

Mothers in the making: A
qualitative longitudinal study
exploring the journey of becoming
and being a teenage mother.

By

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Abstract

Qualitative longitudinal research (QLR) has been described as an emerging and innovative methodology particularly adept at exploring the complex multifaceted nature of young people's lives. Adopting a qualitative longitudinal approach, this thesis explores young women's experiences of teenage pregnancy and motherhood. Highlighting the use and value of this methodology demonstrates the complexity of teenage pregnancy and motherhood, especially with regard to developments through time and how an individual narrative can unfold. By taking a holistic biographical approach this thesis also considers the role of 'critical moments' through time in defining and impacting upon young mother's transitions, identities and life chances. The value of focusing upon processes rather than simply outcomes can also help inform more receptive policy approaches. For instance, being able to grasp the significance of events and ascertain the causes and processes through time help ensure that policy initiatives correspond to the needs of service users.

As the thesis will highlight, QLR should be viewed as a distinctive methodological approach that can provide unique and valuable insights into the processes attached to complex social phenomena and give weight to the lived experiences of young mothers. What makes this thesis an original contribution to the literature is how it views teenage pregnancy and motherhood as fluid and dynamic, moving away from the static snapshots that often depict young mothers as struggling, or even 'failing' (at one moment in time), to a more nuanced account that reflects their journeys *into* motherhood and *changes* through time.

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Because this thesis is concerned with the experiences of mothers who often get unnoticed – I also wish to dedicate this thesis to my own mother, Angela Wenham, a woman who has devoted her life to her five children. She should feel very proud that all her children are safe in the knowledge that they are immensely loved and she has always been someone to whom they can turn to in times of need. Regrettably, there have been far too many times when she has been turned to, something I know she will discount, only signifying once again, her relentless love and devotion.

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Author's declaration

I hereby certify that I am the sole author of this thesis and that no part of this thesis has been published or submitted for publication.

Chapter One:

Contemporary Understandings of Teenage Pregnancy and Motherhood: A Cause for Concern?

Teenage Pregnancy and Parenthood as Problematic

Too many teenage mothers – and fathers – simply fail to understand the price they, their children and society, will pay... Our failure to tackle this problem has cost the teenagers, their children and the country dear...the consequences of doing this can be seen all around us in shattered lives and blighted futures.

(Blair, SEU, 1999, p.4)

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

(SEU, 1999, p.90)

The above statements are often drawn upon as they concisely capture the line of thought that drives and reinforces society's view of teenage pregnancy and parenthood as problematic. This perspective is part of the dominant discourse that views teenage pregnancy and parenthood as a threat to the well-being of society, encapsulating practices/behaviour that directly oppose society's conventional norms of ways in which parenting should take place. It is argued that the result of such behaviour is a wide range of 'poor' outcomes and it is society as a whole that ultimately has to

bear the cost (SEU 1999, UNICEF 2001). Within the dominant discourse, teenage pregnancy tends to be represented as a calamity for all concerned. Whilst this discourse is by far the most powerful in constructing contemporary notions of teenage pregnancy and motherhood, rarely is it questioned. As the quotations above demonstrated, teenage pregnancy as problematic often involves emotive and sensationalist language. Arai argues that teenage parents stand out when compared to other stigmatised groups: 'the language used and imagery evoked are such as to suggest that there are few population subgroups who appear to embody so many social and moral 'evils'' (Arai, 2009, p.48). Similarly, Alexander et al has brought to attention the pervasiveness of this discourse: 'teenage mothers are seen as emblematic of an 'underclass' which is outside of mainstream British society, and which is defined through pathologised moral and cultural values, 'lifestyles and behaviour', seemingly transmitted across generations' (Alexander et al, 2010, p.136). These discourses are powerful signifiers of contemporary social divisions based around social class. For instance Duncan states that 'the fear of teenage pregnancy is bound up in stereotypes of working-class young women whose out-of-control sexuality has historically concerned the ruling classes as having a dangerous potential for social and moral disorder' (Duncan, 2007, p. 311).

Teenage pregnancy and motherhood being viewed as problematic also lies at the heart of much mainstream social policy research. Such research evidence is embedded within the dominant discourse, evidence that can be viewed as both a cause and consequence of the development of this discourse (Pevalin 2003; Kiernan 1997; Ermisch, 2003).

Mainstream research often marshals vast armies of statistical evidence to highlight the (often deemed inevitable) poor outcomes associated with teenage pregnancy and point unerringly to it being a serious cause for concern (Botting et al 1998). Taken at face value, the accumulation of risk factors alongside the consequent poor outcomes of teenage pregnancy for both mother and child do indeed paint a rather bleak picture. For

instance, it has been found that teenage parents are more likely not to finish their education, while being more likely to bring up their children alone in poverty (Dennison 2004; Hobcraft and Kiernan 2001). Overall this has contributed towards the current situation where teenage pregnancy not only requires policy intervention, but preventative measures to stop it occurring in the first place (SEU 1999; DfES 2006). Much of this evidence also points to 'cycles of disadvantage'. This standpoint has been highly influential within policy networks such as that involved in producing the Social Exclusion Unit report in 1999 (SEU 1999). Much of the impetus behind the need for social policy to 'tackle' the 'problem' of teenage pregnancy is the argument that the social exclusion faced by young mothers is being passed on from generation to generation.

