the second visit, and a tall nurse came in, and she saw my age and saw that I was going to be a one-parent and she said about my job - how am I going to be able to cope and bring it up by myself. And she said I should have an abortion. And I was really annoyed. I just cried. I didn't answer her. I couldn't. My mum did mention it - but I was too far gone. That's why I didn't want her to know (sooner). (515; 19 year old single woman who had not thought about the possibility that she might become pregnant).

A. At the clinic they said would I like an abortion, and I didn't know what to say - but then when they said that my mum would have to sign this and this, and that's when I didn't go to the clinic again at all - until they (family) found out. (027; 16 year old who had not thought about the possibility that she might become pregnant who resisted her family and friend's pressure to have an abortion, and later to have the child adopted).

Male partners who were unhappy that women were pregnant sometimes made it clear that they did not want a child just yet, but it was rare for them to attempt to force women to have abortions. The following examples were not, therefore, typical.

A. He kept saying he didn't want it, and he still says it now. (Why?) Because he doesn't have the money to look after a kid, or me come to that. (?) He says he'll still love it, and look after it. (583; 17 year old who had not minded if she became pregnant, but who had been taking the contraceptive pill).

A. When he found out that I was four months pregnant he didn't want to know me. And then one day he come up and he turned round and said I should have an abortion because he doesn't want a baby. (17 year old single woman who had not thought about the possibility that she might become pregnant).

An 18 year old woman who became pregnant the first time she had sexual intercourse suspected that her male partner would be negative about her pregnancy, and broke off the relationship before he had a chance to suggest abortion to her.

Q. Was there anyone you didn't want to know that you were pregnant? (Section 7.5d, page 87, first interview).

A. When I found out, I didn't tell him, and I broke off the relationship. And I knew the only answer he would give me would be 'Go and have an abortion'. It would be a very uncaring attitude, and I didn't want to be involved in that situation - being kicked when you are down...I just didn't want to know anyway. (18 year old single woman who had not considered the possibility that she might become pregnant).

Two women wanted abortions because they felt that they could not cope with children in their situations, rather than because their parents felt they should not have a child. One (17 at birth, but 16 at conception) was undecided about having an abortion until it was too late to do so, but when seen in late pregnancy was very disapproving of its availability, saying 'It's given too freely and it shouldn't be like that'. Once she decided against abortion she began thinking of having her child adopted. She was the only person in the sample to start the process of getting her child adopted rather than just considering it without taking any action.

Q. Did you ever consider having the baby adopted? (Section 7.9.1, page 91, first interview).

A. When I thought I'm not going to have the abortion, I thought to myself, Jane, you just can't keep it. And I said well I'm going to have it adopted. And the social worker said to me 'if you have it adopted, there's no way you can see it again'. And I thought to myself, Jane, why the hell are you having a child, and you're not going to get no benefit or anything out of it... (008; 17 year old who had considered it important not to become pregnant, but became pregnant the first time she had sex).

The other woman who initially wanted an abortion because she did not feel that she could manage to look after a child was an 18 year old single woman who became pregnant while drunk, and had not realised that she had ever had sexual intercourse. She considered having an abortion but did not consider adoption because she felt that there was no point in going through with childbirth and then 'giving the child away'.

Q. Did you consider abortion at any time? (Section 7.7.1, page 89, first interview).

A. I said well I wouldn't be able to keep the child, because I'm unemployed, I haven't got a job, I haven't got a flat. I haven't got anything. So it would be unfair to bring a child into the world...I said 'I'm afraid I'll have to have an abortion so he gave me a letter for the hospital...and then I decided that I couldn't go through with it. (031; 18 year old single woman who had not thought about the possibility that she might become pregnant).

5.2. Reactions in late pregnancy

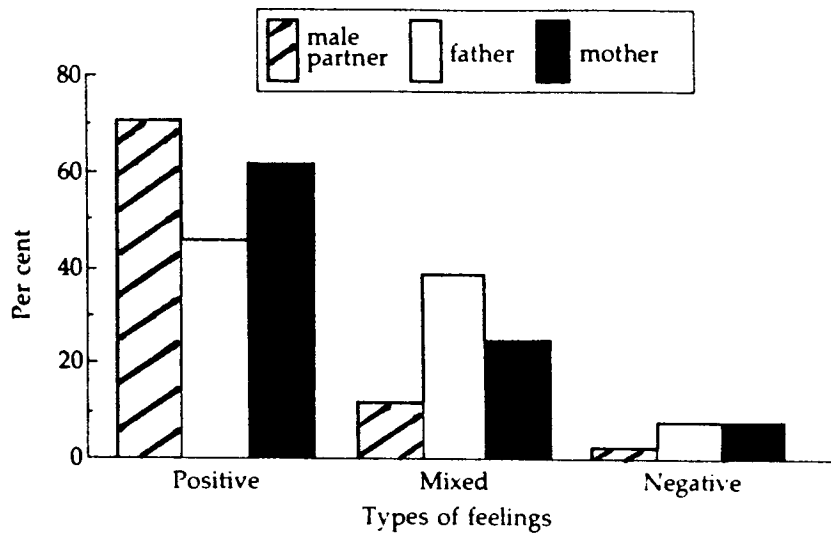
It is sometimes assumed that women who are initially unhappy to be pregnant are unlikely to want their children. Yet psychoanalytic writers consider negative feelings to be a normal part of early pregnancy, and pregnancy itself to be a period of coming to terms with transition to motherhood (Pines, 1978; Birksted-Breen, 1986). Negative reactions have been reported for some women who are over twenty years of age (Oakley, 1979; Brannen and Moss, 1988) as well as those who are under twenty (Simms and Smith, 1986; Skinner, 1986). As pregnancy progresses women are generally reported to become more positive about being pregnant, and this is also the case for women who are under twenty (Furstenberg, 1976; Simms and Smith, 1986).

In the study reported here, most women said that they recognised themselves to be pregnant in the first trimester, and four in every five got a doctor to confirm their pregnancies then. More than a third reported that they had their first hospital antenatal appointment before they were three months pregnant. Nearly all (90%) had been to antenatal clinics by the end of the second trimester. Asked how they had felt about their antenatal visits four fifths expressed some dissatisfaction about waiting times, the way they were treated, or not being given sufficiently clear explanations. Yet over three quarters never missed an antenatal appointment. These findings run counter to beliefs that mothers under twenty are likely to be late bookers and erratic attenders at antenatal clinics.

Only one woman did not disclose her pregnancy until just before she gave birth and, therefore, did not attend antenatal clinics at all. She was a white woman who was frightened to tell her parents she was pregnant because her child's father was black, and her parents, particularly her father, were she reported 'prejudiced'.

Women's feelings in late pregnancy were related to how they perceived that pregnancy would fit into their lives, and how the people who were important in their social networks (predominantly parents and male partners) responded. Only one of the six women who were eligible for maternity leave wanted to take it. She was a 19 year old who was apprenticed to a traditionally male trade and still had a year of training to run in late pregnancy. She had wanted to become pregnant, and did not regret her decision to try to conceive. She intended to complete her apprenticeship. Other women felt that employment and motherhood were not compatible and that motherhood was more important. For example a single 19 year old who qualified for maternity leave strongly disagreed with her mother's desire for her to return to her job as a cashier in a supermarket.

Figure 5.3. Other people's feelings in late pregnancy about women's pregnancies



Figures 5.1 to 5.3 (above) show that as pregnancies progressed women themselves, parents and male partners became happier about the child to be born. In late pregnancy only 8% of mothers and the same proportion of fathers were still displeased that their daughters were pregnant. Women's mothers were slightly more likely to be positively enthusiastic about the pregnancy than women's fathers were.

Q. How did your parents react when you told them that you were pregnant? (Section 7.11, page 93, first interview).

A. She said it's up to me. You can do what you like. It's your life now. She was a bit negative to start with, and my dad hit the roof. (Now...?) She's great now. She's very helpful. And my dad's better now. It's as time goes on, nearer I get to having it the more excited they're getting. Because this is their first grandchild. They don't like the circumstances much, but they're still excited. (523; 19 year old single woman who had previously had an abortion, but became pregnant the first time she had sex in a new relationship).

A. Um she was shocked. She was crying and things like that...Now she's all for it. She's always running out the street buying me this and buying me that. She's just like a normal mother I suppose. (030; 16 year old who had not thought about the possibility of pregnancy, and had still been at school).

By late pregnancy nearly three quarters of male partners (72%) were happy about their partners' pregnancies, and only 13% still felt predominantly negative about it. It continued to be the case that a greater proportion of male partners were enthusiastic about women's pregnancies than either the women themselves or women's parents were. This may partly be because the men who were most upset to learn that their partners were pregnant were no longer in relationships with them in late pregnancy. Fifteen single women stopped having relationships with their children's fathers during pregnancy. Five of these pregnant women reported that their male partners had stopped contacting them without saying that the relationship was over. Three women said they had ended the relationship because men had either reacted badly or were anticipated to react badly to news of their pregnancies. The other seven relationships had reportedly ended for reasons that were less clearly related to the fact that women were pregnant.

As other people in women's social networks became more enthusiastic about the child to be born, so too women felt increasingly pleased to be having a child. In late pregnancy 66% of women were very pleased to be pregnant. Only one person (the 16 year old who had been forced by her father to leave home) said that, while she was looking forward to having a child, there was nothing good

about being pregnant. By late pregnancy when everybody in women's social networks knew about the impending births, women were in a position to weigh up what childrearing was likely to entail for them instead of mainly concentrating on how friends and relatives would react. Far from being unrealistic about what mothering was like women recognised that childrearing was sometimes difficult, and that there were losses as well as gains involved. The following responses are to questions from section 7.6, page 87 of the first interview in Respondent's attitude to pregnancy.

Oh yes, all the plans I'd had for myself went out of the window. I was faced with a different sort of life to the one I'd thought about. I had to sit down and think about what I had to do, what I was going to come across. I knew that it wasn't going to be a bed of roses. I knew there would be hard times. (524; 18 year old who had not thought about the possibility of pregnancy).

I would have preferred not to, but now I don't mind. Maybe I could have gone out and found a career for myself, and maybe we could have got things a little more organised first. I'd like to have been a bit older, but I don't think now it's going to make a lot of difference to my life. I will try not to make it. (542; 19 year old single woman who had considered it important not to become pregnant).

I think it's quite good. It depends on what mood I'm in whether I'm positively happy. (...any regrets..?) Sometimes I think it might be a tie...That's what I'm afraid of. And with my family...like the women - they just had their children and stayed in all the time - and I'm afraid of falling into that. Because I've seen different things you can do - I don't want to fall into that. (564; 17 year old, having twins, who married in pregnancy and had not minded whether she conceived or not).

I regret it at times, thinking, we could have had our own place by now, or we could have had the wedding we wanted, a bigger wedding. But it's a case of having to. We've got a child coming which we're over the moon about, and it's one of those facts of life we've got to face. But I do sometimes think it could have been better than this. (18 year old who had been cohabiting in pregnancy but not thought about the possibility that she might become pregnant).

Although they recognised that mothering would not always be easy, most women were looking forward to having their children by late pregnancy. Even those who said they had initially been miserable about being pregnant felt keen by then.

Q. How do you feel now about being pregnant? Have your feelings changed? (Section 7.6b, page 87, first interview).

A. ...And I'm really looking forward to it you know. I've come to terms with it. It's taken a long time, but... (572; 18 year old single woman who had considered it important not to become pregnant and had been taking the pill).

A. I'm quite happy about it. (18 year old single woman who had considered it important not to become pregnant, but became pregnant, without having a relationship with the child's father, the first time she had sex).

A. I decided that I was gonna have the child and I'm happy now that I'm gonna be a mother. I've always loved children... (18 year old who had conceived while drunk, and had no idea that she had ever had sex).

Parents were invaluable in providing support for women who had initially been unhappy about being pregnant, or whose male partners had left them. The fact that women in such circumstances were looking forward to childbearing owed something to parental enthusiasm about having new grandchildren.

5.3. Satisfaction with life and ideas about the future

Towards the end of the first interview (in late pregnancy) women were asked a few questions about their satisfaction with their lives so far and their expectations for the future. This provided another way of checking how they felt about having their children in their teens and of how they viewed their future prospects.

Table 5.2. Whether the women would ideally change anything about their lives

	No	Yes
Summary	33 (46%)	39 (54%)
Education	60 (84%)	12 (17%)
Employment	68 (94%)	4 (6%)
Having a child	62 (86%)	10 (14%)
Upbringing	57 (79%)	15 (21%)
Other	59 (82%)	13 (18%)

N = 72

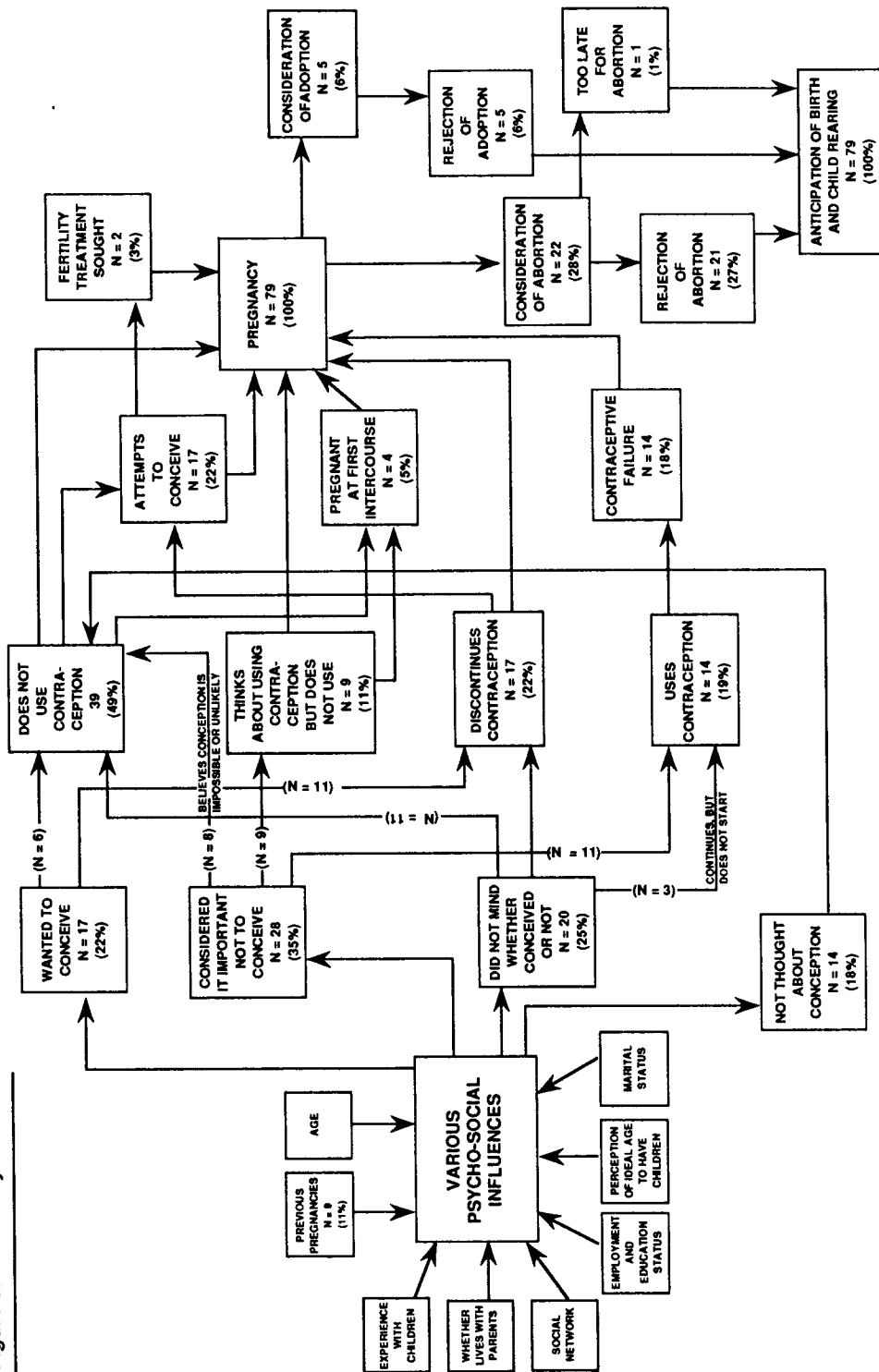
Table 5.2 (above) shows that more than half (54%) the sample wanted to change some aspect of their lives. A fifth of the sample (21%) wished that their upbringing had been different. Women who said this usually mentioned that they wished that fewer restrictions had been imposed on them by their parents and that they had wanted more material goods. A few also mentioned that they would have preferred to have got on better with their parents than they had. Less than a fifth (17%) wished that they had achieved more in their education. On the whole, however, they did not report that they would have preferred their employment experiences to have been different. Only six per cent said that they would have preferred to have had better employment experiences or to have been able to continue longer in their current jobs.

With regard to having children a fifth of them said that they would have liked some aspect of having their first child to be different.

5.4. Summary

Figure 5.4 (below) is a diagrammatic summary of chapters four and five, representing the influences on conception and women's decisions to have and to rear their children.

Figure 5.4 Pathways to Birth



Once they realised that they were pregnant those who felt pleased to be pregnant and those who felt unhappy about it were fairly evenly divided. Most women's parents and their male partners were not initially pleased that they were pregnant. The upset generated by news of the pregnancy was usually less if women were married, and if they were in their late, rather than early teens. Most women declared themselves to be opposed to abortion, and only a minority had considered having an abortion. Even fewer considered having their children adopted although less opposition was expressed to adoption than to abortion.

Over the course of the pregnancy women and significant people in their social networks gradually became more enthusiastic about the child to be born. In late pregnancy only one woman (the only woman to be thrown out of her home by her parents) said that there was nothing positive about being pregnant. Yet even she was looking forward to having her child. By the time they were six months pregnant the majority of women were attending antenatal clinics regularly even though most did not enjoy their clinic visits.

CHAPTER 6: Men and Marriage: Findings and discussion

In Britain and the USA single motherhood has become progressively more common over the last twenty years. In both countries it is now normative for teenage women to be single when they give birth. This trend has been linked with a range of social disadvantages.

Moreover teenage motherhood is associated with illegitimate births... and this in turn is associated with all kinds of deprivation (Simms and Smith, 1986:2)

These trends are of concern because early parenthood and illegitimacy are associated with lower educational and occupational attainment, marital instability, closer spacing of subsequent children, larger completed family size, and poorer mental and physical health of the mother and child (Robbins et al., 1985:567).

In his 17 year follow up of mainly black mothers who had given birth when they were 17 years old, Furstenberg et al., (1987) found that less than a sixth (14%) had never had a marital or cohabiting relationship which lasted at least six months. Only 16% were, however, married to the father of their children when that child reached 17. Simms and Smith (1986) suggest that 'the condition of being 'separated'...may not necessarily be a permanent one' (p.50) since two of the four women in their study who were separated soon after birth had reunited with their husbands a year later.

This chapter aims to provide basic information about changes in women's marital status during pregnancy and over the first two years of their children's lives. It also discusses possible reasons for increases in single parenthood in women who give birth before they are twenty. It does so by describing the characteristics of men who father children with teenage women. It then documents changes in the marital status of women interviewed in this study. Young women's professed views about men and marriage are also discussed.

6.1. The male partners of mothers under twenty

More has been written about fatherhood than is generally acknowledged by writers on fatherhood (Lewis and O'Brien, 1987) but relatively little is known about the male partners of women who become mothers before they are twenty years of age. There have, however, been studies of, or studies which have included, male partners both in Britain and in the USA (eg. Simms and Smith 1986; Elster and Lamb, 1986; Belsky and Miller, 1986). Robinson (1988) reviewed literature on teenage fathers and concluded that much of what is assumed to be accepted knowledge about them are really negative and unsubstantiated myths. Similarly, Bucholz and Gol (1986) suggest:

There is a stereotypical view of the adolescent father as uninterested that is at odds with the

devotion of many of them... There are many indications that fathers are involved with and proud of their children... (Bucholz and Gol, 1986:356).

Most children born to mothers who are under twenty years of age are fathered by men who are slightly older than the women. In Britain in 1980 four fifths of all married teenage women who gave birth had male partners who were over twenty years of age. Most of these male partners (three fifths) were aged 20-24 years. Only one fifth of married mothers under twenty had male partners who were over twenty five years of age (OPCS, 1984).

Married women who are under twenty constitute a minority of the under twenties. In 1986 only 2% of teenage women were married (cf with 0.6% of teenage men; CSO, 1988). Complete official figures for the male partners of single mothers under twenty years of age are not available. But Simms and Smith (1986) found that four fifths of the male partners of women in their nationally representative sample of mothers under twenty were at least 20 years old. Single mothers of any age group are now more likely to jointly register their children's birth with their children's fathers than to register them alone. A greater proportion of the male partners of women who are in their teenage years are older than them compared with the male partners of older women. For example two thirds of fathers who jointly registered their children's births with single mothers under twenty in 1986 were aged 20 or over. Less than a half of women aged 20-24, however, had male partners who were in an older age group (OPCS, 1987).

Table 6.1: Age of women's male partners by women's ages in pregnancy*

	17	18	19	20	21	22	23	24	25	26+
Women's ages										
16	0	2	3	2	1	0	0	0	0	1
17	2	3	4	3	0	2	1	1	0	1
18	1	2	4	5	1	3	2	2	2	1
19	0	0	1	3	4	3	4	3	1	8
Total	3	7	12	13	6	8	7	6	3	11
	4%	9%	16%	17%	8%	11%	9%	8%	4%	14%

N = 76

* Three women did not know their children's fathers' ages *

Over half the women's male partners were 21 years old or more at birth (see Table 6.1 above). They

ranged in age from 17 to 38 with the most common ages being 20 and 21 years. More than seven in every 10 were over twenty. Women who were aged 19 were more likely than any of the other age groups to have male partners who were in their late twenties or in their thirties. But the only 17 year old who was married at conception had a male partner who was 26 years old, and a single 16 year old had, for two years, been having a relationship with a 38 year old male partner. Women who were single at conception were as likely to be having relationships with older men who were in their late twenties and thirties as married women were.

In the USA the male partners of mothers under twenty are more likely to themselves be under twenty than is the case in Britain. This may be because a greater proportion of mothers who are under twenty in the USA are under 18 years old than is the case in Britain (Jones et al., 1986). However, their male partners are still more likely to be over than under twenty. Just under 40% of children born to USA teenage women are fathered by teenage men (Elster and Lamb, 1986).

The majority of male partners of women who become mothers before they are twenty come from similar backgrounds to the women they impregnate. Simms and Smith (1986) found that male partners tended to come from disproportionately large families of origin (two thirds had 3 or more siblings); the majority (four fifths) were from the working classes. A third of them had mothers who had themselves been teenagers when they had their first child. They were also one and a half times more likely to be unemployed than men in their age group. Twelve per cent of the Simms and Smith's fathers were unemployed at the time of interview. Most (87%) had manual occupations.

In keeping with Simms and Smith's (1986) findings, the male partners of women in this study of 16-19 year old mothers also came from similar backgrounds to those the women themselves came from. A third of them had four or more siblings. Two fifths were unemployed during the women's pregnancies. The fact that many more of the current sample were unemployed than in Simms and Smith's study reflects cohort effects (because youth unemployment increased dramatically between 1979 when their sample gave birth and 1983/1984 when the current sample did) and possible regional effects (since this study was a local one and the Simms and Smith study was a nationally representative one). Where male partners' had been employed, their usual occupations were mainly in skilled and unskilled manual work. A similar picture emerges from American work on fathers who are under twenty years of age (Lamb, 1987).

Overall then the fathers of children born to teenage women are more likely to be over than under twenty. Yet because they have high rates of unemployment a substantial minority are unlikely to be able to make material provision for their children or children's mothers.

6.2. The marital career over time

Most women do not marry in their teenage years. But women who become mothers before they are twenty are more likely than their childless age peers to marry in their teens. Marriage early in the life course is related to social class in such a way that people from the manual social classes are likely to marry earlier than women from professional backgrounds (CSO, 1992). The women in the current study were almost all from the manual working classes. When they gave birth (from the end of 1983 to the beginning of 1985), a third of the current sample were married, compared with 3% of women in their age group. Within the under twenty age group marriage is age related so that 19 year olds are more likely to be married than any other age group of teenagers (Simms and Smith, 1986). No 16 year olds in this study were married when they gave birth, while more than two fifths (44%) of 19 year olds were.

6.2.1. Trends in marriage and cohabitation over the course of the study

6.2.1.1. During pregnancy

In the present study there were two noticeable trends in women's marital careers over the course of their pregnancies. Firstly there were increases in the numbers of women married or cohabiting (see table 6.2 below). At conception a fifth of the sample (22%; 17) had been married, and a tenth (11%; 9) cohabiting. By late pregnancy a third (33%; 26) were married. The numbers of women cohabiting stayed the same between conception and birth, but in fact three (4%) started to cohabit in pregnancy while three (4%) moved from cohabitation to marriage over the same period.

Table 6.2: Change in women's relationships with male partners between conception and late pregnancy

	At conception	In late pregnancy
No relationship	2	17 (3%) (22%)
'Visiting' relationship	51	27 (64%) (34%)
Cohabitation	9	9 (11%) (11%)
Marriage	17	26 (22%) (33%)
N =		79 79

The second notable trend during pregnancy was for relationships with male partners to end. While

only two of the women interviewed in late pregnancy had no relationship with their children's fathers when they became pregnant, the relationships of a further 15 (making 17; 22% altogether) ended before birth (see table 6.2 above).

6.2.1.2 After birth

Attrition was relatively high in this study (see chapter 3). Information on changes in the relationships of some women who were given long interviews in late pregnancy is not, therefore, available. Conversely information on changes in relationships is available for some women from whom only basic information was collected in pregnancy. Although it is not possible to be certain, there were some indications that women who were interviewed 21 months after birth may have been those from the original samples (long interview and short interview) who were most likely to continue having relationships with their children's fathers. For example, one woman who continually deferred the 21 month interview had moved away from her husband, and another who had left her own council flat to her child's father and had not left a forwarding address, did so in order to get away from her cohabiter. Nevertheless the relationships of women who were successfully seen underwent a number of changes in the first two years after birth.

Table 6.3: Patterns of relationships from conception to 21 months for the sample interviewed 21 months after birth

	Age	16	17	18	19	Total	
M throughout		-	1	4	11	16 (24%)	
C throughout		-	1	-	1	2 (3%)	
S throughout		6	3	6	4	19 (28%)	
S->M		1	4	2	2	9 (13%)	
S->C		-	3	2	4	9 (13%)	
C->M		-	-	1	-	1 (1%)	
C->S		-	2	1	1	4 (6%)	
S->C->S			-	2	-	1	3 (4%)
S->M->S->M		-	1	-	-	1	
C->S->C			-	-	1	-	1
C->M->S->C		-	-	1	-	1	
C->M->S->M		-	-	-	1	1	
S->C->M->S		-	1	-	-	1	
Total		7	18	18	25	68	

Key: M = married; S = single; C = cohabiting; -> = change to

Note The category 'single' includes women who are in relationships with male partners and women who are not.

Table 6.3 above shows the various sorts of changes that occurred in women's relationships with their male partners in the two years after birth. Between birth and when their children were a year old, one sixth experienced changes in their relationships with their male partners, and over the following year a fifth did. Thirteen patterns of relationship were evident. It should be noted, however, that no distinction is made between 'visiting' relationships and 'no relationships' in tables representing the period after birth. These two sets of relationship were difficult to distinguish in many cases since women reported maintaining relationships with children's fathers (and others) who were seen infrequently in some instances, while in others they appeared tentative about whether or not they were actually having relationships. Thus, while the states of relationships are evident from some accounts, the general picture is less clear.

Table 6.4. Joint registrations of birth for single and cohabiting women

Registered by mother alone	Jointly registered
27 (46%)	32 (54%)

N = 59

Joint registrations of birth provide an indication that couples who are not legally married want their children to be associated with their fathers. Table 6.4 (above) shows that only just over half of the single and cohabiting women asked at the second interview reported that their children were jointly registered. The fact that nearly half did not jointly register births, however, was not necessarily an indication that there was no relationship or a poor relationship between the two parents.

Table 6.5. Reported relationships with male partners for women interviewed at six months and 21 months

	Six months	21 months
Single	46 (54%)	27 (40%)
Cohabitation	16 (19%)	13 (19%)
Married	23 (27%)	28 (41%)
Total	85	68

Table 6.5 (above) shows that for the samples seen at six months and at 21 months there was an increase in the percentage married and, in comparison with the sample seen at six months, a decrease in the percentage who remained single at 21 months. In the sample seen at six months, two of the cohabiting women were 'semi-cohabiting', living in their own flats but with male partners who regularly stayed some nights a week and, for those nights, contributed to the household. Part time living arrangements have been reported in some other studies (Bucholz and Gol, 1986).

Four of the women in the single group had separated from their husbands. In the sample interviewed at 21 months, one woman had married someone who was not her child's father and a further two were cohabiting with men who were not their children's fathers. Three women who were cohabiting at 21 months (and one who had previously cohabited) were 'semi-cohabiting' (in one case not with her child's father). They were 17, 18 and 19 years old.

Twenty-one months after birth a minority of women who had been cohabiting or married reported that

their relationships with male partners were either troubled or had ended. Seven women who had been in cohabiting relationships at some time were no longer in them at 21 months. Two married women separated from their husbands after birth and were still separated when interviewed for the last time at 21 months. One was 17 and the other 18 at birth. The 18 year old had started to cohabit with her husband's stepbrother.

When relationships went through difficult phases cohabiting and marital relationships sometimes ended temporarily. For example one woman stopped cohabiting with her child's father during pregnancy when she still lived in her parents' home. Later, however, when she was rehoused by the council she agreed to let him live with her in her own flat in her child's second year. Similarly two married women (one 17 and one 19 at birth) allowed their husbands to return to the marital home after short separations. Neither of these women had been married when they conceived.

None of the women who married before they were pregnant actually separated in the first two years after birth. Their relationships were not, however, necessarily stronger or happier than those of women who married after conception or after birth. One woman (18 at birth) had packed up and gone back to her parents for a day when her child was a year old. Another two had been unhappy in their marriages and had been thinking of separating since birth, but had not done so. At least one other wanted to leave her husband, but did not have sufficient money to make this possible. Several women expressed dissatisfaction with their marriages or cohabitations. In one case a 17 year old was unsuccessfully trying to persuade her cohabiter to leave their home.

Although it was not uncommon for women to move into or (more rarely) out of cohabitation and marriage, it was slightly more usual for them to remain in the marital status they had been in at conception. Overall more than half the women (55%) had not changed their marital status between conception and 21 months after birth. But more than two fifths (45%) had at least one change in their relationships with their children's fathers. These relationships were both into and out of cohabitation and marriage as well as out of relationships altogether. The lability of women's relationships is not surprising since marriage is still a popular enough institution for most people to marry at some time, and marriages (and presumably cohabitation) contracted early in the life course are less likely to last than those contracted later (Rimmer, 1981). Indeed it is estimated that in Britain half the marriages contracted by teenagers are likely to end in divorce (Kiernan, 1989). In the USA Teti, Lamb and Elster (unpublished) used data from a national population survey to argue not only that marriages contracted by teenagers are likely to end in divorce but that, at least for males, it also has long term negative socioeconomic consequences.

6.3 Reasons for being single, cohabiting or marrying

In order to try to explain why many women's relationships with male partners were not static, the rest of the chapter will focus on the nature of these relationships; women's feelings about men and marriage, and the circumstances in which marriages have and have not occurred.

6.3.1. **Attitudes to men and marriage**

This section uses responses to questions from the first interview, section 13.5 on Attitudes to Men and Marriage on page 177.

Table 6.6 Reported advantages/disadvantages of marriage for women

Neither advantages or disadvantages	Advantages only	Disadvantages only	Both	Undecided
36%	23%	26%	12%	3%

N = 69

Table 6.6 above shows that women were not uniform in their views about the advantages/disadvantages of marriage for women, but expressed three sorts of views. More than a quarter of those asked in late pregnancy about advantages and disadvantages of marriage were unequivocally negative about marriage, seeing it as having only disadvantages for women. A second group of comparable size (just under a quarter) thought that there were only advantages for women, but the largest group (nearly two fifths) did not think of marriage in terms of advantages or disadvantages to be gained and said either that they could think of none, or that there were neither advantages or disadvantages for women.

Table 6.7 Reported advantages/disadvantages of marriage for men

Neither advantages or disadvantages	Advantages only	Disadvantages only	Both	Undecided
32%	34%	7%	18%	9%

N = 68

By way of contrast women were more likely to think that men benefitted from marriage (Table 6.7 above). A third thought that there were only advantages in marriage for men, and only 7% of women thought that men gained only disadvantages from marriage. Over 40% could neither think of advantages or disadvantages in marriage for men. Asked which partner gets the better deal from marriage, 40% of women (25) said that men and women benefitted equally. However nearly as many again (23, 37%) said that men benefitted more, while only 7% thought that women benefitted more.

The majority of women who were already married (82%; 18) felt that marriage had been a good idea for them at the time they married. One (4%) felt that marriage would have been a good idea for her if she had left it until later, but three (14%) were not sure whether marriage would ever have been a good idea for them. None of them said that it would definitely never have been a good idea for them to marry.

Although married women mostly said that marriage had been a good idea for them and that there were advantages of marriage for women, their accounts often highlighted the costs of marriage for women and the benefits for men. The following woman, for example, had said that there were only advantages for women in marriage but the rest of her account contradicts this.

Q. What are the advantages of marriage for women?

A. They (women) feel sort of, they, maybe you feel you've got someone to rely on, you've got someone that's there, you've always got someone to turn to, that's with you. So, it's not very nice at first having to clean and wash and that, but you've always got someone that's there...

Q. What about advantages for men?

A. They got someone to cook and clean and I think they rely on you and that's their benefit, they rely on you, and they think you're their slave. Well they don't think you're their slave, but they rely on you to wash and that, so they really haven't got any worries, I don't think. That's it, you've got to wash and make the dinner and that's hard luck if you don't because I can't.

(17 year old married woman who became pregnant in order to be allowed to marry - husband present for the interview).

The costs to women and benefits to men described by the above respondent were identified in many women's accounts. Women's role in marriage was reported to entail drudgery, while men were perceived to have a more relaxed time through women's hard work. If they were lucky women could expect support (material and emotional) and security from the marriage:

Men know they have to go out to work and the women are looking after them. Especially in Jewish life the women are giving a lot more - I don't mean to say that the men don't give to the women - but the women are looking after the men. But he on the other hand gives other things - like support.

(516, 19 year old married woman).

Someone to depend on. Like me before I'd get paid, but then half way through the month my money would run out and I'd have nowhere to turn. But now I'm married and I'm happy giving my money to my husband and he'll deal with it. And every worry you've got you share. You've got someone there (521, 18 year old married woman).

The price of such security in marriage was often considered to be restrictions on women's, but not men's, personal freedom. Cohabitation was perceived to be qualitatively different from marriage in this respect. Women who were cohabiting (as well as single women) felt that marriage would be more restrictive than 'just living together'.

It ties you really if you're married. Like I can get up and just go to me mum's, but if you're married you've got to explain yourself (522, 16 year old cohabiter).

They can't go out with their friends because their husbands don't like it (593, 16 year old single woman living with parents).

Boulton (1983) suggests that it is having children, not marriage, which restricts women's freedom relative to men's. When they were pregnant, however, women in this study were more likely to say that they thought that marriage would curtail their freedom than that children would.

Despite its reportedly restrictive nature marriage was not perceived to guarantee men's fidelity or that relationships would last.

I mean I've always been told that a man's meant to be faithful to you if you're married and that...I feel sorry for some of these women who are married and then their husband's - he's no good and that, and I don't think it's any better for women who are married. I think it's just luck if you stay together. (Do you have any plans to marry the baby's father?) No never! (019, 19 year old cohabiting woman).

I know people who've lived together for six years, got married, then got divorced within six months. My sister-in-law and my brother were like that. (Do you have any plans to marry the baby's father?) None at all. Dave can go when he wants (522, 16 year old cohabiting woman).

For reasons such as those given by women in the two examples above cohabiting women did not necessarily consider that cohabitation was a precursor to marriage. However, some cohabiting women expressed fears about marriage but were prepared to consider marriage for themselves.

...Say if you lived with them, say you marry them and you haven't lived with them and all of a sudden they could be rather nasty about getting married and that and make you do different things you know. (Do you have any plans to marry the baby's father?) ...It's because I'm pregnant. I mean we was going to marry anyway, but if - you see 'cos I wanted to find out what he was like out of marriage... (080, 19 year old cohabiting woman).

It was because marriage was considered to entail many disadvantages for women that nearly a third (18) of those who had an opinion about whether or not marriage was a good idea for women said that they considered women to be generally better off not married. More than a third (21) felt that it depended on the individual relationship whether marriage was a good idea for women. Just over a quarter (16) felt that marriage was, in general, a good idea for women.

It is not unusual for teenage women to express negative views about men and marriage. In a study of 100 fifteen and sixteen year old young women done in 1980, Sue Lees' (1986) found predominantly negative reactions to the idea of marriage and the burdens it imposes on women. Despite their negative views however, most of Sue Lees respondents expected that they would marry at some time in the future.

Table 6.8: Single and cohabiting women's intention to marry

Never intends to	Not sure if	Not sure when	Before 20	Early 20s	Mid 20s	Late 20s or later
24%	20%	14%	12%	12%	4%	14%

N=50

* Data for three single women are missing *

Table 6.8 above shows that more than half the women who were either single or cohabiting in pregnancy (56%) said that marriage would be a good idea for them in the future. More than two fifths of women who thought that it would be a good idea for them to marry at some point considered that they would ideally like to marry in their mid twenties, while a third thought that somewhere between the mid 20s and later would be preferable. The rest were undecided about the ideal timing of marriage.

A fifth of those who were single or cohabiting were undecided about whether marriage would ever be a good idea for them. But a quarter were adamant that they would never marry. This was for the reasons described above; that they did not want to have to service men's needs and that they did not want their freedom to be restricted. It was also, however, because some have seen other people's marriages, (parents, other relatives and friends) end in acrimony. Their parents' cohort who contracted marriages in the 1960s were much more likely than previous generations to divorce (Kiernan, 1989). Thirty five per cent (28) of the women in the study had parents who had separated. Some women had been deeply affected by this:

I've seen what happened to my parents and I wouldn't want that to happen to me (106; 18 year old single woman).

The majority of people I know haven't got nothing out of it (marriage)...To me I could never get married because I've sat down and watched my mum and dad's marriage fall apart and I wouldn't like to go through that myself... I mean they (men) come home, find the kitchen clean, food waiting... They get a little slave (030; 16 year old single woman).

Griffin (1985) suggests that however anti-marriage young women are the pressures of 'compulsory heterosexuality' are likely to result in their eventual marriage or cohabitation. In late pregnancy, single women in this study who did not want to get married did not necessarily rule out cohabitation for themselves. Fifteen (55%) of those in 'visiting' relationships said that they would consider living with their children's fathers without marriage being a future consideration. A further two women (12% of

those with no relationships) said they would consider living with a man other than their children's fathers on the same terms.

There can be a further mismatch between attitudes to marriage and later marital status. Mansfield and Collard (1988) found that some women reported that they had married earlier than they had anticipated they would.

Yet a feeling of unrealised intention is indicated by the fact that the great majority of those who gave an ideal age range (93 per cent of men and 88 per cent of women) had relinquished their freedom prematurely - indeed, a quarter of women had married as much as five years or more before their ideal age (Mansfield and Collard, 1988:58).

The majority of single women subscribed to the view that, ideally, children should live with both their mothers and fathers. 80% (37) said that it was better for mothers to live with their children's fathers, while only two women (both 17 year olds) thought it was better for them not to, and only six (13%) thought that whether it was a good idea or not depended on circumstances.

In late pregnancy the picture that emerged was one in which most women reported some negative aspects of marriage for women. Yet most single women thought they would marry at some time. Even if they were adamant that they would never marry, many women expected that they would cohabit in the future. Most women held normative views about children being reared in households with both parents.

As we have already seen there were many changes in women's marital status over the two and a half years from conception until their children were 21 months. To some extent differences in women's views were a consequence of the diversity of their circumstances. Women who were sure that they did not want to marry could refuse to do so, but obviously simply being in favour of marriage could not guarantee that marriage would take place.

Q. Have you felt low or depressed at any time in the last month? (question 2.4d from the third interview schedule, page 34).

A. I get a bit depressed sometimes. Especially as all my friends are pregnant. And they're all sort of settled with someone. They're either married or they're settled with someone, and I feel a bit sort of left out you know...Because like - I mean I know women because like they've got a couple of kids and they still like - cos to me - I really want to get married, and they still manage to sort of find someone, whereas I tend to get blokes who either don't wanna know because you've got a child, or they think you're really easy because you've got a baby... You

have to be so careful - like whenever I meet someone I always think will they be good to Robert... (585; woman who was 18 years old at birth speaking 21 months later when she was having a relationship with a married man).

6.3.2. Reasons for marrying

Since many women are negative about men and marriage why had some women married before pregnancy, and why did additional women marry during pregnancy and after the birth? (The quotations used in this section come from the first interview schedule, section 13, Attitudes to Men and Marriage, pages 173-179).

Women did not mention love as a reason for marriage, but they may have taken it for granted that in current western societies love is the most common and acceptable reason for marrying. Nor did anyone say that pregnancy or having a child was their primary reason for marrying (although for a few this was one consideration). Four general reasons (which were not mutually exclusive) for marrying were evident in the women's accounts and these applied both to women who married before they conceived and those who married later. Percentages are not given for the reasons which follow. Many married women were vague about their reasons for marrying and since these reasons are not mutually exclusive it is difficult to be sure that particular reasons did not apply to women who did not mention them.

1. Normative expectations

Some women had always expected, and/or been expected to marry early. This was sometimes because early marriage was usual in the woman's social network. Women from social classes IV and V are more likely to marry in their teenage years than women from social classes I and II (CSO, 1988; CSO, 1992). Additionally a few women mentioned that there were cultural reasons for their early marriage.

Like I said, I got married at 16, and when I left (school) at 15 I had in mind I'll be getting married at 16 (062, 19 year old).

I mean Turkish girls...they have to be married before they are ...22 or something like that (043, 19 year old)

I always wanted to get married at about 18, 19 and to have children straight then - once you get married (516, 19 year old).

Women who followed the normative pattern of marriage before conception could expect some social

approval for this despite the fact that youth itself constitutes being 'normatively off schedule' for motherhood (Chilman, 1980). This social approval may also apply to the women's parents. In this case, marriage could ^{help} the women's social network careers to run smoothly and to intersect supportively with the women's motherhood careers.

2. Having a familiar and reliable partner

Some women had known their boyfriends for some time and felt that they would be reliable marriage partners. The following respondent had cohabited (in her parents home) with her male partner since she was 15 years old, and had married at 16 years:

We don't argue over anything... It's great really. That's why I'm so happy about it... If I weren't so sure about it...that I'm gonna be with him for the rest of my life, I wouldn't have got pregnant... (038, 17 year old).

Marriage to reliable male partners could, theoretically provide the women with direct help and support (both practical and emotional) with childcare and childrearing.

3. In order to improve their circumstances

Women who married could usually leave home to live with their male partners in a way they knew that their parents considered to be legitimate. Marriage could also be an act of defiance against parents who were attempting to break up a relationship:

If I had a choice I would have been brought up differently to start with which probably meant I wouldn't have got married so young because I would have been able to have a **proper** relationship. I wouldn't have wanted to get married so quick. Well I mean it could have changed the whole of me life really... (022, 18 year old).

When we got married me and my husband forged the signatures of my mum and dad because I was under age. We just went and got married. His mum never really liked me. We're second cousins, me and my husband, and she used to say that you'll have mental children and things like that, so...the more she tried to push us apart, the more we got closer together...(098, 19 year old who married at 17 years: 2nd interview).

Women could also use marriage in order to try to gain their parents' approval (see the discussion in 'Marriage after birth').

There were some women who did not mention that they married for such explicitly instrumental

reasons who may well have married at least partly in order to improve their circumstances. The following respondent met her husband and started cohabiting with him immediately:

Well my husband took me from a shed. 'Cos I was living in a shed. That's how we met...Then started living with him (after a week in the shed) and we just got closer and closer. It was on the...3rd day we got engaged {and married 3 months later when R was 3 months pregnant}(054, 19 year old).

4. A more attractive proposition than boring jobs

We knew one day we would get married. I think I am more for being a mother to a family than I am to working (521; 18 year old).

Campbell (1984) suggested that marriage and/or motherhood provide alternatives to employment for many young working class women. It was rare, however, for women to suggest that they perceived marriage to provide an alternative to an employment career.

On the whole parents approved of marriages contracted before conception began. The exceptions were the woman who forged her parents signature, one who married a man she had met while he was on a two week holiday in Britain, and the woman who married at 16 in order to leave home as soon as possible. In the first case the parents never gave their consent, but in the other two cases they reluctantly gave their consent:

It was very serious. My father went mad, he wouldn't talk to me. He said to me, 'you're just marrying someone you don't know. How can you live a life with him? Probably you'll get divorced the second month'. And about going to Italy - he didn't like it. But because it would make me happy they let me go (to get married there). But they were really upset (512, 17 year old).

It should be noted that reasons number two (having a familiar and reliable partner) and three (in order to improve their circumstances) above were also reasons for women to cohabit with their male partners as the following quote demonstrates.

You see my mum was moving and she asked me to go, but I didn't want - because my mum is 48 and this guy is about 31 and he smokes drugs and I didn't like him at all and he had just come out of prison and I met him and I didn't like him so I moved into my boyfriend's house (569, 18 year old who had been cohabiting for nearly two years in pregnancy).

6.4. Marriage after conception

Women who married after becoming pregnant expressed reasons for marrying which were similar to those who married before conception. This section discusses who they were and their circumstances in order to see whether they were different from those who married without being pregnant.

6.4.1 **Marriage and cohabitation during pregnancy**

Once pregnant dominant ideological assumptions about the correct situation in which to have children make single women subject to social disapproval. It might be expected therefore that parents would attempt to pressure their daughters into marriage. In this study however few women reported that any pressure to marry had been put on them.

Fifteen per cent of the women who had been single when they became pregnant reported that someone (usually, but not always, parents) had put pressure on them to marry before they gave birth. However this pressure was resisted when women did not want to marry:

Q. Have you felt under any pressure to get married? (From section 13.5.i, page 177 of the first interview schedule).

A. My aunts wanted us to get married before (the baby was born) and they were literally trying to force us into marriage, but I didn't want it and he didn't want it so it was causing a bit of friction between us but we got that sorted out, and we just did what we wanted and not what they wanted us to do (015, 18 year old who was already engaged at the time of conception).

Nine women interviewed in pregnancy married after becoming pregnant. Three of them already had been cohabiting and, when asked, none of them replied that they had married because other people had forced them to. All except one claimed that they had been intending to marry in any case, and that pregnancy had only brought an acceleration of their plans.

Q. How do you feel now about being pregnant? (From section 7.6b, page 87 of the first interview schedule).

A. I regret it at times, thinking, we could have had our own place by now, or we could have had the wedding we wanted, a bigger wedding. But it's a case of having to. We've got a child coming, which we're over the moon about...But I do sometimes think it could have been better than this (553, 18 year old).

Everything just happened so quickly. We did have plans for what we were going to do...we weren't definitely going to marry until next year, and children were never even talked about.

And instead everything just happened all together (551, 18 year old).

In the one instance where there had been no plans for marriage prior to conception, a grandmother (with whom the woman was living) clearly had put pressure on her to marry. However, the respondent claimed that she had wanted to get married anyway:

Q. What happened when your nan tried to persuade you to marry? (From section 13.5, Attitudes to Marriage, page 177 of the first interview schedule).

So they sat me down, and my nan pushed into my hand this wedding ring and said 'you can borrow my ring, but you're getting married aren't you?' Said we're not trying to push you. It's up to you what you do, but you are getting married?' Which I think I would like to do anyway but I wasn't forced to. I think they would like us to. Personally I preferred to (564, 17 year old).

Although pressure to marry was almost exclusively applied on women by older relatives, pregnancy could be used by the women as a means of resisting parental power to prevent under 18s from marrying. One woman reported that she and her boyfriend had wanted to have a child anyway. They realised that their parents would not want them to have a child while they were single and, therefore, deliberately timed her pregnancy for when she was 17 in an attempt to force both sets of parents to allow them to marry. The couple were particularly sure that this ploy would be successful because the woman had previously given birth when she was aged 14 years and had given up her child for adoption.

Three women began to cohabit with (but did not marry) their children's fathers during pregnancy. Their accounts demonstrate the variety of reasons for 'young mothers' to start living with their male partners and that, for some, it is viewed as 'trial marriage'.

In the first instance, the cohabitation started because of the man's circumstances rather than intent. However, the woman reported that she got on well with her male partner and thought it likely that they would marry in the future although she did not want to marry while pregnant.

Well he's living with us because his nan kicked him out. I'd live with him anyway but fair enough if we don't want to get married we don't. It doesn't really bother us. (You decided not to get married?) Well I didn't want to get married while I was pregnant I suppose. Didn't sort of feel happy about it. Me nan said 'Try and get them married' to me mum and dad. 'It would be better if they're married'. But there's no point in rushing into it straight away. (Did John want to?) Yeah he did ask me. He says 'Do you want to get married because we can

get married now if you like?' I says 'No, we'll wait till later' (174, 17 year old cohabiting in parental home).

The above couple were rehoused after their baby was born but did not get married during the course of the study. They were expecting their second child when their first was 21 months old.