A direct relationship between social exclusion and teenage pregnancy was highlighted by a prominent MP, Tessa Jowell in 1997 when she announced the previous New Labour Government's action plan on tackling teenage pregnancy: *'teenage conceptions tend to be both a symptom and a cause of social inequality. They [teenage parents] can become a cycle of deprivation'* (West 1999). The main driver behind this 'cycle of deprivation' discourse is statistical evidence demonstrating that the daughters of teenage mothers have a higher chance of becoming teenage mothers themselves (Hobcraft and Kiernan 2001; Pevalin 2003; Ermisch and Pevalin 2003), thus perpetuating a cycle of deprivation. However, whilst policy tends to focus on the attitudes and low expectations of young women at risk of teenage pregnancy, it is yet to become clearly demonstrated whether such correlations are caused by long-standing structural determinants or the passing on of cultural expectations/behaviour from generation to generation (Arai 2003, 2007). The intergenerational transmission of social exclusion is further complicated by the difficulties in ascertaining the correlation between poor outcomes and teenage pregnancy in itself. For instance, in controlling for 'selection effects', the poor outcomes often associated with teenage pregnancy may as some have argued be caused by pre-

pregnancy social disadvantage rather than teenage childbearing (Hawkes 2010; Arai 2009).

The Context of Teenage Pregnancy in England and Wales

Some authors have argued that teenage pregnancy constitutes a classical form of moral panic (Cohen, 1972). For example, Arai argues that teenage pregnancy being viewed as an 'epidemic' is a pervasive discourse. When outlining this perspective Arai describes teenage pregnancy as a 'kind of blight with viral –like nature, one that is essentially unknowable, yet capable of spreading itself through a youthful population and able to withstand efforts to defeat it' (Arai 2009, p.48) Despite the moral panic surrounding teenage pregnancy within England and Wales, teenage conceptions account for a small proportion of overall conceptions. The overall number of conceptions in 2009 for women of all ages was 896,300. This number includes conceptions to all women of childbearing age 15-44 (ONS 2011). Figures from the Office for National Statistics show that in England and Wales during 2009, 7,158 girls under-16 became pregnant. This compared to figures in 2008 of 7,586 represents a decrease of 5.6 per cent. The number of girls under the age of 18 who became pregnant in 2009 was 38,259 (ONS 2011). Again, when compared to figures in the previous year, a decrease of 7.5 percent had occurred from the 41,361 conceptions reported for 2008.

National statistics show no significant increase in fertility rates since the 1970's. Fertility rates show the proportion of pregnancies that end in birth as opposed to the conception rate which has become the key target for 'tackling' teenage pregnancy and parenthood. In fact, Table 1.1 below highlights how we have witnessed a decrease in the under-20 fertility rate from the 1971 figure.

**Table 1.1: Teenage (under 20) fertility rates, England and Wales:
Various years, 1961-2009**

Year	Rate	Year	Rate	Year	Rate
1961	37.3	1992	31.7	2001	28
1964	42.5	1993	30.9	2002	27
1966	47.7	1994	28.9	2003	26.8
1971	50.6	1995	28.5	2004	26.9
1976	32.2	1996	29.7	2005	26.3
1977	29.4	1997	30.2	2006	26.6
1981	28.1	1998	30.9	2007	26
1986	30.1	1999	30.9	2008	26
1991	33	2000	29.3	2009	25.3

Note: Rates are per 1,000 females aged under 20.

Source: Data taken from Table 3.1, Vital Statistics: Population and Health Reference Tables, Population Trends (ONS, 2011)

This has led many commentators to reflect upon the paradox of the emerging social climate where teenage pregnancy is considered to be out of control. This is based on the trend of teenage pregnancy and parenthood being in a steady decline, thus indicating that it has in fact become less of a 'problem'. Even by focusing on the conception rates over time, claims that we are witnessing an epidemic of teenage pregnancies is far from the truth. Table 1.2 demonstrates how despite fluctuations, we have witnessed an overall decline in the conception rate

of 18.1% since 1998. The 2009 under-18 conception rate in England for 2009 at 38.2 per 1000 girls aged 15-17 is the lowest it has been for nearly 30 years (DfE, 2011).

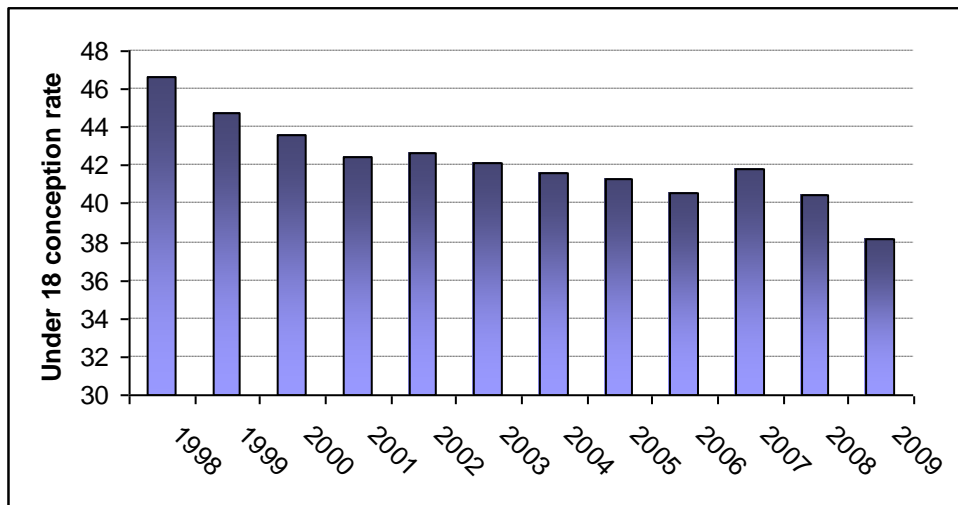
Table 1.2: Under-18 Conceptions for England: 1998-2009

Year	Under 18 conceptions	Under 18 conception rate*	<i>Percent leading to legal abortion</i>
1998	41,089	46.6	42.4
1999	39,247	44.8	43.5
2000	38,699	43.6	44.8
2001	38,461	42.5	46.1
2002	39,350	42.7	45.8
2003	39,553	42.1	46.1
2004	39,593	41.6	46.0
2005	39,804	41.3	46.8
2006	39,170	40.6	48.8
2007	40,366	41.8	50.6
2008	38,750	40.5	49.7
2009	35,966	38.2	49.1

Source: Office for National Statistics and DfE, 2011

*per thousand females aged 15-17

Figure 1.1: Under-18 conception rate for England: 1998-2009



Source: Office for National Statistics and Teenage Pregnancy Unit, 2008

Rate per thousand females aged 15-17

The social context has changed drastically over the last five decades for young women growing up. For instance, the 'Abortion Act 1967' has had profound consequences on the sexual and reproductive behaviour of young women. Since 1969 when the Act came into effect, abortion rates have risen overall and this has been particularly rapid for women aged 16-19 and 20-24 (ONS 2000). For women in these age groups the rates were about ten times higher in 1998 than those in 1968; increasing from 2.5 abortions per thousand women aged 16-19 in 1968 to 26.5 per thousand in 1998. Amongst 20 to 24 year olds this rate also increased from 3.4 to 30.4 abortions per thousand women aged 20 to 24. For those under the age of 16, the number of abortions was at a much lower level, although the rate has since significantly increased since 1968 (ONS 2007). There is also marked geographical variation in abortion rates. For instance, in deprived areas of the UK, young women tend to have fewer abortions than those who live in more affluent areas (SEU 1999; Tabberer et al 2000; Bradshaw et al 2005; Lee et al 2004). As the following discussions will demonstrate, teenage conceptions are also

geographically concentrated with the highest rates occurring within the most deprived areas of the UK.

Comparative Teenage Pregnancy Rates

Whilst it could be argued that the figures above raise no real cause for concern, for some commentators (including Tony Blair), it is Britain's teenage conception rates when compared to other EU countries that seem to be the main source of anxiety. Comparatively, Britain has relatively high rates of teenage conceptions, and it was when these rates were compared with other OECD countries that Tony Blair described Britain as 'shameful' (Foreword SEU 1999). Teenage fertility rates in OECD countries vary considerably. For instance, they range from as few as 2.9 (Korea) to as many as 52.1 births for every 1,000 young women aged 15 to 19 (United States) (UNICEF 2001, p.4). Within the OECD, Britain is the second from the bottom of the list and last among all countries of Western Europe (UNICEF 2001, p.4). To take a few examples of how Britain stands out to be comparatively high; teenage birth rates in Britain are three times that of France, and double that of Germany (UNICEF 2001). However, this has not always been the case and such comparative differences are a fairly recent phenomenon. For example, when we explore the rates during the 1970's, Britain has similar rates to that of other European countries. The figures also show that Britain had fairly consistent rates during the 80's and 90's. It is during this same period that other European countries witnessed dramatic falls in their teenage conception rates (SEU, 1999).