The second woman who ~~cohabited~~ during pregnancy had put her name down on the council housing list once her pregnancy was confirmed. She had been offered a council flat very quickly, and her boyfriend had then moved in with her. As in the previous example, this respondent was not opposed to marriage (and is mentioned in the section on 'Marriage after birth' because she married when her baby was nine months old).

We'll live together for a while, make sure it works out and then sort of think about getting married (504, 17 year old).

The third woman who begun cohabiting in pregnancy was different from the other two in that she had been about to cohabit anyway. She and her boyfriend were about to leave their homes in northern Ireland to live together in London when her gynaecologist (who she was seeing because of the infrequency of her periods) told her that she was pregnant. This news potentially threatened the relationship. However, they did marry after birth (see below).

When I told him I was pregnant he was shocked. I suppose he suddenly realised - 'God, this is it!' For a day or two he was just walking about. When we first came over I stayed with my cousin for a few days, and he stayed with his friends. I just decided to leave him on his own for a while until he decided what he wanted to do.. I didn't want to force him into anything (542, 19 year old).

6.4.2 Marriage after birth

Two women married after birth, but before their children were 6 months old. One of these women had cohabited with the child's father from before conception. She left him shortly before she gave birth, but married him when their son was three months old. She reported that she had married only for the baby's sake and at her husband's insistence. She was not happy with the relationship:

Q. Would you say it's a good relationship? (Follows on from responses to section on Contraception, section 3.16, page 48 on the second interview schedule).

A. I don't know really. Not so good. I think maybe we'll stay together another couple of years, but then I think that will be it (509, 18 year old).

The other woman who married after birth but before the second interview married five and a half months after the birth. Her husband was Protestant and she was Catholic. Religion was significant because both are from northern Ireland, and the woman's mother had not spoken to her since she started having a relationship with her husband:

We were thinking that if we got married that would make her (respondent's mother) feel better. But she wasn't pleased with it (542, 19 year old. Response in answer to questions about changes in circumstances, section 1.1b, page 6 of the second interview schedule).

Three further women married within 21 months of the birth. One (a 17 year old) had begun to cohabit in late pregnancy and married when the baby was nine months old. They had intended to marry at some time. Another woman (a 16 year old) married a boyfriend she had known before she had a relationship with her child's father (539). The third woman (a 19 year old from a middle class background) also married when her child was one year old because she was pregnant for a second time (by a new boyfriend) and felt that it would be totally unacceptable to her family for her to have two children by two different men while single.

A further woman had planned to marry and got as far as setting a date and starting preparations, ^{but} had to cancel the wedding because her mother-in-law to be became ill. She then semi-cohabited with her child's father instead.

6.5. Economic factors associated with marriage or cohabitation

Women's perceptions of their own reasons for marrying are important to an understanding of what marriage means for them. Yet post hoc rationalisations of reasons for marriage do not provide a complete picture of why marriages occurred. Perhaps not surprisingly nobody mentioned economic reasons for marrying. Economic considerations used to be considered the most sensible reasons for contracting marriage, but love has replaced economics as the most publicly accepted foundation for marriage (Gittins, 1986; Mansfield and Collard, 1988). Yet if couples who married prior to conception are compared with those who did not, there are economic differences between them.

Twenty three per cent of women who were either married or cohabiting had male partners were unemployed, while for the whole sample 40% of the male partners were unemployed. Single women's partners were therefore more likely to be unemployed than either married or cohabiting couples.

The finding that single mothers under twenty tend to be 'welfare dependent' is often taken as evidence that marriage is crucial if young women are to make adequate financial provision for their children. What seems to be the case in this study, however, is that couples only follow the

normatively prescribed sequence of marriage then conception if their partners can fulfil the economic functions that traditionally are expected of husbands. Many writers now link high rates of male unemployment with low rates of marriage and cohabitation (Willis, 1984; Pilcher and Williamson, 1988; Wilson and Neckerman, 1987; Daly, 1989).

The absolute shortage of men who earn enough to support families means that in many communities the primary route off welfare - marriage to a man with a job - is out of reach for a growing percentage of women.

For a long time this phenomenon has been apparent in rural America, where the collapse of the farm economy left many young men with no means to earn a living. In these communities there has been a striking increase in teenage pregnancies outside marriage and in dependence on welfare (Daly, 1989:14).

The group of seventeen women who married before they became pregnant were financially better off than other women in the sample, including those who married after conception or after birth. Most (14) of the husbands in this group were employed full time, and some of the wives had been employed before pregnancy. Only three of these seventeen couples were living with kin. It was only in this group that any couples were home owners (6). All other women were either housed by the council or by relatives (usually parents). Couples who were buying their own house all had husbands whose take home pay was high in comparison with that of other male partners in our study (£62-£250, with a mean of £111). This compares with a range of £38-£150 (with a mean of £67) for the male partners of the rest of the sample. Furstenberg (1987a) also reports that mothers under twenty who marry are more likely than those who do not, to have male partners who are in economically secure positions.

Nine women were cohabiting in late pregnancy, and seven of their male partners were employed. At first sight they seem to be relatively affluent. Only one cohabiting couple were living with kin (the rest were renting flats) and three men were bringing home over £100 per week. However two of these relatively well paid men had only started employment during the woman's pregnancy. The other man in this group was married to someone else and £40 of his £109 take home pay went on mortgage and maintenance for his other family. Three other employed cohabiting men took home £38, £50 and £55 per week, and so were not in a position to support a mortgage. The other employed man had been unemployed for a year and, in a determined bid to earn some money, had taken a job in Libya after his partner became pregnant. He was not making a financial contribution to his partner.

From their literature review Voydanoff and Donnelly (1990) conclude that women's own financial

position also has an impact on whether or not they marry. Women who are dependent on welfare benefits are less likely to marry than those who are better off. There were indications from the current study that this may be because women receive and have greater control of their welfare benefits when single if both they and their male partners are welfare claimants. One woman in the cohabiting group explicitly said that she was cohabiting without the DHSS' knowledge so that both she and her cohabiter would continue to receive supplementary benefit. She was already having difficulty making ends meet and did not feel that she could manage on less money. In that sense the DHSS cohabitation rule did provide a disincentive for women to officially cohabit (or to marry) if male partners are not earning well. Supplementary benefit for a couple was rather less than it was for two single individuals (Wilson, 1987), but the replacement of supplementary benefit by income support in the 1988 reforms in British social security legislation apparently has not improved this situation. According to the Maternity Alliance (1989) it has instead served to worsen the financial position of many parents, particularly those who are under twenty.

6.6. Summary

A minority of women in the present study were married or cohabiting when they conceived. But some women's marital status changed over the course of the pregnancy and after birth. Relationships with male partners did not always fit neatly into the three categories, married, cohabiting or single. Over the two years of the study some women moved into, and out of a state which can best be described as 'semi-cohabitation', regularly living with their male partners for only part of each week.

More than a quarter of the sample held negative attitudes to marriage. But this is not a complete answer, since some married women felt that men benefit from marriage more than women do. It was possible to identify from women's accounts four main reasons for marrying. These were; normative expectations that they should marry early, having had a satisfactory period of courtship, for instrumental reasons (eg. to leave home) and because women had always considered marriage and motherhood the most important careers they were likely to have. Women who were cohabiting were similar in some ways to married women but reported more negative views about marriage than did married women.

Women did not mention economic reasons for marrying. However, there was some evidence that women who married before they were pregnant were more likely to have male partners who were relatively affluent (in comparison with the rest of the sample) than women who married later or who did not marry.

CHAPTER 7: Social networks and emotional support: Findings and discussion

7.1. Social networks and social support

Social support is recognised to be an important mediating influence on the ways in which individuals experience stressful situations (Gottlieb, 1981; Brannen and Collard, 1982). Social support has been theorised to act as a protective factor for both physical and psychological health in three possible ways; as a prophylaxis against the onset of stress; as a buffer against stress and amelioratively after stress has been experienced (Riley and Eckenrode, 1986; Belle, 1982). Berkman and Syme (1979) used data from a nine year follow up of a large random sample of Alameda county residents. They reported that those who lacked social support networks were more likely than those who had such networks to have died before the nine year follow up. Broadhead et al. (1983) provide an exhaustive definition of social support.

Social support is much more than a simple environmental exposure. It can be studied as an effect modifier or buffer against the stress of life events... but also as a direct determinant of health or illness (an independent variable) and as dependent variable with its own causes and determinants (Broadhead et al., 1983:533).

Motherhood is socially constructed as an adult status yet, paradoxically, it is often a period of increased dependence on other people for emotional, childcare and often material support (Phoenix and Woollett, 1991). 'Teenage mothers' are a socially stigmatised group of mothers. Those who are aware that they are socially devalued may experience more stress than older mothers do. Social support could, therefore, be particularly important to this age group of mothers. It is, however, an under investigated issue in studies of early motherhood (see chapters 1 and 2).

The previous chapter discussed women's relationships with their male partners over the first two years of their children's lives. But male partners were not, of course, the only people who were important in the provision of social support to the women in this study. One potential source of emotional support is from friends. A lot of literature on young women suggests that relationships with (almost predominantly female) friends and/or with their own mothers influence their attitudes to all aspects of their lives, including relationships with men, and attitudes to sex, contraception, abortion etc. (McRobbie, 1978; Griffin, 1985; Lees, 1986; Brazzell and Acock, 1988).

Relatively little is known about the nature of young women's friendships because much more attention has been paid to male 'youth' in research studies. However, the studies that have been done of young women's friendships have mainly been of working class young women. The working classes are differentiated by factors like access to relatively well paid employment, good housing and education, ^{however,} the women in this study also came from predominantly working class backgrounds, ^{similar} to those described in much youth research.

School seems to be an important focus for young working class women's friendships, being where many friendships are formed and maintained (McRobbie, 1984). However, when women start having relationships with young men, friendships with other young women are often adversely affected. Griffin (1985) found that when women started having regular boyfriends, they gradually lost touch with ('deffed out') their female friends, often at their boyfriends' insistence. Similarly McRobbie (1990) found that after leaving school, young women who were unemployed would congregate on street corners. However, their friendship groupings gradually dissolved as they began to have boyfriends. Some confirmation of this comes from a study done by Elizabeth Monck (1991). She studied 142 young women aged between 15 and 20 years who were drawn from a community sample of 529 young people. She found that by age 19 'boyfriends had become the most frequent intimate and instrumental confidants' (p.333). Female friendships thus usually seem to be transient, generally kept up only until relationships with boyfriends are established.

Few women in this study were still at school when they conceived, and all except two were in established relationships with their children's fathers when they gave birth. Most were not, therefore, in an institution which could facilitate and structure their friendships. In addition, they generally had exclusive relationships with one male partner, and so were likely to see more of his friends than of her own (Lees, 1986). Only 3% of women who are under twenty years of age give birth before they are twenty years of age. They are unusual among their age peers. It could, therefore be that mothers who are under twenty years of age lose touch with their childless peers, and have fewer relationships with peers than young women who are childfree.

Women's relationships with their own mothers have also been found to influence their attitudes to contraception, abortion and marriage, and were an important source of support after childbirth (Skinner, 1986; Brazzell and Acock, 1988; Boulton, 1983). But just how mother-daughter relationships affect young women's attitudes, feelings and behaviours is not well established (Brazzell and Acock, 1988). Relationships between young women and their fathers are generally not discussed in literature on young women (Simms and Smith, 1986; Elster and Lamb, 1986).

This chapter establishes the potential pool of people on whom respondents could theoretically call for support and considers women's attitudes to emotional support, and who, if anyone, provided them with emotional support. In doing so it considers the social networks available to them, their friendships and the relationships between feeling supported and having friends, relatives and male partners available in social networks. Chapter 9 includes a discussion of women's feelings about their social lives.

7.2 Whether women had lived with their birth parents throughout childhood

Data from the London Hospital study of mothers suggests that 'teenage mothers' are more likely than older mothers to have experienced separations from their parents in childhood (Wolkind, Kruk and Chaves, 1976). Such separations may well be important influences on the social support available to women in that they may indicate the absence of supportive parents in women's social networks.

Table 7.1 Whether women's parents were still alive at the first interview

	Both Alive	Father dead	Mother dead	Don't know	Total
Long i/v	63 (86%)	7 (10%)	3 (4%)	---	73
Short i/v	90 (88%)	6 (6%)	3 (3%)	3 (3%)	102

Note None of the women's parents were reported both to be dead. One woman's mother died just after her grandson was six months old.

The majority of the sample had both parents alive (see table 7.1 above). Most had also been brought up by at least one of their birth parents throughout their childhood. Nearly two thirds of the long interview sample and three quarters of the short interview sample had been brought up by at least one parent. For the long interview sample, however, only a minority (39%) had lived with both their birth parents throughout their lives while half (50%) of the short sample had. Only a minority had experience of living with a step parent (10% of the long sample and 3% of the short sample, see table 7.2 below).

Table 7.2. By whom brought up until 16 years

	Always two parents (1)	2 birth parents then 1 (2)	As (2) then plus s/p (3)	1 birth then plus s/p (4)	Alwayo ne parent	Adopt. through out (5)	Other	Total
Long i/v	31 (39%)	12 (15%)	5 (6%)	3 (4%)	---	1 (1%)	27 (34%)	79
Short i/v	51 (50%)	17 (17%)	3 (3%)	---	3 (3%)	---	28 (27%)	102

Key s/p = step parent

The percentage of those who had been brought up in one parent families does not appear to be

higher than that pertaining to the population at large since approximately thirteen per cent of children were being reared in one parent families in 1984 (Ermisch, 1989). A relatively small percentage (less than five per cent) of the women were reported to have been born to single parents (see table 7.2 above).

However the third (34%) of the long sample and quarter (27%) of the short sample who had spent some time living in situations not accounted for in the table above ('Other') require further examination. The following two tables make it clear that The 'other' category includes women who spent all their childhood living with at least one parent (table 7.3 below). They may, for example, simultaneously have lived with a parent and with other relatives for periods. Table 7.4 below shows that it only a small minority of the women in the current study had spent any time in local authority care.

Table 7.3. Periods separated from both parents (not including holidays etc.)

	None	Once	Twice	Three x	Seven x	Total
Long i/v	64 (82%)	9 (12%)	3 (4%)	---	2 (3%)	78
Short i/v	81 (81%)	16 (16%)	2 (2%)	1 (1%)	---	100

Table 7.3 (above) shows that less than a fifth of both samples spent any time living away from both parents. Most of the women lived with their mothers throughout their childhood (until they were aged at least 16 years; 72% of the long sample and 71% of the short sample), but fewer had lived continuously with their fathers (43% of the long sample and 52% of the short sample).

Table 7.4. Time spent in residential care or in special boarding school

	Time in residential care		Time in boarding school	
	Long i/v	Short i/v	Long i/v	Short i/v
Never	74 (94%)	86 (86%)	77 (98%)	93 (93%)
< 6 months	---	3 (3%)	---	3 (3%)
2 years	1 (1%)	5 (5%)	---	---
3 years	---	1 (1%)	---	---
4 years	3 (4%)	3 (3%)	---	---
7+ years	1 (1%)	2 (2%)	2 (3%)	4 (4%)
Total	79	100	79	100

Table 7.4 (above) shows that very few women in either the short interview sample or the long interview sample (which is the focus of the rest of this chapter) had spent any time in residential care or at boarding schools. None reported that they had been fostered, although one had been adopted (see table 7.3 above). In the long interview sample seven women had spent long periods (two years or more away from their parents in residential care or in boarding schools (see table 7.4 above). Most women, therefore, had the possibility of having at least one parent (with a greater probability of that being their mothers) in their social networks.

7.3 Women's social networks

Social network analysis has emerged as a set of methods for the analysis of relationships between social structures. Its history lies in studies of patterns of communication in psychology, phenomenology (in that it is concerned with the ways in which the world is perceived from the viewpoint of a focal individual) and anthropology (Scott, 1991).

In the current study the conventional sociogram (network diagram) was used to illustrate the women's social networks. The women themselves were represented as the central point or hub of a series of radiating spokes joining the central point to other points in the periphery. (See figure 7.1 below).

Women's social and support networks were constructed for each interview (see the sections which follow for the relevant page numbers on the interview schedules). This was done in two ways. Firstly, the number of people in the women's social networks were established. Women were asked which relatives, friends, relatives of male partners and other individuals they were in regular (at least monthly)

contact with. Contacts had to be interactive. They could be by telephone or in person, but not by letter. Partly because many women lacked telephones, most contacts were actually in person. Perhaps because relatively few had telephones, few of the women mentioned that they sustained contacts by telephone. If the women were employed or attending social groups, then work or the group was counted as one social contact unless the women saw particular individuals at least monthly away from their jobs or groups. Contacts with shop assistants were not counted and contacts with neighbours were only counted if they actually visited each other at least once a month rather than simply seeing each other over the garden fence, outside their front doors or in the street. Casual interactions were thus not included in the social network analysis. The women were also asked to indicate which of their social network contacts they saw at least weekly so that a distinction could be made between monthly and weekly contacts.

Secondly, the interlinkages between social network members were established by asking if any of those individuals were, independently of the respondent, in regular contact with any other. If they were, then the linkages between those individuals were also counted. Individuals could, therefore, have only as many linkages as individuals in their social networks or, at the other end of the spectrum, each person in women's social networks could be linked with every other. Recording the interlinkages between people in women's social networks gives a measure of interconnectedness or density of networks (Gottlieb, 1981). The drawing of women's social networks as sociograms allowed easy recognition of the density and extensiveness of women's networks.

Mitchell (1969) suggests that social networks serve two sets of functions. Firstly they facilitate communication and hence the transfer of social norms and the reaching of consensus. Secondly, they serve instrumental functions, allowing the transfer of material goods and services. Literature on social support suggests that the speed at which support can be mobilised, help sought, as well as the types of support available to an individual are influenced by the structure of the support networks women have (Gottlieb, 1981). If, for example, someone is part of a tightly knit, 'solidary' network, support can be mobilised quickly and efficiently during times of crisis, because news that help and/or sympathy are required spreads quickly among network members. For people who control few resources, like most mothers under twenty years of age, such networks are reported to enable the conservation and control of resources. At the same time tightly knit networks may be limited in their ability to mobilise sources of support which are external to the networks (Wellman, 1981). It may also be that tightly knit networks require individuals to shoulder more responsibilities towards network members than do sparsely knit, multiple networks (which give access to a variety of resources, but cannot provide orchestrated support).

Women were also asked a range of questions about who had provided them with particular sorts of

support, who (if anyone) they felt they could or would ask for help with specific problems, whether they had either asked for, or been offered such help within the last year, and what the outcome of that request or proffer had been.

These questions were not asked directly following questions about who were in women's social networks. Instead they were asked in relation to specific issues such as; confiding about pregnancy; emotional and material help; housing support and childcare support. Support questions were asked at each interview.

It was, therefore, possible to establish whether the members of women's social networks mostly knew each other or were unconnected individuals; which individuals provided women with which sorts of support; and whether social contacts tended to be supportive or not. In addition it was possible to see whether social networks were relatively stable entities, or whether they changed over the course of the study, perhaps as residence changed, and whether the people women saw most frequently were necessarily the ones who provided them with support.

7.4. Variations in network size over time

Table 7.5 Network size, linkages and numbers of people seen weekly

	No. seen monthly			No. of linkages			No. seen weekly		
	Rnge	Mean	SD	Rnge	Mean	SD	Rnge	Mean	SD
Preg (73)*	2-21	9.7	3.67	2-67	24.5	15.44	1-20	7.62	2.17
6m (66)*	2-26	10.93	4.64	6-62	28.58	14.96	0-20	8.16	3.92
21m (65)*	2-21	10.59	4.5	3-68	28.58	17.6	1-18	7.98	3.79

Figures in brackets refer to Ns

Table 7.5 above shows that there was a lot of variation in the number of people women had in the women's social networks.

7.4.1. Monthly and weekly contacts in pregnancy

Pages 159-168 of the pregnancy interview schedule cover the construction of women's social networks. In late pregnancy the number of people in women's social networks ranged from 2 individuals (1 person) to 21 individuals (1 person) (see table 7.5 above). The mode was 9 individuals (regularly seen by 12 people, 16% of the sample), the mean 9.7 and the standard deviation (SD) 3.67. The number of interconnections between members of respondents' social networks were also strikingly diverse, varying from 2 (for the woman who regularly saw only two people who were not friends with each other) to 67 (for a woman who had a social network where most people in her social network knew most others) with a mean of 24.5 and a SD of 15.44.

Women were also asked to indicate which members of their social networks they were in at least weekly contact with (in person or by telephone). In late pregnancy the number of people women saw weekly ranged from 1 person in at least weekly contact (with 1 respondent) to 20 (with 1 respondent). The mode was for 8 people (seen weekly by 10 respondents, 14% of the sample), the mean 7.62 with an SD of 2.17. Everybody in the study had regular weekly contact with somebody in late pregnancy (see table 7.5 above). It should be noted that women generally did not mention health and welfare workers when they were asked about their social network members. The exception was that in late pregnancy a couple of women mentioned social workers. This accords with findings from the USA. McGowan and Kohn (1990) and Willard Williams (1990) both express dismay that officials are not generally numbered among those reported to provide social support to mothers under twenty.

7.4.2. Monthly and weekly contacts six months after birth

Pages 56-63 of the second interview schedule and table 7.5 (above) deal with this period. Over the two years of the study the overall numbers of people in the study group's social networks stayed fairly constant. When their children were 6 months old, the numbers of people respondents claimed to be in at least monthly contact with ranged from 2 (seen by 1 person) to 26 (seen by 1 person); with a mode of 9 (reported by 9 people, 13% of the sample). The mean was 10.93 and the SD 4.64. The number of linkages between people in women's networks ranged from 2 to 62, with no obvious mode, a mean of 28.58 and an SD of 14.96. One person was not in regular weekly contact with anyone; the range being from no weekly contacts to 20, with a mode of 4 people seen weekly by 12 respondents (18%), a mean of 8.16 and an SD of 3.92.

7.4.3. Monthly and weekly contacts at 21 months

Pages 36-43 of the third interview schedule and table 7.5 relate to social networks in this period. When the children were 21 months old, the number of monthly contacts ranged from 2 to 21 with a mode of 13 contacts seen by 8 people (12% of the sample), a mean of 10.59 and an SD of 4.5. More than half (53%; 35 women) regularly saw more than 10 people each month. The number of linkages

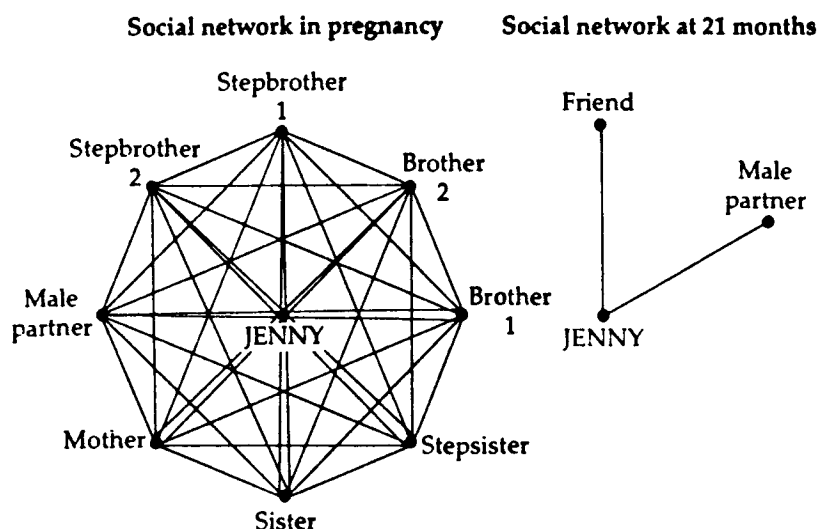
ranged from 3 to 68, with a mean of 28.58 and an SD of 17.6. The number of weekly contacts ranged from 1 to 18, with a mode of seven, a mean of 7.98 and an SD of 3.79.

7.4.4. Example of fluctuations in individual social networks

Viewed as a group the sample's social networks were fairly stable, but there were fluctuations in individual social networks. As women's circumstances changed, so too did the number of people in their networks. Most people experienced minor changes (the addition or disappearance of one or two people) in their social networks which, considered for the group as a whole made little overall difference to network size. Dramatic changes were rare. A woman who experienced a large (and atypical) change in her social network over the course of the study illustrates how much social network contacts were influenced by where women lived.

Jenny (088) was 17 when she gave birth. She had cohabited in a squat with her child's father for a few months before she became pregnant. Throughout her pregnancy she lived with her mother, four of her five siblings, and two of her ex-step father's children. She regularly saw her child's father and a brother who did not live in the family home. The family had moved from the Midlands only the previous year. Jenny had never been to school in London and as yet had no friends in London (other than her boyfriend). Her social network consisted of eight people, seven of whom were relatives, or step relatives, plus her boyfriend. These individuals were all interconnected, so that there were 36 linkages in her network (see figure 7.1 below).

Figure 7.1: Changes in Jenny's social network from pregnancy to 21 months



When Jenny's son was 12 months old, however, her mother moved back to the Midlands. Jenny decided not to go with the rest of the family, and since neither she nor they had a telephone, contact between them was sporadic and infrequent. Jenny went to see them a couple of times, and they had been to see her once (the week before the final interview, 21 months after the birth). At that visit Jenny's mother had taken Jenny's son away with them, so that Jenny could find a job, get herself established in it, and organise day care without having responsibility for the daily tasks of childcare². Jenny's social network now consisted only of her ex-boyfriend (whom she had previously not seen for several months but who, since her mother moved out of the family flat had been pressing her to allow him to move in) and a new friend she had made. There were no interconnections between these two (see figure 7.1 above).

Factors which were beyond women's control thus influenced the structure of their social networks. People around them sometimes moved away (as in the case of Jenny's mother described above) or the respondents themselves were rehoused. People who stopped being within easy travelling distance often stopped being network members because many women, and many of their network members could not afford to pay even the cheapest bus and tube fares very often. Where either the respondent or the network member (or both) had no telephones monthly interactive communication was unlikely and, indeed, letters appeared rarely to be exchanged between women and people who lived a long way away but who were considered by the women to be important social network members. Limited material resources (in the form of telephone ownership, home ownership or access to a wage) therefore diminished women's chances of maintaining continuity in their social networks.

7.5. Restricted and extensive networks and feelings of being supported

Some women had social networks which included very few people, while others had networks which had many people in them. Networks which included less than six people were unusual in the study. They are referred to as restricted. It was more usual for women to have extensive networks with ten individuals or more in them. In the discussion which follows restricted and extensive social networks are discussed.

7.5.1 **Restricted social networks and feeling supported**

Few women had networks which included less than six people. At the third contact only 8 women (12% of 66) had such restricted networks. There were no dramatic changes from very small networks to large ones over the two years of the study (and only one dramatic change from a large to a small

²Since Jenny's mother had taken her son to the Midlands just before the final interview, it is unfortunately not known whether Jenny did manage to find a job and then brought her son back to London.

network) but there were fluctuations in the network size of those who had few regular contacts with other people. The women's accounts indicated that those women who had the smallest social networks usually had them either because their own relatives were not available to them (through physical distance or disagreement). Women who had extensive social networks generally had members of their own families in them. The importance of the women's own relatives to their social support provides a possible explanation for the vulnerability of the 'in care' group described by Wolkind et al., (1976).

An example that demonstrates this is provided by a woman who had only three people in her social network 21 months after the birth (June, 560) was 16 when she gave birth. She had been in council care since she was 1 year old because her mother could not look after her. Her mother died when she was six years old, and although she had six siblings, they were not brought up in the same institution and did not maintain any meaningful relationship. Her father now lives in the USA. June had a strong relationship with a housemother from the children's home in which she had been brought up, but this 'aunt' had moved to Ireland soon after June became pregnant.

In late pregnancy June was living in a mother and baby home because the staff at the hostel for adolescents in care where she used to live had been 'unpleasant' once they realised she was pregnant. Her social network consisted solely of her boyfriend (whom she had known for a year) and his father and brother. She was not quite as isolated as she might have been because she had access to help from the staff and use of facilities at the mother and baby home. There were also other young women around who were either pregnant or had young children.

Six months after the birth June was still in the mother and baby home. Her 'aunt' from the children's home had returned from Ireland, and now played a crucial part in providing childcare while June went out in the evenings. June had also started visiting her own aunt and two cousins, and had re-established contact with two of her friends. She still saw her boyfriend, but had (that week) told him she wanted to end the relationship because he never took her out. She had stopped visiting his father and brother, but despite that the number of contacts in her social network had increased from three to seven largely unconnected contacts.

During the next year June went to live with a foster mother who was engaged to support June with childcare and with whom she did not get on. She still saw the 'aunt' from her old children's home each week. This 'aunt' often babysat while June went out with the 'aunt's' 18 year old daughter. June saw her child's father infrequently now, but had a new boyfriend she saw regularly. Her contacts with her own aunt and cousins had also become infrequent and irregular. There were, as in late pregnancy, three contacts in her social network, but they were different ones.

Overall June felt that she had received little support from anyone since she became pregnant. She did not feel particularly close to anyone, and had no-one to whom she felt she could disclose personal problems. At the same time she said that she liked being on her own, but that she felt that her social life would be improved if she had her own accommodation.

7.5.2 Extensive social networks and felt support

Where women had extensive social networks their networks generally included several interconnected members of their family. For example Chris (532) lived with her mother, step-father and siblings in late pregnancy. Chris came from a large family. She had three siblings, but her mother had seven siblings, all of whom Chris saw regularly. There were twenty one individuals in her social network. Fourteen of them were her own family, and five were her child's father and his family. Only two were girlfriends. Her network was so densely interlinked that there were 60 interconnections in her network. She said 'We're a very close family...We always phone each other, go to each other's houses you know. We're very close'.

When Chris was rehoused 14 months after birth she maintained the family connections so that, although she saw her family less, she was still in more than monthly contact with them (although employed full time). Yet despite the enormous size of her network, there were only four people to whom Chris felt she could, would and had turned to for different kinds of support. These were her mother, her child's father (with whom she was cohabiting by the end of the study), her sister, and her cousin (who was the only person she felt she would turn to for support with a personal problem). The support, as opposed to social side of her network, was fairly restricted.

Julie (141) also had an extensively interlinked social network. She lived with her parents, brother and sister, and was in regular contact with four other members of her family. She also had eight friends in her network who were interlinked because they (and Julie) were all still at school together. Together with her child's father whom she saw regularly, there were 17 people in her social network, and 67 connections between them in pregnancy. (In Julie's case the interconnections fell into two groups; school and family, whereas Chris' was one main interlinking of her family and her child's father's family).

Yet Julie felt that there was no-one in whom she would confide if she had a personal problem. She simply said 'I don't like it' when asked how she felt about confiding. In general she found it difficult to contemplate accepting help from anyone, but felt that she would turn to her mother for help if she ever needed it.

By the end of the study Julie had left school and become employed. She continued to live with her

family and her familial connections remained the same. Her child's father had stopped coming to visit their son, and she had lost touch with three friends. Her social network now consisted of 13 people, and 45 interconnections. She still maintained that 'I like keeping it (personal problems) to meself', but said that her mother had been very supportive to her in providing childcare help.

7.6. Inclusion of relatives in women's networks

The more people that women had in their social networks (constructed as regular, monthly interactions), the more people they were likely to see regularly each week ($r = 0.89$, $n=65$, $p<0.001$). In addition network members were more likely to have relationships with each other independently of the women being studied ($r = 0.79$, $n=65$, $p<0.001$). The number of these linkages in the networks and the number of people seen each week were also highly correlated ($r = 0.77$, $n = 64$, $p<0.001$).

Twenty-one months after birth, only three women (all described above because they had small social networks) had none of their own relatives in their social networks. The majority of women, (48; 76%) had 3 or more relatives in their social networks, with more than a quarter (26%) having 7 or 8. Whether women lived with their children's fathers or with relatives made no difference to either their network size or the number of interconnections between network members.

Twenty one months after birth women were more likely to see their own relatives at least once a month (96%) than to see their children's fathers regularly each month (62%). Similarly girl friends were more likely to be in women's social networks than were members of the child's father's families: over a third of the sample were not in regular monthly contact with any members of their children's fathers' families, more than double the 15% (10) of those with no girlfriends in their social network. (Hardly any women counted men among their social network members).

7.7. Relationship between women's social networks and feelings of being supported

An important question in the study of social support in mothers under twenty is whether, in fact, social networks have any impact on women's feelings of being socially supported and on their psychological state. This section attempts to investigate these issues by considering data from the third interview, when children were about 21 months of age.

In the current study women were asked a number of questions about satisfaction with life (interview three, pages 44-46); satisfaction with motherhood (page 48); social support (pages 68-72 and pages 94-98); psychological state (page 34) as well as about social networks (pages 38-42). The interviews included questions on mothers' positive and negative psychological state. A series of questions on satisfaction with motherhood were also asked and these were rated on a four point scale. Inter rater reliability for ratings of satisfaction with motherhood were high ($\kappa = 0.88$). Both mothers'

psychological state and satisfaction with motherhood are discussed more fully in chapter 9.

The relationship between women's social networks, their feelings of being supported, their satisfaction with motherhood and their psychological state are ones that are difficult to establish through qualitative analyses of women's accounts. Since these were also relationships that included each person in the study at the third interview and the data were ordinal, this was one of the few areas of the study in which statistical analyses were appropriate. A number of one way analyses of variance for two independent groups were conducted.

The number of contacts in a woman's social network was not related to her positive satisfaction with motherhood [$F(2,61) = 0.19, p = 0.82$, negative feelings about motherhood [$F(3,60) = 0.39, p = 0.76$] or to whether she reported that she had someone to whom she could turn if she had a personal problem [$F(1,56) = 0.50, p = 0.48$]. There was, however, a highly significant relationship between the number of people in a woman's network and her positive psychological state [$F(3,61) = 8.03, p < 0.001$]. The relationship between the number of people in women's social networks and negative psychological state approached, but did not reach, significance [$F(3,61) = 2.38, p = 0.08$]. It seems, therefore, that the more people women were in regular, at least monthly, contact with, the more likely they were to report having felt happy and cheerful in the last month. Conversely, the fewer people women were in regular contact with, the more likely they were to report that they had felt anxious, depressed or irritable in the previous month. However, this relationship did not reach significance.

The relationship between women's emotional state and the number of people they saw regularly may well be related to whether women felt lonely or not. The fewer people women were in weekly contact with, the more likely they were to report that they sometimes experienced feelings of loneliness [$F(1,61) = 7.19, p < 0.01$]. Loneliness and psychological state were also significantly related (gamma = -0.47, $p < 0.01$ for positive psychological state; gamma = 0.66, $p = 0.001$ for negative psychological state)³. It thus seemed important for women's well being that they should have regular contact with people in their social networks although it made no difference to their satisfaction with motherhood.

Just as small networks did not necessarily signify that women would be lonely and lacking in support, so large social networks did not necessarily signify extensive channels of support. Neither the total number of contacts in women's social networks (gamma = -0.14, $p = 0.20$) nor the density of linkages in the network (gamma = -0.18, $p = 0.12$) was significantly related to women's feelings about whether they had been sufficiently well supported. This goes against Cross' (1990) findings that the larger social networks were, the better mothers were supported (although in Cross' study, there was a

³The gamma statistic was used to assess the association between various independent categorical variables.

'race'/marital status interaction for felt support in that two parent black mothers [who had the smallest networks] expressed more satisfaction with the support they received than did single parent white mothers with large support networks). The number of people women regularly saw at least weekly was not significantly related to satisfaction with support although it approached significance (gamma = -0.24, $p = 0.06$).

Women were significantly more likely to report satisfaction with the support they had received if they were also satisfied with their social lives (gamma = 0.38, $p = 0.05$) and if they never felt lonely (gamma = 0.47, $p = 0.02$). Although feelings of loneliness were not related to the number of people women saw regularly at least once a month [$F(1,62) = 1.81$, $p = 0.18$], they were related to the number of people seen weekly [$F(1,61) = 7.19$, $p = 0.01$]. Satisfaction with social life was similarly significantly related to the number of people seen at least weekly [$F(1,60) = 5.75$, $p = 0.02$].

People were only included in women's social networks if women said that they were in regular interactive (phone or personal) contact with them at least once a month. Therefore more women than recorded here were in contact with their children's fathers and even considered themselves to have relationships with them but saw them less than once per month. While it seemed reasonable to exclude people who were either seen sporadically, or less than monthly from social network membership, women themselves sometimes considered people excluded on this criterion to be important sources of support.

For some women, frequency of contact with network members was not a defining characteristic for presence/absence from social networks or support networks. The woman whose mother moved back to the Midlands (Jenny) for example, experienced a marked reduction in contact with her mother as well as her siblings, and presumably a qualitative change in the nature of the support her mother could give her. Yet, she felt that her mother continued to be an important network member and an important source of support. Her mother's absence removed the negative aspects of having her mother in her social network. It was no longer necessary to provide daily practical support to her mother.

When asked whether she was happy with her social life, Jenny replied 'I suppose it could be better, but I wouldn't say I'm not happy'. She felt that she would like to get to know more people, but hoped that employment would give her the opportunity to do so. She also felt that she never got bored now. 'Well the last time you came, I said I got bored then, but now I can play with Alex. He's you know - he's old enough for me to play with him now.' Asked directly whether she ever felt lonely, she said 'No not really. Cos if I see my family too much I get sick of 'em. They get on me nerves'.

This last response indicates how large social networks are not necessarily only beneficial. It illustrates the fact that social support is a complicated interlinking of privileges and obligations (Belle, 1982; Riley and Eckenrode, 1986). When interviewed in late pregnancy Jenny had explained how, although she now got on with her mother well, they had previously argued a lot because Jenny felt that her mother was going out and leaving her to look after the four younger children too much. For Jenny, the disadvantage of living with her mother was having more childcare responsibility than she otherwise would, and having lots of people and noise all the time. The advantage of living separately from them was that she had no such responsibilities, and could live in comparative peace, tending only her own child, and the puppy she had chosen to get. Jenny's example neatly illustrates that it is only possible to understand how social networks influence people's lives and feelings by viewing them in the context of the responsibilities, as well as benefits they entail.

Yet although Jenny's mother was no longer within her social network (particularly since Jenny had no telephone) she was clearly still a major source of support. Her intention in taking Jenny's son to stay was to facilitate Jenny's attempt to obtain employment. A rather different, and less satisfactory, picture may have emerged if Jenny had been faced with a stressful life event with her mother so far away, or if she did not experience her mother as still being part of her network.

Just as there was no one-to-one correspondence between social support and network size, so social support was not simply related to particular individuals' presence or absence from the social network. How well supported women felt depended more on who they lived with than on who was in their social networks.

When their children were nearly two years old, women who lived with a spouse or cohabiter were much more likely than those who did not, to say that they had not received sufficient support in the last year. The longer women had cohabited, the more dissatisfied they reported themselves to be with the support they had received ($\gamma = 0.35, p = 0.03$). The reverse was true if women lived with relatives ($\gamma = -0.34, p = 0.04$). But the relationship between reported satisfaction/dissatisfaction with support and whether women saw their children's fathers or their relatives at least once a month, did not approach significance ($\gamma = -0.15, p = 0.31$ for children's fathers and $-0.14, p = 0.20$ for relatives). Shared household appeared to have more of an impact than simple presence in a social network.

What do these findings mean? A possible explanation is that most married or cohabiting men were not contributing enough emotional, material or childcare help to make women feel generally satisfied with the support they gave. Another explanation may be that women expect more support from the men they set up home with, than from their own families and would be more grateful for support from

their own families than from their cohabiters. They would therefore be more disappointed by lack of support from male partners than from relatives. Alternatively, many women's relatives may have provided them with such enormous amounts of high quality support that male partners found it difficult to match. This may be because those women who were still living with their parents 21 months after birth were still there because their parents were particularly supportive. Cross (1990) found a race/marital status interaction for support networks such that white single mothers and black and white married mothers had functional networks but that black single mothers had less functional ones. In this study there was no evidence that single mothers of any colour tended to be poorly supported.

In late pregnancy most women had expected that their male partner, if sharing a household with them, would make substantial contributions to bringing up their children. Their expectations may well have been dashed by the actual experience of cohabitation (including marriage) once their children were actually born. The following section, and the next chapter discusses the support that women received from different people.

7.8. Emotional Support

Even if the people in women's social networks were unable to provide them with material resources or childcare support, they might provide emotional support by listening to women's problems or concerns and being supportive of them. Successful provision of emotional support requires that the person to be supported considers such support to be useful and has someone from whom she is prepared to request and/or accept it. It also requires that the person providing support recognises when support is both necessary and wanted. This section aims to explore whether the mothers interviewed were likely to be receiving emotional support, and whether they considered it to be important. It concentrates mainly on women's attitudes to confiding their feelings.

7.8.1. Confiding and emotional support

Chapter 5 discussed how some women found it difficult to disclose the fact that they were pregnant to their parents and male partners. It might, therefore, seem reasonable for women to have confided in their friends. Friends could possibly provide empathy, calm discussion of the options available to a young pregnant woman, and perhaps mediate between women and their parents or male partners if news of the pregnancy was unwelcome. Yet few women chose friends as confidantes once they realised that they were pregnant. There were only seven women (10%) for whom friends were the first person told about the pregnancy. Perhaps more surprising is the fact that three quarters of the women (56) never directly told their friends that they were pregnant. This finding conflicts with Monck's (1991) finding that for 16 and 17 year old young women girlfriends were more often cited as probable confidantes in the hypothetical situation of unwanted pregnancy than were mothers or boyfriends. In this study, real pregnancies (not all of which were unwanted) were not generally

confided in friends (see table 7.8 below).

It is possible that for young, single women the revelation of pregnancy to non-pregnant peers is embarrassing and unpleasant (particularly because it indicates sexual activity). But this was not the whole story. Asked at the first interview schedule (section 4.5, page 55) whether any of their friendships at school had been close ones, only two women (3%) said that their friendships had been close.

Q. Were any of your school friends close friends?

A. No they wasn't any close friends -just convenience. (564; 17 year old woman who married in pregnancy).

A. At first it was about four or five of us. Then as we got older people went their separate ways, so I used to spend more time with my cousins. (532; 19 year old woman who started cohabiting after birth).

By way of contrast, young people in a study of over 200 14-18 year old Londoners (being done by the author and by Barbara Tizard) were almost unanimous in stating that their friends were very important to them and almost all said that they had close friends. However, it is impossible to be sure whether the women in the current study had reconstructed their recollective experiences in the way that Freeman et al. (1986) suggest or whether it is the case that women who do become mothers in their teenage years (who are unusual within their age group) differ from their childless peers in this respect.

Table 7.6: Attitudes to confiding personal information

Negative	36%
Positive, but has never confided	16%
Positive generally but -ve for self	11%
Positive, and has confided	37%
Total	100% (N = 64)

Many women did not like the idea of disclosing personal information (see table 7.6). A third of those asked (23) said that they thought it was better to keep personal problems and worries to themselves. Of those who felt that it was a good idea to 'turn to others with personal worries or problems' more

than a third had no experience of personal disclosure. Some had never felt the need for such self disclosure, while others reported that they did not feel such disclosure would be a good idea for them personally. Less than two fifths (37%) were both positive about confiding, and had themselves confided personal problems to anyone. The next three sets of quotes are responses to questions from section 12.5 Attitude to confiding in the first interview schedule, page 171.

It's a good idea to talk to someone cause otherwise you keep it bottled up and you get in a state in the end. (?) If I got any I go straight to me mum. (106; 18 year old single woman living with her mother).

The number of people in women's social networks was not statistically related to whether or not they felt they had someone in whom they could confide [$F(1,56) = 0.5, p = 0.48$]. Some women with many people in their social networks felt they had no-one in whom they could confide. Similarly women who felt that they had someone in whom they felt they **could** confide if they chose, and women who felt they did not have a possible confidante were equally likely to say that they were reluctant to confide in anyone.

One reason given for reluctance to confide was fear (sometimes based on experience) that confidantes would not maintain confidentiality or would exact too high a price for listening to confidences.

Most of them (friends) are stupid. If you tell them one thing, they go and tell everyone else, so I never used to bother telling. (540; 17 year old single woman).

Cos all these people you think you've known for a long time they've got such big mouths. You can't really talk to them anyway. (029; 16 year old single woman).

...As far as friends are concerned - because right they were...people that I could talk to and if they wanted anything they'd sort of say 'Come on Di, lend me this, lend me that'. And then I started to lend them my clothes and all that lot and...they never brought them back and all that lot...(030; 16 year old single woman).

But some women simply preferred to keep their own counsel, particularly on subjects they considered to be really personal.

I don't like it (confiding)...(Is there anything that you definitely wouldn't talk to anybody about?)
Yeah, my sex life. I would never discuss that. (141; 16 year old single woman).

I can't do it (confide), even with closest friends. (527; 16 year old single woman).

Talk to me mother about some things, but not other things. (?) Me and Tom I think. I don't talk to her about that. (088; 17 year old single woman).

Table 7.7: People in whom respondents would be prepared to confide

	Father	Mother	Friend	Male partner	Other	Total
Pregnancy	4 6%	27 40%	18 27%	34 50%	17 25%	67
21 months		36 56%	20 31%	23 37%	3	64

Percentages add up to more than 100 and Ns to more than 67 ^{and 64} because respondents could give more than one choice

Mothers were much more likely than friends or fathers to be confided in if for women felt they had to confide in someone (see table 7.7 above). In fact only 4 women said that they would be prepared to confide in their own fathers. This rather marginal status of women's fathers with respect to disclosure of personal information has been found in other studies. Elizabeth Monck (1991), for example, found that only 3 of 153 young women she studied could be said to fully confide in their fathers. In the current study fewer women had lived throughout their childhoods with their fathers than had lived with their mothers and it may have been that fathers were, in any case, less available as confidants. More women said that they would confide in their male partners than in their mothers. This may have been because women considered sexuality to be the most personal issue and many felt that if they ever discussed it with anyone it would be with their male partners.

The hypothetical 'would confide' was usually never put into practice. On the basis of the accounts they gave in late pregnancy, women were rated for whether or not they had anyone with whom they felt they could freely discuss anything. Only a quarter of the sample (19) were rated as having such a relationship. Of these, only two women felt close to friends (one of these friends being an older next door neighbour) while ten were rated as having an open relationship with their children's fathers, and seven with their mothers. The fact that nearly half of the sample (44%) were either married or cohabiting in late pregnancy when the data for these ratings was collected suggests that women did not necessarily perceive cohabitation or marriage to entail the exchange of confidences.

Women did not feel more able to confide in their male partners after their children had been born. When interviewed just before their children were two years old three fifths of women (40) were married

or cohabiting. Yet only 23 said that they would discuss a personal problem with their children's fathers. This compares with over 50% (36) who said that they would discuss such a problem with a relative (almost always their mothers). This is consonant with Monck's (1991) findings that mothers are pre-eminent as instrumental confidants for 15 to 20 year old young women who were asked to say who they would turn to for help with four hypothetical problems.

A minority of women expressed pleasure about being able to talk freely to their children's fathers, but even some of these felt that they had received as much or more support from their own relatives:

Q. What about (male partner)?

A. He's great...which really made me feel happy you know what I mean - the fact that I could actually talk to him like that...

Q. Who has given you the most support..?

A. Me nan and me sister. Me mum's been ill so I don't really bother her.

(557, 17 year old).

Many women did not comment on the lack of a confidential relationship with their male partners. However a few felt that inadequate communication within the relationship caused tensions and strains. Both the women reported below had considered leaving their husbands. The first (who did briefly return to her parents when her child was one year old) reported that she had postnatal depression, and felt strongly that her health visitors and general practitioner would have been better able to discuss it with her husband than she could:

Q. Did you keep how you felt to yourself or talk to others about how you felt? (from section 3.13b on Worst period of negative self feeling on page 42 of the second interview schedule).

A. I think perhaps if somebody had talked to him about it, it would've perhaps got him to understand a little bit better like what's involved and things like that. Because as nobody ever acknowledged the fact that I had postnatal depression, I think perhaps he didn't believe me and he thought that I was just being silly or whatever 'cos he didn't understand...But er I think perhaps if somebody had talked to him he might have been a little bit more understanding. But he was really quite good about it. (022, 18 year old; 2nd interview).

Q. Why didn't you talk to your husband about how you felt? (from page 72, section 8.3b.1 on Emotional support, second interview schedule).

A. He's a very quiet person. I don't like that. I'm getting a bit annoyed with it. Cos I go out too much - I see people laugh -and to just sit in the house. It's so boring. I get so annoyed

with it. Why won't he talk more? He only likes coming home, sitting down and folding his arms (laugh). I can't stand it.

(102, 19 year old at birth; 3rd interview)

Another woman (19 years old when she gave birth) interviewed six months after birth complained that her husband was too uncommunicative. She did leave her husband some time in her child's second year but continually deferred the 21 month interview, and was not successfully interviewed at her new address.

Friends, and relatives other than mothers, were rarely confidantes. Feelings of closeness to other people did not necessarily correspond with being able to freely confide in them. Few women felt able to confide in anyone, and even fewer actually did in practice, yet many more felt they did have at least one close relationship with someone. After birth a few women spontaneously mentioned that their closest relationships were with their infants.

Many women did not define 'support' as having an emotional component. Asked whether they had been given enough support, equal numbers of women who said they had, and women who said they did not have, someone with whom they could discuss personal problems reported themselves to be satisfied with the social support they had received. Nor were women likely to feel lonely if they had no-one in whom they could confide personal problems. There was no relationship between feeling lonely and availability of a confidante for personal problems. The disclosure of personal problems thus appeared not to be of central importance to many women.