Arai has provided a strong critique of the comparisons that are often made between Britain and other Western and Northern European nations (Arai, 2003; Arai 2009). It is often neglected that low teenage fertility rates in some countries are partly attributable to the widespread use of abortion rather than to a low incidence of conceptions (Arai, 2009, p.94). For instance, about 40 per cent of conceptions to teenagers in the UK are terminated compared to 70 per cent in Sweden (reinforcing the need to

look at fertility rates, conception rates and abortion rates together and as a whole). Arai is critical of simplistic comparisons that are made between nations which imply that teenage pregnancy is amenable to policy solutions if we only learn from those countries with low teenage fertility rates: 'Technical/educational approaches are characterised by failure to appreciate the 'social situation' that prevails in different countries... this limits understanding of the complex, nation-specific social contexts within which sexual and reproductive behaviour occurs' (Arai, 2009, p.99)

Social and Geographic Variation within the UK

One of the most prevailing characteristics of teenage pregnancy and parenthood within the literature is that teenage mothers are more likely to come from a lower socio-economic background. For instance, some studies have found that the risk of becoming a teenage mother is almost ten times higher for girls whose family is in social class V (unskilled manual) compared to those in social class I (professional) (Ermisch and Pevalin 2003-b; SEU 1999; Hobcraft and Kiernan 2001; Rosato 1999; Botting et al, 1998). A comparative study of women's sexual and reproductive behaviour across and within Canada, France, Great Britain, Sweden and the United States, demonstrated that there was a clear gradient in the case of the UK, with higher proportions of women from lower socioeconomic backgrounds bearing children in adolescence (Darroch et al, 2001). It is therefore not surprising that the geographical variation in teenage conceptions is also significantly influenced by the varied socio-economic characteristics of different parts of the country. This is shown through the poorest areas in England having teenage conception rates significantly higher than the most affluent areas. For example, under-18 conception rates are more than four times higher in the most deprived 10% of wards in England compared with the 10% least deprived (DfES 2006-b).

However, the relationship between teenage pregnancy and deprivation is not consistent across the country. Some local areas have rates markedly

higher, or lower, than would be expected given their level of deprivation (Bradshaw et al 2005). For instance, across local authorities Bradshaw and colleagues identified a number of 'outliers' that either had teenage conception and abortion rates that were unusually high or low based on the socioeconomic profile, suggesting that such a variation might be correlated with access to and/or the quality of local services. Within social policy, it has also been argued that the *delivery* of local strategies on teenage pregnancy reduction is critically important. This was evident in a review carried out by the Teenage Pregnancy Unit in 2005. Focusing upon 3 high performing local authorities and 3 'statistical neighbours' with static or increasing rates the review sought to explain variation by identifying factors that were evident in successful areas, but not present in those areas where rates were increasing. The key factors identified in the 'Deep Dive' review were:

- Senior local sponsorship and engagement of all key partners who have a role in reducing teenage conceptions. Key partners include; health, education, social services, youth support services and the voluntary sector;
- Provision of young people focused contraception/sexual health services, trusted by teenagers and well known by professionals working with them;
- Strong delivery of 'Sex and Relationship education' (SRE) and 'Personal Social and Health Education' (PSHE) by schools.

(DfES (2006-b)

As the following discussion highlights, other factors such as educational attainment, ethnicity and the experience of being in care also play an important role and are also bound up with socioeconomic status (Dawson and Hosie 2005; Berthoud and Robson 2003b; Barn and Mantovani 2007).

Who Becomes a Teenage Mother? Risk Factors associated with Teenage Pregnancy and Motherhood

A strong association between teenage pregnancy and deprivation has been highlighted extensively (see Berthoud and Robson 2003; Botting et al 1998; Hobcraft and Kiernan 2001; Astin et al 2007; Bradshaw et al 2005; Kiernan 1997; SEU 1999; SSRU 2006, UNICEF 2001; Rosato, 1999). Yet, area deprivation and socioeconomic status are not the only factors which play a role in the likelihood that some young women are more likely than others to become pregnant at a relatively young age. It is important to remember that many women living in deprived communities do not become teenage mothers, and we need to consider what other factors may be influential in determining who does and who doesn't.

Factors that seem to predispose young women to teenage pregnancy are wide ranging and rather than one causal factor increasing the likelihood of teenage pregnancy, it can often be a combination of factors. For instance children in care or leaving care are much more likely than other groups to become parents at an early age (SEU 1999; DfES 2007; Biehal et al 1995). Educational disadvantage and disaffection are also thought to be key influences, as is the experience of not being in education employment or training (NEET) after school-leaving age (SEU 1999a; Bullen et al 2000; Dawson and Hosie 2005; Hosie 2003; Kiernan 1997). Ethnicity also plays a significant role with teenage pregnancy more common amongst Pakistani, Caribbean and Bangladeshi young women (See SEU 1999-b; p.17; Berthoud and Robson 2003-b; Higginbottom et al 2008; Curtis et al 2005 and Sinha et al 2006 for an exploration of the relationship between ethnicity and teenage pregnancy). It has been highlighted how young offenders are also more likely to be teenage mothers with estimates suggesting that around 39 per cent of female prisoners under the age of twenty-one are mothers (Dennison 2004). Links between young women with mental health issues have also been suggested (Futing 2003), and an association between low self-esteem and teenage pregnancy has also been highlighted (Elmer 2001, p.24; Drummond and Hansford 1990; Doskoch, 2007). Teenage pregnancy is

also strongly correlated with the age at which their own mother started child bearing, as well as growing up in a lone parent family (SEU 1999, Bonnel et al 2006). Once again it is important to emphasize how these risk factors can be reinforcing, multiple and associated together in “risk trajectories” (Bynner, 2002). For instance, children who are ‘looked after’ are more likely to experience educational disaffection and disadvantage and are, as a group, over-represented amongst those who are NEET, offending and living in disadvantaged areas (Coles et al 2004).

Much interest has been placed on the experiences of ‘looked after’ young people and the association this experience has with teenage pregnancy. Young ‘looked after’ women are likely to experience many of the risk factors associated with teen pregnancy described above (Rolfe 2003; Rolfe 2008; Barn et al 2007; Garnett, 1992). It is also not that surprising then that early childbearing has also been linked to adverse childhood experiences such as childhood neglect or abuse (Roberts et al, 2004; Erdmans and Black 2008).

Figures show that around 4.1 per cent of looked after young women aged 15-17 years were teenage mothers compared to around 2.3 per cent among all young women aged 15-17 (DfES 2005-b). Other research studies suggest that within two years of leaving care, almost half of young women are likely to have become mothers (Biehal et al 1995). Some authors have suggested that one of the reasons ‘looked after’ young women are at a greater risk of teenage pregnancy is based on the possibility that residential care provides both extra pressure and extra opportunities for young people to start sexual relationships at an earlier age (Chase et al, 2006). It has also been noted that ‘looked after’ young people also seem to have higher aspirations for early marriage and parenthood in comparison to their peers (Corlyon and McGuire, 1999; Stein 2005).

Poor Outcomes

So far a great deal of the research evidence drawn upon has involved large scale data sets that predominantly focus on the problematisation of teenage pregnancy and motherhood. Quantitative studies often attempt to 'control' for pre-existing variables and build a strong argument in favour of causation between teenage motherhood and later 'poor' socio-economic outcomes. For instance, Hobcraft and Kiernan found that teenage mothers were more likely than other women to experience disadvantaged outcomes, even *after* the influence of family background (such as childhood poverty) had been taken into account (Hobcraft and Kiernan, 2001). Much of the statistical literature on teenage pregnancy in the UK depicts early childbearing as both a cause and consequence of social exclusion. Some of the often stated poor health and socio-economic consequences for both mother and child are outlined and discussed below:

Firstly it is claimed that teenage mothers are more likely to suffer many disadvantages such as:

- Lower educational attainment (less likely to complete education);
 - Lower probability of employment;
 - Higher probability of being a single parent;
 - Greater likelihood of experiencing poverty;
 - High rates of post-natal depression;
- (SEU, 1999, p.25)

Not only are the children of teenage parents likely to suffer such disadvantages, but the children of teenage mothers are also at a disadvantage through the increased likelihood of teenage mothers giving birth to:

- Low birth weight babies;

- Children of teenage mothers have higher infant and childhood mortality rates;
- Children of teenage mothers have higher hospital admissions rates;
- Low take-up of breastfeeding amongst teenage mothers;
- Children of teenage parents more likely to become teenage parents themselves;

(SEU, 1999, p.26)

These views are also supported by international comparative studies. In 2001, UNICEF published a report that discussed the issue of teenage births at an international level and stated: ‘the child of a teenage mother is more likely to live in poverty, to grow up without a father, to become a victim of neglect or abuse, to do less well at school, to become involved in crime, to abuse drugs and alcohol, and to eventually become a teenage parent and begin the cycle all over again’ (UNICEF 2001, p.3).

However, whilst the above studies at face value might seem pervasive and add to literature on the negative consequences of teenage pregnancy, some authors claim that the jury is still out on this as statistical studies on the whole present contradictory evidence (Arai, 2009; Duncan et al, 2010). For instance, Ermisch and Pevalin conducted a longitudinal study focusing on the outcomes of young women who became parents as teenagers and conclude that, having controlled for social class: ‘teen birth has little impact on a woman’s qualifications, employment or earnings when they are 30 years of age’ (Ermisch and Pevalin 2003, p.3). Nevertheless, another study using a different set of data concluded that:

‘having a teen-birth, particularly when aged under 18, constrains a woman’s opportunities in the ‘marriage market’ in the sense that she finds it more difficult to find and retain a partner, and she partners with more unemployment-prone and lower earning men.

Teenage mothers are much less likely to be a homeowner later in life, and her living standard, as measured by equivalent household income, is about 20% lower' (Ermisch 2003).

The complications of verifying cause or correlation was further highlighted by a systematic review that aimed to identify 'risk' factors associated with teenage pregnancy in 25 European Union countries (Astin et al 2007). It was reported that: 'the well-recognized factors of socioeconomic disadvantage, disrupted family structure and low educational level and aspiration appear consistently to be associated with teenage pregnancy. However, evidence that access to services in itself is a protective factor remains inconsistent. Although further associations with diverse risk-taking behaviours and lifestyle, sexual health knowledge, attitudes and behaviour are reported, the independent effects of these factors too remain unclear'.