Since many women did not define their friendships as close ones and were not in the habit of disclosing personal information to their friends, it is easily understandable that most friends (even those who are said to be close) were not told about early pregnancy.

Q. Do you have any friends who were close? (from section 12.5b of the first interview schedule on Attitude to confiding, first interview).

A. Yeah I got a close friend...I've known her all my life so I go round with her.

Q. Do you talk to her about everything?

A. I tell her everything. I didn't tell her I was pregnant though. She found out herself. (029; 16 year old).

The profile of friendships which emerged from women's accounts was such that, on the whole, friends were not primary sources of emotional support. In part this was because they were not privileged with confidential information, but it was also because mothers and male partners were more important

sources of support than were friends. Support was not perceived to necessarily either include, or entail disclosure.

Table 7.8: First person to whom pregnancy was disclosed

Fathers	Friends	Mothers	Male partners	Others	None
3 (4%)	7 (10%)	12 (17%)	32 (44%)	10 (14%)	8 (11%)

N = 72

The disclosure of pregnancy was an unusual instance of confiding in that women's pregnancies would eventually become evident even if they were not disclosed. In addition, (particularly for single women living at home) having a child would potentially affect women's parents and male partners. Male partners were the most likely people for women to initially tell that they were pregnant (see table 7.8 above). This is to be expected since the child conceived is shared with the male partner and for single women the male partner was sometimes the only person other than the woman who knew that she had been sexually active. Even so, less than half the women interviewed said that they had disclosed their pregnancies to their male partners before anyone else knew. More than a quarter of the women interviewed did not directly tell their relatives or friends that they were in regular monthly contact with that they were pregnant, but instead either only told people outside their social networks ('others' in table 7.8) or told no-one. Both these groups waited until their friends and relatives noticed for themselves that they were pregnant.

Women who did not tell members of their social networks that they were pregnant did, however, generally go to their GPs and register at antenatal clinics before it became obvious to those around them that they were pregnant. Some mothers discovered their daughters were pregnant when they found their daughters' antenatal appointment cards.

Part of the reason parents were frequently not told about the pregnancy immediately is that many women had a lot to lose if parents were angry with them. Nearly half the sample lived with their parents when they conceived. For some the fear associated with disclosure of early pregnancy was that they would be forced by angry and ashamed parents to leave home (see chapter 5).

For some women pregnancy led to changes in relationships with male partners. Eight couples married, while fifteen stopped having relationships (see chapter 6). By comparison, only one parent (a father) refused to have anything further to do with his daughter once he realised that she was

pregnant. In some cases, therefore, parents provided stability and support that male partners did not.

Q. Would you like to move? (from section 2.2b, page 150 of the second interview schedule)
I reckon I'll just stay with my mum and dad. I suppose I feel a bit wary (about the thought of living with a man). I mean it's stable here. I have a stable relationship with my mum and my dad. (529; 19 year old).

Despite some women's initial reluctance to disclose that they were pregnant, and the misgivings that some parents and a few male partners initially felt when they learned that women were pregnant most parents and male partners who continued to have relationships with the women were eventually emotionally supportive of women. By late pregnancy parents, and male partners with whom women were still in contact were almost all enthusiastic about the fact that they were to have a grandchild or child. Friends were all reported to be immediately supportive of women once they realised that they were pregnant, even if they were initially surprised about it or thought that women should not keep the baby.

7.8.2. Emotional unsupportiveness

The findings discussed above suggest that members of social networks were sometimes unsupportive as well as supportive. Friends, for example may disclose to others information women consider to be personal, male partners may refuse to discuss issues considered important, parents may react angrily when they learn that their daughters are pregnant. This section discusses a few other ways in which parents and male partners could be emotionally unsupportive.

Many women did not expect a great deal of emotional support from anybody, and did not consider that marriage or cohabitation necessitated close, confiding relationships. Yet, those who considered that there were any benefits to marriage were likely to report that these included having company (rather than being lonely) and security. After they had given birth a few married or cohabiting women began to comment on the fact that their male partners were free to go out whenever they wished, while they had to spend most of their time at home with their children.

In addition a few women felt that their male partners had started to behave in unacceptable ways. Male partners' relationships with other women were, for example, always reported to be upsetting. For some women this was enough to finish the relationship. Other women put up (albeit unhappily) with the situation. The following spontaneous accounts were given when the women were asked either about their children's fathers, their own psychological state or changes in their circumstances.

The reason Leslie and I did split up is because he was having an affair with his sister-in-law

and his brother found out and caught them in bed...and I told Leslie I weren't standing for it... (054; 18 year old married woman who separated from her husband when her child was 5 months old).

Oh I'm used to him going off. He always does it... I can't trust him any more. He goes and picks up different women and lives with them in hotels in Victoria when he goes off. And then he comes back to me when he feels like it... I don't care any more as long as he doesn't come near me, 'cos it's dirty. (536.; married woman, 19 year old at birth; 3rd interview)

Well he ~~is~~ seeing a girl... but he says there ain't nothing to worry about you know. Us two can still be together or whatever, but I don't see how you know. I'm not that kind of person... [2nd interview]

Well he lives three doors away, but I don't talk to him or nothing 'cos he's got two other babies now. And I just think that that's a dead loss, so I've just forgotten about him. (030. Single woman, 16 year old at birth; 3rd interview)

I nearly killed him - he did silly things, coming home smelling of perfume, plus one of his friends told me (that he had fathered another child). I knew of the seven month old one and I put up with it, but I threw him out over the three month old one. (016. Woman had cohabited with her child's father; 18 year old at birth; 3rd interview).

Me mum told me to pack him in (because he was having an affair)...And then we sorted it out together and got back together. (080; 18 year old cohabiting woman).

There may have been other women whose partners also had affairs, but who did not mention it spontaneously. For those women who did mention it, infidelity was considered to lessen the feelings of security that women felt in their relationships. Since this was one of the benefits of marriage and cohabitation that those women who reported any had mentioned (see chapter 6) it is perhaps not surprising that they reacted strongly against it. (See also chapter 10 for examples about women being depressed by the state of their relationships with male partners).

If women lived with their parents, then parents could exercise control over who visited them at home. When they were pregnant, a few, younger women reported that they had either been forbidden from seeing their male partners, or that their parents made it too awkward for their male partners to continue visiting them. Six months after birth, for example, one 16 year old woman reported that she had re-established a relationship with her child's father, but that her mother did not know. Similarly, the only woman to conceal her pregnancy until a few days before birth did so because she knew her

father would not approve of the fact that her child's father was black. A major reason for her leaving her parents home (despite anxiety about being the only wage earner there) when her child was a year old was that it was awkward for her male partner to visit her at home. Similarly another white woman had to stay in hospital postnatally until the council found her accommodation because her father forbade her from bringing her black baby back to his home. After birth she almost always visited her family when he was at work, and he never visited her. All three examples cited here were of white women whose children's fathers were black. Most white women whose children's fathers were black seemed to be subjected to more anger from members of their families (particularly their fathers) about the colour of their children than other women in this study. This is perhaps not surprising given both the existence of racial discrimination (see, for example, Brown, 1984) and the prevalence of ambivalence about and distaste for people of mixed parentage (Anne Wilson, 1987).

7.9. Summary

Women's networks varied in size and density, but there was no 1-1 correspondence between the number of people in women's networks, and how supported they felt. Sometimes people with whom women were not in regular monthly contact were still important members of their support networks. This was especially likely to be the case for family members. Women who reported that they had someone with whom they could discuss personal matters did not feel more supported than those who did not have such support available. Apart from the disclosure of pregnancy, young women were more likely to turn to their own mothers than to their male partners for emotional support. When it came to the disclosure of their pregnancies, many women expressed a preference for confiding in their male partners. For many women, friends were not very important sources of emotional support.

Feelings of loneliness were significantly related to feelings of depression or irritability; of not being sufficiently well supported and of dissatisfaction with motherhood. Women who did not see other people regularly each week were likely to report that they felt lonely.

CHAPTER 8: Housing and other material support: Findings and discussion

The previous chapter discussed the people in women's social networks and the emotional support provided by different individuals. This chapter is concerned with the material support that women received from individuals in their social networks. Most mothers who are under twenty years of age live in impoverished circumstances (Simms and Smith, 1986). Social support may, therefore, be important in ameliorating their material circumstances.

This chapter discusses the ways in which, and by whom, support with housing and material resources was/was not provided. In order to do this it establishes the housing and material resources that were available to the women.

8.1. Support with housing

Most women interviewed came from working class backgrounds. Over a quarter of their parents were unemployed when their daughters were pregnant, and many lived in council housing. Most women could therefore expect little material help with housing from their families.

Table 8.1: Changes in types of tenancy for the sample interviewed at 21 months

	<i>Conception</i>	<i>Birth</i>	<i>12 months</i>	<i>21 months</i>
<i>Owner occupied</i>	5*	5*	7	8
<i>Parental owner occupation</i>	12	10	7	4
<i>Private rent</i>	4	1	1	1
<i>Housing association</i>	2	4	6	7
<i>Bed and Breakfast</i>	2	5	2	0
<i>Council</i>	33 (54%)	36 (58%)	42 (65%)	46 (69%)
<i>Other (squats)</i>	3	1	0	1
<i>N =</i>	61	62	65	67

* One other woman (not interviewed at 21 months) also lived alone with her husband in a mortgaged house. However, it was in her father's name and he was paying the mortgage.

Relatively few women in this study lived in owner occupied housing. Table 8.1 above shows that in late pregnancy less than a third (28%) of the women interviewed when their children were 21 months old had been in owner occupied houses at conception. The majority (67%) were dependent on rented accommodation, most of which was council accommodation.

Since more than half the women interviewed lived in their parents' homes (56%) and another 14% lived with relatives, many of their relatives must also have been dependent on public provision of housing. Younger women (16 and 17 year olds) were more likely than older women (18 and 19 year olds) to live with relatives than to live on their own, or with male partners (5% of 16 and 17 year olds cf 17% of 18 and 19 year olds).

The majority of the women interviewed in late pregnancy were living in houses (56%) with most of the rest living in flats and maisonettes (34%). A minority were, however, living in bedsits, bed and breakfast accommodation or mother and baby homes (9%). Most women (94%) were living on the second floor or below, in other words below the council's recommended fifth floor maximum level for households with young children.

For many women pregnancy and the first two years after birth were periods which involved changes in living arrangements. Some of this change was not by choice. There was frequently not sufficient space in their parents' houses to bring an extra person into. A few women had to move because landlords and landladies did not want babies in their property. In other words, factors beyond women's control often dictated where they could live.

Many women were not, however, simply swept along by circumstances. Some women subscribed to a social construction of motherhood as a status necessitating independence. They made definite decisions to become independent by leaving their parental home. Others decided that they were not yet ready to leave the supportive environment their parents provided for them. The following quotes come from Expectations about accommodation after birth, section 11.5, page 153 of the first interview schedule.

If I stay at home my mum is gonna do everything for me and I'm gonna... just automatically rely on her so when I do eventually get my flat I won't be used to doing things. So I prefer to stay independent and be independent. (030; 16 year old).

I just want to stay at home with me parents that's all. I haven't applied for council accommodation. (001; 17 year old).

In late pregnancy nearly half of (49%) the women expected to move at some time. All except one of these women expected to be rehoused by the council. There was therefore little they could do to facilitate that process since, to a large extent, it was beyond their control. Women were, therefore, dependent on local councils, as dispensers of public housing, for much of their housing support.

Women in this study became pregnant just prior to government legislation authorising the sale of council housing. The boroughs in which they lived were able to rehouse most respondents who requested rehousing during the two years of the study. As a result there was an increase in the percentage of respondents who were either householders on their own, or who were joint householders with male partners between conception and 21 months after birth. With changes in housing law, however, much of the more desirable council housing stock has been sold and this group of women is likely to have been the last generation of mothers under twenty to have obtained council housing relatively quickly.

Table 8.2: Changes in person holding tenancies for women interviewed at 21 months

	Conception	Birth	12 months	21 months
Own tenancy	5%	8%	30%	41%
Sp/cohab tenancy	3%	22%	23%	24%
Joint	3%	6%	17%	16%
Parents	56%	49%	21%	10%
Other relatives	8%	8%	5%	3%
Male P relatives	6%	3%	3%	3%
Friends	3%	2%	0	0
Other	6%	2%	2%	3%

N = 68

Key Male P relatives = Male partner's relatives

Table 8.2 above demonstrates changes in the women's accommodation over the course of the study more clearly than does the table on types of tenancies. It shows that between pregnancy and 21 months after birth there was a substantial increase in the percentage of women who held their own council tenancies (alone or jointly with a male partner). At conception only 5% of those who were successfully interviewed 21 months after birth held their own tenancies, while 13% lived in accommodation for which their husbands or male partners held the tenancies and 3% shared tenancies with male partners. By 21 months post birth 41% held tenancies on their own, 24% lived with male partners who held tenancies and 16% were joint householders with male partners. Only 10% (mostly those who were 16 and 17 years old at birth) still lived in accommodation where their parents were the householders, and only a quarter of the sample had stayed in one address throughout the period of the study.

Over the course of the study the percentage of women living in accommodation where their husbands or cohabiters held tenancies only in their names increased (from 13% to 24%). This was not generally

because men could obtain independent housing. Most men who held independent tenancies were living in council housing and only obtained housing because they were living with or intending to live with women and children. In a few instances women were too young to hold tenancies themselves when they first moved into their homes, but in most instances where men were sole householders couples seem to have decided that men should be formally responsible for family accommodation. By the end of the study, however, a greater proportion of women than men held tenancies independently (41% cf 24%). Joint tenancies were rare by comparison (16%).

Moves to independent living usually provided women with more space than they had previously had, but there were some drawbacks involved. An increasing number of women moved into council housing (54% at the beginning of pregnancy, compared with 69% at 21 months). A correlate of increased dependence on council housing was a move to less attractive housing. The proportion of women in houses and women in flats largely reversed over the two years of the study for the sample who were seen 21 months after birth. In pregnancy three fifths were living in houses, and one quarter in flats. By 21 months after birth three fifths were living in flats, and one quarter in houses. This change involved losses of gardens and moves to high rise occupation. Whereas only 6% of the sample had lived on the third floor or above before they had a child, one fifth (21%) did so at some point after birth.

Despite these disadvantages most women who wanted to be, had been, rehoused within the first two years after birth. Yet council housing departments were not entirely popular with women. Nearly half (44%; 19) of those who had attempted to get council accommodation in their children's second year had some negative feelings about the experience.

Q. How likely do you think it is that you will be rehoused soon? (Section 6.1c, page 54 of the third interview schedule).

A. Um, well they say they've got no places, but like today we came up on the bus...we seen 15 houses that were empty... (?) Well I mean why ain't they filled up. That's what we ask them when we go down but they say because there's other people on the list. I mean if there's other people waiting they should get a place there, where the houses are empty. Seems as if they're not even bothering (pause). And we just got to be grateful for what we got at the moment. (054; 19 year old married woman living in a bedsit with her husband).

The perceived difficulty of obtaining council housing led some young women to feel that they were in competition with other people who wanted council housing. It was not uncommon for them to berate the council for housing less deserving people.

...It's like I really have to beg to them or beg for somewhere to live and ... you know, that's bad because some of the girls I know that get their flats, they get nice flats and all fully furnished you know with their first babies just like I'm expecting mine and where they offered... me... depressed me... seeing what those other girls have got and the only reason that they've got is because they actually pressured them and you know shouting and make a lot of commotion... and because I don't do it, you know... (067; 19 year old living in her mother's council house).

For some women it^{was} only a short step from dissatisfaction with council housing policies in general to dissatisfaction with the fact that they believed that council housing departments treated black people preferentially in the allocation of housing. Although some council housing departments have been found to be racially discriminatory towards black people (Commission for Racial Equality, 1984) some white respondents said that black people were treated unfairly well when it came to getting council housing.

Q. How do you feel about the way you have been treated by the council housing department? (Section 2.3a, page 152 of the second interview).

Respondent: I can understand that there's lots of people like us, but I can't understand when they're told - this is not because I'm prejudiced because I'm not - this is when they're told 'oh this couple's come over from abroad, and they've got to have this flat before you, otherwise they're going to sue us for being prejudiced', well I don't think that's fair.

Q. Is that what you were told?

Respondent: Yeah

Spouse: I think they should wait their turn.

Respondent: I don't see why they can't be put into one of those bedsits and we can have a flat until another one comes up. I don't see why they should always jump it.

Spouse: A coloured girl moved into the bedsit where we was, now she was - I don't think she was pregnant as what you was, and also she wasn't married, now she managed to get - she moved in, you take it in turns as she explained, now we was living there before her. She got a two bedroomed place and she was out before us. And she lived on her own, she wasn't married and she got a two bedroomed place.

Respondent: But we've got to live, there's more of us and we have to... so there's definitely a fiddle in the council...//... I'm sure if you can hand them, give them a couple of hundred, you can have a flat straight away because I'm sure most of them are crooked (050; 17 year old).

Fearing that they would have to wait years to obtain council housing, a few women made their circumstances sound worse than they were when talking to their housing department.

Q. How do you feel about the way you have been treated by the council housing department? (Section 2.3a, page 152 of the second interview).

A. I reckon if we told the truth the way that we was before, we'd wait much longer yeah cos we told the council that we was living separate and our families didn't allow us to be together and that's how we got a flat really. But otherwise if we'd told them that we had room at the mother-in-law's we wouldn't have got a place. (062; 19 year old married woman).

Other women made themselves 'homeless' and tolerated living in bed and breakfast accommodation so that they would be rehoused more quickly than otherwise.

Q. Why did you make yourselves homeless?

A. Because we wanted a place, because if we lived with our mums, we'd have a roof over our heads and you can't get a council flat, you have to be homeless to get one quick or you have to go on their waiting list for as long as it takes, well you have to live at home a year and then go on their waiting list, and then you can wait how long it ever took, if you go homeless you usually get one quickly, so we had to go homeless... (050; 17 year old married woman).

A few parents were prepared to assist their children to get housing by telling the council that they were evicting their children and making them homeless.

I just went down there and they said they would put me in a hostel, because I said my mum was throwing me out. My mum wrote this letter saying she was throwing me out from such and such a date, so they put us in the hostel. (522; 16 year old cohabiter).

Efforts (such as those described above) to speed up the process of obtaining council housing did not lead to instant success in being offered a council flat. Women had to be prepared to go into the least desirable council accommodation, bed and breakfast hostels, for a period first. Once the women were in bed and breakfast hotels there was no guarantee that they would not have to stay there for periods of up to two years. They therefore gambled on relatively short term discomfort for long term gain.

It was evident that women were not passive victims of 'the system'. They quickly learned, from family, friends and citizens advice centres and bureaux, how best to facilitate their attempts to get council housing, and took action to manipulate the process. Many parents were supportive of their children's attempts and would accompany them to council housing offices when they were able to. This may partly be because rehousing was in parents' as well as women's interest if the parental home was overcrowded but parents of women who already lived independently also often tried to help them.

Male partners were scarcely mentioned as sources of support in attempts to get council housing. This seems largely to have been because having a child was the factor which made young women eligible for council housing, and therefore it was the women who were central to the process. Many male partners who wanted to leave their parental home (or in one case was homeless after his marriage failed) became dependent on the women to get council housing and to allow them to move in. For many men, fatherhood thus provided them with a rare opportunity to leave their own parental home or to leave unsatisfactory housing. Where couples were going to be sharing council accommodation, they often went together to the council housing departments.

Although women generally moved to less desirable housing than their parents had over the course of the study there was wide variation in the quality of the housing and the neighbourhoods in which women were offered housing. Some were offered small terraced houses in quiet, residential streets while others were offered flats high in tower blocks on vast estates. Satisfaction with allocated housing also varied. Some women envisaged staying in their allocated accommodation for the foreseeable future and were pleased to do so, while others were keen to move as soon as possible.

One woman arranged two swaps for herself in order to improve the quality of the council housing she obtained. Within the two years of the study she moved four times. Yet when her daughter was two years old she was still in poor accommodation and was very unhappy with it. She did not, however, think that she would move again in a hurry.

Q. How do you feel about your flat? Are you happy with it? (Section 6.1a, page 54 of the third interview)

A. No. I mean it's got no heating. Plugs don't work properly and there's a lot of decorating and they're not giving me money to decorate and people knock at the door...(at all hours of the night wanting to see the previous tenant)... It's just like whole lot of problems. I mean the front door if you push it too hard it just flies open and there's people writing on the doors... (030; 16 year old single woman whose friend was living with her at 21 months).

Dissatisfaction with the housing stock was not the only reason for wanting to move house. Women who were rehoused a long way from their families were sometimes keen to arrange flat swaps which would take them nearer their families homes. Council housing departments played little part in the organisation of swaps, leaving the major effort to the individuals concerned. Nonetheless, some women managed to organise their own swaps. One couple, for example, exchanged a ground floor flat on a low rise estate for a flat on the fourteenth floor in a less pleasant estate, in order to be within walking distance of both sets of parents. The woman they exchanged with also swapped in order to be near her family (although she also got better accommodation). The couple who arranged the swap

disliked their new flat so much that they immediately wanted to move to another flat. However, they wanted to stay in the same area so that they could continue to visit their families each day without having to pay any bus fares.

Q. How likely do you think it is that you will be offered another flat? (Section 6.1, page 54, third interview).

A. I'm right at the bottom of the (council housing) list. They said if I find my own exchange, then I can exchange, but it's finding someone who will go up to that height and I don't know. (081; 18 year old married woman)

Desire for geographical proximity to families of origin is hardly surprising since in general women had little (if any) spare money for bus fares, and found it difficult to manoeuvre buggies and babies onto public transport. Maintaining social network contacts with both family and friends required being in relatively close proximity to the area in which the women had grown up, and was important to them.

Q. Would you like to move?

A. We'd prefer to - to move like further down in ___ or further away. It all depends. But a little nearer to me mum and his mum. Cos it's...the walking...Yeah cos when you've got a double buggy you can't get on a bus and you have to walk everywhere, and that's a bit far. (075; 17 year old cohabiting woman who had a 6 month old when her first child was 21 months old, and who very much liked the council house she had been given. Her (white) father still did not talk to her because her children are black).

A. I wish I could take my flat with me. I do want to move though. (?) Well preferably back to ___, cos that's where I come from, and I know practically everybody there. And it's the one area where you can feel safe to walk around at night... (585; 18 year old single woman).

Offers of accommodation on the other side of London tended to be turned down.

When we went to the council, they told us that they were going to offer us places out there (other side of London) because there was none in ___ and if we wanted to appeal against it we could. There's no way I was going to live that far, so we appealed against it... (521; married woman).

Only two women in the study could both drive and had the use of a car available to them. But even one of these wanted to be nearer to her family so that they would also be prepared to visit her rather than relying on her to drive over to visit them.

Q. Do you visit your relatives or do they visit you? (Section 3.1, page 36, third interview).

A. Sometimes I used to feel why don't they come and visit me? But then I realised it was because I was too far away. When I see everyone, near enough all the time they're round me mum, so they haven't got no reason to come up here. (098; 18 year old married woman who had organised a swap with a woman who also wanted to be nearer to her mum).

So far council housing has been discussed as if it was the only housing women had access to. However, by 21 months after birth eight women were owner-occupiers. They were married women who married before pregnancy, most of whose husbands earned more than was usual for male partners in this study.

Some parents were instrumental in helping their married daughters to obtain housing. Indeed one woman was unique in the study in that about six months after birth her mother started buying her a house. This woman was exceptional in being an owner occupier without her husband earning well. Her husband was unemployed throughout the two years of the study. Prior to buying her the house, however, her mother had been paying the rent for the flat in which she lived.

Q. How much is your mortgage going to be? (Section 2.5, page 156 on Housing support, second interview)

A. No idea.

Q. How much is your rent at the moment.

A. Um 45 to 50 pounds. Don't know. Really don't know. My mother pays for it.

This woman was the only one in a couple relationship who was entirely kept by her mother. One other woman was, however, living in a house mortgaged to her father and next door to her parents' own house. Although she lived in the house with her husband, it was in her father's name, and one room was sometimes used by her brother, and was filled with his possessions. The following interchange comes from section 11.1.2, page 145 of the first interview on Current accommodation.

Q. Is this your own house?

A. It's in my father's name because he pays the mortgage.

Q. How much is the mortgage?

A. I don't know... I keep the front bedroom and the little bedroom and my brother keeps the back room, but he doesn't sleep here.

The above woman did not have exclusive possession of the house. Yet she clearly benefitted from

having desirable accommodation at no material cost to herself or her husband. She was further dependent on her father because he employed her husband in the family business. Without material support from her family, her standard of living would have been markedly reduced.

In two other instances women had some indirect parental assistance in buying their own homes. They had lived very cheaply with their parents-in-law and parents respectively when they first began to cohabit and got married. They had thus been enabled to save money for a mortgage. One of these spouses was employed in the family clothing manufacturing business. A further set of parents contributed to the deposit for their daughter's mortgage and employed their son-in-law in their restaurant.

8.2. Financial resources and problems

A pervasive theme running through this book is that women who become mothers in their teenage years have limited access to material resources. Few women interviewed found it easy to make ends meet on the money coming into their households. Yet with changes in social security legislation many mothers in subsequent generations of women who give birth in their teenage years will obtain fewer welfare benefits.

Table 8.3. Money problems experienced and expected

	Pregnancy	Six months	21 months
None	17 (23%)	41 (64%)	27 (42%)
Problems now	12 (16%)	23 (36%)	37 (58%)
Expects probs	46 (62%)	Not asked	Not asked
Total	75	64	64

In late pregnancy nearly two thirds of the sample (46, 62%) expected to have problems with money once their children were born and a further twelve (16%) were already experiencing problems (see table 8.3 above).

Q. Since the pregnancy began have you had to give up or cut down on anything because money was short? (Section 10.9b on Financial difficulties, page 143 of the first interview schedule).

I mean sometimes I've had lots of bills to pay and I've had to pay the bills and gone without... (What have you gone without?) Oh food. Mostly food. Sometimes we had to go round my

mum's or round my dad's to get some food because there's nothing here to eat. (But you managed to pay the bills?) No they did cut me off (electricity). even though they weren't supposed to they still came... So the DHSS had to get in touch with them and hassle them to put it back on. (016; 18 year old cohabiter).

Regular weekly household income ranged from nothing (for three 16 year olds living with their parents) to £250 for a 19 year old whose husband was relatively well paid. Nearly half (36) were dependent on supplementary benefit as their main source of income. Forty five percent had a weekly income of £50 or less.

Apparently large differentials between women with husbands/cohabiters who earned relatively well did not always reflect large differences in standards of living. This was because households with the higher levels of income were responsible for paying their own rents or mortgages, whereas, when these women had their children, the rents of those on supplementary benefit were paid in full by the DHSS.

Q. Do you find it difficult to get by on the money you have to live on? (Section 7.6a, page 66 of the third interview).

A. ...If we didn't have a house to do up it wouldn't be a problem at all, but since we have a house to do it - there might be a bit of a problem. (055, 18 year old married woman; spouse bringing home £105 per week).

A. Oh often I mean if you have to pay a bill or if something unexpected crops up, perhaps I won't do any shopping that week and I'll stock up the next... We have to sort of watch where the money's going... but apart from that basically we just have to cut down a little bit. That's all really. (022, 18 year old married woman with a mortgage; spouse bringing home £95 per week).

In addition, although 'special needs' payments were abolished in 1986, women interviewed in this study who were on supplementary benefit were lucky enough to obtain special needs payments (rather than loans) for major, necessary items of equipment, like cots and prams. Women who were on supplementary benefit were, however, responsible for paying their own fuel bills from their supplementary benefit and this was a major drain on their resources.

In terms of future standard of living it seemed that the biggest differentials were likely to be between those who were managing, albeit by struggling, to buy their own houses and those who were

women's household income had not increased over the two years of the study. If inflation is taken into account many women's household income had probably decreased in real terms.

Dependence on supplementary benefit reduced over the period between six months and 21 months after birth (see table 8.5 above). However, women who received supplementary benefit were united in dissatisfaction with the amount they received.

Q. Do you find it difficult to get by on the money you have to live on? (Section 7.6a, page 66 of the third interview).

A. £26-80 (a week) can only just do for me. Well how is it going to do for me and the baby after? Sometimes it worries me. (540; 17 year old single woman).

A. What Social Security is giving me I really have to struggle on it. And most of the time I'm always broke until the next money comes in but I just do without until the next money comes in. (060; 19 year old single woman).

A. When we first moved in here and we first had (baby) we were getting £110 per fortnight, but then they put it down to £76. (Why?) Cos they said they were paying we're gas bills, but they're taking too much off us, cos David went up a few weeks ago and they said that they were taking too much off us and they said they were giving us a bit extra, but they have nae. (536; 19 year old married woman).

8.3. Feelings about contact with the Department of Health and Social Security

Table 8.6. Reported feelings about treatment by the DHSS in pregnancy and at six months

	Pregnancy	Six months
Mainly positive	18 (38%)	17 (40%)
Mixed feelings	9 (19%)	5 (12%)
Mainly negative	21 (44%)	20 (48%)
Total	48	42

Women were frequently dissatisfied with the length of time it took for supplementary benefit offices to process their claims, and with the way in which they were treated when they went to claim in person. Of those interviewed in pregnancy and six months after birth nearly two thirds had something

negative to say about their contacts with the Department of Health and Social Security (DHSS) (see table 8.6 above). DHSS staff were often reported to be rude and unhelpful. A trip to the supplementary benefit offices was reported by many women to be an ordeal because of the long waiting times and ungracious reception with which they were faced.

Q. How have you been treated by the DHSS? (Section 11.7a, page 170 of the second interview).

A. For example us the other weekend, our cheques hadn't arrived and we were faced with a whole weekend without any money at all. So you're in a state and if you phone up and you're confronted by someone who's rude and not understanding, it's going to make you worse... The whole system seems like that... You've got benches and benches of depressed looking people... and you have to wait for ages and ages and it's all depressing. (564; 17 year old woman who married in pregnancy and had twins).

At the third interview the women in the current study were asked a rather different question from that asked in pregnancy and at six months. They were asked to reflect back on whether there had been people from whom they had expected more support from than they had actually got. Seven (11%) said that they had expected more support from the DHSS and four (five per cent) said that the DHSS had treated them badly at some time.

Just as long waits for council housing increased some women's feelings of competitiveness with other council tenants, so some women in straitened financial circumstances clearly resented some other welfare claimants. Mothers perceived to be in similar economic circumstances, but considered to be getting more welfare benefits or doing better materially were the targets of such resentment.

Divisive resentments between people who are essentially in similar economic circumstances are fuelled by, and make sense in, a context in which views that the irresponsibility and fecklessness of mothers under twenty make them undeserving welfare claimants have widespread currency. The statements some women made about other welfare claimants directly fitted into discourses which stigmatise 'teenage mothers'. Statements such as the one below served to indicate to interviewers that those making the statements were different from, and more deserving than, other mothers under twenty. In other words some women did not question the validity of commonly held stereotypes about young women becoming pregnant for lucrative reasons, but distanced themselves from the associated stigma.

Q. Is it better for as woman and her child to live with the father or not? (Section 14.2, page 181, first interview).

A lot of mothers get pregnant **because** (my emphasis) they find that when they have kids they can cope better because they seem to get more money when they've got a child, than when they're on their own (060; 19 year old single woman).

8.4. Knowledge of entitlement

The ways in which women attempted to accelerate their housing allocation have been discussed above. There were no equivalent ways in which the supplementary benefit system could be manipulated. One woman, however, did report that she was cohabiting without the DHSS' knowledge so that she and her partner could both continue to get supplementary benefit. This is because claiming supplementary benefit as a couple rather than as individuals, somewhat reduces household income (Gail Wilson, 1987). A couple of male partners also occasionally earned money from casual employment while relying on supplementary benefit as their main source of income.

There was enormous variation in women's knowledge of their benefit entitlement, and there was similar variation in the number and quantity of grants women received. Thus, while women were given fairly similar amounts of supplementary benefit, there was no clear pattern for discretionary payments. Six months after birth, for example (the time by which most women who were going to, had received grants) 34 women (40%) had received grants for clothes, furniture, baby items etc. These grants were reported to range in value from £35 to £620.

In a study such as this it was impossible to assess the basis on which grants had been allocated; particularly since supplementary benefit officers visited many women to assess their 'need', and interviewers made no such assessments. Discrepancies in the value of discretionary grants awarded, and some women's awareness or suspicion of them were responsible for the hostility which some women expressed to the DHSS as well as to other claimants. Hostility was not only expressed by those who were dependent on the DHSS, but also by women who felt they were 'doing things the right way' in being self supporting when they had a child. Yet, while they struggled, they felt that other people were comfortably supported by the DHSS and did not have to make any effort to provide for themselves. The following quote is in answer to questions on Satisfaction with material support (section 7.6, page 66, third interview).

She's um unmarried with a baby. She has her flat paid for. She has money in her pocket each week off of SS (Social Security). If she can't pay her electric she's only gotta go to SS and say 'I'm a bit hard up. I can't pay it'. And she gets half of it paid for her. This, that and the other. I mean you think, well, I should have had (baby) not got married, lived in a council house and taken everything off the State and I'd have been better off. They get their house done up. She's had everything. Absolutely everything bought in her house down to carpets,

central heating, absolutely everything furnished inside and you think to yourself well you know, you go doing it the decent way...you don't get anything out of it. (022; 18 year old married woman).

Ironically the removal of special needs payments in 1986 and its replacement with a system of loans has removed some of the above respondent's reasons for complaint about welfare claimants by replacing many grants with loans.

From women's accounts it appeared that supplementary benefit officers did not draw women's attention to any grants or benefits they had not claimed. Presumably, therefore, women who knew most about the benefits they could claim stood a better chance of getting everything they were entitled to than those who did not.

Women's knowledge about entitlements came from a variety of sources. Some women had read DHSS leaflets on benefit entitlement. Others had been told by medical staff or social workers (usually hospital social workers) what they could apply for or had asked friends and relatives. By the end of the study a few women had also come to regard citizens' advice bureaux as an extremely useful source of information about benefits. In practice, most women did not wait for DHSS officials to tell them what they were entitled to, but made efforts to find out for themselves. Most had read something on benefit entitlement, and nearly a quarter (24%; 16) said that they had received some advice on which benefits they were entitled to from sources other than the DHSS. Seven had received advice from their own relatives, 4 from friends, 4 from health and welfare workers, and 5 from other sources (eg. citizens advice bureaux). No-one reported getting help or advice from husbands or cohabiters.

Q. Do you get milk tokens? (from Benefits applied for since pregnancy, section 10.4, page 133, first interview).

A. No the midwife says I wasn't entitled to it (milk tokens) so I didn't apply. I looked at the leaflets - it doesn't look like I'm liable for it but the milkman reckons I am. My friend says it's very hard to get the tokens off them - she says you have to really push them. (174; 17 year old in late pregnancy).

Q. Did anyone help you find out what you were entitled to? (From Support with the DHSS, section 7.3, page 60, third interview)

A. The Citizens Advice Bureau. They helped last time about the request for clothes. They wrote to the Social Security for me but we were refused. But they (the CAB) told me I was owed £200 by the Social Security because I was on supplementary benefit and I hadn't

claimed something else (respondent didn't know what). And I got this back pay. (519; 16 year old single woman, 3rd contact).

Women thus made active efforts to find out which grants and benefits they were entitled to by reading, asking people and going to information centres like the citizens advice bureaux. Many also made efforts to budget. The following two quotes come in answer to question on Budgeting Attempts in Organisation of Finances, page 176 of the second interview.

We get budget schemes for the electric, then if you use those they bill you once a year - which last year added up to about £88 because of the winter, which was an unbelievable sum, but luckily we had it saved somehow. With the gas, we only use the cooker and it's a meter, so the man just comes and collects the money... So if you put about five pounds a week away, it comes out all right (for the phone)... (564; married woman, 2nd interview).

Some women were assisted in their attempts at managing money by their mothers.

Q. What did you do when you were worried about not having enough money?

A. Talked to me mum. Tried saying what do you do with your money? And all things like that. She just said to me, well you should be able to cope. Put this away for that, this away for that - so that's what we've done, and it's... (better). (098; 18 year old married woman, 2nd interview).

A few women, however, were using strategies for coping with low income which seemed likely to lead them into problems later. In particular, some had borrowed money from credit clubs at staggeringly high annual percentage rates, while others had bought items from catalogues, and had to worry about making regular weekly repayments.

8.5. Economic support from male partners

Furstenberg (1987b) suggests that white mothers under 20 fare better economically if they marry rather than remaining single.

For whites, marriage operates as a major recovery route, offering an alternative or, at least, an important supplement to their own earning ability. Low education and restricted job opportunities, therefore, are not quite as costly as they are for black young mothers.

On the other hand, the advantages of delaying parenthood are not so great for blacks as well. As we discovered, blacks who postponed motherhood are less likely to do well economically

than whites who enter parenthood in adolescence. The cruel fact is that for blacks delaying childbearing has a relatively low payoff. They are damned if they do, and damned if they don't (Furstenberg, 1987b:396-397).

Furstenberg's analyses are for the USA and are long term, following women from pregnancy until their own children are adolescent, whereas this study is of British women and only of the first two years of their children's lives. Nonetheless there was no evidence that marriage would rescue most women from poverty. For while women were more likely to have married if their male partners were employed, many married couples were struggling to make ends meet, and it was rare for them to own their own homes.

All except two (5%) of the women who were married or cohabiting when their children were nearly two years old reported that their partner had an income, and knew where the money came from. Married and cohabiting male partners were more likely than the male partners of single women to be in employment. Two years after birth, most men (70%, 28) who lived with women were reported to earn their income whereas overall only 54% (37) of male partners in the sample were reported to be employed. Not surprisingly, single women were less likely than married or cohabiting women to know how their children's fathers got their income. Nineteen per cent (13) of respondents did not know what their children's fathers' employment status was (and all except one were single).

According to women's reports the amount of money cohabiting or married men brought into their households ranged from nothing (1 man) to £180 per week. Income levels were very varied. However both the median and the mode (four men) was £100. The mean for those men who were reported to have an income was £58. The lower levels of income came from state benefits rather than earnings. Twenty eight per cent (11) of married or cohabiting male partners received state benefit (1 received unemployment benefit, the other 10 supplementary benefit). One cohabiting woman had no idea where her male partner got his money from.

Single women rarely received any income from their male partners at all. In late pregnancy one single woman (030) had reported receiving regular sums of money (£20) from her child's father. By the time her child was two years old she no longer had any contact with him, and got no more money. At two years of age only four women who were not cohabiting received money from their children's fathers. This did not always increase their available income, however. If the women were dependent on supplementary benefit and declared this additional income, the amount they received from their children's fathers was deducted from the benefit they received. More single men may well have wished to contribute money to the mothers of their children but been prevented from doing so by lack of money. This is particularly relevant since men with the poorest prospects were least likely to be

married:

Q. Does the baby's father give you any money? (Section 10.1, page 127, first interview).

A. He is on the dole as well, and he has to give money to his mum, so...(he can't give any money to the respondent). (557, single woman; pregnancy interview).

It remains to be seen whether British schemes to ensure that fathers who do not live with their children pay maintenance for them has any impact on men who father children with teenage women. Since such men are themselves frequently living in poverty, it may be as Angela Phillips (1990) suggests that such schemes 'will make it more difficult to get reluctant fathers to acknowledge paternity at all'.

It might be thought that because women who are married or cohabiting have their male partners' incomes coming into the household, they are likely to be economically better off than single women. There are, however, two reasons why this expectation was often not met.

Firstly if both members of the couple were dependent on supplementary benefit (or if a man earned very little money and the woman was unemployed) women were likely to be economically better off if they claimed supplementary benefit as an individual rather than if the couple claimed as a unit (Gail Wilson, 1987). In this study for sample, single women living alone received about £25.70 supplementary benefit per week in pregnancy, compared with about £22.75 per week for each member of cohabiting couples (the amount women reported that they received varied). One parent benefit was, of course, only available to single, rather than cohabiting or married, women. Even women married to men who were earning in the top range for this sample sometimes felt that they were disadvantaged by not being able to claim state benefit in their own right.

Q. What benefits, if any, do women get from marriage? (Section 13.5a, page 177, first interview).

A. I don't think there's no benefits in it at all..I mean you lose - like if you weren't working you get less money when you're married...I mean before I was married... I was getting... unemployment money, but as soon as you get married, you have to give it all up don't you?... I think you're better off not married. (038, 17 year old married woman, pregnancy interview).

Single women or couples who were dependent on supplementary benefit could (at the time these women gave birth) obtain special needs payments to enable them to buy essential household and baby items when they first set up home and had their first child. Since married and cohabiting women were more likely to have employed male partners than single women were, some women who lived with male partners expressed anger about the welfare payments and grants that single women

could obtain.

Q. Do you find it difficult to get by on the money you have to live on? (Section 7.6, page 66, third interview).

A. The ones that do need the help never seem to get it. In my mind anyway. I mean I'm sometimes hard up enough that I don't get any shopping, but I don't get a cent from them... I know some of the things I'm not entitled to - the free milk, the um FIS (Family Income Supplement) the - that sort of thing. I know I'm not entitled to it because they don't take what you have to pay out a month and what you actually have left in your pocket. They take it on what his gross income is which is relatively high, but once you've knocked out everything you gotta pay and everything, you find that you're just left - we're left with less than what people on the dole are which if they look at it that way is a whole different kettle of fish, but they don't look at it that way. They don't look at what he earns in respect to what we actually have left in our pockets each week, so I don't actually get anything off of the Social security at all.

Q. Do you think you should?

A. Yes, yes I do. I think if they was to look into it better, although... I don't give anybody that right to Social Security money but I do think that people do tend - I'm not necessarily saying that they don't deserve it, but the ones that I know are doing a lot better than what I am on Social Security than what I am, going about it the right way. (022; 18 year old home owning married woman)

The second reason that cohabiting women are not necessarily materially better off than single women is to do with control of household resources. It is increasingly being recognised that resources which enter a household are not equally distributed among household members (Brannen and Wilson, 1987). Men in couple relationships tend to consume a disproportionately large quantity of household resources, and to have greater control of how resources are used (Graham, 1986; Gail Wilson, 1987). In cohabitation or marriage it is still usual for welfare benefits to be paid to male partners (although women have been able to receive it since the end of 1983) and, after childbirth it was unusual for the women to be employed. Women living with their children's fathers were, therefore, dependent on their husbands or cohabiters distribution of earnings or benefits. The following example is unusual in this study because the husband, who was present at the six month interview, answered questions about how the couple organises money within their household.

Question to woman: How do you organise your family finances? (Section 11.10, page 176, second interview).

Spouse: If she needs anything, like if she said to me I need something... Like, you see I do work on the side right, now and again and it depends on whatever I earn. But if I had £100

I should give her £30 and say 'Go and buy some clothes'. The other money would go on the house. Like last week I gave her £75 to buy clothes for herself and the baby, and she spent it all. By the night time I was skint, and I didn't realise. Spent £85 in the pub! I was in company. I only went out for half a lager to tell you the truth... I was in a lot of company.
(509)

8.5.1. Feelings about men's financial contributions

Perhaps not surprisingly the respondent whose husband's account is quoted above felt that she wanted more control over how her household finances were organised. She also said that she thought that she would only stay with her husband for another couple of years.

Table 8.7. Married women's reports of who controlled their household finances at 6 months

Self	8 (31%)
Male partner	9 (35%)
Both	7 (27%)
Other*	2 (8%)
Total	26

In one case 'other' was the DHSS and in the other, the woman's mother who supported the woman and her husband

When their children were six months old, 26 of the 28 married (not including cohabiting) women were asked who they considered was in control of their household finances. Roughly equal numbers of married women said that their husbands (9), themselves (8) or both of them (7) were in control of household finances (see table 8.7 above). Only five married women reported any feelings of unhappiness about the way control of their finances was exercised. Nonetheless some men's perceived irresponsibility with money was contentious in some households. In one case a married woman had already separated from her husband by the time their children were six months old. His failure to pay the rent from the family's supplementary benefit was an important factor in her decision to end the marriage.

As we have seen early motherhood mainly occurs among couples who are living in poverty. When their children were nearly two, nearly three quarters of the women asked (72%, 46) said that they found it difficult to make ends meet. It is not therefore surprising that some women expressed dissatisfaction with male partners whom they felt were not making sufficient effort to augment the

household income by keeping jobs or by working hard:

Q. Why did you make him leave?

A. Cós I told him if he's lost his job there's no way he's moving back here. Cos that was a good job he had. There was no need to lose it. There was no need to stay off. (536, temporarily separated woman; 19 years at birth).

Q. How much does (cohabiter) bring home? (Section 7.1, page 56, third interview).

A. ...He's one of those people that you know if he don't wanna work he don't go you know. He hasn't got much will power at all... He sort of lays in bed and says 'oh I don't wanna go. I don't wanna go' you know. I suppose it ain't very nice working out in the cold weather but he does it in the hot weather as well. It's just laziness. I don't know... (This causes a lot of arguments) (187; 18 year old cohabiter).

In answer to the above question some women indicated that they were resigned to accepting what they felt to be a meagre financial contribution from their male partners:

A. Sometimes it's (cohabiter's earnings) around £30 and you know...It's not really worth it.

Q. Do you ever talk about the fact that it's not worth it?

A. Yeah sometimes, but it might end up into an argument so I don't really bother, just let him - let him. It's something for him to do really. I suppose he'd just be a misery around the house. (005, 19 year old at birth, cohabiting).

8.6. Material assistance from parents and relatives

In late pregnancy and after birth when most women who had been employed no longer were, many parents helped to improve their daughters' standard of living in a number of ways. Firstly women who lived with their parents lived more cheaply than they would have done in their own households. Some women who lived with their parents did not pay any board money (see table 8.8 below) and those who did, usually paid less than rent, fuel and food would have cost them in their own households.

Table 8.8. Whether board money paid to parents in late pregnancy and at six months

	Late pregnancy	Six months
Never paid	8 (22%)	5 (24%)
Used to, not now	4 (11%)	5 (24%)
Pays now	24 (67%)	11 (52%)
Total	36	21

Q. Do you give any money to your parents? (Section 10.7, page 139, first interview).

A. I decided to tell my mum that I wanted to give her money for food... So she said to me that I don't have to pay. And I don't really have to give money for food. But because I'm staying here I'm going to want to eat more and she can't really afford it...so I said to her that I would give her a certain amount of money and she said to me that she didn't want that much...So just started giving her £10. And now and again I give her £15 because I'm not paying rent, so I'm actually living here for nothing. (060; 19 year old single woman).

A. Eighty to £100 a month. Because now I've stopped working I don't know what things will be like at the end of the month, so we'll have to see.

Q. How do you feel about the amount you give?

A. I don't think anything is enough, but we try and give her as much as we can. (521; 18 year old living with her husband in her mother's house).

Secondly parents whose daughters no longer lived with them (which was progressively the case over the course of the study) would frequently feed their children several times a week when they visited, give them foodstuff and/or buy them clothes or baby items. Table 8.9 below shows that nearly three quarters (73%) of those asked six months after birth received some help 'in kind' from their own relatives and that nearly half of them (48%) received some help from their children's fathers' families. Without actually giving money, the women's parents and some of the other grandparents could make material contributions to their daughters' households.

Table 8.9. Help 'in kind' received six months after birth

	Women's Relatives	Male partners relatives	Other
None	18 (28%)	34 (52%)	46 (71%)
Hand downs	1 (2%)	2 (3%)	9 (14%)
Other*	31 (48%)	22 (34%)	7 (11%)
Both	15 (23%)	7 (11%)	3 (5%)

N = 65

'Other' includes meals and presents of items the women would otherwise have needed to buy.

Q. Does anybody ever help you out in other ways? (Section 11.8, page 172, second interview).

A. Our mums sometimes invite us over to dinner. That's their way of helping us without giving us money. They buy us little bits and pieces.. for the baby or they bring something up for the home. So they don't actually give us money. They just do it in their own sort of little way. (050; 17 year old married woman).

In late pregnancy women's families had also provided the women with invaluable help in getting the baby clothes and small items they needed in preparation for a new baby.

Q. What have you got ready for the baby? (Section 8.3a, page 101, first interview).

A. Practically everything except for a steriliser and things like a cot and a pram. (Did you buy them?) No my mum bought them and my sister bought them and his parents have bought things. (593; 16 year old single woman).

A. I got Pampers, lotions, cot blankets, a teddy bear. I haven't got the cot and pram yet. Most of the things have been given to me by me nan, me mum's friends, me sister. (557; 17 year old single woman).

Parents did not only assist single daughters (of whom very few received money, even occasionally, from male partners). They also bought items for married daughters whose husbands were employed. Their contributions were partly because they were excited about having a new grandchild, and partly because they recognised the hardships their daughters would face in buying baby things.

A. I bought everything ...I need like my nightdresses and my stuff and that I got to take in... I bought a lot of the baby's clothes as well from me and Graham. But the main accessories I need, like pram and that was bought by parents. (038; 17 year old married woman).

On the whole parents' material resources were stretched, and few were able to give their daughters substantial material assistance. Many, however, helped as much as they could and a few parents (about a sixth at all three interviews) could afford to give more than meals and occasional presents. See table 8.10 below).

Table 8.10. Women who received money from parents and relatives

Pregnancy	Six months	21 months
12 (16%)	10 (14%)	11 (17%)
N = 76	72	66

Q. Do you sometimes get money from anywhere else? (Section 10.3 a, page 131, first interview and section 11.2a, page 160, second interview).