The above discussion highlights the difficulties that arise when we look for direct causal relationships between teenage pregnancy, risk factors and (later) well-being outcomes in life. Studies have been based on a wide range of data sets, which have their own distinct limitations due to the limited range of variables they can draw upon - and as we have seen can conflict with one another at times. These limitations provoke the argument as to whether we can be certain if it is teenage pregnancy that *causes* poor outcomes or whether it is pre-existing factors such as poverty that may largely account for such 'poor' outcomes? This is by far the most prevailing question that the literature on teenage pregnancy and motherhood grapples with - and no consensus has emerged. Whilst it would be foolish to dismiss the research studies discussed above, we need to be extremely cautious concerning the grand claims that are often made from them. Once we start to unpick many of the associations between teenage pregnancy, risk factors and poor outcomes we can come up against the real complexities which highlight the multifaceted nature of teenage pregnancy and motherhood. For example, whilst poverty and deprivation are associated with offending behavior (Farrington 1996) and the literature on teenage pregnancy points to an

association between teenage pregnancy and offending, is it offending behavior that causes teenage pregnancy or the underlying deprivation associated with the offending? Indeed, a number of intervening factors often get overlooked that could largely account for 'poor' outcomes. These may include poor support networks (Brown et al 2002; SSRU 2006), poor housing (Giullari and Shaw 2005), and discriminatory experiences/attitudes associated with the stigmatisation of teenage pregnancy and motherhood (Letherby et al 2002; Phoenix 1991; Bromley et al 2001; Hirst et al 2006; YWCA Campaign).

The poor outcomes that are often assigned to the children of teenage parents are equally difficult to interpret. It is widely highlighted how the babies of teenage mothers commonly experience health deficits such as an increase in prematurity, low birth weight and neonatal death (Cunnington, 2001). The children of young mothers are more likely to suffer accidents, especially poisoning or burns, and twice as likely to be admitted to hospital as a result of an accident or gastro-enteritis (Botting et al 1998). But again, we need to be cautious about the assumptions we make from these associations. For instance, is this relationship the result of the capabilities of young mothers (as is often implied), or is it due to poverty being strongly associated with poor housing and young mothers being more likely to experience poor housing conditions? Research has shown how pregnant teenagers and teenage mothers are more likely to experience homelessness (and predominantly experience temporary accommodation such as B&B's and hostels) or live in social housing (Letherby et al 2001; Giullari and Shaw 2005; Walters et al 2001). The consequences this has on themselves and their children are described below:

'Insecurity in temporary accommodation can affect children's mental health and development. About half the families taking part in one study conducted by Shelter said their children were frightened, insecure or worried about the future as a result of their homelessness. There is evidence among homeless children of mood swings, nervousness and bad tempers, bed-wetting and

disturbed sleep patterns. When people are forced to move into temporary accommodation, their health suffers. The uncertainty of their situation, often combined with poor living conditions, impacts both physically and mentally on homeless individuals and families'. (Rice, 2006)

These are just a few caveats but they demonstrate that there are many variables that need to be taken into account but that either get overlooked or are not at hand for statistical studies to draw upon. As has been identified, the majority of mainstream research only focuses on limited data sets which as a consequence, restrict the generalisations and assumptions that can be made. Tackling inequalities and providing adequate services may reduce the 'poor outcomes' often associated with teenage pregnancy and it could be argued that this could and should be the focus of policy. For example, highlighting how the experiences of young mothers are often lost in quantitative reviews, Graham and McDermott (2005) use a systematic review of qualitative research to highlight the potential role that policies could play in supporting the identities and resilient practices mothers develop in the face of material and social disadvantage. A more extensive review of these findings are discussed later when explorations of alternative discourses are discussed.

Policy landscape

Changes in the social policy landscape over the last decade have been profound, and the developments which have taken place are like no other policy framework that preceded it. Under New Labour (1997-2010), a distinct policy agenda emerged putting teenage pregnancy and parenthood high on the active policy agenda for central and local government. This emerging policy framework encompassed a new language which was distinctly different to that used by previous governments, instead attempting to explain teenage pregnancy in the context of wider concerns about 'social exclusion'. The notion of social

exclusion was a key concept for New Labour and has been suggested as framing social policy over their time in office (see Levitas 1998 for an extensive review of this). According to the 1999 Social Exclusion Unit report, the three main causes of teenage pregnancy are: low expectations (of education or the labour market); ignorance (about contraception); and mixed messages (confusion about sex) (SEU 1999b). The SEU Report has also been highly influential in policy developments directed at teenage pregnancy and parenthood and has set the framework for UK government policy since its publication. The overall ethos of this policy discourse saw young women's attitudes (namely young women within deprived communities), their beliefs and behaviour, as key risk factors and are the focus of intervention in 'tackling' the problem of teenage pregnancy and parenthood (SEU 1999b).

There were also three main policy strands to address 'the problem of teenage pregnancy': a national campaign involving all sections of the community in order to change *attitudes* to teenage sex and parenthood; prevention through better *education* about *sex and relationships* and clearer messages about *contraception*, with a specific focus on the at risk groups; and finally better support for pregnant teenagers and parents to finish their *education* and *learn parenting skills*, alongside changes to housing rules so young parents were not housed in independent tenancies (SEU, 1999b, p.90-91).

New Labour's 'Teenage Pregnancy Strategy' (TPS) was described as highly 'ambitious' (Arai 2003a). The TPS encompassed a range of targets and indicators that evaluated how well the government was doing in tackling such an issue. The establishment of the Teenage Pregnancy Unit (TPU) also played a vital role in overseeing the TPS. This involved setting up a network of local teenage pregnancy co-ordinators whose role was to implement the strategy in every local or health authority area in England. Its overall aim was that of preventing teenage pregnancy (wherever possible) and supporting teenage parents (where teenage births had proved unpreventable) (SEU 1999b; DfES 2007).

The TPS was a ten-year program, running from 1999 to 2010 that combined both national and local initiatives; with the overarching focus to:

- Reduce by 50% the 1998 England under 18 conception rate by 2010, with an interim target of a 15% reduction by 2004;
- Achieve a well-established downward trend in the under 16 conception rate by 2010;
- Increase to 60% the participation of teenage parents in education, training or employment to reduce their risk of long-term social exclusion by 2010;
- Reduce the inequality in rates between the fifth of wards with the highest under 18 conception rate and the average ward rate by at least 25% by 2010 (this recommended by an interim report on the TPS that suggested targets for reducing teenage pregnancy could only be met by achieving substantial and sustained impacts on conception rates in the deprived areas with the highest under 18 conception rates).

(Dennison 2004)

The TPS encompassed a multi-agency approach to its successful delivery. Indeed, the reduction of teenage conceptions is a concern for a range of agencies, most notably highlighted through the inclusion of teenage pregnancy reduction targets in health and local government performance indicators (HDA 2003). The TPS worked across a range of government departments that at times aligned the focus to their own specific policy frameworks. For instance, recognition that young women who are/have been 'looked after' and experience teenage pregnancy and motherhood need intensive support has been reflected in government policy. In *'Care Matters: Time for Change'* (DfES 2007) for instance, it was stated that a comprehensive support package, co-ordinated by a lead professional should be put in place for all pregnant teenagers and

teenage parents in care or leaving care. This comprehensive package of support should include:

- Unbiased advice on pregnancy options and support in deciding what to do about their pregnancy;
- If they choose to have a child, advocacy and support during the pregnancy, and after the child is born, with healthcare, benefits, educational opportunities and childcare;
- Access to a trusted adult who they can confide in, thereby enabling the early identification of difficulties and the provision of appropriate, co-coordinated support;
- Advice on contraception to minimise the risk of subsequent unplanned pregnancies;

(DfES 2007 p.95)

The end of the 'National Teenage Pregnancy Strategy'

2010 marked the end of the TPS and whilst a reduction of 18.1 per cent was achieved, this was far from the initial 50 per cent first envisaged (DfE, 2011). The Teenage Pregnancy Independent Advisory Group (TPIAG), who monitored the strategy over ten years, produced a final evaluation of the strategy. Whilst the report was surprisingly brief, the TPIAG outlined what they believed to be the successes, missed opportunities and disappointments over the course of the ten years. The following statement clearly states the huge task that they believed was ahead of them and consequently how the targets were unrealistic from the out start. What is interesting about the final report however, is once again the emphasis placed upon the role of education (sex education programmes) as the primary component to the success of the strategy - despite the growing evidence that has disputed this focus:

“England's under-18 pregnancy rate is currently at its lowest level for over 20 years, but it is still unacceptably high. In 2000 we

welcomed the launch of the Teenage Pregnancy Strategy but felt the timescale for halving under-18 conceptions by 2010 was too short. Teenage pregnancy is closely interlinked with poverty which is a major issue to tackle in just one decade. Progress in teenage pregnancy is also dependent on a change in culture so that sex and relationships can be discussed more easily and it also requires a co-ordinated approach across all sectors. But despite our reservations many local areas around England used the Teenage Pregnancy Strategy to achieve great success... Some areas managed to reduce their under-18 conception rates by up to 45 per cent from the 1998 base line which proved the strategy worked when it was applied properly. But some local areas failed to implement the strategy effectively and as a consequence their teenage pregnancy rate stayed high - or in some cases increased".
(TPIAG, 2010)

Since the development of the TPS, a huge amount of interest developed that sought to explore the experience of teenage pregnancy and motherhood, and in research terms, what could be described as an explosion of interest and developments occurred over the course of the ten year strategy. The accumulation of such research evidence helps identify both the limitations of the TPS and what might have been the main contributory factors that lead to the TPS failing to meet its targets.