A. Like I mean my family's helped us with the house. Getting the settees... the cabinet, the wardrobe and everything. They've helped us a lot to pay it all off. But apart from that I don't really get any money. (043; 19 year old married woman).

A. Now and again... my dad treats him for a tenner more (085; 19 year old married woman living in a house her dad is buying whose husband is employed in her father's factory).

A. When we got married we got some money for our wedding present. Then there was spare furniture which the family didn't want, like the bookshelves and the table. Carpets came out of our wedding present money. Pots and pans and cutlery were given by our relatives, so we've done really well... So it's all been gradual and due to relatives. Otherwise we'd still be sitting on the floor cushions. I was nine months pregnant and very uncomfortable sitting on a floor cushion. (564; 17 year old woman who married in pregnancy).

One woman (the one whose mother was buying her a house) and her husband were entirely dependent on her mother for all the income she received.

Q. How much money does your mother give you each week? (Section 11.1, page 158, second interview).

A. She gives me a weekly £35. Thirty five pounds a week I use up for housekeeping. I know it sounds a lot, but it just flies out of your hands! And I got about £500 in the bank saved. (516; 19 year old with unemployed spouse)

However much material support women got from their own parents few felt that they were materially comfortable. The woman quoted above, for example, reported that her mother always made sure she had 'enough money', but that she was rather tired of having to ask her mother for money to buy specific, named items rather than being given a weekly lump sum to budget on. She also said 'I would like more'.

Two sets of parents, and one pair of parents-in-law were unusual in the current study because they had not offered the women material assistance although it seemed they could have afforded to do so. The parents-in-law were disappointed that, having paid for a private education for their son, he had married (and had twins with) a woman from a working class background who had no educational qualifications. Similar motives inspired one set of parents who had disapproved of their daughter's early marriage, and felt that married couples should be self sufficient. The woman concerned felt strongly that she would never tell her parents how difficult she found it to make ends meet.

Q. Have you told your parents that you are short of money? ((Section 8.1, page 68 of the third interview).

A. They don't know we're sort of in debt. I mean cos if I say to them 'Oh I can't afford such and such this week' they'll start going on about 'oh well you let yourself in for it and you're always hard up, and you're always this...Cos they're always going on about how hard up I am... and by this...stage in life he (the woman's father) said you should be a little well off...We've only been married three and a half years. We've got our own place which is a lot more than some people have got...I think they're trying to rate us up too high quite honestly...(022; married woman who was 18 years old when her child was born).

The other woman whose parents did not help her financially when it seemed that they could have done came, unusually for this study, from a middle class background. In late pregnancy she reported that her mother was preventing her father from giving her money on the grounds that she would never apply to get supplementary benefit if they paid for everything she needed. This particular respondent did take a long time to apply for supplementary benefit but was able to pay for things she needed by running up debts on her Barclaycard. She was unusual in the study in having a credit card.

Parents, therefore, denied their children material help either if they disapproved of some aspect of their behaviour, or if they thought that taking a hard line would be beneficial to their daughter in the long

run.

Once infants were born many parents continued to give their daughters any material assistance they could. Six months after birth over three quarters of the sample were receiving some material help (other than cash) from their families (compared with just under half who were getting similar help from their children's fathers' families). When children were 21 months old just under one sixth of the sample (11) were receiving regular sums of money from their parents. Notably none of those who reported that their parents regularly gave them cash had been 16 or 17 when they gave birth. The explanation for this may be that the youngest women in the study were those most likely to be still living with their parents and hence getting board and lodging either free, or at a nominal cost. They may also have been getting small sums of money from their parents that they took for granted, and hence did not report.

Table 8.11. Who respondents would ask for particular kinds of help at 21 months

	Male partner	Own Relatives	Friends	Other
Shopping	18 (33%)	45 (70%)	25 (39%)	6 (9%)
Food	3 (5%)	40 (63%)	24 (38%)	3 (5%)
Small money	5 (9%)	50 (78%)	15 (24%)	5 (8%)
Large amount	2 (3%)	47 (74%)	6 (9%)	7 (11%)
N* =	59	64	64	64

Totals do not add up to the Ns given or to 100% because some women would not ask particular people for help while others would ask them for more than one kind of help.

If women were desperate for either money, food or shopping, their own relatives (usually their parents) were likely to be the first people women turned to for help (see table 8.11 above). There was usually no point in asking resident male partners for this sort of help since both members of the couple were likely to be in similar poverty. In general women reported themselves to be reluctant to ask anybody for food (although many sometimes got food from their parents). When their children were nearly two, women were asked who they would ask for food if necessary. Two thirds (63%; 40) said that they **would** ask their relatives for food (see table 8.11 above). Seventeen per cent regularly got food from their relatives anyway.

8.7. Summary

Relatives, particularly mothers were of prime importance in providing material support for many women. Even where women were married, and male partners were making financial contributions to their households, some parents supplemented their daughter's standard of living. A substantial number of women were reliant on supplementary benefit for income and provision of furniture, baby equipment etc. Most women in this study were dependent on local authorities for housing. Many expressed dissatisfaction with how they were treated by housing departments.

CHAPTER 9: Women's health, psychological state, reported feelings for their children and experiences of motherhood: Findings and discussion

The previous two chapters have examined the social networks and the social support available to the women in this study and thus to their children. This chapter considers the women's health, psychological state, opportunities for leisure and their reports of the ways in which they felt about their children and about motherhood. In doing so it provides background material for the understanding of the factors which may have influenced their children's health and development (which will be discussed in the next chapter).

9.1. Maternal health, psychological state and opportunities for leisure

9.1.1. Illnesses and Tiredness

By six months after birth most of the women interviewed (92%, 78) said that they had recovered from pregnancy and birth. Six (7%) felt they had not recovered yet and one (1%) was not sure whether or not she had recovered.

The women interviewed six months after birth and 21 months after birth were asked about their long standing health conditions. Nineteen (22%) of those interviewed six months after birth said they had experienced such conditions. Half of these (9) said that they were continuously affected by conditions such as asthma, eczema, one congenitally withered left arm and, in one case, hearing impairment. The other half said that their conditions were recurrent (bronchitis and migraine). All except one of these 19 women had been affected by these conditions since birth.

Twenty one months after birth 23% (15) of the sample reported that they had long standing illnesses. Nine of them (60%) reported that they were continuously affected by these conditions. Eleven of the fifteen had been affected in the last six months.

Table 9.1. Women's reported episodes of indisposition/illness

	None	1 - 3	4-6	7-9	10+	N
6 months	21 (26%)	20 (25%)	19 (24%)	11 (14%)	9 (13%)	80
21 month	15 (23%)	17 (26%)	10 (15%)	10 (15%)	14 (21%)	66

Women were also asked about any periods when they had been ill or indisposed during the previous six months. Six months after birth just over a quarter of the women (26%) had neither been ill nor felt indisposed since birth (see table 9.1 above). Of those who did report some, most had colds or headaches. At 21 months after birth a similar percentage as at six months reported no indispositions or illnesses (23%). However, rather more reported ten or more bouts of illness (21% cf 13%). At least

one of these women was seriously ill since, unfortunately, she died soon after the third interview. 'Death from natural causes' was recorded on her death certificate (according to her sister who telephoned with the news).

Six months after birth, the women were asked whether they had ever been so ill that they had found it difficult to look after their children. A third (32%) reported that they had been so indisposed at least once. This question was not asked at 21 months.

Women's health and tiredness was reported to be roughly similar six months and 21 months after birth. However, it seemed that for a minority of women bouts of illness or minor ailments and the severity of their tiredness had increased over that period and, on occasion, could well have been debilitating.

Table 9.2: Frequency of tiredness in the last month

	None	Once or twice	Some days	Most days	Every day	Total
6 months	9 (13%)	13 (18%)	19 (27%)	10 (14%)	20 (28%)	71
21 months	9 (14%)	7 (11%)	15 (23%)	11 (17%)	23 (35%)	65

At the second (six month) interview, women were asked whether they had ever felt tired since they gave birth. Only 13% of them said that they never felt tired while 28% said they felt tired every day. A quarter (24%) reported that their tiredness had increased since birth, compared with 45% who considered that it had reduced. More than half of those asked six months after birth said that they had more energy then than they had before birth (57%, 39) while 28% (19) said they felt that they had less energy. Twenty one months after birth, 14% said that they never felt tired while 35% said that they felt tired every day.

9.1.2. Psychological state

Depression in women with young children has received much research attention, largely because it is considered to depress children's emotional and cognitive development (Puckering, 1989; Murray and Stein, 1991) and to be relatively common. Estimates of the prevalence of maternal depression in the general population vary. In the postpartum period, for example, it has been estimated that only about 10-20% of new mothers have severe enough depression to warrant treatment but that as many as 80% of newly delivered women may experience 'the blues'; depressive or labile moods (York, 1990). After the immediate postnatal period it is estimated that between 10 and 15% of women with young children are depressed (Cox et al., 1982) and that perhaps as many as 40% of women at home

full time with children under five years of age are depressed (Brown and Harris, 1978).

The reasons for such high levels of depression among mothers are far from clear cut (Oakley and Rajan, 1990; Green, 1990) although factors such as the use of obstetric technology in childbirth (Oakley, 1979) negative life events (Brown and Harris, 1978) including separation from parents (Wolkind and Hall, 1980), poor socioeconomic circumstances and genetic predisposition (Puckering, 1989) as well as negative antenatal mood (Green, 1990). In addition, not having wanted the pregnancy and low self esteem during pregnancy (Zajicek, 1980) have all been implicated.

The research evidence currently available would suggest that the poor socioeconomic circumstances of the women in this study would make them particularly susceptible to depression while they were at home with their young children. Indeed, the London Hospital study of all the British born women (most of whom were working class) attending London Hospital antenatal clinics between 1974 and 1975 found that one of the characteristics of those who showed continuity in emotional difficulties was that they tended to be under twenty when they gave birth (Zajicek and Wolkind, 1978; Zajicek and De Salis, 1979). Green (1990), however, found that age was not related to emotional well being.

The current study did not use standardised depression measures. This was because such measures often take a long time to complete and are generally self completion inventories. Given the problems of attrition experienced in the current study it was decided not to prejudice participation rates by lengthening the time each visit took or by requiring the women to complete an inventory since some had marked difficulties with reading and writing. Instead the women were asked a range of questions at each interview which included questions on depression but also aimed to get at both positive and negative aspects of their emotional state. (See sections 7.13 (page 95) of the pregnancy interview; 3.10-3.13 (pages 34-42) of the six month interview and 2.4 (page 34) of the 21 month interview). There is, thus, information on their antenatal and postnatal mood as well as on their initial reactions to being pregnant (see chapter 5); their feelings about their social contacts; social lives and social support (see chapters 6 and 7)

Data on women's psychological state during pregnancy and after birth is presented in two tables since at the pregnancy interview depression was the only focus, while the two interviews after birth asked about both positive and negative emotional state.

Table 9.3. Whether ever felt depressed in pregnancy

No	Yes, but not now	Yes, currently	Total
22 (31%)	21 (29%)	29 (40%)	72

Table 9.4. Reported psychological state after birth (in the last month)

	Positive feelings self				Negative feelings self				
	None/ Few	Some	Mod	Lot	None/ Few	Some	Mod	Lot	N
6 mont	4 6%	37 53%	24 34%	5 7%	16 23%	34 49%	17 24%	3 4%	70
21 mont	13 20%	31 48%	14 22%	7 11%	8 12%	26 40%	20 31%	11 17%	65

It is striking that at each interview, the majority of the sample interviewed reported that they had experienced some negative emotional feelings in the period prior to the interview. The prevalence is higher than that generally reported in studies of maternal depression. For example, Zajicek (1980) found that in her subsample of 56 women who had become 'teenage mothers' from the London Hospital study, 35% had emotional difficulties (usually depression and associated anxiety, assessed on the Rutter Malaise Inventory) in pregnancy, 42% had such difficulties four months after birth and 30% did fourteen months after birth. Similarly, Simms and Smith (1986) found that 43% of the 'teenage mothers' they studied reported suffering from depression or nerves in the first year of their children's lives.

How can such high rates of negative emotional feelings in the current study be explained? Part of the explanation probably lies in the fact that this study did not use standardised measures giving a single depression score. As a result it cannot give findings on depression that are comparable with those from other studies. Women who expressed negative feelings identified problems associated with lack of money; poor housing; lack of opportunities to do things they enjoyed; problems with male partners and difficulties with childcare as sometimes making them feel low. It is perhaps not surprising that there are slight increases in reported negative feelings over time with increased exposure to factors (particularly related to socioeconomic status) known to be associated with depression.

When asked, however, the women were equally likely to report that they had had positive feelings as

well as negative feelings (see table 9.4 above). Six months after birth 77% of those asked reported some negative feelings while 94% reported some positive ones. Twenty one months after birth 88% reported negative feelings while 81% reported some positive feelings. Thus, although there is a slight increase in reported negative feelings, and a decrease in reported positive feelings over pregnancy and in the period following birth (see tables 9.3 and 9.4 above) most still report positive feelings. When women's accounts were examined, very few either considered themselves to be depressed or gave accounts which suggested that depression was a pervasive part of their feelings (see section 9.6).

Some justification for recording positive and negative feeling separately came from the fact that positive and negative feelings sometimes seemed to operate independently. For example, positive feelings for self were significantly related to the total number of people in women's social network [$F(3,61) = 8.03, p < 0.001$] while negative feelings were not [$F(3,61) = 2.38, p = 0.08$] (see chapter 7).

9.1.3. Opportunities for leisure

A further influence on women's health relates to the opportunities they have to do things that they enjoyed, to have time for themselves when they want to and company when they want it.

Table 9.5: Whether or not there were things that women enjoyed but could do only occasionally

	Not mentioned	Mentioned	Total
6 months	25 (37%)	42 (63%)	67
21 months	24 (37%)	40 (63%)	64

Table 9.5 (above) shows that at both six months and twenty one months after birth nearly two thirds of the women asked said that they felt they did not get enough opportunities to do things that they enjoyed. Those who reported this said that they would mainly have liked to go out more, shopping or doing more social activities. Lack of money was cited as a major impediment to many of these activities although a few women also cited lack of alternative childcare or not wanting to leave their children as reasons.

Just over half the sample at both the six month (54%, 38) and 21 month (53%, 34) interviews considered that their social lives could be better and half said that they were sometimes lonely. Forty nine per cent (34) of the sample at six months and 50% (32) of the sample at 21 months said that, on occasion, they felt lonely.

In keeping with this, most women said that they considered that they got enough time to themselves (see table 9.6 below). Those who felt that they did not have enough time to themselves were more likely to mind this than to think that it was unproblematic.

Table 9.6: Whether had enough time to self

	Yes	No, does not mind	No, minds	Not sure	Total
6 months	48 (71%)	8 (12%)	11 (16%)	1 (1%)	68
21 months	39 (61%)	8 (12%)	17 (27%)	0	64

Many women may have felt that they had too much time to themselves since nearly three quarters of those interviewed at six months (73%, 51) and more than two thirds of those interviewed at 21 months (69%, 44) reported that they sometimes experienced boredom.

Thus, although social support was available to many women, it seems that most women in the present study were not satisfied with their social lives.

9.2. Initial feelings for the children

When they first realised that they were pregnant, 60% of the women had some negative feelings (however small) about being pregnant (see chapter 4). But only 6% remained generally unhappy about the prospect of having a child in late pregnancy (see chapter 5).

Although the moment when mother and baby actually meet is romanticised as magical, women do not necessarily fall in love with their babies the moment they see them. Ann Oakley (1979) found that 70% of the women she studied reported that initially they felt nothing for their children. In the present study, when interviewed six months after birth, one woman in five (20%) reported that she had no feelings for her child immediately following birth (see table 9.7 below). The fact that a much smaller proportion of women reported having no initial feelings for their children in this study rather than in Oakley's study may be because women were asked to give retrospective accounts (six months after birth) and their recollections may have become idealised.

An alternative explanation could be that younger women are reluctant to admit to having no feelings because they are aware of the stigma that attaches to mothers under twenty. It could also be that social support, for example from their mothers, led them to feel more enthusiasm than they otherwise would have done. These remain hypotheses which it is not possible to confirm or disconfirm with the data from this study.

Table 9.7: Feelings for children from birth to six months

	No feelings	Disappointm ent	Anger	Anxiety	Other
Never felt	80% (56)	96% (67)	73% (51)	65% (46)	99% (69)
At first only	20% (14)	4% (3)	6% (4)	20% (14)	-
Later, but not now	-	-	1% (1)	4% (3)	1% (1)
Throughout	-	-	1% (1)	9% (6)	-
Later and still	-	-	19% (13)	3% (2)	-
	N=70	N=70	N=70	N=71	N=70

Lack of feeling was usually reported to have lasted no more than a couple of days, and to have given way to feelings of love and wonder. Very few women (4%) reported themselves to have been disappointed with their children, or said that they had felt any anger (6%) with their children at first. No-one said that they had continued feeling either disappointment about, or nothing for their children beyond the immediate postnatal period. Nearly a fifth of the women (19%) reported that they occasionally felt very angry with their children at six months, but nearly three quarters (73%) said that they had never felt such anger.

Most women (65%) said that they had never experienced anxiety about their children either. Of those who reported that initially they had felt very anxious, most (24%) said they no longer did so six months after birth. Feelings of anxiety were almost exclusively about the possibility of cot death. Many women had seen television programmes on the topic, which had made them worry in case their children died. A few reported anxiety about handling their newborn infant. This general lack of anxiety probably reflects the confidence (based on their earlier experience with younger relatives or their friends' children) that many women felt about looking after small children. One woman said that she had been worried that her child was not developing as well as he ought to be.

As in Oakley's (1979) study most women (84%) reported that they had a clear sex preference for their children and more wanted boys (46%) than girls (37%). Boys were, however, not as popular as they were in Oakley's study (where 54% of women reported wanting a boy cf with 25% who wanted a girl). Once children were actually born, most women (73%) reported themselves to be immediately happy

with their children's sex. Only 8% claimed they had initially been entirely unhappy with the sex of the child they got, and all of them had stopped feeling negative about it in the first few months after birth. In this they were no different from older mothers (Oakley, 1979).

Table 9.8. Sex preference for children

	Respondent	Child's Father	Own Family	Child Father's Family
None	16% (11)	32% (20)	59% (36)	69% (36)
Boy	46% (31)	42% (26)	18% (11)	21% (11)
Girl	37% (25)	18% (11)	13% (8)	6% (3)
Felt Mixed	---	3% (2)	8% (5)	4% (2)
Not Known	---	5% (3)	2% (1)	2% (1)
	N = 67	N = 62	N = 61	N = 53

Although the majority of the children's fathers were reported to have a preference for either a girl or a boy child, fewer of them than of the women were reported to have such a preference (see table 9.8 above). A third (32%) apparently did not mind whether they had a boy or a girl. However, those who were reported to have a preference that women knew about, were more than twice as likely to want a boy as a girl (whereas the women were more evenly distributed with regard to sex preference of their children).. Forty two per cent wanted a boy, compared with 18% who wanted a girl.

Table 9.8 also shows that relatively few members of either women's or male partner's families expressed preferences for the sex of grandchild (39% and 29% respectively). Yet male partners' relatives were more than three times as likely to express preferences for male children as for female children (21% cf 6%). Women's relatives were more equally balanced with regard to sex preference. Eighteen per cent preferred a boy, while 13% preferred a girl.

Although boys were more desired than girls, slightly more girls than boys were born. Fifty three per cent of births were of girls. Expressed preferences were rarely reported to have had any effect on how male partners and relatives reacted to the child's sex once it was born. Over 90% of fathers, 94% of women's relatives, and 97% of the child's father's relatives were said to be satisfied with the child's sex at birth. For those few who were said to be disappointed, the child's sex reportedly made no difference to the help given.

9.3. Feelings for children over the first two years

For women who become mothers under twenty, greatest difficulties have been said to occur when their children become toddlers (Lamb and Elster, 1986) who want their own way and are not easily dissuaded. In that context it is important to establish whether mothers had experienced any diminution in positive feelings for their children by the time they were nearly two years old.

Table 9.9: Whether child was reported to be easy or difficult to look after

	Easy	Mixed	Difficult	Total
6 months	47 (70%)	18 (27%)	2 (3%)	67
21 months	36 (56%)	19 (30%)	9 (14%)	64

Table 9.9 above shows that more than half of the sample (56%) said that their 21 month old children were easy to look after. Only 14% considered their children to be difficult. The rest (30%) said that their children were sometimes difficult, and sometimes easy. Most women also thought their children were generally contented. Seventy eight per cent said that their children were contented, while only 6% said their children were mainly unsettled. Relatively few children were reported to be always shy with unfamiliar people. Nine per cent said their children were shy, while just over half the women (55%) said their children were friendly, and just over a third (36%) said it depended on the circumstances.

Most women, therefore, gave positive reports about their children, and said that their children were easy to look after. Asked what they enjoyed about their children, only one woman could not think of anything she liked about her child. Half the women (51%) mentioned two or more things they enjoyed about their children. Most women also mentioned something that irritated them about their children. But in contrast to answers about what they enjoyed about their children, 17% said nothing irritated them about their children. Most (58%) mentioned only one thing as irritating.

Table 9.10: Reported changes in relationships with children over the last year at 21 months

	No change	Better	Mixed	Worse	Don't Know
21 months	19 (31%)	38 (61%)	3 (5%)	1 (2%)	1 (2%)

N = 62

When asked to assess whether there had been any change in their relationship with their children

over the last year (table 9.10 above), most women (61%) portrayed their relationship as having improved. Mother-child relationships were felt to have been continually good, but improvement was felt to have resulted from children's developmental advances (in communicative skills, mobility and dexterity).

Q. Do you think your relationship with (child) has changed over the last 12 months?
(Interview 3; section 9.1.f, page 74)

A. I enjoy him more at this age because... he's got more to offer than what he was when he was younger. (Why is that?) Well he responds more, as I said, to when you actually tell him to do something, and it's really nice to see him, and he doesn't like to be helped. He likes to do things for himself. So he's turned into an independent little boy. (008; 16 at birth. Did cohabit, but moved back to her parents' home when her child was two years old).

Enjoyment of young children as company may well be class specific. Boulton (1983) studied 50 married women aged between 22 and 34 years old who had at least two young children, one of whom was under five years old. Boulton found that working class (but not middle class) mothers reported that they enjoyed their children's company.

In their accounts of their daily lives, working-class women built up very clear pictures of their children as important and valued companions. They chatted to their children on their own level, shared their interests with them, and spent much of their time with them (Boulton, 1983:72).

The women in this study were under twenty when they gave birth while Boulton's sample were over twenty. However, shared social class position may mean that the women in the current sample had similar feelings about their children as did the women in Boulton's (1983) study.

9.4. Coping with childcare and motherhood

This section considers women's reports of whether other people considered they were coping well as mothers as well as their own accounts of how they were coping.

Table 9.11: Maternal reports of whether other people believed they were coping well as mothers six months after birth

Others think coping well	Others think not coping well	Doesn't know
49 (72%)	10 (15%)	9 (13%)

N = 68

Six months after birth the women were asked how other people felt they were coping with motherhood (see table 9.11 above). Nearly three quarters (72%) reported that they had been praised by someone for coping well. Only 15% reported that anybody they knew thought that they were not coping well.

Table 9.12: How women considered they were coping with childcare

	Very well	Quite well	Mixed	Total
6 month	17 (25%)	50 (73%)	2 (3%)	69 100%
21 month	19 (30%)	40 (62%)	5 (8%)	64 100%

Table 9.12 above shows that both at six months and when their children were nearly two, nobody considered that overall they were coping badly with their children, and few considered that they were coping badly with any aspects of childcare. At six months nearly three quarters (73%) said that they were coping 'quite well' and a quarter (25%) said that they felt they were coping 'very well'. At 21 months, nearly two thirds (62%) said that they felt they were coping 'quite well' with their children, and just under a third (30%) said that they were coping 'very well'. More than four fifths considered themselves to be coping as well with motherhood as they felt they wanted to. This did not mean that they gave only glowing accounts of how they were coping. As Willard Williams (1991) found with her sample of black mothers under twenty, the women were generally realistic about the demands of childcare. The following quote is in response to questions on Perception of child, section 5.2, page 50 of the third interview.

I think I cope really well with him. Like I'm always talking to him and trying to involve him in what I do. I think I'm good in that way. But sometimes I get so sick of him... I just want him to go away and leave me alone (585 single woman living alone, 3rd contact).

Table 9.13: Satisfaction/Dissatisfactions with motherhood

	Satisfaction - 6 months	Satisfaction - 21 months	Dissatisfact 6 months	Dissatisfact 21 months
None	6 (9%)	---	22 (32%)	11 (17%)
Some	11 (16%)	10 (16%)	39 (57%)	41 (64%)
Moderate	42 (62%)	44 (69%)	7 (10%)	11 (17%)
A lot	9 (13%)	10 (16%)	--	1 (2%)
N =	68	64	68	64

At 21 months, the period when mothers under twenty have been considered to be likely to find it difficult to cope with their children's increasing wilfulness (Lamb and Elster, (1986) women were asked a series of questions designed to allow assessment of their satisfaction and dissatisfaction with motherhood (section 5.1, page 48 of the third interview). From their answers to those questions all the women interviewed at 21 months were rated as having some satisfaction with motherhood with more than four fifths of the women being rated as gaining quite a lot of satisfaction (85%). While the majority of the women (83%) were also rated as having some dissatisfactions with motherhood, most gave accounts which suggested that they had more satisfactions than dissatisfactions. Women of each age point between 16 and 19 years of age reported themselves to be satisfied with motherhood, and with the childcare they provided for their children. There were slight increases in both reported satisfactions and reported dissatisfactions between six months and 21 months after birth (see table 9.13 above).

The tenor of what women said was that the greatest pleasure they got from motherhood came from caring for their children and having them around. They also reported getting a lot of pleasure from seeing the developmental advances made by children and enjoyed aspects of their children's behaviour. Many women had long anticipated that motherhood would be a crucial aspect of their lives and their accounts suggested that having a child gave them the sense of meaning and purpose that has also been reported in studies of older women (Boulton, 1983) as well as of those who gave birth in their teenage years (Simms and Smith, 1986; Sharpe, 1987; Willard Williams, 1990).

The following two sets of quotes come from section 5.1, page 48 of the third interview schedule.

(What are the best things about being a mother?) I like playing with her... I like having her around... (What would you say are the worst things about being a mother?) I don't find

nothing worst. (Some mothers say that they don't like changing nappies or getting up at night...?) No I like changing her nappies. I don't get up at night. She sleeps right through the night. She always did when she was little didn't she? (to her mother). (Would you say that you've always enjoyed being a mother?) I enjoyed her even when she was a baby. I enjoyed her all the time. (081; married woman).

(...best things...?) Bringing up Leah and taking care of her and cooking meals for her. I think it's lovely, and dressing her. Looking after her... some of the things that she does makes you feel so proud... (...worst things...?) It's when they get up to mischief and you're trying to do the housework and everything. You have to have eyes at the back of your head to look after them... (Does that affect how you feel about Leah?) No I like everything she does really. (195; 19 year old single woman).

(...best things...?) They make you laugh and pleased you had them. They are company. (...worst things?) Not being able to do things you want when you want. (200; cohabiting woman with two children at 21 months).

Table 9.14: Whether last six months reported to have been easy or hard

	Six months	Twenty one months
Easy	29 (43%)	24 (38%)
Mixed	21 (31%)	22 (35%)
Hard	18 (27%)	17 (27%)
N =	68	63

At the six months and the 21 months interviews women were asked whether they had found the last six months as a mother easy or difficult (see table 9.14 above). At both interviews just over a quarter (27%) said they had found it difficult. This compares with roughly two fifths (43% at six months and 38% at 21 months) who said they had found everything easy, and about a third (31% and 35%) who found some things easy, but others difficult. At the 21 months interview more than half the women (56%) said that motherhood had become easier over the last six months, and less than a fifth (19%) thought it had become harder. The following quotes come from section 5.2, page 50 of the third interview schedule.

I think it's getting easier and easier as she's getting older 'cos she's... very independent (532; cohabiting; 3rd contact).

Easier. It seems to have got easier as he's grown older. I won't say that too soon, but I mean so far (008; 16 year old at birth; living with parents at contact 3).

Well when I had Jane you know everything was so hard. I didn't know what to do if there was anything wrong, but with Jackie I got into a routine so quick... It's been easier bringing them both up than it was with Jane (129; married woman 3rd contact).

Mm. I find it easier now he's getting bigger. (How has it got easier?) It's not so demanding as when... he was a baby you know. I mean I can - he gets on with what he wants to do and things like that... (077; single woman).

I think it's been easy and exciting really because she's talking now and she makes sentences and she asks to go places and that. Which is quite good. (So it's easier now?) Yes as she grows it gets easier. (How?) Well the nappies for one. She's out of nappies, so she asks to go to the toilet. I don't have to um constantly change and clean and that and her eating habits... have more or less stabilised, so it's been easier that way. (048; 18 year old single woman).

Well like this age is the best age I suppose so far. I mean all the little things she can do. She's always making me laugh. (174; cohabiting woman who was pregnant again at 21 months).

It may be argued that few women are likely to report themselves to be 'bad mothers', particularly when they know they are in a stigmatised age group of mothers. Yet, as will be discussed more fully later, some women did express dissatisfactions with motherhood. However, when women were asked to describe their children, love for, and pleasure in their children is evident in many of their accounts.

Q. How would you describe (child)? (Section 9.1a, page 74).

A. She's good company. She's always good to me, and I'm very happy when I'm with her too (532; cohabiting; 3rd contact).

A. (She's) picking up words and coming out with funny things and dancing and putting my shoes on, and putting my hat on and things like that. (Is there anything about her that you particularly enjoy?) Well everything about her really (129; married woman; 3rd contact).

Q. What do you enjoy about him? (Section 9.1.d, page 74)

A. I really enjoy playing with him, because some of the things he does, it makes me die laughing. You get a sense of proudness sometimes you know. You feel so proud of him sometimes. I enjoy him more now - he's more company... (585, single woman, 3rd interview)

A. He's very boisterous. Mischief! On the whole he's a really good boy. He is. A great little imitator. He loves to imitate as you know!...

Q. Would you say that it's easy or difficult looking after him?

A. Easy. No way is he difficult. (524; single woman living alone; 3rd contact).

A. Oh he's company. I really enjoy his company and I'm gonna miss that when I actually start to go to work, but I really do enjoy that. (What do you enjoy about his company?) It's just being with him really. I find that really sort of - absorbing I should say (Laughs) (008, single woman, 16 at birth, 3rd interview).

A. Oh you get a very biased opinion don't you?... I don't know. I don't think you could wish for a better son. I mean I can't be the only one who thinks that because everybody says how good he is and that. He's a very loving child. If I'm crying he sits there and he goes 'Oh mummy crying!' And he gets all upset. I wouldn't be without him... If anything happened to him, I'd kill myself. I couldn't live without him (585; single woman living alone; 3rd contact).

9.5. Dissatisfactions with motherhood

By the time the children were 21 months, most of the women expressed some dissatisfaction with motherhood (see table 9.14 above). In almost all cases this dissatisfaction was with particular, often short term, elements of motherhood that women felt made things more difficult than they had been previously. Only one woman expressed major dissatisfaction with motherhood. She was the same woman who expressed no positive feelings for her child.

The things that many women said that they disliked about motherhood were mainly getting up to attend to children at night, not being free to do things like going out at will, having to deal with tantrums and prolonged crying and having to be continually alert to the possibility that their toddlers could very quickly get into mischief or danger.

Q. Has being a mother got easier or harder in the last six months? (Section 5.2a, page 50, 3rd interview).

A. I think it's getting harder rather than easier really...He's getting into more things. He's doing more things, and I don't know really. He's just getting a little sod. Potty training, getting off the bottle, and it all seems to be getting harder now, whereas if I done it before,

it might have been a lot easier (187; 3rd round; cohabiting).

Q. Are there things you particularly enjoy about him?

A. I just enjoy being a mum really. But I don't enjoy my circumstances like being a single parent. But I enjoy being his mum.

Q. What don't you enjoy about your circumstances? A. If I didn't have so much of the work load on my own. I know I get all the good bits as well, but I get all the work that goes with it...

Q. Would anything help you enjoy it more?

A. I think if I just found someone to share it with (585; single woman ; 3rd contact).

For the third interview data, there was no statistical relationship between whether women considered that their children were easy or difficult and their satisfaction with motherhood ($\text{Gamma} = -0.05, p = 0.43$). There was, however, a highly statistical relationship between whether women reported that their children were easy or difficult and dissatisfactions with motherhood ($\text{Gamma} = 0.67, p < 0.001$). So although all the women reported some positive satisfaction with motherhood, those women who felt that their children were difficult to look after were more likely than those who said that their children were easy to look after, to express some dissatisfaction with motherhood.

Q. Would you say that he's an easy or difficult child? (Section 9.1b, page 74, 3rd interview).

A. Like um, how can I put it. He's very touchy and troublesome... So I wonder whether he's going to grow up to be a bad boy you know, like them little kids and that. But my mum goes well he'll change and quiet down, so I can't really judge him for what he's doing now. Well he's my first one really. So I don't really know (Laughs).

Q. Are there any other things that worry you about him?

A. The way he talks as well that makes me... wonder as well if he's gonna be a bit slow at sch- you know slow at doing things. (Why?) Cos some things he doesn't do. Like the way he's talking. My mum goes he's talking all right for his age and that, but I think he could be doing better things for his age you know, talking plainer and that (005; 19 years at birth; cohabiting, 3rd contact).

From the women's accounts there was also an indication that it is the youngest mothers under twenty who are most likely to express difficulties with motherhood. A couple of the youngest women; who had been 16 and 17 years at birth did seem to be having particular problems with motherhood, or to

be feeling particularly dissatisfied with their children. They are discussed in the section which follows.

9.6 Women's reported assessments of motherhood

The third interview schedule (which was designed to be shorter than the two previous interview schedules) did not include any questions designed to get women directly to assess whether, in retrospect, motherhood had been a good idea for them. But when women were spontaneously contemplative about the effects of motherhood, they discussed their perceptions of how motherhood had affected other significant life careers. As Boulton (1983) found, these assessments were independent of their feelings for their children. The following accounts followed questions about satisfaction with social life (section 4.1, page 44 of the third interview schedule).

Sometimes I wish I'd never had her. Not in the sense that I wish she wasn't here, but in the sense I wish that I'd waited perhaps a bit longer... I sometimes get that feeling you know cos we never really had much of a life when I was single, being Italian - the way I was brought up. So I miss the fact that I've never been to a disco. (Never at all?) No. No. I've hardly ever been to the pictures and that sort of thing. Doing what other teenagers would have done. I sometimes get the feeling that you know if only I hadn't got married maybe things would have turned out differently, but I don't think they would have done with my parents because I would have been going to work, and then going home. That would have been it. I would never have been allowed out at night so - that's the only thing about it. I sometimes wish it's never happened. Then when I think about it deeply I think well I probably would have been worse off cos all I would have had would have been work. I wouldn't have had any social life. I don't have much of a social life now but at least I am my own person here in the sense that I can do practically what I want... so I'm pleased with that - that bit of it. (022; 18 year old married woman).

When asked in pregnancy if she would like to change anything in her life, the above woman had replied that she would have liked to have been born to different parents, parents who were less strict. Marriage had been the only route she perceived out of her parental home, and she had married at 16 years. She had been having fertility investigations after a year of trying to become pregnant before eventually conceiving, and was clear that her daughter had been wanted and was much loved. Her regrets were to do with aspects of her life she perceived as immutable.

Another woman who was continuously employed throughout the study in a manual trade, and who said that she found it very difficult to combine employment and motherhood, had also 'tried' to become pregnant. She had feared that she was infertile because she had had an infection which had affected her fallopian tubes. Her assessment of whether having her daughter when she did had been

a good idea centred around her relationship with her child's father.

I mean sometimes I say to myself I wish I never had her you know. Maybe I would probably have had a boyfriend and we been going out regular and you know a decent one who's here round me, maybe then I would have decided to have a child because I thought that maybe he was the right one, and have a kid now you know. Things just didn't turn out that way. Maybe I was a bit - well 19 - I wouldn't say I was young but I didn't know much about him anyway to say I should've had a child with him. When I sit down and think about it now I say 'no. I shouldn't have had (child). He wasn't really the right one to have her for. Cos I mean he's changed drastically from the time I was pregnant. Before we used to have a bit of a laugh and fun and I used to see him all the time, but since I've had (her) things have just gone downhill and there's gonna be a time when it's gonna reach rock bottom where I ain't gonna take no more and I'm just gonna tell him to get out and that's it... You know from there on I've just got to build myself back up again.

Q. So do you regret having had (her)?

A. Um I do and I don't. I mean sometimes I wish I didn't have her. Sometimes when I've got money problems I say to myself if I didn't have her I'd probably be well off now. I'd probably be in mummy's house saving and I could buy myself a car and everything but then when I think of her I say 'no. She's mine, and I'm happy she's here. You know I can sit down and play with her and give her the love I never had from my father when I was small... and I'm two parents in one really... (500; 19 year old single woman).

To record these women as being only regretful of their decisions to have their children would be both an oversimplification and a distortion of their accounts. Both women were sometimes regretful of aspects of their lives which they saw as being limited by having a child, but neither could seriously imagine themselves without their daughters. The first woman is aware that her regret is idealised because she is unlikely to have had as much freedom as she would ideally have liked even if she had deferred marriage. She had also had two childless years after marriage when she was free of her parents' restrictions but still did not go to a disco. The second woman was dissatisfied with many more areas of her life than the first woman and feels that she would have been both economically better off and likely to have a more reliable male partner if she had deferred childbearing. Even so she was happy with her daughter.

Women's satisfactions and dissatisfactions with motherhood were not simply related to how they felt about their children but also to its effects on various aspects of their lives like their financial or

employment situations, relationships with kin, or staving off loneliness later in life (section 5.1, page 48 of the third interview schedule).

There's less money to spend but um I wouldn't say it was that hard and I wouldn't say it was easy neither. (?)...I'm not bringing her up on my own you know. I've got her dad and my parents and his parents so I just have to phone one of them and say d'you want to keep her for a couple of hours? And it's like putting gold in their laps... (015; semi-cohabiting woman).

Well when you get older you know... you still have someone to look after - you know you still have someone to care about. I don't know you know. You'll never be lonely. He'll probably get married and have children so I can always go round there. You got someone to care for. Of your own to look after (Laugh). (Anything else?) Well I don't have to go out to work (laugh). Maybe when he gets older I will go out (to work), because you don't get enough money but... I enjoy looking after him even though he's a handful, but he's all right. (194; 18 year old single woman).

Both the above women were well supported, having excellent relationships with supportive mothers who lived nearby and visited frequently. Both children's fathers were also supportive. In the second case, the couple no longer had a sexual relationship, but were very good friends. Her child's father paid £10 per week towards caring for his child. While this did not benefit the woman materially because it was deducted from her supplementary benefit, it did clearly demonstrate his commitment to their son. Like most women in the study, money was scarce for these two women, but both were managing. The relative absence of other problems made motherhood a positive experience for them both.

The responsibilities of housework and tiredness were also sometimes considered to detract from women's enjoyment of motherhood.

Q. Would anything help you enjoy motherhood more? (Section 5.1c, page 48, 3rd interview).

A. No, because she's fulfilling. I mean I stimulate her as much as I can, and I play with her - although sometimes I'd like to play with her more, but I mean you've still got to run the household as such but er I mean you can't drop everything for them... but I mean I think I'm doing quite well at it. I'm getting - you can see what she's like. She is quite good so I don't think I could get more out of it. Perhaps I'd enjoy it more if I didn't feel so tired, but I'll have to see what I'm like after I have the other baby. See whether this tiredness will go away, and then perhaps I'll enjoy it more (022; 18 year old at birth; married woman, 3rd contact).

A woman who had been 16 years old at birth who had started college but stopped because she missed her child did not express any regrets about motherhood. She reported that her son had not prevented her from doing anything she wanted to do. Similarly another woman who had been 16 years old at birth and reported that she was studying in order to be able to get a well paid job so that she could support her child, felt that motherhood had been beneficial to her.

It's made me more responsible. It's changed the sort of person I am. I used to be a trouble maker and get into fights all the time. People have been amazed at the change in my personality. (How do you feel about that?) I'm happy with that. (Has being a mother made any other differences in your life?) I feel less lonely. I feel more love being a mother. (527; 16 year old single woman, 6 months after birth).

Elster et al. (1989) report that young women who become mothers are more likely than their peers who do not, to have engaged in 'problem behaviour'. The implication of their argument is that this constitutes a further reason for attempting to prevent early motherhood since it is likely to be the most unsuitable women who become mothers early in their life course. However, the above example indicates that early motherhood may have a beneficial impact on the conduct of some women. Chapter 11 indicates that, for a few women, it can also be beneficial to their educational and employment prospects.

Another woman who had been 16 when she conceived, but 17 when she gave birth said that she felt that she was coping all right with motherhood. However, she was very unhappy with motherhood and with her child:

Q. How would you describe him? (Section 9.1, page 74, 3rd interview)

A. God! He's a terrible child. He's always crying. A real cry baby. Got a bottle. A bottle hanging all day. He don't concentrate on nothing. Hassle all day. He's only sleeping now because of Phenergan. (Do you think that he's more difficult to look after than other children?) More difficult because of the crying. (Is that the only way in which he's more difficult?) He don't play for long. (No?) He don't concentrate. Like that one (child the interviewee was childminding) will play for half an hour. (He) will just throw them (toys) at you. (522; cohabiting woman, 3rd contact).

What had led to this rather worrying state of affairs? Was it simply that the woman had been too young to have a child, and as a consequence couldn't cope? This woman had lived with her child's father from before she became pregnant. In the pregnancy interview she reported that she had come

off the pill in order to become pregnant, but had not told her male partner that she had. Twenty one months after birth, she was depressed. One reason for this was that she wanted the child's father to leave their maisonette, but he had refused to. Two other reasons were, that she was worried about her son's language development. She would have liked to have been able to get out of the house more and was very tired, because her son woke up a lot at night, and she was getting very little sleep. In the day she minded a 6 month old, and so could not sleep when her son did.

She was well experienced in childcare. She had helped look after her six year old niece since she had been born. Before her son had been born, her niece had actually lived with her for six months after her brother had separated from his wife. However, she seemed to particularly dislike her son's characteristics, seeing him as too active, too fretful and lacking concentration. At the same time she felt that, 'except for the speech' he was developing well. She had taken him to see a health visitor about his language at twenty months, and been told that he was 'alright for his age'. A few weeks later she took him to the health centre, and was told by the speech therapist that her son was not talking because he was very active and found it difficult to concentrate. She was told she would be asked to bring him again later if he did not begin to talk.

When given the Bayley Scales of Infant Development her son scored just above the standardised norm (gaining a score of 104). She could, therefore, have been misjudging her child, either because she dislikes him, is depressed or does not know what to expect from a young child. However, her report of what the speech therapist had said did seem to indicate that the speech therapist agreed with the respondent that her child was unusually active. She could, therefore, have been sensitive enough to pick up the early stages of a speech problem before it became evident to anyone else. It is difficult to sort out the causative factors but, from his mother's accounts, the prognosis for this particular child did not seem good.

However, the problems that seemed to make his mother intolerant of him were unlikely to be simply age related. The above mother had been unable to get a nursery place for her child, because there was none available. This shortfall between supply and demand may, possibly, cease to exist with the implementation of the Children Act (which came into force on October 14, 1991) is intended to give local authorities the responsibility to provide the childcare that parents want. This respondent had, unusually for the sample, received a visit from a health visitor at 21 months (the week before the interview) perhaps because her child had suffered three accidents in the last six months (a burn from an iron, a needle broken in his foot and a broken tooth) two of which required hospital treatment.

She differed from most of the other women who had given birth at sixteen or seventeen in the current study in that she did not regularly stay with any of her own relatives or her child's father's relatives.

She was, however, in regular touch with most of her relatives and her sisters did provide some childcare help. She was the only one of those who had been 16 when they conceived to be cohabiting when interviewed 21 months after birth. That relationship did not help, however, but added to her problems particularly since her child's father was a heavy drinker and would not move out of their flat as she requested.

Another woman (16 years old at birth) reported that she regretted having had her child when she did. She reported that she had not thought about the possibility of becoming pregnant, but once pregnant had resisted her mother's suggestions that she ought to have an abortion. Twenty one months after birth she was living in very difficult circumstances. She had moved house four times since she had become pregnant, and during the interview her gas supply was cut off because the gas man discovered that her cooker was unsafe. She had no money to buy another one, and had discovered many things wrong with the housing association flat she had just transferred into. She reported that she felt low and depressed much of the time.

Although she loved her daughter she felt that she would never advise anyone to have a child as early as she had (16 years) and wished she hadn't done so.

Q. How do you feel now about having become a mother when you did?

A. I mean when you're pregnant you think that it's gonna be a fairy tale, but the worst thing is that you gotta face up to reality.. You know it's nothing what you expect it to be. I mean people always told me 'don't expect... for it to be good'. But you say 'no, no no' you know. You never expect the worst... That is the worst thing about it. (?) ... The easiest part is having the baby - the hardest part is looking after them and even harder is to have a flat. I mean... you say 'oh I want a flat. I want this. I want that'. But when you've got it you wish you never got. You wish that you were back home. You wish that you never had a kid or whatever because you spend most of your money buying... paint, wallpaper and that lot... I mean if I could've turned the clock back and had some experience of what I was thinking now... I would have waited until I was about 28, I had a good job, money that I know that when I get a flat I'm not gonna have to wait on Social for carpet and all them sorts of thing... (030; 16 at birth; living with a woman friend at 3rd interview).

To a large extent, lack of material resources was responsible for this woman's depression. She said that it was difficult being on her own with her child (her relationship with her child's father having ended). Yet, when asked whether it would be easier if she lived with her child's father, she replied that it would be 'harder when you're with the father...they always wanna go out, and you're the one

that is left there with the baby...’.

Despite her depression, and her feeling that her daughter was difficult to manage, she did not ignore, or neglect her child. Asked whether her relationship with her child had changed over the last year, she explained how she is now able to teach her daughter:

...If Samantha’s awake I sort of like teach her little things, like how to count. ’Cos she can count up to ten now, and say a little bit of her ABC, except when you say ’A’, she jumps to ’D’, and um play with her little games like ring o’ roses and all that lot...

In addition Samantha stayed with her grandmother most weekends so that her mother got a break from her, and Samantha got attention from her aunt and grandmother who loved her. (When Samantha’s development was assessed on a developmental test she scored normally for a child of her age).

After the interview the respondent went to stay at her mother’s house until her gas supply was reconnected. Ironically she had left home in the first place only because she wanted to assert her independence from her mother in terms of looking after her own child. Her mother’s support was, however, crucial to her ability to keep managing to look after herself and her child. She was also fortunate in having an employed, close, childless woman friend who lived with her and provided her with some support.

Both women described above were in miserable circumstances. However, if reported positive feelings towards children are considered, the relationship of the woman described immediately above and her child did not seem worrying in the way that it did for the woman in the penultimate example.

The above two cases were discussed at length because they were unusual. They provide an indication that a minority of the children born to 16 or 17 year old mothers may not fare as well as most children born to teenage women do (the majority of whom are born to 18 and 19 year olds). Most women did not regret having had their children in their teens. Nor were most struggling to manage the care of their children.

One extraordinary case is perhaps worthy of mention here, particularly since it may well have been an instance where the current study proved not to be beneficial. One woman (who was 18 years old when she gave birth and was the only woman in the study to report that she had not known when she became pregnant (see chapter 4) was asked at the second interview whether she had experienced any discrimination because she was a white woman with a black baby. She replied in

very offended tones:

She's not black. She's only dark because she's Italian. My grandmother's got Italian blood and she's taken after her.

The above respondent had previously been very friendly but subsequently refused to participate further in the study so that the six month interview was never completed. She had apparently (and by her own report) been contented with motherhood and very much in love with her child. However, the denial that her daughter, who appeared undeniably black to me (as a black interviewer) raised the possibility that this would later lead to problems.

9.7. Summary

On the whole, women did not report many episodes of illness for themselves over the first two years of their children's lives. Most women were rated as having both negative and positive psychological feelings in the two interviews after birth. Between 6 and 21 months there was a slight diminution in the percentage of women reporting positive feelings and an increase in those reporting negative feelings. Most women in the study were not satisfied with their social lives.

Women's reported experiences of motherhood were mainly positive ones although they said that they disliked some aspects of childcare, like getting up at night and hearing their children crying. However, a few women expressed regrets because they felt that motherhood had adversely affected their lives. There was no one-to-one correspondence between women's feelings about motherhood, and their feelings for their children. Some women expressed negative views about motherhood and yet almost all were consistently positive about their own children over the first 21 months of their children's lives.

CHAPTER 10: Women's Reports of their children's health and socioeconomic circumstances and researcher assessment of the children's developmental status: Findings and discussion

A major focus of research literature on 'teenage mothers' and a source of concern for health and welfare professionals working with mothers under twenty concerns the consequences of early motherhood for the welfare of their children. Children whose mothers give birth before they are twenty years of age are reported to experience a variety of disadvantages (Butler et al., 1981; Carlson et al., 1986). This chapter will use maternal reports to consider the health status and socioeconomic circumstances of the children born to mothers under twenty in this study. It will then examine the children's developmental status assessed on a standardised infant test, the Bayley Scale Mental Development Index, at the time of the third interview.

Although the data presented here comes mainly from maternal reports, it focuses on factors (other than maternal feelings about the children and about motherhood which were explored in the previous chapter) which are likely to have an impact on children's health and welfare.

The difficulties involved in finding appropriate control groups for mothers under twenty (discussed in chapter 2) influenced the decision not to include a comparison group in this study. This chapter does, however, make reference to other studies of mothers and children in order to contextualize the findings.

10.1. Breastfeeding

Breastfeeding has been accorded special status within particular areas of midwifery, health visiting, paediatrics and neonatal psychology. Its nutritional and immunological value to infants together with suggestions that it is highly beneficial to mother-child 'bonding' and relationships (Messenger Davies, 1988) have all led to it being taken for granted that mothers should be encouraged to breastfeed (see for example the Special breastfeeding issue of the Journal for Reproductive and Infant Psychology, 5 (3), 1987 and the commentary articles on that issue in volume 6, issue 4, 1988). Particular concern is often expressed about 'young, unsupported mothers' who are reported to be less likely to breastfeed and to need 'special attention' directed to them (Stein et al., 1987). In this context it is worth examining the feeding experiences of the children born to the teenage women in this study.

In their 1980 survey of infant feeding Martin and Monk (1982) found that two thirds of mothers initially breastfed their infants, but only about a quarter continued to breastfeed for the four months recommended by health professionals. In the current study a greater percentage of women (82%) started breastfeeding than did in the Martin and Monk survey, but a similar proportion continued breastfeeding for four months. Half of those who breastfed, did so for longer than a month, with a quarter of those who ever breastfed continuing for at least four months (see table 10.1 below).

Table 10.1. Breastfeeding rates in the present study

Never breastfed	15 (18%)
Less than two weeks	17 (20%)
One month	18 (21%)
Two months	9 (11%)
Three months	9 (11%)
Four to six months	10 (12%)
Still breastfeeding	7 (8%)

N = 85

This is similar to breastfeeding rates in Oakley's (1979) study where 88% of women initially breastfed. It is also similar to breastfeeding rates in the study of first time mothers (predominantly over twenty years of age) in dual earner households done at the Thomas Coram Research Unit. In that study, 89% of women who anticipated that they would return to work and 92% of those who did not intend to return, breastfed their children at some time. By five months, half the returners had given up breastfeeding, as had 43% of the non-returners.

The percentages of those who breastfed for less than two weeks (generally only while in hospital) was roughly similar across the two studies. Twenty per cent of the mothers in the current study stopped breastfeeding in the first two weeks, compared with 27% of the 'returners', and 26% of the 'non-returners' in the dual earner household study (Brannen, personal communication).

Recent studies of women's experiences of breastfeeding suggest that it is not surprising that many women give up breastfeeding within four months after birth because many encounter difficulties for which they are unprepared (Woollett, 1987; Romito, 1988). In this respect mothers who were under twenty and their children in this study do not seem to differ from those over twenty reported in other studies. Many of the women and children lived in circumstances which were either too cramped to ensure any privacy for breastfeeding or substandard so that the women were likely to spend much of their time away from their living accommodation. These factors have been identified by Sanjack (1988) as ones which make breastfeeding a less convenient choice than bottle feeding. Some of the reduction in breastfeeding over time for this sample may have been a consequence of these unsatisfactory socioeconomic circumstances.

In this study and the study of dual earners mentioned above children were first born, and there is evidence that first born children are more likely to be breastfed than later born children (Woollett, 1987). High rates of breastfeeding probably reflect definite attempts to encourage breastfeeding on the part of nurses and midwives over the last twenty years. Taylor (1988) makes this clear when she says 'As a midwife I am partisan (to the encouragement of breast feeding): my code of professional conduct requires me to be so' (p.259). In the current study, nearly three women in every ten (29%) said that they breastfed because someone had encouraged them to do so. Only two women (2%) reported, however, that they had not felt free to make up their own mind. Nine per cent reported that in retrospect they regretted the way they had chosen to feed their infants when newborn. They included those who had breastfed and those who had bottle fed.

Greater encouragement of breastfeeding by health professionals may partly account for differences in breastfeeding rates found in two studies, one of women who gave birth in 1970, and the other of women who gave birth in 1980. Butler and his colleagues (1981), for example, found that more than 60% of the women who gave birth in one week in 1970 never breastfed and that teenage women were slightly less likely to have breastfed than older women. By way of contrast, Martin and Monk (1982) found that only a third of the mothers they surveyed (who had given birth in 1980) had never breastfed their infants.

10.2. The children's health

In the current study, children's physical health status was assessed by asking the women about; their children's length of stay in hospital in the neonatal period; the immunisations they had; their contact with child health clinics and health visitors and any bouts of illness they had suffered.

Five per cent of the children had to stay in hospital after delivery for longer than 10 days. None of these stayed in because they were poorly. It was either because their mothers had been given Cesarean sections and were not feeling well, or because they had to wait to be rehoused, or to get heating in their accommodation.

Q. How did you feel during the rest of your stay in hospital? (Contact 2, section 3.4a, page 24).

A. The only bad bit was when I could have gone home within three days, but then... they took my stitches out, and it burst open and all my insides started coming out... so I had to wait; I couldn't go home for another eleven days, so I was in there all that time. I just wanted to go home. I hated being in there all that time (540).

By six months of age only one child had been confirmed to have a condition which was going to be

long standing (asthma). Two more were suspected to have such conditions, but these were as yet unconfirmed.

At six months' over a quarter of the children (26%) were reported to have not yet had any illnesses. Half the children (49%) had had six or fewer illnesses, but the remaining quarter had up to nineteen episodes of illness. Most of these were minor coughs and colds, and in general the children's health seemed good. The children who had over 6 conditions were distributed among the four ages of mothers in the study. Butler et al. (1981) found that by five years of age, the children of younger mothers were more likely to have been admitted to hospital for accidents than were children of older mothers, but no more likely to have had sore throats, hay fever, ear discharge, bronchitis, pneumonia or wheeze.

This finding of no increase in rates of admission to hospital for lower respiratory illnesses was surprising. Families where the mothers begin child rearing under the age of 20 years are disproportionately of lower social class and live in less satisfactory environments, factors known to be associated with an increased liability to lower respiratory illness (Butler et al., 1981:32).

At the time that the women in the current study gave birth it was medically recommended that at about three months of age children should start being immunised against polio, diphtheria, pertussis (whooping cough) and tetanus. Butler and his colleagues (1981) found that mothers under twenty were as likely as older mothers to have taken their children to have at least one vaccination. By five years of age, however, younger mothers were less likely to have taken their children for as many immunisations as older mothers had. According to Butler and his colleagues, this difference was largely accounted for by differences in socioeconomic circumstances between the under and over twenties.

Table 10.2. Child immunisations done by six months

Had None	Had Some, Not All	Had All
4 (6%)	17 (24%)	50 (70%)

N = 71

At the six month interview most women (96%) in this study reported that they had taken their children for at least one immunisation (see table 10.2 above). The majority of infants (70%) had all the immunisations they could have done, but nearly a quarter had been taken for some immunisations,

but not all that they could have had. Four infants (6%) had not been taken to have any immunisations. Immunisations were usually missed either because children had been unwell when immunisations were due, or because parents were anxious about possible side effects from whooping cough vaccines and had, therefore, refused it on their children's behalf.

The findings of the Butler et al., (1981) study are not strictly comparable with those of the current study. Butler et al., (1981) present the number of children's immunisations up to five years of age whereas the women in this study were asked about immunisations only when their children were six months old. However, Butler et al., (1981) found that 2.2% of mothers under twenty had never taken their children to be immunised by the time they were five years old (compared with 2.7% of older mothers) and that 72.7% of their children had had four or more immunisations while 76.4% of older mothers had. Although these percentages are very similar, this age difference was a significant one.

Table 10.3. Children's contact with Child Health Services between three and six months

Number of Visits	Visit to CWC	HV Visit
None	10 (13%)	40 (50%)
One	16 (20%)	22 (28%)
Two	12 (15%)	9 (11%)
Three	10 (13%)	4 (5%)
More than three	31 (39%)	5 (6%)
N =	79	80

Key CWC = Child Welfare Clinic; HV = Health Visitor

The women in the current study were asked how many times they had taken their children to be weighed and checked up at child welfare clinics in the three months prior to the second interview. Most children (87%) were reported to have been taken to a clinic at least once between (roughly) three months and six months of age. Half (52%) had been at least once a month, and health visitors had visited half the children at least once between three and six months of age. Only one in ten (11%), however, had been visited three or more times in that period (see table 10.3 above). Butler et al., (1981) conducted an analysis of data on clinic attendances from the Child Health and Education study. They found that age of mother was not significantly correlated with children's clinic attendances but that when parity was taken into account, teenage primiparae were less likely to attend frequently in the first six months after their children were born than were older mothers. Overall 26%

of both mothers under and over twenty had not taken their children to child welfare clinics in their first six months while 35% of mothers under twenty and 34% of older mothers had taken their children to child welfare clinics six times or more. In the study reported here fewer women reported that they had never taken their children to child welfare clinics than did so in the study done by Butler et al. (1981). However, this difference may simply be due to the difference in the time that the children were born (1970 of the mid 1980s).

Between six and 21 months of age, the children in the current study were reported to have developed more chronic health conditions than had been evident in their first six months. At 21 months, eight children were reported to have long standing health conditions. These consisted mainly of asthma, bronchitis, eczema and strabismus. Also at 21 months one mother whose daughter had not yet started to talk was waiting for her to have hearing tests.

Table 10.4: Children's reported bouts of illness in the previous six months

	None	1-3	4-6	7-10	11+	N
6 months	6 (8%)	24 (31%)	29 (38%)	9 (12%)	9 12%	77
21 months	8 (13%)	20 (31%)	17 (27%)	10 (16%)	9 14%	64

Most 21 month olds in the study (88%) had some bouts of illness in the six months before their mothers were interviewed (see table 10.4 above). The maximum number of illnesses mentioned was 20 (one child). Unlike the situation at the six month interview, there was a discernible trend for the number of illnesses children had to be related to the age of their mothers. None of the children whose mothers had been 19 years old at birth had more than ten illnesses in the last six months; none whose mothers had been 18 years old at birth had more than 14. Only the children of women who had been 16 or 17 years of age at when they gave birth had been ill more than 14 times in the last six months, and a quarter of them had been. In their analyses of child health measures Butler and his colleagues did not find differences between younger mothers of any age and older mothers. However, they concentrated mainly on conditions requiring hospital admission or bronchitis and these were less commonly reported for this sample.

The illnesses reported in this study were mainly coughs, colds, raised temperatures, asthma, eczema, loss of appetite, diarrhoea and vomiting as well as 'childhood ailments' like mumps and measles. Accidents were mainly falls (which in one case resulted in a broken arm) or fingers and toes being caught in doors. In one case a father knelt on his daughter's foot while playing on the floor with her

and its rapid swelling led her parents to take her to a casualty department. However, the foot was not seriously injured. Two children suffered minor burns from irons. Such accidents are more likely to occur where living accommodation is unsatisfactory and cramped and safety equipment cannot be afforded (Mayall, 1986). The most serious illness reported (by an 18 year old who lived with her mother) was meningitis.

Most mothers considered that their children's health was the same as, or better than other children's of the same age. However, sixteen and seventeen year olds were more likely than 18 and 19 year olds to say that their children's health was worse than other children's. If their reports are compared with those of 18 and 19 year olds, this is, of course, an accurate assessment if mothers were classifying bouts of illness in similar ways. Younger mothers were also more likely than older ones to report themselves to be worried about their children's health, behaviour or development. Two thirds of those who had been 16 at their children's birth reported such a worry, compared with just over half of the other mothers.

It is unfortunately not possible to disentangle whether children with the youngest mothers in this study were the most ill, or whether differences in reporting illnesses were mainly due to differences in maternal perception or confidence.

The design of this study does not allow comparisons with reports from older mothers about their children's health. The British study that provides most information on this (Butler et al., 1981) was of a sample of women who gave birth in 1970, nearly a decade and a half before the current sample gave birth. However, they found no maternal age related differences in child health.

10.3. Caregiving arrangements

Popular stereotypes of mothers in this age group suggest that they are likely to leave their children frequently with a succession of caregivers. In late pregnancy women were asked their opinions about who should be involved generally in looking after children. Most said that mothers, or mothers and fathers should have primary responsibility for bringing up their children.

Ninety eight per cent said they felt that fathers should contribute to the upbringing of their children. (Eighty seven per cent felt that this contribution should be of both physical care, and money, while 11% thought it should be only a financial contribution). By comparison 94% said they thought that their own parents should not contribute to children's upbringing. However, nearly three fifths (58%) did expect their own parents to be involved in their children's upbringing, while two thirds (66%) expected their children's fathers to be. Only 12% expected the child's father's parents to be so involved. Women appeared to be espousing views which fit normative expectations that a nuclear family grouping will take full responsibility for its children, although they simultaneously recognised

that many of their own situations did not conform with it.

Table 10.5: Whether anyone else looked after child in the last week at 21 months

	Never	1-3	4-6 times	7 + times
Overall	21 (32%)	25 (39%)	12 (19%)	7 (11%)
Child's Father	53 (82%)	10 (15%)	2 (3%)	----
Mother's Relatives	41 (63%)	15 (23%)	5 (8%)	4 (6%)
Father's Relatives	59 (91%)	5 (8%)	1 (2%)	----
Friend	57 (88%)	8 (12%)	----	----
Nursery	59 (91%)	1 (2%)	4 (6%)	1 (2%)
Other	63 (97%)	1 (2%)	1 (2%)	----

N = 65

At the third interview women were asked whether in the last week anyone had looked after their children while they were not there (see table 10.5 above). For a third of the sample (32%), the answer was 'no'. For a further 39% someone had looked after their children three times or less in the previous week. Eleven per cent of the children in the study had experienced between 7 and 11 episodes of childcare by someone other than their mother in the last week. These children's mothers were either employed, or studying, and in some instances, care was for an hour or two, so that women could go shopping. Two thirds of women (66%) said that last week's pattern of childcare was typical.

The data presented in table 10.5 (above) did not quite accord with the women's responses to questions about who regularly helped them with childcare tasks since more than a third (37%, 23) said that male partners regularly helped them with childcare tasks (cf 18%, 12 who male partners had helped in the last week) and only just over a quarter said that relatives helped regularly (27%, 17), compared with 37% (24) who said that relatives had helped in the last week.

At the six month interview the nature of childcare help was investigated by asking the women whether

anyone had helped at least once with specific tasks in the last week. The women's own relatives were the most consistent source of help with childcare tasks. (See table 10.6 below).

Table 10.6. People other than the respondent who had done any childcare tasks in the last week at six months

	Male partner	Relatives	Friends	Others	N =
Bathing	17 (26%)	20 (30%)	6 (9%)	5 (8%)	66
Nappies	25 (37%)	36 (52%)	8 (12%)	6 (9%)	67
Feeding	24 (35%)	38 (56%)	11 (16%)	4 (6%)	68
Childcare	11 (16%)	30 (45%)	12 (18%)	12(18%)*	67

*This includes 12 of the children's fathers' relatives and 2 day care arrangements.

Percentages do not add up to 100 because more than one person could have done a task.

Most women had primary responsibility for caring for their toddlers themselves. Some women recognised that young women are stereotyped as frequently leaving their children with other people and, as a consequence, took particular pride in not asking for childcare help. Their answers to questions about how they were coping with childcare sometimes seemed designed to pre-empt possible criticisms that they did often leave their children with other people.

Q. How do you feel you are coping as a mother? (section. 7.3c, page 72, 2nd interview).

A. I think I cope quite well. I don't leave him wi' anybody. (522; 16 year old at birth. Cohabiting; 2nd interview; 6 months after birth).

Some women's mothers were crucially important in looking after children when, for one reason or another, it was difficult for women to manage. For example two women's mothers kept their children while the women were depressed. In both cases this allowed the women to move to their own flats and settle in before resuming responsibility for their children.

Q. Does anybody look after her regularly when you are not there? (Section 10.5, p. 138, 2nd interview).

A. My mum looked after her for a little while (about two months) when I was feeling depressed (081; married woman living with her husband; 2nd contact).

A. My mum had him for one and a half months when I first moved into my flat. I was round there **every** day, but she had him at night, and she did most of the looking after (585; single woman living alone whose mother died just after the second interview).

At the third interview six relatives (mostly mothers) who were unemployed provided primary daycare for their grandchildren while their daughters were employed or studying. One woman (141) who was sixteen and still at school when her son was born had a mother who had actually left paid employment so that she could care for her grandchild (although she had initially insisted that her daughter should have an abortion). Another mother had taken her grandson to stay with her after she moved out of London so that her daughter could look for, and get settled into employment before resuming responsibility for childcare. When they were available many mothers were prepared to provide childcare help, and some routinely cared for their daughter's child while their daughters went out or did shopping. Male partners provided ~~less~~ childcare help ^{than did mothers}. Married, working class women in Boulton's (1983) study were also dependent on female relatives' (often mothers) provision of childcare help. 'When female relatives were available, child care remained a female activity and men were once again excused' (Boulton, 1983:157).

Children did not experience a stream of caregivers. Most women looked after their own children most of the time, and where they did not, it was usually one of the woman's female relatives who provided care. Relatives were perceived to be the first alternative source of childcare.

10.4. Material provision for the children.

The economic circumstances in which children live is an important influence on how children fare. Given that most women in this study had low household incomes, women were asked a series of questions about whether they received or would accept material help for goods given for their children; whether their accommodation was always warm enough for their children; their attitudes to spending money on themselves and whether they felt they had everything that they and their children needed.

Just as recognition of the ways in which 'young mothers' are stigmatised led some women in the Thomas Coram study to feel they should not ask other people to look after their children, so it also influenced the way in which they dressed their children. There was a marked reluctance from many to accept second hand clothes for children, even when couples were very poor.

Many women felt that the adequacy of the care they provided for their children would be assessed on the basis of children's appearance. It was, therefore, important to keep children clean and neatly dressed. The women's views received some confirmation from professionals' accounts. The

presentation of children in terms of the ways in which they were dressed and their cleanliness was frequently mentioned as an indicator of good mothering by the health professionals with whom early motherhood was discussed informally during the course of this research project.

Although six months after birth half the sample (52%) said that they did get some baby clothes handed down from other people, their spontaneous accounts when asked about such help indicated that they either rejected hand down children's clothes or were regretful that they were obliged to accept things other children had worn. There was a strong feeling that, particularly for a first child, new clothes were preferable.

Q. Would you be prepared to accept hand downs?

A. No I don't... really like passed on things... Especially as it's my first baby I like everything new (532; 19 year old single woman; 1st contact).

A. I don't really think so. I don't want people to think we can't afford things for him (521; 2nd contact; married woman).

The desire to dress children in the best available clothing indicated women's desire to project themselves as good mothers who could provide well for their children as well as their desire to give their children 'the best'.

Despite the straitened financial circumstances in which the women lived, only just over a quarter of the sample (27%) had tried to economise on heating costs when their children were six months old. Those who had done so had invariably tried to make economies in ways that did not involve risking making the baby cold. A favoured strategy was to heat only one room, and to keep the baby in that room all the time.

Q. Has the flat always been warm enough for him? (Section 11.12.3, p.180, 2nd interview)

A. Like... I used to put him with me and we used to stay in my room all day. It used to be a little warm for him. I used to take drink in there, biscuits in there, sandwiches in there and everything... I hardly used to go out as well... Like when we stayed up at my dad's in December it was so nice and warm I didn't want to come home. I says 'Dad, I'm not going yet'. 'Cos it's central heating. When you go in there the heat just hits you (Single woman, 17 years old at birth at 6 months).

Table 10.7: Whether accommodation was always warm enough for the children in their first six months

Always warm enough	Sometimes too cold
36 (58%)	26 (42%)

N = 62

More than two fifths of women (42%) expressed concern that their accommodation was sometimes not warm enough for their children (see table 10.7 above). This was particularly the case for women who lived in their own flats and, hence, were responsible for paying their own heating bills. In the above example the woman's council flat was not centrally heated, and there was a two inch gap between the glazing and the window frame throughout the flat. The gap was designed for ventilation, but it also allowed cold air to circulate. When her child was twenty one months old, the above woman was still in the same flat, and the windows were still not sealed. Although she had an electric heater on during the third interview, the room was too cold for comfort.

Table 10.8: Whether, at six months, mothers felt differently than before birth about spending money on themselves

No change	More negative	More positive	Other
15 (29%)	26 (51%)	---	10 (20%)

N = 51

Most women perceived their children to have first priority in having things bought for them from household resources. Half the women asked reported that since having their children, they felt more negative about spending money on themselves (see table 10.8 above). Nearly a third (29%) claimed that having a child had not changed the way they felt about spending money on themselves. A fifth of the women gave accounts which indicated that they felt differently because their responsibilities had changed but that they did not have negative feelings about spending money on themselves.

When asked whether there were any items they needed for either themselves or their children (Section 7.6, page 66 of the third interview), the women's responses indicated that they gave more priority to their children's needs than to their own in circumstances where material resources were scarce.

I think I should spend it on her more. (Why?) I think I have an obligation to buy her things

first. She comes first anyway whatever happens. That's what I think. (038; 17 year old at birth; 3rd contact, married woman).

If I need anything for Tommy then I'll go short myself (504; single woman living alone at 3rd contact).

I've went without plenty. I go without things, but Angela never. I always buy her things. Even if sometimes that leaves me with no money, but I always get her it because I wouldn't have her having any less than any other kid (536; 3rd round, married woman).

No, I mostly go short... Once a week I try and buy him something - if I try - I buy him like sleeping clothes and vests and like track suits and that - jeans, and like sometimes I'm in the same clothes (540; 3rd round single woman).

Table 10.9: Percentage of women who said that they would like things they did not have

	At six months	At twenty one months
For child	40 (61%)	37 (58%) [Includes things desired for both mother and child]
For self	53 (82%)	
N =	66	64

The discrepancy between answers at the two time points in table 10.9 above can probably be accounted for by differences in the way in which the question was posed. The question of which material things mothers wanted to be able to get was probed specifically for mother and for child at the second interview, but left more general at the third interview.

Nonetheless, approximately three fifths of the women said that there were things they wanted but did not have (because money was scarce) at both six months and 21 months after birth (see table 10.9 above). It was probably because women were more likely to spend their limited money on their children than on themselves (see quotes above), that fewer felt that there were things they would like to buy for the baby rather than themselves six months after birth (61% cf 82%).

Given the poverty in which many women lived, it is not surprising that some were concerned that even 'going short' themselves was not sufficient to provide things they felt their children needed or that they would have liked to be able to provide. A third (22, 33%) of those asked the question at the second interview said that they would have liked to be able to buy more clothes for their children while just over a quarter (18, 27%) wanted to be able to buy more toys.

Q. Are there things you feel you need for (child) or yourself? (Section 7.6a, page 66, 3rd interview).

A. Um clothes. I'd like to get her some more things which I can't do. (022, 3rd round; owner occupier married woman).

A. ...You know there's food and you know she's got adequate clothing. Um... I suppose just wants really. Not what we need 'cos we do have what we need. It's just a matter of what we want or what we see in the shop and what we would like (048; single woman who wanted more toys for her child; 3rd contact)

It emerged from the women's accounts that many perceived child benefit payments to be children's own money rather than part of general income to be spent on household needs. It was, therefore, either used to buy things for children or saved for them.

When I get her money, that is her money, so it's spent on her (016; single woman; 3rd contact).

10.5. Beliefs about Influences on children's development

The things that many women reported wanting for their children indicated that they had clear ideas about what would help their children make good developmental progress. Fry (1986) suggests that 'young mothers' are deficient in the knowledge of child development which is necessary to successful child rearing. Formal knowledge of child development was not assessed in this study and information about whether the sample had such knowledge is not available (although 'child development' had been on the curriculum at some of their schools). However, they did use currently circulating ideas (gained mainly from the media about the importance of healthy diets, and of stimulating children's cognitive development) to guide their assessments of what their children needed, or what they would ideally like to provide for them. The responses below are in answers to questions on material needs in the second and third interviews (sections 11.13 and 11-14, pages 182-184, 2nd interview and section 7.6, page 66, 3rd contact).

She does need some more toys, some more learning toys, and we'll probably get her some later on as well (062; 18 year old at birth, married woman).

She needs more toys. She's a lot active... As soon as I can afford it - I'll get her some (527; single woman; 2nd contact).

Um I like him to have all like learning toys you know. Nothing just to play with you know. I like him to have a reason - like his bricks. He can count 'em and they've got colours and things with numbers on and colours or shapes. I like him to have learning toys rather than things that just sit and look at you, and I can't afford that (187; 3rd contact; cohabiting woman)

Yeah, we don't sort of starve. We manage. As long as he gets a decent meal every night that's all I'm worried about. That's why Ian (boyfriend) tends to buy stuff for me because I'll go out and spend money and make sure he gets the proper vegetables and the proper dinner, and I'll have a sandwich or something like that 'cos his health is more important to me (585; single woman; 3rd contact).

Well for Kelly not to be able to eat the right foods, you know we can only sort of live on egg and chips some nights you know, whereas it's bad for her - well it's bad for us as well you know. I mean they're saying on the telly you gotta eat the right sorts of foods, but you just can't afford it on their money (supplementary benefit) can you? That's the only thing I'm worried about (129 3rd contact; married woman).

Table 10.10: Reported influences, at six months, on children's health and happiness

People who bring children up	Basic character	Both	Don't Know	Total
36 (57%)	15 (24%)	10 (16%)	2 (3%)	63 (100%)

Six months after birth women were asked what they thought were the most important influences on children's health and happiness (see table 10.10 above). The majority considered it most important to provide children with a settled home environment. Three fifths (57%) said the most important influence was the way the child was brought up, while only 16% thought that the child's own character was most important and a further 16% said that both were important. Most of the women thus considered that they had an important part to play in making their children healthy and happy. Statements about the atmosphere created in their homes and the provision of healthy food are included in 'people who bring children up' in table 10.10 (above). Such beliefs are, of course, similar to those held by older women (see Boulton, 1983 and Oakley, 1979, for example). Wasserman et al., (1990) found, for example, that 'teen mothers did not differ from older mothers in child-rearing attitudes, a finding that corroborates the results of other studies' (p.576). The following quote comes from section 8.16.f on page 116 of the second interview).

Q. What do you think affects the way that children grow up?

A. I think it's the atmosphere they're brought up in really. I suppose it could be in their genes, but I think it's the atmosphere they're brought up. That's what does it really.

Q. What about so that the child grows up happy?

A. Just to make him happy. Like if you've got family arguments try and keep it away from the child. Don't argue in front of him and fight - don't do it at all, but if you have to don't do it in front of the kids.

Q. What about so he grows up to be healthy?

A. Give him all the fresh food, vitamins that he needs.

(005; 2nd contact; cohabiting woman, 19 years old at birth).

From informal observations made during interviews it did seem that some mothers had reason to be concerned that they were not providing 'healthy food' for their children. Several women simply did not seem to have the wherewithal to provide three nutritious meals a day for their children. Children were sometimes not fed during interviews which lasted from late morning to late afternoon. In some cases, relatively cheap and filling, but not nutritious, foods were provided at lunch time. In 1988 Lyn Durward of the pressure group the Maternity Alliance costed the kind of diet recommended for pregnant women by hospital dietitians. She reported that such a diet cost more than half of the Income Support women under 25 receive. It is thus not surprising that once they have their children many young women find it difficult to feed them as they would ideally like to. Some children may, therefore, be malnourished (even if not hungry) not because their mothers are ignorant of their nutritional needs, but because they are too poor to provide for those needs.

10.6. Further children

Mothers who were under twenty years of age have been found in some north American countries to have more children than average and to have them closely spaced (see for example Balakrishnan et al., 1988; Bolton, 1980) although evidence for this has never been clear cut in Britain (Bury, 1984). Some writers suggest that the more children there are in a household, the less likely children are to do well intellectually because they have diminished access to resources such as parental time and attention (Osborn and Milbank, 1987). Recent literature from north America suggests that women who start childbearing before they are twenty, are now not very likely to go on to have more children than average (Furstenberg et al., 1987; Balakrishnan et al., 1988). But Furstenberg et al. (1987) suggest that births to this age group of mothers may be closely spaced. The data from the present study is too short term to establish whether women ended up having more children than average. But it can indicate whether second children were conceived or born within two years of the first.

Table 10.11: Further pregnancies by 21 months

None	46 (69%)
Currently pregnant	8 (12%)
Miscarried	3 (4%)
Has second child	10 (15%)
Total who have been pregnant again	21 (31%)

N = 67

A third of those interviewed (31%, 21) had become pregnant again in the 21 months following their first child's birth (see table 10.11 above). All had been pregnant only once more. Eight (12% of the sample) were still pregnant, ten (15%) already had a second child, and three had miscarried. Of the ten who had a second child, three had given birth when their first child was 12 months old, five had given birth when their first child was fourteen or fifteen months, and the remaining two had been born at 16 months and 18 months.

More than seven in every ten (73%) of the children were, therefore, going to be their mother's only children until they were at least two and a half years old. Thus most women were not having second children very soon after their first births. Nor were they particularly different from older women in their spacing of second births (see, for example, Brannen and Moss, 1988). OPCS figures for 1988 indicate that the median interval between first and second births to married women was 32 months (CSO, 1992) which is much longer than that waited by the third of women who had been pregnant again in the current study. However, birth intervals are related to social class. In 1988 women married to men who were from the semi-skilled and unskilled manual social classes waited a median interval of 18 months between marriage and first birth. Women married to men from the professional and intermediate classes, however, waited a median interval of 34 months (CSO, 1992). The age of the women in the current study may well, therefore, be less important than social class with regard to the spacing of births.

How did this compare with women's projected intentions in late pregnancy? Most women (70%) had reported that they wanted to have further children and knew how many they wanted to have (see table 10.12 below).

Table 10.12. In late pregnancy, number of further children wanted

Regardless of child's sex					Dependent on child's sex			Don't Know
None	One	Two	Three	Four	One	Two	3 or 4	
5	11	9	5	1	5	2	2	11
10%	22%	18%	10%	2%	10%	4%	4%	22%

N = 51

Most of those who were asked and who said that they wanted to have further children said they had wanted to have them when their first children were two years old or later. Therefore, 74% had kept to their personal life course timetable on this. (See table 10.13 below). This does not, therefore, fit with the findings from Furstenberg et al.'s (1987) study which reported that their sample of 'teenage mothers' had generally given birth to second children before they had said that they would.

Table 10.13. In late pregnancy, when wanted next child

First child's age in years						
One	Two	Three	Four	Five	Six	Don't Know
1 (2%)	8 (20%)	9 (22%)	5 (12%)	4 (10%)	4 (10%)	10 (24%)

N = 41

10.7. Children's cognitive development

A major reason for concern about the children born to 'adolescent mothers' is the fear that their educational attainment will be poorer than that of children born to older mothers. Various studies have found that USA children born to mothers who are under twenty, do not do as well at the end of their school careers as their peers who were born to older mothers (Card et al., 1981; Furstenberg et al., 1987). While studies on older children born when their mothers were less than twenty years older rely on children's scholastic achievement, studies of preschool children generally use standardised tests. Children born to teenage women have been found in many studies to do less well on standardised cognitive tests than those born to older women (Butler et al., 1981 and Hall and Pawlby, 1981 in Britain; Carlson et al., 1986 in the USA). However, not all studies report this finding. For example, Chambers and Grantham-McGregor (1985) found that, for a middle class Jamaican sample, age of mother made no difference to children's scores on the Griffiths Mental Development

Scales.

Cognitive test scores do not, however, remain consistent from infancy to adulthood. It is highly likely that, given in infancy, developmental tests do not give a useful indication of later educational achievement (Messick, 1983).

The assessment of children is also rendered problematic by the occurrence of rapid changes, especially during the early years. It is difficult to assess a child's characteristics adequately at a given point in time... if those characteristics are in effect moving targets... there may be instability of scores even over the short run (Messick, 1983: 479).

If a child does poorly on an infant developmental test, and poorly later at school, the later poor performance may not be related to the earlier poor one. This is particularly so, since language has not yet developed in infancy and many later developmental tests (and certainly school performance) are heavily dependent on linguistic skill. In addition young children are difficult to test:

In the assessment of young children, many problems that are ordinarily handled by the standardization of instructions and procedures and by reliance on the past testing experience and expectations of the respondents become highly magnified by virtue of the limited experience and understanding of many youngsters in coping with novel task demands. These include problems of establishing rapport and motivation; of ensuring that instructions are well understood; of maintaining attention; and, of coping with boredom, distraction, and fatigue. (Messick, 1983: 479).

Indeed there may be poor test-retest reliability for infants tested on the Bayley Scales (Horner, 1980). The data from the Bayley test are used in the current study to give information about children's developmental status from a source other than maternal report and to provide an indication of the children's cognitive developmental status, but cannot be considered predictive of their later educational outcome.

10.7.1. Results from the Mental Development Index of the Bayley Scales of Infant Development

10.7.1.1. The circumstances in which the testing occurred

Since the current sample of mothers under twenty was difficult to find at home and often broke appointments, it was decided to conduct Bayley tests in women's homes at any time convenient to the mother around the period of the third interview. Using a middle class sample of infants, Horner (1980) found no differences in children's test scores depending on whether they were tested in the laboratory or in their own homes. However, the circumstances in which the children in this study were

tested were almost certainly more distracting than those in the homes used by Horner. All the infants in Horner's study came from middle class homes and had tables, in rooms apparently free from distractions, at which children could be tested.

At 21 months many of the women and children in the study were living in impoverished circumstances. Sometimes space was overcrowded, and sometimes furniture was sparse. As a result the circumstances in which the Bayley tests were conducted were often far from ideal and not standardised as recommended in the Bayley manual. For this reason it was decided to note the circumstances in which the Bayley scores occurred, in order to collect some data on whether the environments in which the tests took place appeared to be distracting to the children.

Table 10.14. Distractions during the administration of the Bayley test

	Not distracting	Partly affected	Greatly affected
People	46 (74%)	10 (16%)	6 (10%)
Physical environ (eg TVs, crowded rooms etc.)	38 (61%)	20 (32%)	4 (7%)
Child co-operate	26 (42%)	20 (32%)	16 (26%)
Child State	45 (73%)	12 (19%)	5 (8%)
React to tester	44 (71%)	16 (26%)	2 (3%)
English comprehension	55 (89%)	5 (8%)	2 (3%)

N = 62

In nearly two fifths of the testing situations (39%) the physical environment was judged to be distracting, at least partly, for the child. The distraction was from televisions, stereos and radios (two of which were sometimes on simultaneously). The volume of televisions and audio equipment would sometimes be turned down low, but there was still a lot of auditory distraction. Sometimes the distraction came from a variety of items which had to be within the child's view because there was nowhere else to put them. It also sometimes came from the sparseness of furniture, because it was difficult to find anywhere on which to balance the case containing the test items and hence children were distracted by other items in the Bayley box.

Nearly two fifths of the children (39%) had two or more adults present during the test. A quarter (26%) had another child present. In 26% of the testing situations, the tester rated people as a distraction to the child. Other people could not simply be sent to another room, since even when there was another room available, it was often not warm enough, or cramped or uncomfortable.

The majority of children (82%) only heard English spoken in their home, but for a minority, the Bayley instructions must have been rather bemusing, and in some cases it was necessary to rely heavily on mothers' translations of instructions to children. In addition to this many children were rated as being uncooperative during the test. Three fifths (58%) were rated as uncooperative, although only 28% were rated as being tired, ill or upset, and the majority (71%) were friendly to the tester.

All of these factors contributed to making the circumstances in which children were tested non-standard, and different from those recommended by Bayley (1969). However, testers felt that relatively few children seemed to be prevented by these distractions from doing the test adequately. Other people were considered to have distracted children in such a way that it interfered with the test in only 10% of tests. The physical environment was thought to disrupt the test in only 7% of cases. However more than a quarter of the children (26%) were felt to be uncooperative in a way that distracted them somewhat from the test (see table 10.14 above).

Distractions sometimes lengthened the testing time considerably (see table 10.14 above). Tests ranged in length from 20 minutes to 95 minutes, with 80% of the tests lasting 40 minutes, or more and thus being somewhat taxing of young children's attention span. Ideally children would have been tested on another occasion in those instances where it took a long time to present the test items. It was, however, very difficult to find women and their children at home, and many interviews took several visits to arrange. It was thus often felt undesirable to leave the assessment procedure for a further occasion.

10.7.1.2. Children's test scores

Table 10.15: Mean, mode, standard deviation and range in Bayley test scores

Mean	114.5
Mode	116 (N = 6)
SD	20
Range	61-150

The standardised norm on the Bayley test (as on other IQ tests) is 100 with one standard deviation being 15 score points. The mean and median scores for children in this study was 114, with a mode of 116 (6 children). Scores ranged from 61 (one child) to the ceiling of 150 (five children) (see table 10.15 above). Four fifths of the sample (79%) scored above the standardised norm of 100.

The high scores (in comparison with the standardised norm) obtained by the sample are not unusual since average infant developmental test scores in reported studies are currently often higher than 100. Thus, high Bayley Scales are now being obtained in samples subject to disadvantage. For example, a study of Haitian-American women living in impoverished circumstances found that those living in urban settings with access to health and social services had children whose average Bayley Mental Developmental Index was 110 (Widmayer et al., 1990). Such an increase perhaps partly reflects the common nature (relative to the 1960s when the test was standardised), and hence familiarity of items such as clocks which are part of the recognition tasks on the Bayley test. A further explanation could be that with attrition, it was mainly children who were developing well cognitively who remained in the current study. However, the children of mothers who are under twenty have been found to be developing well in some other studies. For example, Brickner Rothenberg and Varga (1981) found that the children of 'adolescent mothers' scored better than those of older mothers on the Denver Development Screening Test.

A series of analyses of variance (ANOVA) were conducted to establish which independent variables were significantly associated with children's Mental Development Index (MDI) scores. Few such associations were found. Non significant relationships were found for the composition of women's households, whether they had had subsequent pregnancies and births, their employment status and sources of income and the ways in which mothers perceived their children. Of these, the only one that approaches significance is maternal perception of how her child compares developmentally with other children of the same age ($p < 0.06$). If mothers considered that their children were not developing as well as other children of the same age, their children were likely to have lower (but not significantly so) MDI scores.

Furstenberg et al. (1987) also found that whether women who had given birth at 17 years were single, cohabiting, living alone or with other people made no difference to children's test scores at five years.

In the current study neither age of mother nor colour of child were statistically correlated with MDI scores in this study. This is at variance with the findings from the Child Health and Education Study. Butler and his colleagues (1981) found that, when aged five years, children with mothers who were under 17 years when they were born, scored less well on developmental tests (Draw a Man, Copying Designs and English Picture Vocabulary Tests) than children born to 18 and 19 year olds. In the

study reported here, however, the children's scores were not significantly related to whether their mothers were younger or older teenage women at birth.

10.7.2. Independent variables which influenced children's Developmental Quotient on the Mental Development Index (MDI)

There was a significant difference between MDI scores for those whose children were reported by their mothers to be shy and those who were not [$F(2,59) = 3.75, p = 0.03$]. 'Shy' children scored less well than 'friendly' children; the means being 88 and 115 respectively, a difference of 27 scale points. However, only six children (10%) were reported to be always shy. Those children who were said to be sometimes shy ($N = 22, 35\%$) had the same mean score (115) as did those who were reported to be friendly ($N = 34, 55\%$). Correlations between children's reported shyness and a range of other independent variables were examined using the gamma statistic, but none proved significant.

It appeared that four other independent variables were associated with MDI test scores (see table 10.16 below). These were; mothers positive feelings about herself; tester ratings of children's co-operativeness in the test situation; gender and satisfaction with motherhood. The direction of these differences were as follows. Mothers who were rated lower on positive psychological state (see chapter 9) had children who scored lower on the Bayley test (a mean of 103.8 cf 121). Those children who were rated as uncooperative in the Bayley test did less well than children who were rated co-operative (with means of 101.5 and 124.7). Boys did less well than girls (a mean of 105.7 cf 122.2), and children whose mothers (on the basis of a range of interview answers) were rated as gaining little satisfaction from motherhood did less well than those whose mothers were rated as satisfied with motherhood (with a mean of 104.1 cf 125.9). The biggest of these differences was between those children rated as uncooperative and those rated co-operative (a mean difference of 23.2 scale points).

Table 10.16: MDI scores related to four independent variables

Variable	Mean	S.D	N
<u>Mothers psychological state (positive feelings for self)</u>			
low	103.8	26.6	12
slight	115.6	16.1	28
moderate	119.0	23.1	14
high	121.0	14.1	8
<u>Child co-operativeness</u>			
poor	101.5	19.0	16
moderate	111.6	19.9	20
good	124.7	16.1	26
<u>Child gender</u>			
Boys	105.7	18.5	29
Girls	122.2	18.8	33
<u>Satisfaction with motherhood</u>			
low	---	---	0
slight	104.1	29.1	9
moderate	114.0	18.6	43
good	125.9	15.8	10

Associations between the above independent, ordered categorical variables were tested by the application of the gamma statistic to contingency tables. Child co-operation and child gender were significantly associated ($\gamma = 0.43, p < 0.01$) and the association between mothers' psychological state and satisfaction with motherhood approached significance ($\gamma = 0.28, p = 0.06$). There were no other significant associations between the independent variables. The independent effects of these variables were assessed by entering MDI scores into a regression analysis against the independent variables of child gender, child co-operation, mother's psychological state and satisfaction with motherhood. The multiple correlation coefficient thus gained was 0.63 ($R^2 = 0.39$) [$F(4,56) = 9.00, p < 0.001$]. Children who were more co-operative had higher MDI scores ($t = 3.22,$

$p < 0.005$) and girls scored more highly than boys ($t = 2.64, p < 0.02$). The more satisfied women reported themselves to be with motherhood, the higher were their children's MDI scores ($t = 2.03, p < 0.05$). Mothers' psychological state did not produce a significant effect once these variables had been allowed for. Adding other independent variables (such as maternal age and household organisation) into the regression did not result in a significant increment in the variance accounted for.

The interpretation of these differences is not straightforward. If, for example, children are felt to have been uncooperative in the testing situation it could be either that they did not do themselves justice on the test because they are interested in other things, or simply do not wish to perform. Alternatively it could be that they were uncooperative because they could not do the test, and were bored. If testers could not get children to respond in the test situation, they may well have rated children as uncooperative when in reality they could not do the tasks instructed, or had not understood what was required of them. Birns and Golden (1972) found a similar relationship between co-operation and developmental quotients for two year olds.

Boys (who did not score as well as girls) were more likely to be rated uncooperative than girls. The difference in boys and girls scores cannot all be accounted for by differences in co-operation since both variables had independent effects on Bayley scores. Research on the development of language consistently indicates that girls initially make faster progress in language development than do boys (Lloyd and Duveen, 1989). Since the Bayley Scales include language comprehension items at 21 months, the better scores of the girls in the current study may reflect their greater precocity with regard to language. Bayley (1965) did not find gender effects in her analyses of developmental assessments but Chambers and Grantham-McGregor (1986) did find gender effects for middle class Jamaican children aged 6-60 months who were tested on the Griffiths Mental Development Scales. Whether children were reported to be friendly or shy was not significantly related to child gender ($\text{Gamma} = -0.05, p = 0.41$).

With regard to 'satisfaction with motherhood' could it be that those mothers who were not satisfied with motherhood did not enjoy being with their children? This explanation seems unlikely given that only one mother reported that there was nothing she enjoyed about her child, and most found few things about their children irritating. A possible explanation could be that women who were rated as not being satisfied with motherhood were less responsive to their children. Responsiveness to children has been found in another study to be correlated with MDI scores at 21 months (Crockenberg, 1983). However, this study cannot be definitive about the reasons for this correlation.

Butler et al. (1981) found that overcrowding and frequent household moves were correlated with

children's test scores at 5 years of age and explained some of the differences between children born to teenagers and those born to older women. However, children in the current study were more likely than not to have experienced at least one household move. Household composition was not correlated with test score.

The four factors found to be correlated with children's test scores (child shyness, child co-operativeness, gender and satisfaction with motherhood) do not necessarily operate in isolation. A mother who is dissatisfied with the conditions in which she has to mother her child may also have a child who is rated as uncooperative in the test situation and some of those children will also be boys.

The picture that emerges is thus a hazy one. Most children assessed on the Bayley Scales of Infant development, were developing well. There were indications that children's co-operativeness with the tester, gender and maternal feelings about motherhood were all related to children's test performance. It is less clear whether there was a causative relationship between these independent variables and children's test scores. While it might be expected that children's co-operativeness would influence test performance, it is more difficult to establish how gender and mothers' feelings about motherhood affect children's performance on developmental tests.

10.8. Summary

Most women in this study (two thirds) had someone (usually a female relative) who would, and sometimes did, look after their children for a couple of hours each week. But the women themselves had the major responsibility for childcare.

Many women reported that they would have liked to be able to afford more educational toys, clothes and, sometimes, more nutritious food for their children. Most women gave priority to their children's material needs in preference to their own. Many reported that they 'went short' in order to buy things for their children.

On the whole, the women in the current study were familiar with popular medical and psychological thinking about children's needs. They reported that children needed emotional nurturance, nutritious food and stimulating play in order to develop into happy, healthy, children. On the whole the women were satisfied with motherhood. Only one woman reported that she regretted having had a child when she did while a second woman was exceptional in being very negative about her child.

Twenty one months after birth children's developmental status was assessed using the Bayley Scales of Infant Development. The circumstances in which many children were tested were not optimal

because of the number of distracting factors in the children's homes (where tests were conducted). Most children, however, scored above the standardised norm which, however, may well be outdated. Four independent variables were found to be correlate with children's test scores. These were, whether or not children were reported to be shy (only six children were reported to be shy), the children's co-operativeness in the test situation, gender and maternal satisfaction with motherhood. Children who were rated by testers as uncooperative in the test situation, boys and those whose mothers were less satisfied with motherhood did less well than those who were rated as co-operative, girls and those whose mothers were more satisfied with motherhood. These factors are, however, not necessarily causative of better or worse test performance.

CHAPTER 11: Women's employment and education from pregnancy to 21 months after birth:

Findings and discussion

This chapter considers whether motherhood appears to have limited the educational and employment opportunities open to the women in this study who gave birth before they were twenty.

11.1. Employment and education from pregnancy to six months after birth

Before they became pregnant many women in this study had experienced unemployment at some time. When they conceived two fifths (39%) of the combined in-depth and short interview samples were unemployed. If job training schemes and part time employment are included in the 'employed' category the same percentage of the combined samples were unemployed as were in employment. The jobs women tended to get were frequently impermanent, so that many had experienced redundancy although being under twenty, they had only been in the employment market for short periods. Some black women in the sample also reported that they considered racial discrimination to have reduced their employment opportunities (see Phoenix, 1988b).

Looking more specifically at the in-depth interview sample, six per cent were employed on Manpower Service Commission training schemes which were necessarily temporary and 4% were employed part time. A further 17% were in full time education. Forty four per cent were unemployed.

Table 11.1: Employment status from conception to late pregnancy

	Conception	Late pregnancy
In education	17%	-
Job training	6%	-
Part time jobs	4%	-
Full time jobs	29%	-
Maternity leave	-	6%
Inelig. for mat. leave	-	22%
Unemployed	44%	72%

N = 79

By the end of pregnancy 72% of the women were unemployed. For those on MSC schemes, this was largely because the scheme itself had ended. Those in full time education had given up school or college attendance. (One 16 year old, however, did, as she intended, return to school for a term after birth). The proportion unemployed had therefore nearly doubled during pregnancy (from 44% to 72%. See table 11.1 above) although three quarters of those who were employed at conception remained in their jobs until late pregnancy. A further 22% of women were not yet registered as unemployed or thinking of themselves as unemployed because they had just given up employment. They were,

however, going to be unemployed after giving birth because they were not eligible for maternity leave. Almost all the women (94%) were, therefore, effectively unemployed at the end of their pregnancies.

Women sometimes left work, school or college before colleagues and employers could find out that they were pregnant because they feared adverse reactions. Some women who did tell employers and teachers that they were pregnant were subjected to such displays of disapproval that they left education or employment anyway. A few women left employment because their jobs were too physically taxing to be continued late into pregnancy.

Only six per cent of the women were eligible for maternity leave. Some women, particularly those under 18, had not been in the employment market sufficiently long to qualify for maternity leave. However the difficulties many women had experienced in finding jobs and the transient nature of many of the jobs they had managed to find were mainly responsible for women's ineligibility for maternity leave.

Pregnancy was more disruptive of school and college attendance than it was of employment. The majority of those who had been employed at conception remained in employment until late in pregnancy whereas women left school and college early in pregnancy. Birth, however, did make a difference to women's employment status. The majority (88%, 75) of women interviewed six months after birth were unemployed. Seven per cent of the sample were employed (5% (4) part time and 2% (2) full time). One woman was attending college part time, and 4% (3) were on MSC programmes.

In late pregnancy it seemed unlikely that more than a handful of the mothers would be employed outside their homes while they had pre-school children. Four factors militated against employment:

1. Conventional social constructions: 'children need their mothers'

Most women in this study held conventional beliefs about the roles of mothers. Many subscribed to discourses of children 'needing' their mothers to be at home full time. In a complementary way they perceived motherhood to be an important part of their lives and did not want to 'miss out' on seeing children's development by leaving them with other people. Many of those who expected to return to work at some time favoured part time, rather than full time, work.

Q. Will you return to work after the baby is born? (Section 15.2b, page 191 of the first interview)

A. ...I would like to be with it until it's about four but I'd like a part time job, but I wouldn't leave it until it's about seven months old because I think it needs you then (050; 17 year old married woman).

In late pregnancy most women were not in favour of maternal employment. Only 5% (3) were wholeheartedly positive about mothers with young children being employed, while 41% (25) were unequivocally hostile to the idea.

Table 11.2: Attitudes In late pregnancy to returning to paid employment

Will never return	8%
Will return in child's first year	28%
Will return when child is 12 to 18 months	10%
Will return when child is over 18 months	33%
Doesn't know when will return	21%

N = 61

It was not, therefore, surprising that less than two fifths of the sample (38%) considered that they would seek paid employment before their children were 18 months old. (See table 11.2 above). More than half of the women reported that they either could not foresee a time when they would return to paid employment or that they would only seek employment when their children were over 18 months or that they had no idea when they would get jobs.

2. Unrewarding employment

Paid employment was not perceived to be in competition with, or to be as attractive an option as motherhood. This was because few women were in jobs which either had built in career progression or were intrinsically rewarding.

I don't think you can have a career and kids as well (022; 18 year old married woman).

I think ... I'm more for being a mother ... than I am to working (521; 18 year old married woman).

(Both these quotes were responses to questions in section 15.2, page 191 of the first interview schedule).

3. Costs of childcare

Women who had investigated the childcare options available realised that the cost of a childminder or of a private nursery place would take a substantial proportion of their earnings. They were also aware that council day nursery places (which had a sliding scale of charges) were scarce. If relatives (usually mothers) could not provide free childcare, employment was frequently not a viable option. In the Thomas Coram Research Unit study of dual earner households, women (who were mostly over 20 and all married or cohabiting) did not consider it worth their while to be employed unless they

earned enough to pay for childcare and have what they considered a fair proportion of their wages left over (Brannen and Moss, 1988). In the current study those few women who could have gone back to their jobs made the same sort of calculations.

Q. Do you think that you will go back to work?

A. ...For one thing I don't think I could put her with a childminder plus they're too expensive. They're £30 a week and that's over half my wages, so it's not worth it to me. (055; 18 year old married clerical assistant who had been taking home £56 per week and on maternity leave at first interview).

4. Inadequate pay

At the time that women in this study gave birth unemployed women who held tenancies for council flats and lived alone or with unemployed male partners received supplementary benefit and had their rents paid by the then Department of Health and Social Security. Once they became employed, they lost both these benefits, and if their income was low they had to rely on Family Income Supplement. If women were to be employed, therefore, it was essential that they earned enough to pay their rents as well as (if necessary) to pay for childcare. Since most women in this study could only hope to obtain poorly paid employment they were caught in 'unemployment' and 'poverty' traps because they could not afford to be employed. The 1988 changes in social security legislation is likely to make such women's situation more desperate because many will not be able to fully afford to pay their rents and provide for their own and their children's needs whether employed or not.

Given the combination of the four factors discussed above it is not surprising that only one of the five women who was eligible for maternity leave eventually took it fully intending to return to her job.

It would seem, therefore, that motherhood had significantly worsened some young women's employment prospects. Those who would have to pay for childcare were unlikely to be able to earn enough to make it worth their while to be employed. In any case the majority considered that it was women's duty to give up their 'commitment' to employment in favour of a commitment to motherhood at least for a few years. It would be surprising if the difficulty of obtaining sufficiently well paid employment did not strengthen women's commitment to providing full time childcare for their children.

Neither low pay nor disapproval of maternal employment are exclusive to the youngest age groups of mothers. Many older working class women, employed in poorly paid occupations cannot afford to pay for childcare. With employment rates currently rising, unemployment and poor employment prospects are likely to continue to be an important factor for the material prospects of women who become mothers in this age group. In addition the current social construction of motherhood in

Britain still proscribes maternal employment although increasing numbers of mothers with young children are employed outside their homes. The Children Act, which was implemented on October 14 1991, gives local authorities statutory responsibility to provide day care where parents want it. This may possibly both reflect and lead changes in social constructions of motherhood and employment. Currently, however, employed mothers continue to be positioned in contradictory ways (Lewis, 1991).

Motherhood itself, at any age damages women's career prospects and lifetime earning potential (Martin and Roberts, 1984; Joshi, 1987). Remaining childless throughout the life course (rather than deferring motherhood) would probably enhance some women's employment prospects (particularly those in well paid, professional occupations), but it would do little for the majority of those interviewed in the present study. Had they stayed in the labour market, many of the young women interviewed would have continued to experience periods of unemployment and/or poorly paid jobs.

The data from the present study indicate that educational prospects were more likely to be damaged by early motherhood than employment prospects were. Women who were in full time education, whether at school or at college, usually did not complete their courses. Nine women (11%) had been at school when they became pregnant. All except one (a 17 year old) were 16 year olds. Five (6%) were at colleges of further education. None of these were 16 years olds. Only one woman (a 16 year old) returned to school full time and took her Certificate of School Education examinations (which no longer exist but were for less academic students). Other women left school or college before they would otherwise have done. They did not necessarily mind this however. The majority of women in the study did not consider themselves to be academic, and most had left school as early as possible. Some of those who would have stayed on at school but for pregnancy did not regret having left early.

Q. Were you happy at school or not? (From section 2.4e, page 25 of the first interview).

A. I didn't enjoy school. I dunno. There was too much fighting going on. (Why did you leave when you did?) I left because I was pregnant. I thought I was happy at leaving, but it's boring at home, especially when mum's not here (539; 16 year old engaged woman).

Another sixteen year old who left school when she was pregnant, but not because she was pregnant (she reached the end of the school year very early in pregnancy) expressed animosity to examinations:

Q. What did you feel about exams and qualifications while you were at school? (From section 2.5a, page 27 of the first interview).

A. I didn't wanna do it (exams). I thought it was a waste of time. I didn't wanna do no examinations or nothing. (Why not?) Cos I thought it would be too hard and I couldn't take

all them hours sitting down writing boring things on the paper. (Did you think you needed qualifications?) I knew I needed them but I wouldn't bother. I didn't study or nothing to get them. (029; 16 years old single woman).

In three cases women were in danger of not being allowed to take the examinations they had anticipated they would. Two of these women did eventually take 'O' levels (the examinations taken by more academic 16 year olds at the time), although in one case it was necessary to argue with the school about this.

Q. What happened about doing O' levels when you became pregnant? (Section 2.5, page 27, first interview).

A. Well they (school) wanted me to leave 'cos I could have some kind of accident or something like that. I said I wasn't going to 'cos if a teacher could walk round the school and nothing could happen to her, why should anything happen to me? So I stayed on. I took my mock exams and after that I left. (030; 16 year old single woman).

In the above instance the woman was insistent on taking her school mock examinations because passing those guaranteed that she would be allowed to sit the state examinations a few months later. Her persistence paid off, because she did get some 'O' levels soon after birth:

Q. Did you take the O' levels you were going to?

A. I passed the English, but not the language. The literature, but not the language. My Maths I got a B, which is equivalent to a pass but I mean I wanna do like work for the metropolitan police (secretarial work) or whatever, but you have to have a grade A at 'O' level so I decided to take that one again. I got my Art and Chemistry and Biology (030; 16 year old single woman).

Another 16 year old who left school during pregnancy also returned to sit examinations and gained 3 'O' levels. She then started evening classes in order to gain three more O' levels after birth but dropped out of classes, reportedly because she was missing her son. Another two 16 year olds were provided with home tutors so that they could sit their Certificate of School Education examinations. In the four instances described above each woman made attempts to continue with their education after birth. Two of them did so within the first six months of their children's births. One woman who had a home tutor took a City and Guilds Physical Education teacher's course. The other woman who had a home tutor went back to school after birth and sat her Certificates of School Education.

One student at a college of further education did not attempt to resist her tutor's recommendation that

she should leave college. As a result she did not take her nursery nursing examinations although she had nearly completed the course when she became pregnant.

Q. Why did you leave college just before your NNEB exams were due? (Section 2.5, page 27).

A. Because my tutor said to me that there was no way I would have been able to carry on up until the end of July so there wasn't much point in me staying until however long. (575; 18 year old single woman).

It was unfortunately not possible to re-interview the above woman, so it is not known how she fared after childbirth.

The tiny minority of women who were close to sitting examinations when they became pregnant seem to have been the women in the study who had their life chances most limited by motherhood. Although some were determined enough to ensure that they did get some qualifications, their chances of further study and employment seem likely to have been curtailed.

11.2. Employment nearly two years after birth

The women in the present study were subject to contradictory pressures with regard to employment and education. On the one hand they subscribed to the social construction of children's development being optimal in conditions where mothers are not employed outside the home. On the other hand, the majority of the women were experiencing poverty. Paid employment might have been expected to play an important part in easing some of their financial burdens. Yet, two years after birth, the pressures of paying for childcare and rent made employment impracticable for most women.

Q. Do you ever wish that you weren't at home all day? (From section 5.3b, page 52 of the third interview).

A. Not at the moment no. I wanna like see him at school first, then try and go after something. See at the moment - I'd have to have a really good job. See at the moment anyway I'm better off on the dole, because my rent's paid and that. So I'm better off as I am really. I mean I'm poor, but I'm better off than I would be if I'm working. (585; 18 year old single woman).

Well cos my husband's unemployed I feel that well why don't I get a job you know? (So are you going to look for a job?) Well I would, but I can't cos I can't bring enough money home. I can't bring as much as he could... (?) Oh I'd only be able to get part time anyway wouldn't I? So it wouldn't be a lot. It'd only be about 40, 50 pound - not even that really. (129; 18

year old married woman).

The above woman was worried that she would not be able to rely on her husband either to be consistently there or to keep their children properly clean and fed while she was out at work. She had, in fact, done a job in a fish and chip shop for four hours two weeks prior to the interview, but had given it up after the first evening because it was both poorly paid and hard work. She was still considering the possibility of doing early morning or late night cleaning.

Some women managed to earn a little extra money without having to leave their children with other people. One way was to look after someone else's child as well as yours. By the time children were 21 months old, three women (two single and one cohabiting) had done this at some time. Two still were and another (a married woman) was expecting to start doing so. None of them had actually sought childminding work. All had been asked if they would look after a friend's child. They provided childcare for much less money than childminders would usually charge and, therefore, hardly earned anything in this way.

Another way to earn money and not have to leave children in the day time was to sell cosmetic products at parties in other women's homes. A married woman with an employed husband was able to earn occasional small amounts of money by this means in the evenings when her husband was available to look after their daughter. A third way was to provide a childcare service outside the home. Another married woman whose husband was also employed had managed to supplement their income and get out of the house without being parted from her own child by becoming a part time creche leader in a community centre. The final way in which women in this study considered earning money without leaving their children was to engage in paid employment in the home. Nobody in the study had actually done this after birth, but two married women with employed husbands were considering taking on machining as homework when their children were nearly two.

Twenty one months after birth many women (and often their male partners and parents) still felt that their children were too young to be regularly left in someone else's care while mothers were out at work. Most women in the study were, at this stage, unemployed, and more than half of them (52%) said that even if they found the idea of being employed attractive, they would ideally choose to be at home with their children. The quotes on this and the following two pages, are in answer to questions on Role conflict and preference, section 5.3, page 52 of the third interview.

Well I ought to be (at home with daughter) because you know she's young you know. You can't leave her somewhere else or with other people, but um I don't like to be at home full time, but I have to. So - there's not much I can do about that is there? (You feel that you

can't leave her?) Yeah because I mean she's not even two yet. (062; married woman who was selling cosmetics in her spare time).

Yeah I wouldn't leave her with anyone else. Like um I was gonna get a job full time in a little chip shop, and I said to my mum would she look after her. But I wouldn't give her to a stranger [This woman did not take the job she was offered because her mother said that she should not leave her child]. (081; 18 year old married woman).

Yeah and so does Alan (husband) till they (current child and the one about to be born) start school. (Would you like to go to work?) Well sometimes I feel that I would like ... to go out to work to earn extra money and that but I also feel that I should be at home with her. So she's more important. When she starts school I can start working. I chose to have her. It's my place to stay with her. (050; 17 year old married woman).

Nearly half of the sample (48%) did, however, feel that they could separate from their children in order to be employed or to study. By 21 months after birth some women were beginning to feel that their children needed to mix with their own age peers.

Since before we went away (on holiday). I was determined that when we come back I'd get a job and go a work full time. But then Paul don't really like me to work. He thinks I should stay at home with him until it's time for him to go a school, but I think... he does need other children, and I'm not prepared to give him any more at the moment (Laughs). (187; cohabiting woman whose son had already had a council nursery place for 2 months).

Table 11.3: Employment and education from conception to 21 months after birth

	Conception	6 months	21 months
In education	17% (15%)	1% (0)	7%
Job training	6% (6%)	4% (3%)	0
Part time jobs	4% (4%)	5% (7%)	9%
Full time jobs	29% (33%)	2% (6%)	10%
Unemployed	44% (42%)	88% (83%)	74%
N =	79	85	68

Note Percentages in brackets are those for the sample eventually interviewed at 21 months in order to allow comparisons of the 21 month data with earlier data from the same sample.

The data from the different samples are fairly similar but this does not rule out the possibility that attrition was disproportionately of women who became employed and were, therefore, less often at

home than the sample interviewed at 21 months.

These samples follow the usual pattern (with regard to employment) for mothers of young children in Britain. They mostly stayed at home with their children immediately after birth and a few moved into employment when their children were nearly two years of age (Martin and Roberts, 1984). Twenty-one months after having given birth fewer of the women who were interviewed at the third interview were employed (19%, 13 women of 37%, 25) than had been prior to conception. There was an increase in the proportion of women who were employed part time rather than full time (4% of 10%). Nearly half of those who were employed were only working part time at 21 months (6 part time and 7 full time). In these respects the women interviewed did not differ from most British mothers because breaks in women's employment careers after childbirth are extremely common. When they do return to paid work women are more likely to work part time rather than full time and hence to experience downward career mobility (Brannen and Moss, 1988).

Although the numbers of employed women were small, there was a definite increase in the percentage of women employed over the two years following birth. Throughout the study employed women remained largely in the same occupational groupings (such as retail, clerical, childcare and hairdressing). This is hardly surprising since most women were employed in occupations where there was little career progression and hence no corresponding possibility of downward occupational mobility. Re-entry to such jobs was therefore likely to be at the same point as original entry had been.

More women might have sought employment if they had been able to arrange childcare, and to find sufficiently well paid part time work. It is true that more than half (52%, 26) of those who were at home with their children claimed that this is what they would ideally have chosen. But nearly half (48%, 24) wanted either to find employment or to take an educational or training course. Half of those who did not want to be full time caregivers would ideally have chosen to work part time. A third wanted to find full time work. Only a sixth wanted to pursue further education.

Childcare was difficult to arrange for those mothers who wanted to work. Because they could not afford to pay much for alternative childcare women had few choices open to them. Council day nurseries were an obvious option since they are cheap to the consumer and often have a sliding scale of charges, so that poorer women pay less. Twenty six per cent of the sample (18 women) had tried to get a council day nursery place for their children. Most (14) had not been successful in doing so because they were not considered to have enough 'social problems' to be given priority. The demand for council day nursery places so outstrips supply that most council nursery places are now reserved for those considered by health visitors, social workers or nursery workers to have pressing social problems (McGuire and Richman, 1986). Having mothers who were young and single used to be

considered sufficient criteria for children to be given nursery places, but this is no longer the case.

Q. Have you ever tried to get a place at nursery for her? (Third interview, question 1.10a on page 88).

A. Well I did (put daughter's name down on council nursery waiting list) when I was working but um they told me she didn't fit into the criteria list so they told me they'd have to turn down my application. They advised me to get a childminder. (Are you going to get a childminder?) But as I said to them it's not worth it to get a childminder because I'll just be working to pay a childminder so might as well stay home and look after her myself. (015; 18 year old semi-cohabiting woman whose mother had provided childcare for the 6 months she was employed).

Her name was down but they have taken it off because there are too many kids waiting. Only left those with special needs. (016; 18 year old single woman).

I put it down when he was born and then they refused him then and then I tried again, say that he moved up back to my mum and they still say well he's not a priority case. (005; 19 year old woman who started cohabiting after birth).

Just as women's perceptions that other people were getting more benefits than they were fuelled discontent and resentment (see chapter 6), so the perception that some children got council day nursery places more easily than others was considered to be unfair.

When Claire was about 9 months (put her name down on council nursery list)... What really hurts me is that um the woman that lives downstairs, her child is 6 months right and she's not working. She's not doing nothing. She's in the same position as me, and it's going to a nursery and Claire's what - 2 next week and she's just being stuck indoors. She's not mixing with other kids and there's no other kids round here for her to sort of like play with her or anything. (030; 16 year old single woman living alone).

At 21 months only two children (3%) were in council nurseries while their mothers were in employment (a further two children were in council nurseries while their mothers looked for employment, see table 11.4 below). There were no obvious differences in the circumstances of women who got a nursery place compared with those who did not.

Table 11.4: Childcare arrangements at 21 months

Not in day care	75%	(51)
Nursery*	6%	(4)
Minder/friend	5%	(3)
Relative	9%	(6)
Combination	6%	(4)

N = 68

This includes two children who were in nurseries part time, one in a council nursery while her mother looked for employment and the other in a private nursery while her mother went to college.

The majority of children whose mothers were employed or pursuing further education courses were cared for by relatives (6) or by minders and friends (3) and nurseries (3). Four children had more than one childcare arrangement. These were a combination of relatives and friends when the main alternative caregiver was employed part time.

While a minority of women who remained unemployed 21 months after birth would ideally have chosen to be employed, most women who were employed full time did not want to be. They found it stressful and difficult to combine employment and motherhood. Nine women (13%) said that they wanted to be employed full time. Only one of these was already employed full time (seven women altogether were employed full time). She had been 16 at birth, had returned to school and obtained five Certificate of School Education examinations, and had been employed continuously since leaving school (although she had changed jobs twice). She lived with her parents, and her mother had given up work in order to look after her child. Both parents believed that she should not miss out on what they considered to be a 'normal adolescence' simply because she had a child. They were keen that she should be encouraged to experience employment, to save money and to go out in the evenings sometimes.

Q. Does that mean you think you should be at home with him? (From section 5.3, page 52 of the third interview).

A. No, no I think I should be at work. (So you don't think you should be at home with him?) Well me mind tells me I prefer work, but me heart when he's crying on the doorstep here waving goodbye to me tells me I should be at home. (Would you prefer to work part time?) Um well I'm just happy with a full time one (job). (141; 16 year old single woman living with her parents).

Although the above woman's parents had pressed her to have an abortion (and indeed she would

have had one had she not been too advanced in pregnancy) they were now delighted with their grandson. The woman's mother expressed this to me after the last interview by saying '...He's really one of the family now'. This woman clearly got a lot of support from her parents and felt that she shared responsibility for her child with them. Asked whether she had considered using a day nursery for her son she replied 'No we haven't done that and we won't' (my emphasis). Yet she found it tiring to work by day and tend her son in the evenings and nights, and difficult to part from him in the morning. She admitted that she would feel more like a mother if she did not live with her parents although she maintained that she did not mind the fact that her mother provided a lot of the childcare for her son.

Q. Would anything make it easier for you (to combine motherhood and employment)?

A. Um if I had my own house.

A. I think me and William would be happier. (Why?) Well I'd think myself more of a mother cos I wouldn't have mum here you know all the time.

Q. Is that partly because you don't want your mother to do so much for him?

A ...I don't mind it. I think William would be happy having more room... for him. (141; 16 year old single woman).

Judging from other full time employed women's reports of their dissatisfactions with combining employment and motherhood, the support this woman received was probably crucial to her wellbeing as an employed mother. Yet that very support was in part experienced as oppressive.

Other women who were employed full time complained of overwhelming tiredness. One woman's case (Debbie's) is presented at length because she was unusual in this study in having been continuously employed since before conception. Debbie returned to her apprenticeship after maternity leave, completed it and was working as a full fledged member of her manual trade 21 months after birth. She earned more than any other woman in the study (£120 to £140 a week) and had a particularly supportive childminder who often kept her daughter overnight on week nights so that she did not have to worry about taking the child out early in the morning (since she started work at 7.30 in the morning) and so that Debbie could get a good rest sometimes. This childminder, a friend of Debbie's step-mother, charged £20 per week if the child did not stay overnight, and £30 if she did. Debbie mostly liked her job. But she was exhausted by employment and childcare responsibilities. When asked at the third interview how she felt about having combined motherhood and employment she replied at length stressing only negative aspects (section 5.3, page 52 of the third interview).

When I wake up in the morning I'm really knackered... my body always feels tired. It feels like

it's on its limit and it's gonna drop down. But you know I just go ahead and keep pushing myself you know. I just go up the road and pass out (this happened to Debbie at work two months before the interview when she had flu. She also has sickle cell trait which may increase her tiredness and vulnerability when ill) or I just drop out of exhaustion or something you know... (500; 18 year old single woman).

Although she was well paid by comparison with other people in the sample, Debbie's disposable income (after paying for childcare) was not sufficient to cushion her from worrying about money. Part of her tiredness resulted from sometimes lying awake worrying about money.

Even if Shelley's over there (at her minder's) I still can't sleep because I'm wondering. Probably I got money matters on my brain or something like that and I'm worried about that all through the night...

Money was not the only matter that prevented her from sleeping, however. She was the only woman in an otherwise male trade and was fed up with the sexual harassment she continually experienced. In addition her relationship with her child's father was not currently very happy. She had anticipated that he would be more supportive than he had been.

(Ideally) I would stay at home until she goes to school... and then get a part time job so it fits in with her - like when she leaves for school I leave to go to work and when she comes home I come home. (Why didn't you do that?) Well... me and the boyfriend's relationship wasn't really that steady for me to say that I would do that... (Does that mean you wouldn't have finished your apprenticeship?) No what I would have done is wait till I qualified then stop.

Some of Debbie's desire to stay at home with Shelley seemed to come from her perception of what her role should be with regard to her child. Asked whether she would like any help with childcare, she replied:

I mean I'd rather do it myself cos that's what I'm there for. I wouldn't like to know anybody does it you know. Well the childminder does because she's there with her, but otherwise I just like me to do it.

Given her circumstances, however, she was happy with the amount the childminder did for Shelley.

I'm happy because at least it... you know eases some of the pressure off me. Cos with me working I don't really find that much time to say I'm gonna be with her. So if the childminder's

making her feel you know relaxed you know giving her everything she needs at least I know she's happy. I mean cos she knows who her mother is... So you know no matter how the childminder spoils her or treats her, Shelley will always know who her mummy is. (500; 18 year old single woman).

Debbie provides a good example of the various and contradictory pressures operating on young, single women who attempt to combine employment and motherhood. She was only able to continue in employment because her earnings (although not enormously high) and her childcare arrangement were better than most other women's in the study. Despite her remarkable achievement (in finishing her apprenticeship in a sexist, male enclave, after birth and continuing to practise her trade there) she would have preferred to be at home with her daughter. '...I mean I'm always depressed... When I started to go back to work, the depression started to come in.'

Debbie's vision of herself and her future did not include existing on supplementary benefit, however. She would only have been prepared to give up her job if her male partner could support her.

Another woman, Sarah, did stop working. She was employed as a hairdressing apprentice for six months, from when her child was 8 months old. Although she had her own flat her mother looked after daughter for free, and Sarah was happy with that arrangement. It was, however, very tiring work and very long working hours (9 or 10 hours a day, including Saturdays) for hardly any pay (£54 per week 'if the shop was busy', meaning presumably that takings were high, and £40 if not) so she gave up. Sarah said 'I'd like to go back to work actually. I don't think staying at home is me.' Yet she also felt that she would not go back to work until her child was older. She did not argue that her child needed to be with her all the time, but that as a mother she would miss seeing her daughter's development if she worked full time (see section 5.3a on page 52 of the third interview).

Um I think I - yeah (I will stay at home) until she goes to school - starts nursery, cos there's so many things you miss first two, three years of their lives you know and I'd like to spend that time with her at home and then go back out to work. (015; 18 year old semi-cohabiting woman).

Sarah had been looking after her sister's 8 month old child for the last three months for no payment. '...I couldn't really charge her, because he's my nephew you know. I mean if I was going out to work and she wasn't, she would look after Evey.

11.3. Education 21 months after birth

Twenty one months after birth five women (7%) were pursuing educational courses. These courses were office and business skills, sports management, 'O' levels and manual trades. One single woman who had been 17 years old when she gave birth had started a job with a national charity and had been seconded to study office skills and business studies. Her child had a nursery place. A single woman (19 years old at birth) had been advised by a college that she could do a course for women returning to employment. Her child was looked after by her mother while she did computer studies. Her mother was, however, paid £45 per week as a sponsored childminder.

The other five women had decided what they wanted to do, and pursued their chosen courses themselves. One woman's child went to a private nursery, one to a childminder and one went to his grandmother in the mornings and his father in the afternoons. Two women had been engaged in study before they became pregnant (one at college and the other at school). But three had not been attracted to study before conception.

For most women attending further education 21 months after birth it seemed that having a child had acted as a spur, giving them the necessary impetus to seek formal qualifications. Women felt that they needed qualifications in order to get jobs which paid well enough to allow them to support their children. They therefore felt a determination to succeed which had not been evident before.

Q. Why did you decide to do a course?

A. I went on the course so that I would be able to get a job to support Sophie... It's important to train now because without qualifications I wouldn't be able to get a decent job. (527; 16 year old single woman).

A. Cos I couldn't get the kind of job I really want. (What kind of job did you really want?) Mainly computer work and word processing and you need O, A levels... so I decided to go back and do my 'O' levels. (005; 19 year old cohabiting woman doing 3 year package of 5 'O' levels).

The five women who were engaged in further education were not concentrated in any particular part of the 16 to 19 age range when they gave birth. One woman was cohabiting (although she did not consider her relationship to be a permanent one) but none were married. This is not an unusual finding. Furstenberg (1976) found that those 'teenage mothers' who were most likely to gain academic credentials were single, rather than married women.

One woman was unfortunately prevented from studying because she could not afford to pay for childcare. She had not been successful in getting a nursery place, and her mother was employed full time. The question here and that for the next quote comes from section 5.3 on page 52 of the third interview schedule.

Well I went to college for a little while (three and a half months when her child was one year old) but I gave it up because I mean I didn't have no-one to look after Lucy so that meant I had to give this girl money out of my benefit money to sort of look after her and I was losing out because I didn't have enough money to sort of buy things I needed. (?) Well I just used to pay her like £10 a week and all that lot and just provide food for Lucy and I thought that the Social Services would help me out but you know I mean they kept on saying they would but they never got round to it. So I just didn't bother, but I decided I'm gonna go to evening classes instead this year so I'll be better off. (?) Well I'll leave her with my mum then. You see my mum finishes work at half four... (030; 16 year old single woman whose friend had recently moved in with her).

It is a measure of this woman's determination to get qualifications that she continued to study for a whole term in such unsatisfactory circumstances. She may well manage to pursue a course of evening study later. She had already managed to pass 4 'O' levels at school after her child was born. But childcare responsibilities had clearly prevented her from achieving as much academically as she otherwise might have. She herself perceived her child to have been a limitation (see chapter 9) and felt that she had held a romantic view of motherhood which was unrealistic for her age group.

The second woman who gained 'O' levels (3) when she was pregnant was also 16 years old when she gave birth. She had attended evening classes for three months when her child was 7 months old. Her child's father (with whom she was then cohabiting) looked after their child. She gave up because she said she missed her son, and found it difficult to do the necessary studying. Twenty one months after birth she had moved back to her parents' home and was about to start a one year MSC job.

...I mean there were so many things I could have done and I just didn't want to. I used him (child) as a nasty excuse and now that things have sort of changed I feel that it's time I got off my big ass and sort of get out and actually do something for myself instead of sort of waiting for it to come to me. And if I did I think I'd still be sitting here. I mean it's only working for a year, but it's a start. (?) My ideal is to be working full time and to be actually getting some qualifications at the same time. (What prevents you from doing that?) Myself. As I said I use him as an excuse. It's just me. (So you think you could do it?) Oh yeah. And I think I will do it.

The above woman did not perceive her child to have limited her prospects at all. She felt that she had used him as an excuse not to do more in the first two years, but that she would eventually do the things she wanted to. Although this woman did attempt to do some studying when she was cohabiting, it is perhaps significant that it is when she moved back in with her parents that she found a job, and felt that she would also be able to study. Living with supportive parents did seem to give women more opportunities (or at least the perception that more opportunities were open to them) to study or to be employed if they wanted to be than either living alone or living with male partners.

The above woman's male partner had not actively attempted to prevent her from taking up employment but he had refused to assist by providing childcare, although he had looked after their child for the three months she had attended evening classes.

Q. Who will look after him when you start work?

A. I asked his father (who is unemployed) if he could look after him, and his father turned round and said 'no'. (Do you know why...?) He hasn't given me no reason and I'm not asking for no reason really. I'm not really bothered. But I mean he said - before I had a job I asked him and he goes 'oh yeah' he'll look after him, but now he's turned round and said 'no'. So I've just left it at that. Cos I mean as far as I'm concerned it's just either spite or what - so what I can do is sort of get him into - sort of if I can get him into nursery or childminder. But I mean I sort of want to pursue the job. (008; 16 year old whose aunt is going to look after her son initially while she is on sick leave).

The fact that employment decisions were sometimes influenced by the composition of women's households is illustrated by Sharon, who was 18 years old when she had her son and lived with her parents until he was 18 months old.

Q. When did you go back to work?

A. When I started going back with Tony (child's father and now cohabiter) we talked about it (applying for a council flat) and I weren't too sure because of my mum. I weren't working because of the baby. My dad weren't working and my mum was the only one working and she had to pay all the money out and everything. So I went back to work and said 'no' (to applying for a flat) because me mum wants the money. So I was giving my mum the money. (624; 18 year old cohabiting woman).

Sharon then got herself re-engaged as an apprentice in an almost exclusively male part of the food trade (the same apprenticeship she had worked in until 3 days before she gave birth) and worked there from when her son was 8 months old until he was 14 months old.

Pay was disgusting. I was doing the same things (as qualified people) and I was getting sort of like £50 and it was no good you know - from 9 until 6 o'clock at night and 7 until 6 o'clock on Saturdays and I was getting £50. And I went down the road - it was in an underwear shop, and it was four days a week about 6 hours a day and I was taking home £60, maybe £70.

Sharon's mother was working part time, and was able to look after Sharon's son. Eighteen months after birth Sharon decided that she would like her own flat. Her father had never liked her boyfriend 'because he thinks that all black people are the same you know'. It was therefore uncomfortable for him to visit Sharon while she lived with her parents. In addition although they shared a house, Sharon's father had completely ignored her son for at least three months 'because he was half caste' (although by 21 months he was reportedly very fond of Sharon's son). Sharon was offered a council flat as soon as she applied for one.

I stopped working there when I got the flat because I thought I ain't gonna come home from work and have to cook and clean up and look after David. I thought well I'll stay at home and look after David, look after the house. (624)

In this case Sharon had worked when living with her parents in order to help them out financially. She was not attempting to further her career, nor had she been keen to either return to her apprenticeship or to any other employment. She did not like the trade she had been apprenticed to, and felt that she did not want to be employed again until her son was at school. Her decisions, firstly to seek employment and later to stop being employed, had both been made to suit her household circumstances.

11.4. Summary

In summary, most women who became mothers before they were twenty years of age in the study reported here did not appear to have their employment or educational prospects damaged by early childbearing. This was largely because most had neither been academically inclined nor in jobs which offered training or career prospects. Many women felt that they should not leave their children in the first years after birth. For all the women motherhood was at least as important a career as (and for many women, more important than) employment.

Women's attitudes to motherhood in combination with social conditions in which childcare is scarce and takes a large proportion of many working class women's income, made it unlikely that many women would return to employment or education (even part time) before their children started school.

The data from the current study indicates that it would be overly simplistic to conclude that early motherhood had clear, unitary effects on young women's prospects. Early motherhood did not seem to be detrimental to the educational and employment prospects of the majority of women interviewed. Where it did seem to have negative effects there were always particular factors, other than age which were adversely affecting young women's lives. The findings from the current study are short term and hence limited. However, an understanding of the social contexts in which particular women live is crucial to an understanding of how (and why) early motherhood affects their lives as it does.

CHAPTER 12: 'Insider' perspectives on early motherhood and on being a respondent in this study: Findings and discussion

Women who give birth in their teenage years are generally discussed only from the 'outsider' perspectives provided by researchers (see chapters 1 and 2). Yet 'young mothers' have their own views about early motherhood, which do not always accord with outsider perspectives. One aim of the study has been to present young women's accounts of their own circumstances. The first part of this chapter presents little new data but attempts to draw together data from the study in order to analyze the ways in which young women who have become mothers present arguments about themselves as mothers and their own circumstances. Thus, while previous chapters have been more concerned with the content of accounts, this chapter is more concerned with discourse analysis of 'insider' perspectives on early motherhood. The second part of the chapter discusses the women's reports of what they felt about having taken part in the current study.

12.1. Maintaining positive identities as mothers

The women interviewed in this study were, on the whole conscious of how 'young mothers' are socially constructed. Recognition that they are devalued gave them some investment in defending themselves against these negative images. They rarely displayed any group identification with other mothers in the same age group or in similar socioeconomic circumstances. Yet almost all maintained positive views of themselves as mothers. (See chapter 9).

Women used a variety of strategies to maintain positive social identities (see Skevington and Baker, 1989 for further discussion of this). They sometimes accepted conventional ideas and normative assumptions about motherhood, and marriage. If those views and assumptions defined their group ('young mothers') as pathological, they defined themselves outside the group by seeing themselves as exceptional and others as less deserving or worse than themselves. This strategy led some women to reproduce stigmatising notions about other women (in similar circumstances to themselves) being the 'undeserving poor' (see chapter 8).

Alternatively they rejected the conventions and assumptions which defined them negatively and asserted their own beliefs in preference by, for example asserting that their own age group of mothers was preferable to older age groups (see section 'Too young to be mothers?' below). A further strategy was to attempt to forestall what they perceived to be likely criticisms of their age group of mothers. One woman, for example, asked how she thought she was coping as a mother replied 'I think I am coping quite well. I don't leave him wi' anybody'.

These strategies for maintaining a positive sense of self could not easily be separated out. At one and the same time, for example, some women stated the advantages of being 'young mothers' while

asserting that women of their age were young to be mothers but that they themselves would have no difficulties with it. Their accounts were far from unitary, but instead drew on a number of different discourses which were available to them (Henriques et al., 1984; Hollway, 1989).

Most women in the current study and their children fared well in the first two years after birth. The majority of children scored above the norm on a developmental assessment just before they were two years of age (see chapter 10). The aim of this section is not to assess how women and their children were faring but to consider how women presented their ideas about motherhood, particularly 'young motherhood' and marriage and motherhood.

12.2. Too young to be mothers?

All the women in the study reported here considered that they were young people but most rejected the idea that they were young to be mothers or that people would look down on women who have children while still in their teens simply because of their age. Nearly three fifths (58%) said that they believed they were having their first child at an average age. Two fifths thought that they were younger than usual but only just under a quarter thought that it was possible that anyone might look down on them for no other reason than that they were having children early in life. This age group is, however, increasingly unusual because the average age at which women give birth to their first baby is increasing and is now in the late twenties at 27.5 years (CSO, 1992). It may, therefore, be that women were simply giving accounts which were likely to preserve their self respect while protecting them from having to face the fact that negative attitudes about 'young mothers' are widely held. This does not, however, seem the most likely explanation because the women interviewed were not unusual within their own social networks.

Two fifths of respondents' own mothers had first given birth before they were twenty and it was usual for them to know siblings, friends or peers who had also had children in their teenage years. In order to get an understanding of how common it was for women's social networks to include other women who also became mothers in their teenage years women were asked about the ages of their friends and relatives with children and children's ages. It emerged that many did not know the exact ages of friends and so it was often not possible to be specific about whether a friend or a relative gave birth at 19 or 21. The researchers' preoccupation with the issue of 'teenage motherhood' was not shared by most women. In addition most women did recognise that their age group of mothers was socially stigmatised. However, they did not consider that such stigma was appropriate to them or to women in their own social networks.

The variety of discourses women drew on to explain their ideas about age and motherhood can best be illustrated by some examples. These include arguments about; the irrelevance of age,

comparisons with mothers known to be younger than themselves, problems with leaving childbearing too late, and the stigma of late motherhood (which many defined as not having children by the mid twenties). The following two respondents simultaneously made use of two contradictory discourses. On the one hand they asserted that age is irrelevant to childbearing and on the other that it is preferable to have children earlier rather than later. The second woman did this by appealing to psychological notions of children needing to be loved, and argued that love is possible at any age. She also referred to medical ideas about young women being physiologically ideally suited to childbearing. The questions in this section come from sections 14.3 and 14.4, Perception of self as Young and Attitude of respondent and others to young mothers on page 183 of the first interview schedule.

Q. Do you think that people look down on women who have their first child before they are twenty?

A. They might do yeah. I think they look down on women who don't have a child by 30, but there's no set time for anybody to have a baby by.

Q. What do you think is the ideal age to have a baby?

A. I think about now is all right... I don't want to get too old and have children. (19 year old)

Q. Do you think that you're young to be a mother?

A. Yeah I think I'm young and people say I'm young, but I don't think it makes any difference really how old you are... Whether you're 30 or 16 you can still give it as much love....She's 26 (sister) but she's getting on to have a baby when you think of it. The younger you are, the more likely that it's going to be healthier.... (17 year old)

The following respondents compared their ages with younger women who were having children. The first rejects the notion that she is a 'young mother' and asserts that she has left childbearing late. The other two respondents accept that they are young to be mothers but find (different) ways of making their age a positive attribute for themselves as mothers.

A. I think I've left mine quite late. All the girls I know -by 16 they've had their babies. (18 year old)

A. Well my mum had me when she was 17. I find I am a bit young to have a baby. But there are some girls here who are fifteen years of age. I find that I am a bit young, but I can cope. (19 year old)

Q. What would be the ideal age for you to have a baby?

A. Twenty five... Because you've had a bit of time to yourself. Twenty five is a nice age. I'll be younger. It will be nice. My kids will be grown up and I'll still be young.(18 year old)

Not surprisingly, women stressed the problems of having children later as opposed to the benefits of having them earlier. Problems mentioned were physiological as well as psychological. Recurrent themes were being able to empathise with children (particularly in adolescence), retaining enough youth to be able to enjoy life after children left home and not being tied down.

It seems that women may have been responding to simplistic, unitary outsider views that it is automatically bad to be a 'young mother' which they may have thought were implicit in questions about age and motherhood. It would, however, be equally prescriptive if they simply asserted that all women should ideally become mothers in their teenage years. Their accounts are, however, more complicated than that. They did not simply accept or reject ideas about age and motherhood uncritically. Rather they chose those that most appealed to them and best suited their circumstances. Even if they accepted that they were young to be mothers (and only a minority did so) they used familiar arguments and their own experiences to justify their situation. Arguments typically called upon for this purpose included comparisons with other, younger mothers and the highlighting of the advantages of being a youthful parent. Many sought to deny prescriptions about ideal ages for becoming mothers. As we have seen this sometimes resulted in contradictory accounts because many women also felt that women should not leave it 'too late' to become mothers.

Where women did not have ready access to particular discourses they obviously could not make appeals to those arguments. Thus, being experienced in childcare was not usually cited as an advantage ^{by this group of} 'young mothers' even though four fifths were experienced in looking after young children.

12.3. Marriage and motherhood

One reason for the negative orientation to motherhood in the under twenties is that it is associated with women's single status (meaning not legally married). Single motherhood flaunts social conventions. Since more than three quarters of British women who become mothers in their teenage years do so while single, it is not surprising that some mothers in this age group question the benefits of marriage. A third (33%) of the women interviewed in the current study were legally married and another 11% were cohabiting in late pregnancy (see chapter 4). In general women were not positive about marriage and that men got a better deal from marriage than women did. Two fifths said that men benefitted from marriage more than women did while only 7% thought that women gained more from marriage (see chapter 6). Even those who reported that marriage was extremely positive for women sometimes contradicted their direct accounts by highlighting only its negative aspects.

Despite their negative views about marriage, the majority of single women (56%) did consider that they would marry at some time. Only a quarter were adamant that they would never marry. A further fifth, however, were not sure if they would ever marry but did not discount the possibility. In this their views were similar to those of young women interviewed by Griffin (1985) and Lees (1986) who were negative about marriage but perceived no alternative for themselves later in life.

Respondents, both married and single, drew primarily on negative arguments to explain the meanings marriage had for them. They were one of the first generations whose parents had access to relatively easy divorce and some of those whose parents had separated cited this as a reason for not wanting to marry. Other arguments they used included restriction of freedom for women (but not for men) in marriage, dislike of the drudgery seen to be involved in women's traditional roles within marriage and the fact that cohabitation was perceived as being similar in many ways to marriage, without entailing the same disadvantages. The advantages mentioned for marriage were companionship and having someone to depend on for the management of money and for support. These were more likely to be mentioned by the third of women who were married than by single women.

The discourses women used in explaining their views on marriage were clearly historically specific. Women drew on current popular knowledge and debates to present their case. Thus feminist arguments that marriage subjects women to an exploitative division of household labour as well as to male domination within the household were much cited although the women in the current study did not consider themselves to be feminists (see Griffin, 1989 for discussion of how feminist ideas have permeated many young women's consciousness). Similarly changes in divorce legislation and practice and removal of much of the stigma traditionally attached to cohabitation provided a context for women's feelings that marriage and motherhood were separable and cohabitation little different from marriage.

Women's silences about some issues they could have addressed were sometimes as informative as what they actually said. They did not, for instance mention economic reasons for contracting marriage. Yet women who had married before conception were those with the most affluent partners (in comparison with other male partners in the study). It seems likely that high rates of unemployment among the young unskilled have made young men less attractive marriage partners than previously. It is, however, difficult for women to recognise that their decisions to marry or not may be affected by their male partners' economic prospects because marriage is now supposed to be contracted for emotional rather than material reasons (Gittins, 1986; Mansfield and Collard, 1988). So pervasive is the construction of the ideal marriage as companionate and loving that women could take it for granted that other people would recognise that if they married it would be the logical outcome of 'true (heterosexual) love'. This may well be one reason that some young women gave no particular reason

for having married or intending to marry in the future.

Another possible reason is provided by Lees (1986) and Griffin (1985) who both suggest that since there are no clear alternatives to marriage, young women are likely to end up marrying by default, regardless of how negative they feel about marriage as an institution. The arguments women use and the discourses they construct to interpret their experiences can thus contradict the actions (such as getting married) they have either taken or anticipate taking in the future.

12.4. Motherhood, employment and children's needs

In the present study women were interviewed for the final time when their children were nearly two. The normative assumption in the UK is that mothers of pre-school children should not be employed outside their homes because their children need to be with them. Although childcare manuals encourage mothers to see children's needs as congruent with their own (Marshall, 1991) mothers do not necessarily perceive such a congruence. Discussions of 'the needs of children' frequently ignore their mothers' needs. Those who advance the conventional argument that children need to be at home with their mothers rather than in daycare assume that women should sublimate their needs for income, stimulation and company to their children's needs (Tizard, 1991b). On the other hand developments in feminist theory which stem from the recognition that it is often stressful and boring for women to be at home with their children all day have led to the counter argument that there is not necessarily an opposition between 'the needs of children' and those of their mothers (Oakley, 1974; 1979). According to this argument mothers should be free to choose whether or not they return to employment because good alternative childcare is not detrimental to young children.

In this study women's lack of labour market experience made it difficult for them to find jobs which were sufficiently well paid to enable them to pay for childcare. For just over half of those interviewed, however, the discourse they drew upon protected them from having to face the problems raised by fruitless searches for adequately paid jobs and cheap childcare. In late pregnancy very few women (5%) were actually in favour of maternal employment and two fifths were openly hostile. When their children were two years old 52% of women said that they thought their children were still too young to be left with anyone else. Yet 19% of those interviewed were in employment (half part time) when their children were 21 months old and some others would have liked to be employed.

Many women's accounts demonstrate the conflict they experienced about their own needs in comparison with those of their children. Where women subscribed to a conflictual model of mothers and children's needs gave what they perceived to be their children's needs precedence over their own. The questions in this section come from section 5.3, page 52 of the third interview schedule.

Q. Do you feel that you ought to be at home full time with her?

A. Well sometimes I feel that I would like... to go out to work to earn extra money and that but I also feel that I should be at home with her so she's more important. When she starts school I can start working. I chose to have her. It's my place to stay with her. (17 year old married woman)

Male partners were also frequently reported to subscribe to normative expectations about mothers being at home with their children.

Q. Do you feel you ought to be at home full time with her?

A. Well yes... I'd like to until she's school age... (cohabiter) says oh it's nice because his sister's been at home with his mum...but I said I'd like to go back at work. I've sort of begun to miss it I suppose. But I think it's best to be with her. (17 year old considering childminding in order to be at home).

Women could sometimes override cohabiters and spouses wishes, however, by subscribing to another set of discourses about children's needs; the need for children to socialise with their peers.

...Paul don't really like me to work. He thinks I should stay at home with him until it's time for him to go to school, but I think... he does need other children, and I'm not prepared to give him any more at the moment (Laughs). (18 year old cohabiter who was intending to look for a job).

It was even more fortuitous if women's own perceived needs or desires complemented what they believed to be their children's needs. The woman who advances the argument of wanting to be with her daughter (below) had actually taken up a hairdressing apprenticeship for a few months after birth, but had given it up on grounds of poor pay and missing her daughter.

Q. Do you think you ought to be at home with her?

A. Um I think... yeah until she goes to school - starts nursery, cos there's so many things you miss first two, three years of their lives you know and I'd like to spend that time with her at home... (18 year old).

By following conventional patterns in remaining at home with their young children, and believing that they should, some women were able to include themselves in the category 'good mother' and were thus able to distance themselves from social constructions of 'young mothers' as pathological. They were, after all, putting first what they understood to be the needs of their children. The positive side

of this was that it allowed them to enjoy both being with their children and the status they gained from motherhood without experiencing conflict about not providing adequate care for their children. This holding to convention could itself, however, be problematic for women and cause them concern if they felt that in some ways they were not providing for children's needs. While, for example, many were content to be single mothers, enjoyed their children and enjoyed motherhood, they were not always confident enough or perhaps did not have access to arguments that would enable them to reject notions that whatever the circumstances and regardless of the contribution their children's fathers could make, 'children need their fathers'. The following quote comes from section 5.1, page 48 of the third interview schedule.

Q. Best things about being a mother?

A. Just having him there plus he is a lovely child to be with. He doesn't cause me any trouble... I feel grown up.

Q. Worst things?

A. I'm frightened that he will grow up to be horrible- because he is separated from his father it might have an effect on him.

Q. Do you ever feel that you could get more out of motherhood...?

A. No I think I'm getting a lot out of it. Maybe if I was still with his father, motherly life and life in general would be better. (19 year old single woman)

Clearly then, the existence of negative views about single mothers and about 'young mothers' could generate anxiety and stress in mothers who were on the whole confident that they were doing well as mothers.

12.5. On being a respondent

At each interview, questions on how the respondents had felt about the interview, the interviewer and the study itself were written into the interview. This was partly in order that interviewers could address any issues that respondents disliked about the interview procedure or the study itself, in order to facilitate response rates and keep interviewees in the study. It was also so that data could be obtained about respondents' views of the study and their perceptions of its impact on them. (See section 16, page 193 of the first interview schedule; section 13, page 196 of the second interview schedule and appended sheet On being a respondent of the third interview schedule). At the third interview the questions asked were designed to provide a picture of how respondents had found the study as whole.

Only the data from the first interview were coded. At the second and third interviews, the questions about the experience of taking part in the current study were those that were most likely to be

dropped when there were time constraints on the interview and it was not originally intended that they should be analyzed systematically. Nonetheless, these questions do provide some insights into young women's insider perspectives on being respondents in this study of mothers under twenty.

Table 12.1. Respondents' views on the first interview

Good	All right	Mixed	Bad	Total
35 (50%)	25 (36%)	8 (11%)	2 (3%)	70

Most women's responses at the first interview indicated that they did not find taking part in the study an aversive experience (see table 12.1 above). Only 14% mentioned that they had disliked anything about the interview at all. Those who did generally mentioned the intrusiveness of some questions and the length of time that interviews had taken.

Q. How did you feel about the questions you were asked?

A. Very nose they are... About your housing and how much money you earn and things like that.

Q. Did you mind being asked those questions?

A. Well I didn't really mind, but I think they are a bit personal.

Q. How did you feel about taking part in the study?

A. Um I think the last interview was a bit tiring. It seemed to go on for ever and ever and ever. But um - I thought oh God, when's it gonna get to the end of it you know.

Q. What about this interview?

A. No this one's all right. Weren't as long as the middle one. It seemed to go on for ever (187).

In the above example the second interview which the respondent claimed had gone on 'for ever' had lasted two hours while the third interview which she said was 'all right' lasted three hours. Her perception that it had been less long was inaccurate, but may have been generated by boredom or by pressures on her time at the second interview. It was the case, however, that a few women exclaimed in dismay when they saw the thickness of the interview schedules. Most of them, however, said that they thought that the interview did not take as long as they had anticipated from seeing the interview schedule.

Although responses to questions about the experience of taking part in the current study were not

coded in the two later interviews, the largely positive or accepting response to questions about being a respondent was reproduced in later interviews, partly, perhaps, because anybody who really disliked the interview may simply have made themselves unavailable for later interviews.

Q. How did you feel about taking part in the study (3rd interview)

A. Interesting.

Q. What was interesting about it?

A. Well it's not every day you get to sit down and tell people your problems... Makes you feel quite interested you know - I'm an interesting person. (054).

A. I usually sit and listen, so it makes a change to talk. (572)

A. I can say what I want. It gives me a chance to say what I want. (174).

Women appeared to enjoy the opportunity to be listened to with interest and without interruption; even apparently deriving some therapeutic benefit from it. The fact that women enjoy being listened to in the context of interviews has been identified by feminist researchers (Oakley, 1980; Finch, 1984). That most women did prefer to be interviewed by a woman is borne out by their responses to questions about their preferences for particular types of interviewers.

I don't know. I find it hard to talk to men I suppose. They don't seem to see things the way women do. (187).

Nearly two thirds (64%) of those asked at the end of the first interview said that they preferred to be interviewed by a woman, while only just over a sixth (17%) said that they would have preferred to be interviewed by a man. (See table 12.2 below).

Table 12.2. Respondents' views on interviewers

Views on Interviewer Age				
Prefer not own age	No preference	Prefer nearer own age	Total	
16 (26%)	27 (44%)	18 (30%)	61	
Views on Interviewer Colour				
Prefer not own colour	No preference	Prefer own colour/ethnic.	Don't know	Total
3 (6%)	39 (71%)	11 (20%)	2 (4%)	55
Views on Interviewer Gender				
Prefer a woman	No preference	To be a man	Total	
37 (64%)	11 (19%)	10 (17%)	58	

Table 12.2 (above) shows that with regard to other interviewer characteristics, the young women interviewed reported that they mostly had no preferences about the colour or ethnicity of their interviewers (71%) but were more divided about age preferences. Less than half (44%) of them said that they had no preferences about the age of their interviewers. The other 56% were fairly evenly divided between those who preferred an older interviewer and those who would have preferred their interviewers to be similar in age to themselves. Nearly a third of the women interviewed reported that they would have preferred their interviewer to be younger than interviewers were.

The reported indifference on the part of most women to the colour of their interviewer may have resulted from the fact that no attempt was made to deliberately match colour of interviewer and interviewee (although it sometimes happened accidentally). Respondents may have felt diffidence about expressing colour preference to an interviewer of a different colour from themselves. But even interviewees who were incidentally colour matched generally expressed no such preference. At the first interview, three black women (interviewed by white women) said that they preferred to be interviewed by white interviewers so that they would not be judged by people of their own colour. This is a preference not generally discussed in methodological debates about the colour matching of interviewer and interviewee. However, where women expressed a preference for colour or ethnicity of the interviewer they were more likely to say that they preferred to be interviewed by someone of their own colour or ethnicity. Although a couple of white women justified this by drawing upon racist ideologies it was more common for black and other minority ethnic women (including in one case a

Scottish woman) to say that they thought they would be better able to relax and to be understood if interviewers were of the same colour or ethnicity. The following quote is chosen because, although it was unusual, it demonstrates that, for at least some respondents, structural inequities related to 'race' are part of the interview situation, whether explicitly acknowledged or not.

If --- [white interviewer] had been doing the interview I would have had to tell her that the questions were too noseey because white people don't understand what a typical black family is like. Therefore, while white people might feel that they shouldn't ask too much about certain things because they're strange, black people would understand.

It is not being claimed here that this respondent would definitely have told the white interviewer that the questions were 'too noseey'. In fact she had reported that she enjoyed the previous interview with the white interviewer. Similarly, the only two respondents who were interviewed by men on the first interview also said that they had enjoyed the interviews. Although one of the women was not subsequently re-interviewed, the other again said at subsequent interviews that the gender of her interviewer did not matter.

An issue that was not addressed in the interviews was whether respondents minded being asked to be in the study in the first place. Ros Edwards (1990) found that, in contrast to white women, many of the black women mature students she approached in the hope of recruiting them to her study were resentful that their names and addresses had been passed on to a white interviewer by a white educational institution. They were also very suspicious of her motives for wanting to include them in her study. In this study the mode of recruitment was direct and personal (being approached in an antenatal clinic) and more than half of the black respondents were approached by a black interviewer (the author). However, it is difficult to know what impact this had on black and on white respondents.

It may well be that once women were engaged in the interview process, that power differentials did not interfere. Nonetheless, interviews were not conversational two way flows of information in the way that Ann Oakley (1980) and Janet Finch (1984) suggest that woman to woman interviews generally are. This may well be because (as Brannen, 1988 suggests) the relationship between the researcher and respondent varies with social class (and hence the power relations between them) as well as with the nature of the topic being studied.

In the current study, interviews were not generally interactive or conversational. Women usually answered the questions they were asked and reserved any questions they had (usually about the interviewers' marital status and whether they had any children) for the period after the interview. One explanation may be that although most of the women asked *used positive discourses* about the interviews, they did not really enjoy being in the study. However, it may well be related to

the fact that the respondents were almost exclusively from the working classes while the interviewers were all in middle class occupations. Brannen (1988) also found that working class women were less likely to engage in 'conversations' with interviewers.

The interview was much more likely to be interactive and to conform to the model of a conversation between equals, with the respondents asking the interviewer questions... with middle class respondents who are quick to realise their status equivalence with women researchers (Brannen, 1988:555).

A few women spontaneously said that they wanted to be interviewed by women who were mothers (and sometimes married) since they felt that they would be better understood by women in similar circumstances to themselves.

At the third interview the women were also asked about whether they had or would have preferred to be interviewed by the same person over the whole course of the study or preferred to see new people. The general response seemed to indicate a preference for continuity of interviewer.

I mean I'm getting to know the person that's been coming and I mean the first time I met you, you know I was a bit strange. I didn't know what to say... I mean it's easier today than what it was on the first visit. (062).

It seems, therefore, that the dynamics of the interview process are more complex than debates about interviewer-interviewee matching and style of interviewing often allow, particularly since different interviewees within the category 'woman' express different preferences with regard to interviewers.

Although women were generally positive about having taken part in the current study, they sometimes gave indications that they had not understood completely what the study was about. For example, one woman with whom rapport was established over the course of the three study interview asked after the last visit 'Well Ann, how are you? Are you a qualified social worker yet?' Confusion about the study was also apparent in some of the things other respondents said.

Q. Did you feel that you were given enough information about the study?

A. Um I found it very confusing... And I'm not really sure why the research is doing. It's okay. I enjoyed it. It's been quite, you know, it's been good... But I always wanted to know - I still would like to know why this research has been taken part (062).

A. I don't know why I'm being interviewed or you know - maybe I was told, but I can't

remember (Laughs). Why did you pick on me? (187).

Although women were told about the study and given handouts about it at each interview (see appendix 1), this confusion is perhaps not surprising since respondents were not familiar with research and did not really know what to expect. They had been recruited into the study from hospital antenatal clinics and those who were used to interactions with social workers and social security office staff may well have equated interviewers with workers in the health and social services. It may have been partly for this reason that some women also said that they thought some interview questions were too intrusive.

12.6. Summary

Researchers and other professionals who write about early motherhood are socially distant from 'young mothers'. Their 'outsider' constructions are public and accessible and have professional status while 'insider' constructions are rarely recorded.

In this study women draw on a range of arguments to explain the meanings that motherhood holds for them. These arguments were culled from a variety of discourses currently available. The lack of well paid employment for unskilled young people, developments in feminist ideology and its concomitant changes in how many women live, together with trends in marriage and divorce have resulted in a broadening of the discourses young women are able to draw on when thinking about marriage and motherhood. The constellation of arguments that they used served to distance them from the negative assumptions associated with 'young motherhood' and assert themselves as 'good mothers'.

When asked about their experiences of taking part in this study, most respondents gave positive or accepting responses.

CHAPTER 13: General discussion

13.1. Introduction

The central issue that has continued to exercise those who research and write on motherhood in the under twenties is its effect on young women and their children. Many published studies suggest that young maternal age is, in itself, causative of poor outcome for both mothers and their children and that the association between early motherhood and 'unplanned pregnancies' as well as high rates of single motherhood are particularly problematic (see chapter 1).

There is, however, an emergent literature which contradicts the negative focus of most research on mothers under twenty and argues that 'teenage motherhood' is not a widespread social problem. This body of literature points out that many studies on early motherhood are methodologically flawed and that assumptions that there are 'true age effects' in motherhood have served to obscure the processes that lead a minority of mothers under twenty to fare badly (see chapter 2).

The current study used women's accounts to gain an understanding of how London based, 16-19 year old women came to have children and of how they and their children fared over the first two years of the children's lives and of intra group differences between them. In doing so it attempted to avoid imposing a negative social construction of early motherhood on analyses of the women's accounts

The findings of this study indicated that early motherhood did not seem to constitute cause for general concern. The majority of mothers investigated appeared to be coping well with motherhood. Their children, according to maternal reports, and assessed on a standardised developmental test, were mainly doing well.

The findings of the current study have been discussed as they have been presented in each chapter. This chapter attempts to consider the implications of the findings for the general question of whether early motherhood is detrimental to young women and their children. It does this by identifying the contribution made by the present study to the understanding of a number of issues commonly addressed in literature on mothers under twenty. Since there is relatively little British research on mothers under twenty and their children, the current study makes more of a contribution to the literature than would a comparable study done in the USA. The thesis concludes by discussing critically the methodology used, the limitations of the findings and implications for future research.

13.2. Factors which led to conception and motherhood

The findings from this study did not support negative social constructions of young women's reasons for becoming pregnant. Women in this study had not conceived because they lacked knowledge

about contraception and none reported that they had wanted to become pregnant in order to get housing or welfare benefits.

Contraceptive use and non-use depended on a number of factors including fears of potential health risks; of breaching socially accepted gender relations; of parents finding out that they were sexually active, and doubts about their fertility. Women were less likely to use contraception at the start of sexual relationships than when relationships were well established. So although women who had wanted to become pregnant seemed different from the rest of the sample at conception, their sexual careers had often followed similar paths. Only chance had prevented some women from conceiving earlier in their sexual careers, and hence from fitting into the group often labelled 'non-contraceptors' in literature on contraception.

Studies of 'teenage pregnancy' often dichotomise 'planned' and 'unplanned' pregnancies. The findings from the current study demonstrated that such a polarisation is not useful to the understanding of why women under twenty become pregnant or of how contraception and sex education should best be taught. Only one in five reported that they had 'planned' to conceive. Women who had been 'trying', together with those who said that they had not 'thought about' the possibility of becoming pregnant and those who were 'not bothered' whether or not they became pregnant were much less likely than those who considered it 'important not to become pregnant' to perceive contraceptive use to be relevant to them.

Other studies have also found that some young women report that they are 'not bothered' or 'don't mind' whether they become pregnant (Simms and Smith, 1986; Morrison, 1985). Such women are usually considered as 'not having planned' their pregnancies and hence are included in the group who are categorised as having become pregnant 'accidentally'. However, the findings of this study indicate that the nuances of women's accounts are important to the understanding of their conceptions and that the three sets of bipolar constructs which are common in the literature ('planned' versus 'unplanned'; 'contraceptors' versus 'non-contraceptors' and 'wanted' versus 'unwanted') are inadequate.

The literature reviewed in the first two chapters of this thesis conceptualise reactions to pregnancy in women under twenty in two polarised ways. On the one hand the more substantial body of literature portrays pregnancy in this age group as a negative event. On the other hand some of the critical body of literature views such pregnancies as adaptive to circumstances and hence to be welcomed, or at least, understood. The findings from this study suggested that there was no uniform reaction to the ways in which young women and the people around them reacted to news that they had conceived.

Once they realised that they were pregnant those who felt pleased to be pregnant and those who felt unhappy about it were roughly evenly divided. Most women's parents and their male partners were not initially pleased that they were pregnant. The upset generated by news of the pregnancy was usually less if women were married, and if they were in their late, rather than early teens. Most women declared themselves to be opposed to abortion, and only a minority had considered having one. Even fewer considered having their children adopted although less opposition was expressed to adoption than to abortion.

Other people in young women's social networks also varied in their reactions to the pregnancy. In many cases both women's and other people's reactions demonstrated a process of coming to terms with, and then becoming positive about the idea of the child to be born.

13.3. Marital status over time

As would be expected from current demographic trends and from other studies of mothers under twenty, a minority of women in the current study were married or cohabiting when they conceived. The increase in cohabitation in most western societies makes a dichotomous married versus single categorisation increasingly unsatisfactory. The findings from the current study suggested that even a tripartite categorisation of marital status (married, cohabiting and single) does not fully describe marital status for mothers under twenty. For example, some women's marital status were dynamic, changing over the course of the pregnancy and after birth. Some single women married, or began to cohabit, while a minority of cohabiting or married women moved into single or separated status. In addition, relationships with male partners did not always fit neatly into the three categories, married, cohabiting or single. In pregnancy, for example, a few married women were not living with their husbands because they had no homes of their own. Later, a couple of women briefly separated from their husbands. Over the two years of the study some women moved into, and out of a state which can best be described as 'semi-cohabitation', regularly living with their male partners for only part of each week.

The findings of this study can also provide indications of reasons for the reduction in rates of marriage in mothers under twenty. It seems likely that this reduction at least partly results from three sets of reasons:

1. Negative attitudes towards men and marriage that more than a quarter of the sample expressed. But, this is not a complete answer, since even some married women felt that men benefit from marriage more than women do. Yet, most married women said that marriage had been a good idea for them. It is possible that married women found it difficult to admit that they may have made a mistake in marrying early or that those experiencing most marital

difficulties would simply have dropped out of the study. However, it is also likely that the married women considered that marriage was better for them than the other alternatives in their lives.

2. With the liberalisation of divorce laws the women in the present study were part of one of the first generations to see substantial numbers of their parents' generation become divorced. Women whose parents had divorced reported that they were keen to avoid similar problems and, for some, this involved the avoidance of marriage.

3. With high rates of youth unemployment, many of the men who fathered the children of women in this study were unemployed or in poorly paid, insecure employment. They were, thus, unable to make much economic contribution to their children and children's mothers. Some support for this comes from the fact that teenage women who had followed the conventionally accepted trajectory of marriage then conception did seem to fare better economically than teenage women who conceived while they were single. Although this could be interpreted in similar ways to that common in much of the literature, ie that 'young mothers' would benefit economically from the institution of marriage. However, there is reason to believe that the young women who are most likely to follow this career path are those whose male partners are relatively high earners (compared with other men who impregnate teenage women). The poor economic profile of men who father the children of women in their teenage years has been found in other studies (eg Simms and Smith, 1986). It thus seems unlikely that most 'teenage mothers' would fare better if they married instead of remaining single although this assumption is common in much literature on 'teenage mothers' (eg Ineichen, 1986).

Women's accounts were silent on the third set of reasons mentioned above; economic reasons for marrying. They also did not mention love as a reason for marriage. This is probably because marriage for money is now not overtly sanctioned in western societies while it is taken-for-granted that people marry for love. Both sets of discourses were thus not available to the women; in one case because it is invisible and in the other because it is too obvious.

The four main reasons women actually gave for having married were; normative expectations that they should marry early; having had a satisfactory period of courtship; for instrumental reasons (eg. to leave home) and because marriage and motherhood had always been considered the most important careers women could have.

Questions about men and marriage demonstrated not only silences in women's discourses, but also

contradictions in their accounts. Thus some women described marriage as being only beneficial to women but went on to describe only its disadvantages.

13.4. Social networks and social support

Although social support has become an increasingly popular topic of study it has not received much attention in studies of mothers under twenty. This study makes some contribution to that literature.

Women's social networks were measured according to the monthly social (rather than incidental) contacts in person and by telephone. Social networks varied in size and density. However, analyses of women's accounts revealed that while monthly social contacts provide a guide to women's social networks (and hence to their potential sources of support) it was not wholly adequate. People with whom women were not in frequent an/or regular contact were sometimes important members of their support networks. This was especially likely to be the case for close family members. In terms of feelings of being supported, there was no one to one correspondence between the number of people in women's networks, and how supported they felt. Women who reported that they had someone with whom they **could** discuss personal matters were not more likely to report that they felt supported than those who did not have such support available. However, this did not mean that social support made no difference to the women's lives. The availability of social network members did protect women from some negative feelings such as of loneliness and provided them with practical support.

Relatives, particularly mothers were important in supporting many women. Even where women were married, and male partners were making financial contributions to their households, some parents supplemented their daughter's standard of living. There were also indications of some of the costs of parental social support (in terms of obligation and lack of privacy).

13.5. Children's care and development and women's feelings about motherhood

The first two chapters established that a major focus on early motherhood concerns the welfare of children born to women who are under twenty years of age when they give birth. Most research on mothers under twenty gives little emphasis to their own perspectives on childcare. However, research which does generally finds that they are generally positive about having become mothers early in their life course (Willard Williams, 1990; Simms and Smith, 1986). This was also the case in this study. The evidence from the current study suggests that up to 21 months of age (when the study ended) there was no evidence that most children's welfare was at risk. Over their first 21 months most women were positive about their children and about motherhood.

Most women in the present study cared for their children full time. At 21 months three quarters of the sample were at home full time with their children. Two thirds of the women had someone (usually a

female relative) who would look after their child for a couple of hours each week. But the majority of childcare was done by women themselves.

Women were familiar with popular medical and psychological thinking about children's needs. They reported that children needed emotional nurturance, nutritious food and stimulating play in order to develop well and to be happy and healthy children. Many women reported that they would have liked to be able to afford more educational toys and clothes. A few mentioned that they could not afford as nutritious food as they would have liked for their children. Women tended to give priority to their children's material needs in preference to their own, reporting that they 'went short' in order to buy things for their children.

Women thus accepted dominant western ideologies which suggest that childhood should ideally be a commercialised period with educational toys and smart clothing being lavished on children. Poverty made the acceptance of such ideologies potentially oppressive because many women could only afford to buy their children manufactured toys by going short of things they themselves needed. However, women did not experience such ideologies as oppressive but simply took them for granted as established knowledge.

Twenty one months after birth children's developmental status was assessed using the Mental Scales of the Bayley Scales of Infant Development. Most children scored above the standardised norm. The facility with which the great majority of the children could do some of the tasks deemed more difficult within the Bayley test (such as clock recognition) suggests that the standardised norms may be outdated as daily life becomes more technological.

13.6. The women's experiences of employment and education after birth

Much literature on early motherhood addresses its negative impact on young women's educational and employment prospects, but does not investigate, in depth, women's feelings about, as well as experiences of, education and employment in conjunction with describing their experiences.

Most women who became mothers before they were twenty years of age in the current study had neither been academically inclined nor in jobs which offered training or career prospects. In addition the majority of them considered that motherhood was at least as important a career as (and for some, more important than) employment. As a result they did not appear to have their employment or educational prospects damaged by early childbearing.

Many of the women interviewed felt that they should not leave their children in the first years after birth. Their apparent choice to stay at home full time was not, however, an entirely free one because

employment would not have been practicable for most. This was because firstly, jobs would not necessarily have been available to them and, secondly, they were unlikely to be able to earn enough to enable them to afford to pay for childcare. Thus, women's attitudes to motherhood in combination with social conditions in which childcare is scarce and takes a large proportion of many working class women's income, made it unlikely that most would return to employment or education (even part time) before their children started school.

In practice, therefore, only certain groups of women could afford to be employed. These were married/cohabiting women whose male partners earned a reasonable wage and single women who either managed to get a cheap nursery place, a childminder paid for by social services or whose relatives were able to look after their children.

Furstenberg and his colleagues (1987) suggest that marriage appears to depress young women's educational achievements (and hence their employment opportunities) after birth. In this study no married women studied or were employed full time outside their home (although one was a full time childminder at home and others worked part time). Most women who were either employed or in education were single (two were cohabiting). There may be a number of possible reasons for this. It may be that single women are more likely to feel that they should attempt to improve their children's economic position by seeking educational qualifications or by being employed, while married or cohabiting women may feel that their children's fathers have major responsibility for making economic provision for the children. Ironically, those married women who stayed at home with their children were simultaneously in a devalued age group of mothers, and in conventional positions with regard to marriage and provision for children.

A further possible reason for the greater economic activity of single rather than married women may be because married women have little chance of obtaining council day nursery places for their children. Social services departments are more likely to treat single women more favourably than married women when it comes to the provision of scarce nursery places and sponsored childminders because being single is considered by many to be an indicator of disadvantage. In addition women who lived with their parents were sometimes supported and encouraged in employment by mothers who provided childcare. By 21 months all married and cohabiting women had moved away from their parental homes.

The only woman who was continuously employed throughout her pregnancy and child's life found the effort of combining motherhood and employment so draining that she would have preferred (had her child's father been prepared to support her) to give up employment. The stresses involved in combining motherhood and full time employment or education led a few women to discontinue their

educational courses or employment.

The literature review in chapter one established that the focus of most literature on early motherhood is on its reportedly damaging consequences for the women and their children. However, there are indications from this study that, for a few women, motherhood acted as a spur to improving their educational qualifications in order to provide well for their children. For those women early motherhood can be argued to have had a beneficial rather than a deleterious effect. The numbers of those employed and in education in the present sample are too small for any conclusions to be reached about whether and, if so, why married women are less likely to seek employment or training. It is also not possible to say whether such small differences are sustained over time, particularly as two married women reported that they intended to return to education at some time in the future.

13.7. Accounting for the findings

Most women in the study that informs this thesis reported positive experiences of motherhood. Few expressed regrets about it or felt that motherhood had adversely affected their lives. Almost all were positive about their own children and the children seemed to be developing well. Their 'insider' accounts all used discourse that emphasised that they were doing well (sometimes by comparing themselves favourably with other young women who were in similar positions).

Given the weight of research reports which stress that 'teenage motherhood' has negative consequences for the mothers and their children, it is reasonable to ask why the findings of the current study are so positive in comparison. Why were women who by virtue of their ages might be expected to be engaging in youth cultural practices and developing 'style' rather than taking on the responsibilities of childcare reportedly so content with motherhood?

In addressing that issue a life course perspective has been used to explore many aspects of the lives of the women reported in the current study. Relationships with parents and male partners; the social support available to them; socioeconomic circumstances including education, employment, housing and welfare benefits; feelings for children and satisfaction with motherhood have all come under scrutiny. In other words the most significant 'careers' in women's lives have been explored.

From the findings of this study it is possible to identify a number of factors that may account for the generally positive findings. Some of these are pertinent to the sample as a whole while others demonstrate intra group differences:

1. The social context in which the young women gave birth.
2. The life course 'career' discourses they subscribed to.

3. Intragroup differences, for example, in terms of age (whether women were 16 and 17 years of age or 18 and 19 years of age), marital status and social support.

1. The social context

What has been referred to in this thesis as 'the critical literature' on early motherhood consistently makes the point that most literature on this topic ignores the social context in which some teenage women become mothers (Willard Williams, 1990). This context affects young women's experiences and the ways in which they report their feelings about them. Failure to take account of the social context leads to the confounding of socioeconomic factors with age in many studies (Geronimus, 1987).

Concerns about the effects of early motherhood on women and children often seem to be based on the assumption that they would necessarily fare better if they deferred motherhood beyond the teenage years. Yet the available evidence suggests that most (and certainly white 'young mothers') have already failed national examinations or left school without taking them before they conceive (Rhode and Lawson, in press; Edelman and Pittman, 1986). Prior to conception most 'young mothers' have experienced difficulty in finding permanent jobs. Their male partners come from similar backgrounds and, having equally poor experiences of the employment market, are mostly unable to make much financial contribution to women and children. It also seems that early motherhood is most likely to occur if young women have experienced unemployment (Penhale, 1989). The deferment of motherhood, therefore, would not necessarily improve these young women's socioeconomic circumstances.

Since most women who become mothers in their teenage years are inexperienced and unqualified when they enter the labour market, the employment opportunities available to them are limited, particularly in periods when youth unemployment is high. This may be particularly so for young black women. The jobs the women who become mothers in their teenage years are generally able to get provide little possibility of career progression and are usually poorly paid. As a result the intersection of the motherhood career with employment and educational careers often makes less difference to those who give birth early in their life course as it is for women whose educational or career trajectories are such that career breaks are likely to result in downward mobility and to be costly in terms of loss of potential earnings (Joshi, 1989).

The implication of this is that early motherhood is likely to be less disruptive of the lives of those who, because of their socioeconomic and educational backgrounds have limited life chances. It is likely to be more problematic for those who have better employment and educational prospects. The few young women in this study who had some prospects were sometimes frustrated in their attempts to

pursue their educational and employment careers. On the other hand having a child opened the possibility of pursuing educational and employment careers for some young women who had previously not considered this.

Boulton's (1983) findings suggest that working class mothers may be more satisfied with motherhood than middle class mothers. She found that women who have had experience of dull, unskilled and uncreative work are more likely than women who have been in skilled, prestigious occupations in which they have held responsibility to give a positive assessment of their experiences of motherhood. Boulton argues that different employment experiences prior to birth tend to develop different expectations of how rewarding daily life should be. 'It is not surprising, then, that the working-class women were more satisfied than the middle class women with a less than highly rewarding experience' (p.196). This explanation, together with the fact that motherhood provided a higher social status for most of the women than education or employment had, may account for the high levels of satisfaction with motherhood reported by mothers in this study.

The majority of women interviewed in the current experienced poverty. The fact that they were doing well did not indicate that poverty did not affect them or their children. Although they got a great deal of pleasure from caring for their children, women's lives were complicated by their material circumstances. Since most of their male partners, many of their parents and the women themselves had poor experiences of the labour market, many were dependent on social security payments for income. Women found it difficult to manage on the supplementary benefit (the welfare payment available at the time) they received. Lack of money was the major problem most women reported that they faced. Even women whose partners earned well in comparison with the rest of the sample reported that they had financial problems. Women's parents were invaluable in giving any childcare and material help they could. Many, for example, provided women and their children with meals as well as clothes and equipment for the children. The help they could give was, however, limited by the fact that most had little money to spare and, if employed themselves, little time available to provide childcare.

It is well established that the living standards of many lone parents are unsatisfactory (Millar and Bradshaw, 1987) but in this study many couples were also struggling to bring their children up, providing further evidence that marriage is not sufficient in itself, to improve women's economic position. This study ended while children were still toddlers. It may be that as children grow up, those women who manage to have enough economic resources to treat their children's childhoods as the commercialized products of western cultural invention (Kessen, 1982) are those who continue to feel more satisfied with motherhood.

2. Women's life course 'career' perspectives

Work on mothers under twenty is invariably done by people who are older than teenage and of a different social class position from most mothers under twenty. It is thus, 'outsider' constructions which gain widespread currency and which impinge on 'young mother's' lives. 'Insider' constructions are rarely recorded (Willard Williams, 1990). One aim of the current study was to examine women's accounts from their own perspectives and to analyze the discourses they used when talking about their own situations.

Almost all the women's accounts were positive about motherhood and about how women were coping as mothers. This was generally so regardless of whether or not women had reported that they had experienced negative feelings about themselves (such as depression) in the previous month. Women draw on a range of arguments to explain the meanings that motherhood held for them. These arguments were culled from a variety of discourses currently available. The lack of well paid employment for unskilled young people, developments in feminist ideology and its concomitant changes in how many women live, and trends in marriage and divorce have resulted in a broadening of the discourses young women are able to draw on when thinking about marriage and motherhood. Yet this widening of perspective does not necessarily change the status quo because it does not dramatically increase the alternatives open to women. Rejection of marriage as an ideal for women does not, for example, allow them to perceive any real alternatives to marriage in the long term. Similarly, women may not be opposed to the employment of mothers with young children, but not be able to find jobs which pay well enough for them to afford childcare. The ideas women drew on to describe their situations reflected these contradictions in their positions.

Women did not simply accept normative assumptions about motherhood, age, marriage and employment. Instead they subscribed to ideas which suited their particular circumstances and beliefs. Although broad themes can be picked out from accounts, different women chose different constellations of arguments. Nor did women use one set of discourses consistently. Most, for example, accepted feminist arguments about the impact of marriage on women. Yet many rejected feminist ideas on employment and motherhood. This illustrates the ways in which ideas gain popular currency because they accord with common sense assumptions and people's own experiences and desires (which are themselves socially produced). [See Riley (1983) and Tizard's (1990) discussion of 'ideological gateways' for further discussion of this issue]. Since the young women in the current study were in a devalued group of mothers they had more investment in defending themselves against possible criticisms than may other groups of mothers. They did not do this by means of a strong group identification but instead chose to distance themselves from the negative assumptions associated with 'young motherhood'.

Their discourses with regard to the ideal age of first time mothers provided an instance of a relatively unified discourse among the young women studied. Most women interviewed in the current study had long anticipated that motherhood would be the most fulfilling aspect of their lives. The majority had expected that they would become mothers earlier rather than later in their lives. Those who said that ideally they would have deferred motherhood mostly said that their preferred age to have children was only a couple of years older than their current age. Furthermore, early motherhood was common in most women's social networks. Most had friends and relatives who were having or had had children at similar ages. Many of their own mothers had also had first children before they were twenty or soon afterwards. The age at which they became mothers was not, therefore, unusual within their social networks.

Whatever the constellation of the discourses to which women subscribed, those discourses allowed them to maintain a positive sense of themselves as mothers.

3. Intra group differences

Mothers who are under twenty when they first give birth are often discussed as if they constituted a unitary group. This is not the case. They differ with regard to colour and ethnicity, marital status, employment histories, reasons for becoming pregnant and having children as well as with respect to how they and their children fare. There are also differences between younger (under 17s) and older (18 and 19 year old) mothers under twenty (see chapters 1 and 2).

In the current study there were differences between older and younger teenagers. Older teenagers were more likely to have been trying to become pregnant or to have been using contraception while younger women were more likely to have considered it important not to conceive. Older women were also more likely than younger women to be married or cohabiting. Other people in the women's social network also reacted differently to news of their conceptions by age of the woman. The older teenagers were less likely to be censured for being pregnant than were their younger peers. It also seemed that those few women who were experiencing real problems with motherhood were ones who had been 16 or 17 years old when they gave birth. Caution is required in the interpretation of these findings since there were few 16 and 17 year olds in the study and only a couple of those studied appeared to be experiencing serious problems. British literature on motherhood in the under twenties does not agree on whether there are differences in outcome between teenagers under 18 years of age and those of 18 and 19 years. Butler et al. (1981) found such age differences for some factors while the London Hospital study did not (Wolkind, 1984). Simms and Smith (1986) however, found no age differences for many things but reported that 'disaffected mothers' were more likely to be younger than older teenagers. The question of whether there are clearly discernible differences between younger and older 'teenage mothers' needs further investigation.

Relatives, particularly mothers, were generally very supportive in providing childcare and material resources in a way that male partners frequently were not. In many cases parental support seemed crucial to the good outcomes found. However, there were a few women who did not have access to as much social support as most of the women interviewed, usually because their mothers were not available to them. Given the disadvantaged circumstances in which most of the mothers were bringing up their children, it seems that those who do not have access to adequate social support are further disadvantaged.

A further difference between the women in the current study was in their marital status. Women's marital status appeared to have more complex effects than is usually assumed in literature on mothers under twenty. Those women who had married before they conceived tended to marry men who could make an economic contribution to their households. If they also got on well with their husbands and received some social support from them, they were likely to fare well. Equally, however, single women who were happy with their status and well supported by their families were also likely to fare well. On the other hand women whose husbands or cohabiters could make little economic contribution to their households; who did not get on well with their husbands and felt unsupported by them experienced dissatisfactions with their circumstances (although not usually with their children). Similarly single women who would have preferred to be married and considered that their financial problems would be alleviated by marriage, were also unhappy with their circumstances.

13.8. Limitations of the study

This study was a relatively short term one which had high rates of attrition and relied on one test result together with maternal reports for evidence on children. Its findings cannot, therefore, be assumed to be generalisable and further research needs to be done if many issues are to be clarified.

1. **Lack of comparison groups**

One of the methodological criticisms of research described in literature on early motherhood is that it uses inadequate comparison groups (see chapter 2). This study sidestepped that issue by concentrating on intra rather than inter-group comparisons. It could, however, be argued that this is not satisfactory because it does not address directly the issue of whether youth is the most important independent variable when considering the effects of early motherhood.

One recent study has come up with an ingenious solution to problems of inadequate comparison groups in studies of mothers under twenty. Geronimus and Korenman (1990) used secondary analysis of large scale data sets to compare the socioeconomic circumstances of women in the USA who became mothers in their teenage years with those of their sisters who did not. The use of sisters allows comparison of people who genuinely come from the same socioeconomic backgrounds but

who have become mothers at different times. This method would, however, not be feasible for a relatively small scale, in-depth interview study starting during pregnancy since the number of sisters who could be recruited into the study at that time would be limited. Nonetheless, although sibling studies have been used in other research (notably in research on genetic influences on intelligence), theirs is an important methodological innovation in the study of mothers under twenty.

There are other possible comparison groups that, potentially, could yield interesting data on mothers under twenty. A comparison of the relatively few affluent women who become mothers under twenty with the majority of more impoverished mothers under twenty would help to disentangle features that are related to age from those related to poverty. The major problem with this, of course, is that it is impracticable since the scarcity of affluent mothers under twenty would make them difficult to find and sample sizes small. Further potentially interesting comparison groups would be of more academic/well employed women who have children early in their life course with the majority who are poorly employed and do not have secure, well paid employment. Those who marry prior to conception could also be compared with those who marry after conception and those who remain single. The childrearing styles, satisfaction with motherhood, economic circumstances and later employment/education patterns could be compared. Some of these comparisons were made in this study but such intra-group comparisons were of small sub groups of the sample. It would generally be difficult (although not impossible) to recruit sufficient such sub groups of women into studies of early motherhood.

2. Sample size

A related limitation of the current study is its reliance on a relatively small group of mothers under twenty, and hence the inadvisability of using statistical testing for most analyses which required the sample to be divided into small sub groups. But, conversely, one of the strengths of the current study lies in its detailed qualitative analyses of young women's accounts. It would require a great many researchers to conduct both types of study simultaneously.

3. Attrition

The major limitation of this study is in relationship to the sample recruited and later attrition. The difficulty of finding people at home in order to interview them, together with higher than desirable rates of attrition over the three contact points makes it difficult to generalise from the findings of the study. This is particularly so since there were indications that women who were not interviewed were likely to be those who had most house moves, sometimes because relationships had broken down. However, it is difficult to see how such attrition can be avoided for a sample of this kind, but attrition does limit the conclusions it is possible to draw on the basis of the data from this study.

Attrition also limited the longitudinal nature of the study since it reduced the number of women who were interviewed at all three contact points. It could also be argued that the study was too short term to be able seriously to address issues of outcome for young women and their children. There are, however, few studies which attempt to follow up 'young mothers' and their children over the first two years of their children's lives. The study makes an important contribution to understandings of what happens to young women and their children during infancy and early childhood. It is, perhaps, more accurate to view the study as cross sectional with a longitudinal element than as longitudinal per se.

4. The methodological validity of reliance on respondents' accounts

A further potential limitation of this study is that it relies mainly on maternal reports for indications of children's developmental status. The one direct measure of children's development used was the Bayley Scales of Infant Development. Some psychologists are critical of a reliance on accounts on the grounds that they produce distorted rather than true representations of reality (Kagan, 1984) and as such is argued to be as useless to a genuine understanding of individual psychology as introspection is. Other psychologists have avoided the issue of truth values in accounts by focusing only on the discourses represented within accounts (Potter and Wetherell, 1987; Kitzinger, 1987).

The current study aimed to take seriously young women's perspectives as presented in their accounts rather than dismissing them as simply being inaccurate retrospective reconstructions of their experiences. There is no other way to get at other people's perceptions of their experiences. In this, the present study is not dissimilar to studies of older mothers which also generally have a large interview component.

A reliance on accounts does not necessitate that those accounts be taken at face value as if they constituted the whole and only story. Hollway (1989) demonstrated that silences (discourses that are potentially available but not referred to) are important in analyses of subjectivity since respondents are unaware of some aspects of their circumstances and of their sub/unconscious desires. Van Dijk (1987; 1992) has also shown that some 'elites' manage their self presentation in ways that allow them to present a positive view of themselves as 'not racist'.

In addition (as the 'critical literature' reviewed in chapter 2 makes clear) there are always alternative explanations of an account or event which it can be difficult to disentangle. An example from the current study makes this clearer. It has been argued (chapter 5) that women become increasingly positive about having a child by the time they are pregnant. Alternative explanations for the fact that young women report such positive reactions by late pregnancy may be either:

1. That this reflects the human capacity for 'making the most of a bad job', particularly since

the birth of babies is socially constructed as an exciting event in most societies.

2. That positive reports are an artefact of a reliance on accounts since there is a tendency for people to portray themselves and their circumstances as positively as possible.

The data from this study can neither confirm nor disconfirm these possibilities. It can, however, do three things to support those conclusions. Firstly, it can give indications of how children were viewed after birth which, since most women were pleased with their children and with motherhood, provided some support for the fact that childbearing became a positive event for the young women. Secondly, it can show that some women did express negative feelings about conception, pregnancy and their children and thus indicate that at least some women did not simply portray themselves in the best possible light. Thirdly, it can give indications of how the structural factors that form part of the social context in which young women with children become the subjects of this research, had narrowed the available life course options other than motherhood and hence made motherhood attractive in comparison. Finally, it can also examine the discourses women used and demonstrate differences between 'young mothers' as well as contradictions in their accounts.

An examination of women's reasons for marrying or not provides substantiation for the view that it is unsatisfactory in analyses solely to rely on the face value of respondent's accounts without considering other factors such as what could be said but is not, or socioeconomic factors. In this study women did not mention economic reasons for marrying. But, there was some evidence that women who married before they were pregnant were more likely to have male partners who were relatively affluent (in comparison with the rest of the sample) than women who married later or who did not marry.

Other areas where it may be argued that it is difficult to get accurate data from accounts include sexual behaviour, previous conceptions, social support and cohabitation. In the current study the longitudinal design did enable one woman who had denied that she was pregnant at the first interview to reveal that she had a son who had been adopted (see chapter 4). However, questions on sexual intercourse were dropped because the embarrassment they appeared to cause respondents could, potentially, have threatened the longitudinal element of the study.

With regard to social support, it may well be difficult for people to remember accurately what their friends and relatives do for them. However, analyses of women's accounts on a range of subjects demonstrated that young women's expectations of support affected their reporting of help with various tasks. Some, for example, took for granted help from mothers and sisters and under reported it in answer to direct questions. Help from male partners was less likely to be taken for granted and more

likely to be reported.

With regard to cohabitation, it can be argued that women who were dependent on supplementary benefit are unlikely to be completely honest about cohabitation if they have not declared it to the Department of Social Security. One woman, however, was explicit about not having told the DHSS that she was cohabiting, and women reported a range of marital status. Gaining the confidence of respondents seems to override problems of deliberate distortions of the truth, even about potentially delicate matters.

The use of diaries was discounted in this study since some women did not have high levels of literacy. There would have been other limitations if mother-child observational procedures had been used since these are intrusive, time consuming and cannot guarantee to capture 'naturalistic' behaviour. Many studies use only infant assessment procedures in comparing mothers under twenty with older mothers. The combination of maternal report and infant assessment in this study can be argued to provide rich data, particularly since accounts were not treated as the simple 'truth' but were accepted as social constructions that provided insights into women's subjective experiences. In presenting examples of women's accounts, the current study lays its interpretations open to scrutiny and hence alternative interpretation.

5. Black-white differences

Chapter 2 discussed at some length the limitations of studies that assume that there are essential differences between black and white mothers under twenty. The present study could be criticised for not following the usual pattern of studies of mothers in this age group and presenting black-white comparisons for all the data analyzed (see chapter 3 for discussion of reasons for not doing this). The lack of such routine comparisons is not intended to imply that it is not acceptable or worthwhile to conduct black-white analyses. Rather it is in recognition of the fact that such comparisons are unsatisfactory and often meaningless unless they carefully theorise the social ecology in which different groups live. Mercer Sullivan's (1987) small scale ethnographic analyses provide a creditable example of black-white-Hispanic comparisons of the fathers of children born to mothers under twenty in the USA. Sullivan's methods are, however, not feasible in studies such as this which are larger scale and not ethnographic.

6. Comparability of data

On the whole the central themes addressed in this thesis were followed through in the three sets of interviews done in the current study. This was usually done by repeating questions on the three occasions when the women were interviewed. Particularly at the third interview which aimed to be shorter than the other two, some questions were not repeated in the same way they had been asked

in the first two interviews. Instead, more general questions were asked to elicit the same themes in fewer questions. In many ways this is unfortunate since it prevents direct comparability across the three interviews. However, a deliberate decision was taken to do this in order to allow time for the checking of certain key features of women's life stories (such as marital, household and employment histories) and to present the Bayley Scales.

One benefit of not using directly comparable questions is that it has allowed some methodological insights into the effect of the forms of questions asked. It seemed, for example, that more general questions usually elicited different types of answers from more specific ones. Questions requesting information about what usually happens produced different information than questions asking specifically for descriptions of last week. One way of dealing with this discrepancy would be to ask only specific questions grounded in practical realities. However, the general answers given to general questions also provide insights into the discourses women draw upon. Both types of questions are, therefore, valuable and can be usefully interspersed throughout interviews. Research in cognitive development has demonstrated that the form of the question put to children can have powerful effects on the answers that children give (see for example Wood, 1988).

A related limitation concerns the amount of 'missing' data in the study. In any large scale interview study with several interviewers there is likely to be variability in coverage of interview questions. This variability was compounded in the current study where it was necessary to accept that some interviews could not be entirely completed in the time available. Thus for many questions there are fewer responses than there were respondents.

A further limitation related to the issue of comparability regards its usefulness in terms of comparability of studies which will be done in the future. In the relatively short time since the current study has been completed there have been a number of social changes which have an impact on mothers under twenty. These range from changes in the school examination system to changes in the British welfare allowances and in council housing. The social context in which future generations of mothers under twenty and their children will live is thus different from that reported for women in the current study. This is, of course, an unavoidable problem for any social research. Hopefully, however, the fact that the social context has been described, rather than left implicit in this thesis, will allow comparisons of context as well as results and hence aid understanding of the impact of social context on early motherhood.

Finally, this thesis does not contain all the analyses possible for this study. The quantity of data collected was too vast for that to be possible. Thus the women's educational experiences are hardly discussed here, childcare support is omitted (see Phoenix, 1991) as is discussion of those areas

where differences related to 'race' and ethnicity have been analyzed (see Phoenix, 1988b).

Given the limitations discussed above the findings discussed in this PhD thesis are better considered as insights into motherhood in the under twenties rather than definitive answers about them and their children.

13.9. Issues for further research

In many ways this study has raised as many questions as it has answered. Despite the plethora of studies that are consistently being done on mothers under twenty (particularly in the USA) various issues require further study in order to tease apart the factors that lead to good or poor outcome in this age group of mothers. There is a need for more studies which take different theoretical approaches to early motherhood than those found currently in most literature. For example, there is a dearth of studies which do not start from a perspective that assumes that early motherhood is necessarily problematic. More studies which take a life course perspective, considering motherhood as a 'career' to be viewed in the context of other life course careers would also aid understanding of 'young motherhood'.

The findings of the present study suggest a number of other important areas for further research. There is a need for studies which do not focus on chronological age as if it is either static or necessarily indicative of developmental status. This study has demonstrated that there are many differences between women who give birth while in their teenage years. It is also, of course, a truism to point out that women who first give birth in their teenage years often also give birth in their twenties. As Geronimus (1987) suggests, the assumption that there are 'true age effects' can, in itself, lead to a confusion of causes and consequences in the study of early motherhood.

There have been recent increases in rates of contraceptive advice seeking and of conceptions to teenage women who are under 17 years of age (CSO, 1992). Yet the indications from the current study are that the under 17s may experience more problems in motherhood than those aged 17. A detailed study of conception and motherhood in the younger age group would thus be potentially helpful.

Another important area for further research on mothers under twenty is to do with research that is 'ecologically valid' in Bronfenbrenner's (1979) terms. Thus there are relatively few studies which attempt to theorise and analyze the ways in which the social contexts in which young women and their children live and from which 'young mothers' come, have an impact on their lives. For example, the importance or lack of importance of marriage for this age group of mothers in terms of what male partners contribute to women, children and their households needs to be analyzed in a way that does

not idealise marriage. The fathers of children born to teenage women (whether or not teenage) also need more investigation in ways which do not stereotype them and which illuminate the conditions in which young men are and are not supportive to the young women with whom they have children.

Studies of early motherhood can potentially make useful contributions to thinking about issues of sex education and contraception. These issues are arguably, more pressing than they were when the women described in this study were interviewed since AIDS has since become more prevalent. Data from the current study would suggest that young women had strong feelings about specific forms of contraception and that relatively few perceived contraception to be relevant to them. Studies which engage with the issue of how young people come to see specific forms of contraception as desirable and relevant to themselves are sorely needed. The research done by Holland et al (1991) and Breakwell and Fife-Schaw (1991b) provide indications of the circumstances in which young people are likely to feel able to use condoms. With recent increases in the incidence of HIV infection and AIDS more such studies are urgently needed. There is also a need for studies of young people's experiences of contraceptive services.

Another study that could usefully be done is an in-depth British comparison of young women who currently have abortions but come from similar socioeconomic backgrounds to those who go on to become mothers. This would help to sort out the impact of background factors on becoming pregnant and on decisions to have/not to have a child at that time.

More follow up studies of 'teenage mothers' and their children are also necessary in order to collect evidence on the long term consequences of early motherhood. Few such studies exist (Furstenberg et al., 1987; Card, 1981) and despite their limitations they provide much useful data. A retrospective study of women's perspectives on having become mothers under twenty would also illuminate issues such as the long term interrelationship of poverty and having given birth in their teenage years.

It is also important to get more information on how children born to mothers under twenty fare and the children's positions, when older, with regard to using and contributing to household resources; educational achievement; behaviour etc. In addition mothers' childrearing philosophies once their children have left infancy could be investigated. Data on the children could be collected from a variety of perspectives. For example grandparents and fathers of the children could be interviewed about the social support they provide to the women and children, their perceptions of it and of how the children are being brought up. This relates to two further gaps in current literature on mothers under twenty and their children. Firstly, there are few of studies directly of the male partners of 'young mothers' and of their parents. Secondly, there is an absence of research on the function and long term availability of social support in early motherhood.

Differences between mothers under twenty, regardless of whether these are based on 'race' and/or ethnicity, marital status, age, social support or economic status also require attention that recognises the complexity of both differences and similarities between groups and grounds them in their social ecologies. Detailed national as well as local studies would also be helpful.

Finally, to finish this thesis on a flight of improbable and impracticable fancy, many of the questions commonly asked about mothers under twenty could be addressed in one study if money and researchers were no object. This fantastic study would use a differentiated, stratified sample of the full childbearing age range (not just teenage women) nationally in a range of countries and would combine secondary analysis, large scale surveys, in-depth interviews and ethnography so that a range of quantitative and qualitative methods were combined. The sample would include the relatively rare middle and upper class women who give birth in their teenage years; fathers and women who have abortions rather than giving birth. It would include cross sectional and longitudinal elements and focus on a full range of life course 'careers'.

REFERENCES

- Alan Guttmacher Institute (1976) Eleven Million Teenagers. New York: Alan Guttmacher Institute.
- Alan Guttmacher Institute (1981) Teenage Pregnancy: The Problem That Hasn't Gone Away. New York: Alan Guttmacher Institute.
- Allen, I. (1987) Education in Sex and Personal Relationships, Policy Studies Institute, London.
- Antonis, B. (1981) Motherhood and Mothering. In Cambridge University Women's group (Eds) Women in Society: Interdisciplinary essays. London: Virago.
- Archer, J. and Lloyd, B. (1982) Sex and Gender Harmondsworth: Penguin.
- Arney, W. and Bergen, B. (1984) Power and visibility: The invention of teenage pregnancy. Social Science and Medicine, 18 (1).
- Bachrach, C. (1986) Adoption plans, adopted children, and adopted mothers. Journal of Marriage and the Family, 48, 243-253.
- Balakrishnan, T.R., Rao, K.V., Krotki, K.J. and LaPierre-Adamcyk, E. (1988) Age at first birth and lifetime fertility. Journal of Biosocial Science, 20 (2), 167-74.
- Ball, L. (1989) Pregnant young women and YTS: no choice. Maternity Action, 40, 10-11.
- Barker, P. (7.11.1989) The ethnic question. The Independent Newspaper
- Basker, E. (1986) The 'natural' control of fertility. Sociology of health and illness, 8, 3-25.
- Bayley, N. (1965) Comparisons of mental and motor test scores for ages 1-15 by sex, birth order, race, geographical location and education of parents. Child Development, 36, 379-411.
- Bayley, N. (1969) Manual for the Bayley Scales of Infant Development. New York: The Psychological Corporation.
- Belle, D. (1982) Social ties and social support. In D. Belle (ed.) Lives in Stress: Women and Depression. Beverley Hills: Sage.
- Belsky, J and Miller, B. C. (1986) Adolescent Fatherhood in the Context of the transition to parenthood. In A. B. Elster and M. Lamb (eds) Adolescent Fatherhood. Hillsdale, NJ: Lawrence Erlbaum.
- Benjamin, L. (1987) The new caste: toward an alternative framework for understanding adolescent pregnancy. Practice, 5 (3), 98-109.
- Berkman, L. F. and Syme, S. L. (1979) Social Networks, Host Resistance and Mortality: A nine year follow-up study of Alameda County residents. American Journal of Epidemiology, 109, 186-204.
- Billy, J. and Udry, J.R. (1985) The influence of male and female best friends on adolescent sexual behaviour. Adolescence, 20, 21-32.
- Birksted-Breen, D. (1986) The experience of having a baby: a developmental view. Free Associations, 4, 22-35.
- Birns, B. and Golden, M. (1972) Prediction of intellectual performance at three years from infant tests and personality measures. Merrill-Palmer Quarterly, 18, 53-58.

- Bolton, F. (1980) The Pregnant Adolescent. Beverley Hills: Sage.
- Bolton, F.G. and Belsky, J. (1986) The adolescent father and child maltreatment. In A.B. Elster and M. Lamb (eds) Adolescent Fatherhood. Hillsdale, NJ: Erlbaum.
- Boukydis, C.F.Z. (1986) Support for early parenting: Research and theoretical perspectives. In C.F.Z. Boukydis (ed) Support for parents and infants: A manual for Organizations and professionals.
- Boulton, M.G. (1983) On Being a Mother: A Study of Women with Pre-school Children. London: Tavistock.
- Brannen, J. (1988) Research Note: the study of sensitive subjects: notes on interviewing. The Sociological review, 36, 552-563.
- Brannen, J. and Collard, J. (1982) Marriages in Trouble: The Process of Seeking Help. London: Tavistock.
- Brannen, J. and Wilson, G. (Eds) (1987) Give and Take in Families: Studies in Resource Distribution. London: Unwin Hyman.
- Brannen, J. and Moss, P. (1988) New Mothers at Work. Unwin Paperbacks. London.
- Brazzell, J. and Acock, A. (1988) Influence of attitudes, significant others, and aspirations on how adolescents intend to resolve a premarital pregnancy. Journal of Marriage and the Family, 50 (4), 413-26.
- Breakwell, G. (in press) Psychological and Social Characteristics of those who have children in adolescence. In D. Rhode and A. Lawson (eds) The Politics of Pregnancy: Adolescent Sexuality and Public policy. Yale: Yale University Press.
- Breakwell, G. and Fife-Schaw, C. (1991a) Sexual Activities and Preferences in a UK sample of 16-20 year olds. Archives of Sexual Behaviour.
- Breakwell, G. and Fife-Schaw, C. (1991b) Risk-Taking, Control over partner choice and intended use of condoms by virgins. Journal of Community and Applied Social Psychology.
- Brickner Rothenberg, P. and Varga, P. E. (1981) The Relationship between age of mother and child health and development. American Journal of Public health, 71, 810-817.
- Brindle, D. (14.11.1989) Race Question in Census. The Guardian Newspaper.
- Brittan, M. and Maynard, M. (1984) Sexism, Racism and Oppression. Oxford: Basil Blackwell.
- Broadhead, W. E., Kaplan, B. H., James, S. A., Wagner, E. H., Schoenbach, V. J., Grimson, R., Heyden, S., Tibblin, G. and Gehlbach, S. H. (1983) Reviews and Commentary: The Epidemiologic Evidence for a Relationship between Social Support and Health. American Journal of Epidemiology, 117, 521-537.
- Broman, S. (1980) Longterm development of children born to teenagers. In K. Scott, T. Field and E. Robertson (eds) Teenage Parents and their Offspring. New York: Grune and Stratton.
- Bronfenbrenner, U. (1979) The Ecology of Human Development: Experiments by Nature and Design. London: Harvard University Press.
- Brooks-Gunn and Furstenberg, J. and Furstenberg, F. (1989) Adolescent Sexual Behaviour. American

Psychologist, 44, 249-257.

- Brown, C. (1984) Black and White in Britain: The Third PSI Survey. London: Heinemann.
- Brown, G. and Harris, T. (1978) Social origins of Depression: A study of psychiatric disorder in women. London: Tavistock.
- Bucholz, G. and Gol, B. (1986) More than playing house: A developmental perspective on the strengths in teenage motherhood. American Journal of Orthopsychiatry, 56 (3), 347-9.
- Burgos, M. (1991) Life Story Analysis. Paper presented at a Collective Hermeneutics Workshop, Thomas Coram Research Unit, University of London Institute of Education.
- Burton, L. and Stack, C. (in press) Kin Scripts and Adolescent Childbearing. In D. Rhode and A. Lawson (eds) The Politics of Pregnancy: Adolescent Sexuality and Public policy. Yale: Yale University Press.
- Bury, J. (1984) Teenage Pregnancy in Britain London: Birth Control Trust
- Busfield, J. (1974) Ideologies and reproduction. In Richards, M. (Ed.) The Integration of a child into a Social World. Cambridge: Cambridge University Press.
- Busfield, J. (1987) Parenting and Parenthood. In G. Cohen (ed) Social Change and the Life Course. London: Tavistock.
- Butler, M., Ineichen, B., Taylor, B., and Wadsworth, J. (1981) Teenage Mothering Report to DHSS, Bristol: University of Bristol.
- Caldwell, B. and Bradley, R. (1980) Home Observations for Measurement of the Environment. Little Rock, Arkansas: University of Arkansas.
- Campbell, B. (1984) The Road to Wigan Pier Revisited. London: Virago.
- Card, J.J. (1981) Long-term consequences for children of teenage parents. Demography, 18 (2), 137-56.
- Carlson, D.B., Labarba, R.C., Sclafani, J.D., and Bowers, C.A., (1986) Cognitive and motor development in infants of adolescent mothers: a longitudinal analysis. International Journal of Behavioral Development, 9, 1, 1-14.
- Carnegie Corporation of New York (1990) Exploring the Territory West of Childhood: The Early Teens. Carnegie Quarterly, 35, 3-13.
- Carroll, L. (1988) Concern with AIDS and the sexual behaviour of college students. Journal of Marriage and the Family, 50 (2), 405-12.
- Central Statistical Office (1988) Social Trends. London: OPCS.
- Central Statistical Office (1990) Social Trends. London: OPCS
- Central Statistical Office (1992) Social Trends. London: OPCS.
- Centre for Contemporary Cultural Studies, (1982) The Empire Strikes Back. London: Hutchinson.
- Chambers, C. M. and Grantham-McGregor, S. M. (1986) Research Note: Patterns of development among young, middle class Jamaican children. Journal of Child Psychology and Psychiatry, 27, 117-124.

- Chase-Lansdale, P. L. and Vinovskis, M. A. (1987) Should we discourage teenage marriage? The Public Interest, 87, 23-37.
- Chilman, C. (1980) Social Research Concerning Adolescent Childbearing: 1970-1980 Journal of Marriage and the Family, 42 (4) 793-805.
- Chilman, C. (1986) Some Psychosocial aspects of adolescent sexual and contraceptive behaviors in a changing American society. In J. B. Lancaster and B. A. Hamburg (eds) School Age Pregnancy and Parenthood: Biosocial Dimensions. New York: Aldine de Gruyter.
- Christ, M.A., Lahey, B. B., Frick, P.J., Russo, M. F., McBurnett, K., Loeber, R., Stouthamer-Loeber, M. and Green, S. (1990) Serious Conduct Problems in the Children of Adolescent Mothers: disentangling confounded correlations. Journal of Consulting and Clinical Psychology, 58, 840-844.
- Clark, E. (1989) Young Single Mothers Today: A Qualitative Study of Housing and Support Needs. London: National Council for One Parent Families.
- Clark, E. and Coleman, J. (1991) Growing up fast: Adult Outcomes of Teenage Motherhood. London: St. Michael's Fellowship.
- Cohen, P. (1986) Rethinking the Youth Question. Working Paper 3. London: Post 16 Education Centre.
- Coleman, J. (1976) The Nature of Adolescence. London: Methuen.
- Coleman, J. and Hendry, L. (1989) The Nature of Adolescence: Second Edition. London: Routledge.
- Commission for Racial Equality (1984) Race and Council Housing in Hackney: Report of a Formal Investigation. London: Commission for Racial Equality.
- Cooper, J. (1991) Births Outside Marriage: Recent trends and associated demographic and social changes. Population Trends, 63, 8-18.
- Coyne, A-M. (1991) Schoolgirl Mothers. Research Report no. 2. London: Health Education Council.
- Cox, J. L., Connor, Y. and Kendell, R. E. (1982) Prospective study of the psychiatric disorders of childbirth. British Journal of Psychiatry, 140, 111-117.
- Crabbe, P. (1983) 'Teenage Pregnancy: An Overview' Paper presented to the Women and Children Outside Marriage Conference, National Council for One Parent Families, 20 May 1983.
- Creighton, S. (1985) Epidemiological study of abused children and their families in the United Kingdom between 1977 and 1982. Child Abuse and Neglect, 9, 441-448.
- Crnic, K., Greenberg, M., Ragozin, A., Robinson, N. and Basham, R. (1983) Effects of stress and social supports on mothers in premature and full term infants. Child Development, 54, 209-17.
- Crockenberg, S. (1983) Early mother and infant antecedents of Bayley Scale performance at 21 months. Developmental psychology, 19, 727-730.
- Crockenberg, S. (1987a) Support for Adolescent Mothers during the Postnatal Period: Theory and Research. In C. F. Z. Boukydis (ed) Research on Support in Parents and Infants in the Postnatal Period. Norwood NJ: Ablex Publishing Company.

- Crockenberg, S. (1987b) Predictors and Correlates of Anger toward and Punitive Control of Toddlers by Adolescent Mothers. Child Development, 58, 964-975.
- Cross, W. E. (1990) Race and ethnicity: Effects on Social networks. In M. Cochran, M. Lerner, D. Riley, L. Gunnarsson and C. R. Henderson (eds) Extending Families: The Social Networks of Parents and their Children. Cambridge: Cambridge University Press.
- Culp, R. E., Culp, A. M., Osofsky, J. D. and Osofsky, H. J. (1991) Adolescent and older mothers' interaction patterns with their six-month-old infants. Adolescence, 14, 195-200.
- Cunningham-Burley, S. (1985) Constructing grandparenthood: Anticipating appropriate action. Sociology, 19, 421-36.
- Cvetkovich, G. and Grote, B. (1981) Psychosocial maturity and teenage contraceptive use: An investigation of decision making and communication skills. Population and Environment, 4, 211-225.
- Daly, S. (1989) Family and welfare policy in the USA: an analysis. In A Fairer Future for Children: Speeches from CPAG's National Conference, 15 April 1989. London: CPAG.
- Davis, A. (1981) Women, Race and Class. London: The Women's Press.
- Davis, R. A. (1988) Adolescent Pregnancy and infant mortality: Isolating the effects of race. Adolescence, 23, 899-908.
- Davis, R. A. (1989) Teenage pregnancy: a theoretical analysis of a social problem. Adolescence, 24, 19-28.
- Dornbusch, S.M., Carlsmith, J.M., Gross, R.T., Martin, J.A., Jennings, D., Rosenberg, A. and Duke, P. (1981) Sexual development, age and dating: A comparison of biological and social influences upon one set of behaviours. Child Development, 52, 179-185.
- de la luz Rez, M. and Halcon, J. (1988) Racism in Academia: The Old Wolf Revisited. Harvard Educational Review 58, 299-314
- Dowrick, S. and Grundberg, S. (1980) Why Children? London: Virago.
- Dunnell, K. (1979) Family Formation 1976. London: OPCS, HMSO.
- Durward, L. (1988) Poverty in Pregnancy: The Cost of an Adequate Diet for Expectant Mothers. London: Maternity Alliance.
- Edelman, M. and Johnson Pittman, K. (1986) Adolescent Pregnancy: Black and White. Journal of Community Health, 11, 63-69.
- Edwards, R. (1990) Connecting Method and Epistemology: A White Woman Interviewing Black Women. Women's Studies International Forum, 13, 477-490.
- Elder, G. H. Jr. (1978a) Family History and the Life Course. In T. Hareven (ed) Transitions: the Family and the Life Course in Historical perspective. New York: Academic Press.
- Elder, G. H. Jr. (1978b) Approaches to Social Change and the Family. In J. Demos and S. Spence Boocock (eds) Turning Points: Historical and Sociological Essays on the Family. Special Issue of the American Journal of sociology, 84, Supplement, 1978.

- Elder, G. H. Jr. (1986) Military Times and Turning Points in Men's Lives. Developmental Psychology, 22, 233-245.
- Elster, A., Ketterlinus, R. and Lamb, M. (1989) The association between Parenthood and problem Behaviour in a National Sample of adolescent Women. Pediatrics, 81,
- Elster, A. and Lamb, M. (eds) (1986) Introduction. Adolescent Fatherhood. Hillsdale, NJ: Lawrence Erlbaum.
- Elster, A. B., Lamb, M. E., Peters, L., Kahn, J. and Tavaré, J. (1987) Judicial Involvement and Conduct Problems of Fathers born to Adolescent Mothers. Pediatrics, 79, 230-233.
- Erikson, E. (1968) Identity, Youth and Crisis. New York: W. W. Norton & Co.
- Ermisch, J. (1989) Divorce: Economic Antecedents and Aftermath. In H. Joshi (ed) The Changing Population of Britain, Oxford: Basil Blackwell.
- Farrell, C. (1978) My Mother Said... The way young people learn about birth control. London: Routledge and Kegan Paul
- Faulkenberry, J. R., Vincent, M., James, A. and Johnson, W. (1987) Coital Behaviours, Attitudes, and Knowledge of Students who experience early coitus. Adolescence, 22, 321-332.
- Field, T., Widmayer, S., Stringer, S. and Ignatoff, E. (1980) Teenage, lower-class black mothers and their preterm infants: an intervention and developmental follow-up. Child Development, 51, 426-36.
- Finch, J. (1984) 'It's great to have someone to talk to': The Ethics and Politics of Interviewing women. In C. Bell and H. Roberts (Eds) Social researching. London: Routledge and Kegan Paul.
- Finkel, M. and Finkel, D. (1975) Sexual and contraceptive knowledge, attitudes and behaviour of male adolescents. Family Planning Perspectives, 7, 256-60.
- Finlay, I. G. and Scott, M. G. B. (1986) Patterns of contraceptive pill taking in an inner-city practice. British Medical Journal, 293, 601.
- Fisher, T. D. (1986) Parent-Child Communication about sex and young adolescents' sexual knowledge and attitudes. Adolescence, 21, 517-527.
- Ford Foundation (1983) Teenage Parents (letter, 1 August 1983). New York: Ford Foundation.
- Foucault, M. (1977) The Archaeology of Knowledge. London: Tavistock.
- Foucault, M. (1979) Discipline and Punish: the birth of the prison. Harmondsworth: Penguin.
- Francome, C. (1986) Abortion Practice in Britain and the United States. London: Allen and Unwin.
- Franklin, D. (1988) Race, Class and Adolescent Pregnancy: An Ecological Analysis. American Journal of Orthopsychiatry, 58, 339-354.
- Fraser, N. (1987) Women, Welfare and the Politics of Need Interpretation. Thesis Eleven, 17, 88-106;
- Freeman, M., Csikszentmihalyi, M., and Larson, R. (1986) Adolescence and its recollection: Toward an Interpretive Model of Development. Merrill-Palmer Quarterly, 32, 167-186.
- Fry, P. S. (1985) Relations between teenagers' age, knowledge, expectations and maternal behaviour. British Journal of Developmental Psychology, 3 (1), 47-56.

- Furstenberg, F. (1976) Unplanned parenthood: The Social Consequences of Teenage Childbearing. New York: The Free Press.
- Furstenberg, F. (1987a) Bringing back the Shotgun Wedding. The Public Interest, 87, 121-127.
- Furstenberg, F. (1987b) Race differences in teenage sexuality, pregnancy, and adolescent childbearing. The Millbank Quarterly, 65 (2), 381-403.
- Furstenberg, F. (in press) When Fathers Matter, Why Fathers Matter: Paternal Involvement and Children's Well-being. In D. Rhode and A. Lawson (eds) The Politics of Pregnancy: Adolescent Sexuality and Public Policy. Yale: Yale University Press.
- Furstenberg, F., Brooks-Gunn, J. and Morgan, S. P. (1987) Adolescent Mothers in Later Life. Cambridge: Cambridge University Press.
- Furstenberg, F., Morgan, S.P., Moore, K.A., Peterson, J.L (1987) Race differences in the timing of first intercourse. American Sociological Review, 52, 511-518.
- Gergen, K. (1985) The Social Constructionist Movement in Modern Psychology. American Psychologist, 40, 266-275.
- Geronimus, A.T. (1987) On Teenage Childbearing and Neonatal Mortality in the United States. Population and Development Review, 13, 245-279.
- Geronimus, A.T. and Korenman, S. (1990) The Socioeconomic Consequences of Teen Childbearing Reconsidered. Research Report, No. 90-190. University of Michigan: Population Studies Center.
- Gladwell, S., Pearson, M. and Batstone, J. (unpublished) Adolescent Pregnancies - the outcome for mothers and babies: a two year follow-up.
- Gilroy, P. (1988) There Ain't No Black in the Union Jack. London: Hutchinson.
- Gittins, D. (1986) The Family in Question. Changing Households and Familiar Ideologies. London: Macmillan.
- Gottlieb, B. H. (1981) Social networks and social support in communities' mental health. In B. H. Gottlieb (ed.) Social Networks and Social Support. Beverley Hills: Sage.
- Graham, H. (1986) Caring for the Family. London: Health Education Council.
- Green, J. M. (1990) "Who is unhappy after Childbirth?": Antenatal and Intrapartum Correlates from a Prospective Study. Journal of Reproductive and Infant Psychology, 8, 175-183.
- Griffin, C. (1985) Typical Girls: Young Women from School to the Job Market. London: Routledge and Kegan Paul.
- Griffin, C. (1989) 'I'm not a Women's Libber, but...' In S. Skevington and D. Baker (Eds) The Social Identity of Women. London: Sage.
- Grindstaff, C. F. (1988) Adolescent Marriage and Childbearing: the long term economic outcome, Canada in the 1980s. Adolescence, 23, 45-58.
- Hall, F. and Pawlby, S. (1981) Continuity and Discontinuity in the Behaviour of British Working-Class Mothers and their First-Born Children. International Journal of Behavioral Development, 4, 13-

36.

- Hanson, S., Myers, D. and Ginsburg, A. (1987) The role of responsibility and knowledge in reducing teenage out-of-wedlock childbearing. Journal of Marriage and the Family, 49, 241-56.
- Hareven, T. K. (1978) Family Time and Historical Time. In A. S. Rossi, J. Kagan and T. K. Hareven (eds) The Family. New York: W. W. Norton and Company.
- Harvey, D. (1987) The Condition of Postmodernity. Oxford: Blackwell.
- Harrison, A. (1990) High risk sexual behaviour among black adolescents. In A. Rubin Stiffman and L. E. Davis (Eds) Ethnic issues in adolescent Mental Health. California: Sage.
- Hays, W. L. (1974) Statistics for the Social Sciences. London: Holt, Rinehart and Winston.
- Henriques, J., Hollway, W., Urwin, C., Venn, C. and Walkerdine, V. (1984). Changing the Subject: Psychology, Social Regulation and Subjectivity. London: Methuen.
- Henwood, M. (1987) The family and the home. In M. Henwood, L. Rimmer and M. Wicks (eds) Inside the Family: Changing Roles of Men and Women. London: Family Policy Studies Centre.
- Herold, E. and Goodwin, M. (1980) Development of a scale to measure attitudes towards using birth control pills. Journal of Social Psychology, 110, 115-22.
- Hewitt, R. (1986) White Talk Black Talk: Inter-racial Friendship and Communication Amongst Adolescents. Cambridge: Cambridge University Press.
- Hogan, D. and Kittagawa, E. (1985) The impact of social status, family structure and neighbourhood on the fertility of black adolescents. American Journal of Sociology, 90, 825-836.
- Holland, J., Ramazanoglu, C., Scott, S., Sharpe, S. and Thomson, R. (1990) 'Don't die of ignorance' I nearly died of embarrassment: Condoms in Context. Women Risk Aids Project, Paper 2. London: The Tufnell Press.
- Holland, J., Ramazanoglu, C., Scott, S., Sharpe, S. and Thomson, R. (1991) Pressure, Resistance, Empowerment: Young women and the negotiation of safer sex. Women Risk Aids Project, Paper 2. London: The Tufnell Press.
- Hollway, W. (1989) Subjectivity and method in Psychology: Gender, Meaning and science. London: Sage.
- Holly, L. (1989) 'My Nan said, "Sure you're not pregnant?": Schoolgirl Mothers. In L. Holly (ed) Girls and Sexuality: Teaching and Learning. Milton Keynes: Open University Press.
- Horner, T. M. (1980) Test-Retest and Home-Clinic Characteristics of the Bayley Scales of Infant Development in Nine- and Fifteen-Month-Old infants. Child Development, 51, 751-758.
- Ineichen, B. (1984/5) Teenage motherhood in Bristol: the contrasting experience of Afro-Caribbean and white girls. New Community, 12 (1), 52-8.
- Ineichen, B. (1986) Contraceptive experience and attitudes to motherhood of teenage mothers. Journal of Biosocial Science, 18, 387-94.
- Ineichen, B. and Hudson, F. (1991) Taking it Lying Down. London: MacMillan.
- Johnson, K. (1986) Building Health Programs for Teenagers. Washington: Children's Defense Fund's

Adolescent Pregnancy Clearing House.

- Jones, E., Forrest, J., Goldman, N., Henshaw, S., Lincoln, R., Rosoff, J., Westoff, C. and Wulf, D. (1986) Teenage Pregnancy in Industrial Countries. London: Yale University Press.
- Jones, S. (1988) Black Culture, White Youth: The Reggae Tradition from JA to UK. London: Macmillan.
- Joshi, H. (1989) The Changing Form of Women's Economic Dependency. In H. Joshi (ed) The Changing Population of Britain, Oxford: Basil Blackwell.
- Joshi, H. (1987) The cost of caring. In C. Glendinning and J. Millar (eds) Women and Poverty in Britain. Brighton: Wheatsheaf.
- Joshi, H. (1990) Mothers' Foregone Earnings. Seminar at the Thomas Coram Research Unit, 7 February 1990.
- Jowell, R., Witherspoon, S. and Brook, L. (eds) (1987) British Social Attitudes: The 1987 Report. Aldershot: Gower.
- Kagan, J. (1974) The Nature of the Child. Basic Books: New York.
- Kantner, J. and Zelnik, M. (1973) Contraception and pregnancy: experience of young unmarried women in the United States. Family Planning Perspectives, 4, 9-18.
- Kessen, W. (1981) The American child and other Cultural Inventions. In F. S. Kessel and A. W. Siegel The Child and Other Cultural Inventions. Maiston: Praeger Publications.
- Kiernan, K. (1989) The Family: Formation and Fission. In H. Joshi (ed) The Changing Population of Britain, Oxford: Basil Blackwell.
- King, T. and Fullard, W. (1982) Teenage mothers and their infants: new findings on the home environment. Journal of Adolescence, 5, 333-46.
- Kitzinger, C. (1987) The Social Construction of Lesbianism. London: Sage.
- Kohler Riessman, C. and Nathanson, C. (1986) 'The Management of Reproduction: Social Construction of Risk and Responsibility.' In L. Aiken and D. Mechanic (Eds.) Applications of Social Science to Clinical Medicine and Health Policy. New Brunswick, New Jersey: Rutgers University Press.
- Kuzela, A. L., Stifter, C. A. and Worobey, J. (1990) Breastfeeding and Mother-Infant Interactions. Journal of Reproductive and Infant Psychology, 8, 185-194.
- Ladner, J. A. (1972) Tomorrow's Tomorrow: The Black Woman. In J.A. Ladner (ed) The Death of White Sociology. New York : Vintage Books.
- Ladner, J. A. (1988) The Impact of Teenage Pregnancy on the Black Family. In H. Pipes McAdoo (Ed) Black Families: Second Edition. London: Sage
- Lamb, M. E. (1987) Teenage Fathers. Paper presented at the Fatherhood Research Group, Thomas Coram Research Unit.
- Lamb, M. E. and Elster, A. B. (1986) Parental behaviour of adolescent mothers and fathers. In A. B. Elster and M. Lamb (eds) Adolescent Fatherhood. Hillsdale, NJ: Lawrence Erlbaum.

- Lamb, M. E., Elster, A. B. and Tavare, J. (1986) Behavioral Profiles of Adolescent Mothers and Partners with varying intracouple age differences. Journal of Adolescent Research, 1, 399-408.
- Lamb, M. E., Hopps, K. and Elster, A. B. (1987) Strange situation behaviour of infants with adolescent mothers. Infant Behaviour and Development, 10, 39-48.
- Landy, S. (1981) Teenage Mothers and their infants. Unpublished paper.
- Landy, S., Cleland, J. and Schubert, J. (1984) The individuality of teenage mothers and its implication for intervention strategies. Journal of Adolescence, 7, 171-190.
- Lawrence, E. (1982) 'Just plain common sense'. The roots of racism. In Centre for Contemporary Cultural Studies The Empire Strikes back. London: Hutchinson.
- Lee, C (1983) The Ostrich Position: Sex, schooling and Mystification. London: Writers and Readers.
- Lees, S. (1986) Losing Out: Sexuality and Adolescent Girls. London: Hutchinson.
- Lewis, S. (1991) Motherhood and Employment: The Impact of Social and Organizational Values. In A. Phoenix, A. Woollett and E. Lloyd (eds) Motherhood: Meanings, Practices and Ideologies. London: Sage.
- Lewis, S. Y. (1990) Black Teens parenting in the Inner City: Problems and Recommendations. In A. Rubin Stiffman and L. E. Davis (Eds) Ethnic issues in adolescent Mental Health. California: Sage.
- Lewis, C. and O'Brien, M. (1987) (eds) Reassessing Fatherhood. London: Sage.
- Lloyd, B. and Duveen, G. (1989) The reconstruction of social knowledge in the transition from sensorimotor to conceptual activity: The Gender system. Reprinted in M. Woodhead, R. Carr and P. Light (Eds) (1991) Becoming a person. London: Routledge.
- Luker, K. (1975) Taking Chances: Abortion and the Decision not to Contracept. Berkeley: University of California Press.
- Luker, K. (in press) The Social Construction of Teenage pregnancy. In D. Rhode and A. Lawson (eds) The Politics of Pregnancy: Adolescent Sexuality and Public policy. Yale: Yale University Press.
- MacIntyre, S. and Cunningham-Burley, S. (in press) Teenage Pregnancy as a Social Problem: A perspective from the U.K. In D. Rhode and A. Lawson (eds) The Politics of Pregnancy: Adolescent Sexuality and Public policy. Yale: Yale University Press.
- McCrate, E. (1989) Discrimination, Returns to Education and teenage Childbearing'. Paper presented to the Middlebury conference on Discrimination Policies and research in the Post-Reagan Era, April 6-8, 1989.
- McGowan, B. G. and Kohn, A. (1990) Social Support and Teen Pregnancy in the Inner City. In A. Rubin Stiffman and L. E. Davis (Eds) Ethnic issues in adolescent Mental Health. California: Sage.
- McGuire, J. and Richman, N. (1986) The prevalence of behaviour problems in three types of preschool groups. Journal of Child Psychology and Psychiatry, 27, 455-472.
- McLaughlin, S.D., Manninen, D.L, and Wings, L.D. (1988) Do adolescents who relinquish their

children fare better or worse than those who raise them? Family Planning Perspectives, 20, 25-32.

- McRobbie, A. (1978) Working class girls and the culture of femininity. In Women's Studies Group (eds) Women Take Issue. London: Hutchinson.
- McRobbie, A. (1984) Dance and Social Fantasy. In A. McRobbie and M. Nava (eds) Gender and Generation. London: MacMillan.
- McRobbie, A. (1989) Motherhood, a teenage job? The Guardian, 5 September 1989.
- McRobbie, A. (1990) Teenage mothers: a new social state. In A. McRobbie From Jackie to Just Seventeen. London: Macmillan.
- Manning, N. (1987) What is a social problem? In M. Loney (ed) The State or the Market: Politics and Welfare in Contemporary Britain. London: Sage.
- Mansfield, P. and Collard, J. (1988) The Beginning of the Rest of Your Life: A Portrait of Newly-wed Marriage. London: Macmillan.
- Marshall, H. (1991) The Social Construction of Motherhood: An analysis of childcare and parenting manuals. In A. Phoenix, A. Woollett and E. Lloyd (eds) Motherhood: Meanings, Practices and Ideologies. London: Sage.
- Marsiglio, W. and Scanzoni, J. H. (1990) Pregnant and Parenting Black adolescents: Theoretical and Policy Perspectives. In A. Rubin Stiffman and L. E. Davis (Eds) Ethnic issues in adolescent Mental Health. California: Sage.
- Martin, J. and Monk, J. (1982) Infant Feeding 1980. London: OPCS Social Survey Division.
- Martin, J. and Roberts, C. (1984) Women and Employment: A Lifetime Perspective. The Report of the 1980 DE/OPCS Women and Employment Survey. London: HMSO.
- Maternity Alliance (1989) Editorial: Pocket Money Parents. Maternity Action, 40, 2.
- Mayall, B. (1986) Keeping Children Healthy. London: Allen and Unwin.
- Melhuish, E. C. (1989) Maternal Psychological State and Infant development in Mothers under Twenty: A Research Note. Journal of Child Psychology and Psychiatry, 30, 925-930.
- Messenger-Davies, M. (1988) Commentary Article on the Journal of Reproductive and Infant Psychology Special Issue on Breastfeeding. Journal of Reproductive and Infant Psychology, 6, 252-254.
- Messick, S. (1983) Assessment of children. In P. Mussen (ed.) Handbook of Child Psychology, Vol. 1. New York: John Wiley.
- Millar, J. (24 May 1988) Lone parents cross culturally. Paper presented at a DHSS Research Seminar.
- Millar, J. and Bradshaw, J. (1987) The living standards of lone-parent families. Quarterly Journal of Social Affairs, 3, 233-52.
- Miller, B.C. Christensen, R. and Olson, T.D. (1987) Self esteem in relation to adolescent sexual attitudes and behaviour. Youth and Society, 18, 93-111.
- Miller, B.C. and Moore, K.M. (1990) Adolescent sexual Behaviour, Pregnancy and Parenting: Research

- through the 1980s. Journal of Marriage and the Family, 52, 1025-1044).
- Mitchell, J. C. (1969) The Concept and use of Social Networks. In J. C. Mitchell (ed) Social Networks in urban situations. Manchester: Manchester University Press.
- Monck, E. (1991) Patterns of confiding relationships in a population of adolescent girls. Journal of Child Psychology and Psychiatry, 32, 333-346.
- Moore, K., Simms, M.C. and Betsey, C.L. (1986) Choice and Circumstance. New Brunswick, N.J: Transaction Books.
- Morris, N. (1981) The biological advantages and social disadvantages of teenage pregnancy. American Journal of Public Health, 71 (8), 796.
- Morrison, P. (1985) Adolescent contraceptive behaviour: a review. Psychological Bulletin, 98 (3), 538-68.
- Mosher, W.D. and Horn, M.C. (1989) First family planning visits by young women. Family Planning Perspectives, 20, 129-136.
- Moss, P. and Lav, G. (1985) Mothers Without Marriages. New Society, 73, (1180), 9 August 1985.
- Murcott, A. (1980) The social construction of teenage pregnancy. Sociology of Health and Illness, 2 (1), 1-23.
- Murray, L. and Stein, A. (1991) The Effects of Postnatal Depression on Mother-Infant relations and Infant Development. In M. Woodhead, R. Carr and P. Light (Eds) Becoming a person. London: Routledge.
- National Council for One Parent Families (1979) Pregnant at School. Report of the Joint Working Party on pregnant Schoolgirls and Schoolgirl Mothers. London: NCOPF.
- National Council for One Parent Families (1983) Single and Pregnant: a guide to benefits. London: NCOPF.
- National Council for One Parent Families (1989) Press release: The Social Security Act 1986: Impact on One Parent Families. London: NCOPF.
- Newcomer, S.F., and Udry, J.R. (1984) Mothers influence on the sexual behaviour of their teenage children. Journal of Marriage and the Family, 46, 477-485.
- Newson, J. and Lilley, J. (1988) The childrearing attitudes of young unmarried mothers. Unpublished paper.
- Newson, J. and Newson, E. (1989) The Extent of Physical Punishment in the UK. London: APPROACH
- Newson, J., Lilley, J. and Lalonde, S. (1987) Childrearing attitudes of teenage parents. Unpublished paper.
- Oakley, A. (1974) The Sociology of Housework. Oxford: martin robertson.
- Oakley, A. (1979) From Here to Maternity: Becoming a Mother. Harmondsworth: Penguin.
- Oakley, A. (1980) Interviewing women: A contradiction in terms. In H. Roberts (ed) Doing Feminist Research. London: Routledge and Kegan Paul.

- Oakley A. and Rajan, L. (1990) Obstetric technology and maternal emotional wellbeing: A further research note. Journal of Reproductive and Infant Psychology, 8, 45-55.
- OPCS (1984) Conceptions inside and outside marriage 1969 to 1981. OPCS Monitor. Reference FM1 84/6.
- OPCS (1985) Trends in conceptions in England and Wales during 1983. OPCS Monitor. Reference FM1 85/8.
- OPCS (1986a) Fertility Trends in England and Wales: 1975-1985. OPCS Monitor. Reference FM1 86/2.
- OPCS (1986b) Trends in conceptions to women resident in England and Wales: 1974-1984. OPCS Monitor. Reference FM1 86/3.
- OPCS (1987) Trends in conceptions to women resident in England and Wales 1975-1985. OPCS Monitor. Reference FM1 87/2.
- OPCS (1988) Live births in 1987. Population Trends, 53, 35-40.
- Osborn, A. and Milbank, J. (1985) Ethnic Minority Children: A comparative study from birth to five years. London: Commission for Racial equality.
- Osborn, A. and Milbank, J. (1987) The Effects of Early Education. Oxford: Oxford University Press.
- Oskamp, S. and Mindick, B. (1983) Personality and attitudinal barriers to contraception. In D. Byrne and W. Fisher (eds) Adolescents, Sex and Contraception. Hillsdale, NJ: Erlbaum.
- Penhale, B. (1989) Associations between Unemployment and Fertility among Young People in the Early 1980s. Working Paper no. 60. London: Social Statistics Research Unit.
- Phillips, A. (1990) Fatherhood is a lifelong responsibility. The Independent, 22 January 1990.
- Phipps-Yonas, S. (1980) Teenage pregnancy and motherhood: a review of the literature. American Journal of Orthopsychiatry, 50 (3), 403-31.
- Phoenix, A. (1987) Theories of Gender and Black families'. In G. Weiner and M. Arnot (Eds) Gender Under Scrutiny: New Inquiries in Education. London: Hutchinson.
- Phoenix, A. (1988a) The Afro Caribbean myth. New Society 4 March 1988, 10-13.
- Phoenix, A. (1988b) Narrow definitions of culture: the case of early motherhood. In S. Westwood and P. Bhachu (eds) Enterprising Women: Home, Work and Culture among minorities in Britain. London: Routledge.
- Phoenix, A. (1989) Black Women and the Maternity Services. In J. Garcia, R. Kilpatrick and M. Richards (Eds) The Politics of Maternity Care: Services for Childbearing Women in Twentieth-Century Britain. Oxford: Clarendon Press.
- Phoenix, A. (1991) Young Mothers? Cambridge: Polity Press.
- Phoenix, A. and Woollett, A. (1991) Motherhood: Social construction, Politics and Psychology. In A. Phoenix, A. Woollett and E. Lloyd (eds) Motherhood: Meanings, Practices and Ideologies. London: Sage.
- Pilcher, H. and Williamson, J. (1988) A Guide to Young People's Experience in the Labour Market.

London: Youthaid.

- Pines, D. (1978) On becoming a parent. Journal of Child Psychotherapy, 4, 19-31.
- Pittman, K. (1986) Adolescent Pregnancy: Whose Problem is it? Washington: Children's Defense Fund's Adolescent Pregnancy Prevention Clearinghouse.
- Plesko, I. (1990) Comparative study of breast cancer risk factors in Estonia and Slovakia. Neoplasma, 37, 97-104.
- Polit-O'Hara, D. and Kahn, J.R. (1985) Communication and contraceptive practices in adolescent couples. Adolescence, 20, 33-43.
- Potter, J. and Wetherell, M. (1987) Discourse and Social Psychology: Beyond Attitudes and Behaviour. London: Sage.
- Prendergarst, S. (1989) Girls' Experience of Menstruation in School. In L. Holly (ed) Girls and Sexuality: Teaching and Learning. Milton Keynes: Open University Press.
- Prendergarst, S. and Prout, A. (1980) What will I do...? Teenage Girls and the construction of motherhood. Sociological Review, 28, 517-535.
- Prout, A. (1985) Teenage girls' knowledge of antenatal care, and its implications for school-based preventive strategies.
- Prout, A. and Prendergarst (30.5.1986) Holding the baby. Times Educational Supplement.
- Puckering, C. (1989) Annotation: Maternal Depression. Journal of Child Psychology and Psychiatry, 30, 807-818.
- Ragozin, A. S., Basham, R. B., Crnic, K.A., Greenberg, M. T. and Robinson, N. M. (1982) Effects of Maternal Age on Parenting Role. Developmental Psychology, 18, 627-634.
- Randolph, L. A. and Gesche, M. (1986) Black adolescent Pregnancy: Prevention and Management. Journal of Community Health, 11, 10-18.
- Resnick, M.D. (1984) Studying adolescent mothers' decision making about adoption and parenting. Social Work, 29, 5-10.
- Rhode, D (in press) Adolescent Pregnancy. In D. Rhode and A. Lawson (eds) The Politics of Pregnancy: Adolescent Sexuality and Public policy. Yale: Yale University Press.
- Riley, D. (1983) War and the Nursery: Theories of the Child and mother. London: Virago.
- Riley, D. and Eckenrode, J. (1986) Social ties: subgroup differences in costs and benefits. Journal of Personality and Social Psychology, 51, 770-78.
- Rimmer, L. (1981) Families in Focus: Marriage, Divorce and Family Patterns. London: Study Commission on the Family.
- Robbins, C., Kaplan, H. and Martin, S. (1985) Antecedents of pregnancy among unmarried adolescents. Journal of Marriage and the Family, 47, 567-83.
- Robinson, B. E. (1988) Teenage Pregnancy from the Father's Perspective. American Journal of Orthopsychiatry, 58, 46-51.
- Romito, P. (1988) Mothers' experience of breastfeeding. Journal of Reproductive and Infant

Psychology, 6, 89-100.

- Salmon, P. (1987) Living in Time: a New Look at Personal Development. London: J.M. Dent and Sons Ltd.
- Sanjack, M. (1988) Commentary Article on the Journal of Reproductive and Infant Psychology Special Issue on Breastfeeding. Journal of Reproductive and Infant Psychology, 6, 254-255.
- Scott, J. (1991) Social Network Analysis: A Handbook. London: Sage.
- Scott, J. W. and Perry, R. (1990) Do black family headship Structures Make a Difference in Teenage Pregnancy? A Comparison of One-Parent and two-parent Families. Sociological Focus, 23, 1-16.
- Scott-Jones, D. and Nelson-Le Gall, S. (1986) Defining black families: past and present. In E. Seidman and J. Rappaport (eds) Redefining Social Problems. New York: Plenum.
- Scott-Jones, D. and S. L. Turner (1990) The Impact of Adolescent Childbearing Educational Attainment and Income of black Females. Youth and Society, 22, 35-53.
- Seidman, E. and Rappaport, J. (1986) Framing the Issues. In E. Seidman and J. Rappaport (eds) Redefining Social Problems. New York: Plenum.
- Shah, F. and Zelnik, M. (1981) Parent and peer influence on sexual behaviour, contraceptive use, and pregnancy experience of young women. Journal of Marriage and the Family, 43, 339-348.
- Shaver, S. (1987) Comment on Fraser. Thesis Eleven, 17, 107-110.
- Siegel, L. (1981) Infant Tests as Predictors of Cognitive and Language Development at Two Years. Child Development, 52, 545-557.
- Sharpe, S. (1987) Falling for Love: Teenage Mothers Talk. London: Virago.
- Simms, M. and Smith, C. (1986) Teenage Mothers and their Partners. London: HMSO.
- Skevington, S. and Baker, D. (eds) (1989) The Social Identity of Women. London: Sage.
- Skinner, C. (1986) Elusive Mister Right, The Social and Personal Context of a Young Woman's use of Contraception. London: Carolina Publications.
- Sonenstein, F.L., Pleck, J.H. and Ku, L.C. (1989) Sexual activity, condom use, and AIDS awareness among adolescent males. Family Planning perspectives, 21, 152-158.
- Southwell, M. (1985) Pregnancy, Maternity and Education: A study of a special unit for pregnant girls and school age mothers. London: National Council for One Parent families.
- Stack, C. (1974) All our kin: Strategies for survival in a Black community. New York: Harper and Row.
- Stanley, L. and Wise, S. (1983) Breaking Out: Feminist Consciousness and Feminist Research. London: Routledge and Kegan Paul.
- Staples, R. (1988) An Overview of Race and Marital Status. In H. Pipes McAdoo (Ed) Black Families: Second Edition. London: Sage
- Stein, A., Cooper, P. J., Day, A. and Bond, A. (1987) Social and Psychiatric Factors Associated with the Intention to Breastfeed. Journal of Reproductive and Infant Psychology, 5, 165-172.
- Stone, N. (1989) The gas chamber mentality. The Guardian, 14 December 1989.

- Strauss, A. L. (1987) Qualitative Analysis for Social Scientists. Cambridge: Cambridge University Press.
- Sullivan, M. (1987) Absent fathers in the Inner City. The Annals of the American Academy PSS, 501, 48-58.
- Taylor, M. (1988) Commentary Article on the Journal of Reproductive and Infant Psychology Special Issue on Breastfeeding. Journal of Reproductive and Infant Psychology, 6, 258-259.
- Taylor, B., Wadsworth, J. and Butler, N. (1983) Teenage mothering, admission to hospital, and accidents during the first five years. Archives of Disease in Childhood, 58, 6-11.
- Teti, D. M., Lamb, M. E. and Elster, A. B. (unpublished) Long range Socioeconomic and Marital Consequences of Adolescent Marriage in Three Cohorts of Adult Males.
- Thornton, A.D and Campburn, D. (1987) The influence of the family on premarital sexual attitudes and behaviour. Demography, 24, 323-340.
- Tizard, B. (1990) Research and Policy: is there a link? The Psychologist, 13, 435-440.
- Tizard, B. (1991a) Intercountry Adoption: A review of the evidence. Journal of Child Psychology and Psychiatry, 32, 743-756.
- Tizard, B. (1991b) Employed Mothers and the Care of Young Children. In A. Phoenix, A. Woollett and E. Lloyd (eds) Motherhood: Meanings, Practices and Ideologies. London: Sage.
- Tizard, B., Blatchford, P., Burke, J., Farquhar, C. and Plewis, I. (1988) Young Children at School and at Home in the Inner City. London: Lawrence Erlbaum.
- Udry, J.R. (1988) Biological predispositions and social control in adolescent sexual behaviour. American Sociological Review, 53, 709-722.
- Unemployment Unit and Youthaid (1991) Working Brief, April 1991. London: Unemployment Unit and Youthaid.
- van Dijk, T. (1987) Communicating Racism: Ethnic Prejudice in Thought and Talk. Newbury Park, CA: Sage.
- van Dijk, T. (1992) Discourse and the Denial of Racism. Discourse and Society, 3, 87-118.
- Vinovskis, M. A. (1987) Teenage pregnancy and the Underclass. The Public Interest, 87, 87-96.
- Vinovskis, M. A. and Chase-Lansdale, P. L. (1987) Hasty Marriages or Hasty Conclusions? The Public Interest, 87, 128-132.
- Voydanoff, P. and Donnelly, B. W. (1990) Adolescent Sexuality and Pregnancy. London; Sage.
- Waddington, C. H. (1957) The Strategy of the Genes. London: Allen and Unwin.
- Wadsworth, J., Taylor, B., Osborn, A. and Butler, N. (1984) Teenage Mothering: Child Development at Five Years. Journal of Child Psychology and Psychiatry, 25, 305-313.
- Walkerdine, V. and Lucey, H. (1989) Democracy in the Kitchen: Regulating Mothers and socialising daughters. London: Virago.
- Wallis, C. (9.12.1985) Children Having Children. Time Magazine.
- Ward, M. (1989) The Politics of Adolescent Pregnancy: Turf and Teens in Louisiana. In W. Penn

- Handwerker (Ed) Births and Power: Social Change and the Politics of Reproduction. San Francisco: Westview Press.
- Wasserman, G. A., Rauh, V. A., Brunelli, S.A., Garcia-Castro, M. and Necos, B. (1990) Psychosocial Attributes and Life Experiences of Disadvantaged Minority Mothers: Age and Ethnic Variations. Child Development, 61, 566-580.
- Weedon, C. (1987) Feminist Practice and Poststructuralist Theory. Oxford: Blackwell.
- Wellman, B. (1981) Applying network analysis to the study of social support. In B. Gottlieb (ed.) Social Networks and Social Support. Beverley Hills: Sage.
- Wells, N. (1983) Teenage Mothers. Liverpool: Children's Research Fund.
- Werner, B. (1988) Fertility trends in the UK and in thirteen other developed countries, 1966-86. Population Trends, 51, 18-24.
- Westwood, S. (1991) Racism, Black Masculinity and the Politics of Space. In J. Hearn and D. Morgan (eds) Men, Masculinities and Social Theory. London: Unwin.
- Willard Williams C. (1990) Black Teenage Mothers: Pregnancy and Child Rearing from their Perspective. Massachusetts: Lexington Books.
- Willmott, P. (1986) Social Networks, Informal Care and Public Policy. London: Policy Studies Institute.
- Willis P. (1984) Juventus: half way to a youth utopia. Youth and Policy, 10, 44-7.
- Wilson, A. (1987) Mixed race Children: A study of identity. London: Batsford.
- Wilson, G. (1987) Money: patterns of responsibility and irresponsibility in marriage. In J. Brannen and G. Wilson (eds) Give and Take in Families: Studies in Resource Distribution. London: Allen and Unwin.
- Wilson, W.J. (1987) The Truly Disadvantaged: The Inner City, the Underclass and Public Policy. London: University of Chicago Press.
- Wilson, W. J. with Neckerman, K. (1987) Poverty and family structure: the widening gap between evidence and public policy issues. In W. J. Wilson The Truly Disadvantaged: The Inner City, the Underclass and Public Policy. London: University of Chicago Press.
- Winter, L. (1988) The role of sexual self-concept in the use of contraceptives. Family Planning Perspectives, 20, 123-127.
- Wise, S. and Grossman, F. (1980) Adolescent mothers and their infants: psychological factors in early attachment and interaction. American Journal of Orthopsychiatry, 50, 454-468.
- Wolkind, S. (1977) Women who have been "in care"---Psychological and Social status during pregnancy. Journal of Child Psychology and Psychiatry, 18, 179-182.
- Wolkind, S. (1984) Teenage Mothers. Paper presented to the Psychiatric, Obstetric and Paediatric Conference on Teenage pregnancy and Motherhood, 3 February, 1984.
- Wolkind, S. and Hall, F. (1980) Disadvantaged Infants as Parents. In J. Howells (Ed) Modern perspectives in the Psychiatry of Infancy. New York: Branner Mazel.
- Wolkind, S., Kruk, S. and Chaves, L. P. (1976) Childhood Separation Experiences and Psycho-Social

Status in Primiparous Women: preliminary findings. British Journal of Psychiatry, 128, 391-396.

Woollett, A. (1987) Who breastfeeds? The family and cultural context. Journal of Reproductive and Infant Psychology, 5, 127-31.

Wood, D. (1988) How Children Think and Learn. Oxford: Blackwell.

York, R. (1990) Pattern of Postpartum Blues. Journal of Reproductive and Infant Psychology, 8, 67-74.

Zajicek, E. (1980) Self Perceptions during pregnancy and early motherhood. In O. Hartnett, G. Boden and M. Fuller (Eds) Women: Sex-Role Stereotyping. London: Tavistock.

Zajicek, E. and Wolkind, S. (1978) Emotional difficulties during and after the first pregnancy in a sample of married women. British Journal of Medical psychology, 51, 379-385.

Zajicek, E. and de Salis, W. (1979) Depression in mothers of young children. Child Abuse and neglect, 146, 622-627.

Zani, B. (1991) Male and Female Patterns in the Discovery of Sexuality during Adolescence. Adolescence, 14, 163-178.

Zelnik, M., Kantner, J.F. and Ford, K. (1981) Sex and Pregnancy in Adolescence. Beverly Hills, CA: Sage.

Zelnik, M. and Shah, F. (1983) First intercourse among young Americans. Family Planning Perspectives, 15, 64-70.

APPENDIX 1

UNIVERSITY OF LONDON
INSTITUTE OF EDUCATION
THOMAS CORAM RESEARCH UNIT
LONDON WC1

YOUNG MOTHERS PROJECT

You have been asked to take part in a research project about young mothers and their children which is being conducted at the Thomas Coram Research Unit (part of the Institute of Education at London University). This work is being paid for by the Department of Health. We are interested in the experiences of young women having their first babies between the ages of 16-19 years of age. We want to look at the part played by relatives, friends, employers and the health and welfare services over the first years of their children's lives. A second and equally important aspect of the project is its concern with the experiences and development of the children.

What will it involve?

I would like to see you now and then after your baby is born, when he or she is six months old. Later I would like to see you again when your child is eighteen months and three years of age. This would mean that we would visit you at four points over this three year period. Each visit would involve a tape-recorded interview with you which will follow you and your child's experiences over the preceding months.

The research team very much appreciate your giving up time to help, and we hope that taking part in the project will be an enjoyable experience. We wish to stress that your contribution to the research will be treated in the strictest confidence, and as far as possible we will keep you in touch with our progress.

It would be greatly appreciated if you would inform us of any change of address.

If you have any queries, please do not hesitate to call us at the office on 278 2424, or me at home on _____.

Many thanks.

You will be visited by:

Thomas Coram Research Unit, 41 Brunswick Square, WC1.