One of the main criticisms voiced is the lack of research evidence to back up the assumptions that lay behind the policy approach adopted by the TPS. This was especially with regard to the assumptions surrounding teenage sexual and reproductive behaviour. Despite weak evidence that sex education programmes are actually successful in changing behaviour (Arai, 2009, p.99), the technical/educational approach to the strategy still took centre stage. For example, Carabine's (2007) analysis of the TPS highlighted how the; acquisition of knowledge, was the most significant component to the TPS (Carabine, 2007). Despite this focus, research evidence has disputed the emphasis placed on such an approach. For example, an analysis of sex education programmes and improved access

to advice and contraception services concluded that this did not reduce unintended pregnancies among young women aged between 11-18 years (DiCenso et al. 2002)

A further crucial omission is how the strategy seemed oblivious to, and unwilling to listen to, the voices of young mothers themselves. Where it did include the accounts of young mothers, the reliability and validity of such evidence has been questioned as it appeared that quotations from young mothers had been selected carefully in order to be congruent with a pre-set policy agenda. The TPS seriously lacked a balanced account with regard to the experience of teenage pregnancy and motherhood, consequently missing a vital insight into the meanings attached to pregnancy and decision making of young women. As Duncan et al. strongly argued, policy was misdirected in its aims, used inappropriate instruments, and was unhelpful to many teenage parents (Duncan et al, 2010, p.20).

What has become a common complaint about the TPS was the lack of attention paid to the social and cultural explanations of teenage pregnancy and parenthood. The provision of education is unlikely to be the real driver behind the decision making processes young women who were involved in communities where a socio-cultural milieu in which pregnancy may not be regarded as a calamity. Focusing upon the individual at expense of structural determinants is misguided and heavily criticised for neglecting the real inequalities that exist amongst young people. This is especially with regard to the structural influences on behaviour and the choices young people make, both conscious and unconscious, which will be discussed later within the context of 'individualised rationalities' (Furlong et al, 2003).

This chapter will now turn to alternative discourses of teenage pregnancy and motherhood. Such discussions will provide a more nuanced account of teenage pregnancy and motherhood. An inherent feature of these discussions will be to draw upon the subjective accounts of young mothers themselves.

Alternative Discourses – Insider Accounts

This section will demonstrate that when an alternative perspective to the dominant discourse is adopted, it is possible to reach very different conclusions concerning the nature and experience of teenage pregnancy and motherhood. It will be argued that critiquing the assumptions on which the dominant discourse is based is essential if we are to gain an understanding of the limitations of mainstream research and policy approaches. The following discussion draws on qualitative research and will seek to demonstrate the contradictions that can arise through comparing different methodological approaches.

In 1991 Phoenix published a report that sought to question the assumption that teenage pregnancy should be regarded as necessarily problematic (Phoenix 1991). She did this on the basis of her experience of a qualitative research study with a sample group of 50 young mothers. This was a longitudinal study involving the women being interviewed first in late pregnancy, then six months after childbirth, and again as their children reached the age of two years old. The rationale for using such a methodology was to conduct in-depth interviews that would document the women's life histories and their experiences as mothers. In doing so, Phoenix's findings demonstrated that, for some young women in her sample, motherhood could be both a realistic and positive experience. This directly challenged the dominant discourse that assumes teenage pregnancy should be avoided at all costs, while necessarily resulting in negative outcomes for both mother and child. Whilst this study is some twenty years old, Phoenix's work has been repeatedly referenced as providing an alternative perspective to teenage pregnancy and motherhood (Arai, 2009b, 2007; Duncan et al 2010; McDermott et al 2004; Macvarish and Billings 2010; McNulty 2010).

Furstenberg conducted a qualitative longitudinal study of teenage mothers in Baltimore, USA. The women in the study were interviewed over three decades from the mid-1960's (when they first became pregnant) to the mid-1990's (when they had entered midlife). This study

was pertinently titled 'destinies of the disadvantaged' and involved nearly 300 women from poor working class backgrounds. Furstenberg observed how over three decades the women had moved from: 'being poster children for a negative stereotype to becoming poster women for a more positive image – the family matriarch and protector of the next generation' (Furstenberg 2007, p.44).

Contrary to popular belief, analysis of the data led Furstenberg to argue that early childbearing is not the disastrous and life-compromising event that it has been portrayed to be:

*'We have discovered that early childbearing does not necessarily result in a negative trajectory for young mothers. ...most of the women who stumble early on and become pregnant appear to regain their footing over the long term. They had a rough time in the immediate aftermath of becoming a teenage mother, but most eventually found their way back into more conventional roles. The majority returned to school, left welfare, limited their family size, and entered the labor force. Of course, many remained single or went through a series of marriages and partnerships, however, this pattern of family instability was equally characteristic of many of their later-childbearing counterparts, who came from the same sorts of neighbourhoods and went to the same sorts of schools'.
(Furstenberg 2007, p.51)*

More recent qualitative research studies have also sought to understand young mother's experiences and have produced similar results (Arai 2003; Cater and Coleman 2006; Greene 2003; Kidger 2004 and 2005; Letherby et al 2002; Luttrell 2003; Mitchell and Greene 2002; Smithbattle 2007; Hirst et al 2006; Alldred and David 2010). In a similar vein to Phoenix, they are often critical of the stance of mainstream discourse, research and policy in regarding teenage pregnancy as a 'pathology'. For instance, Arai argues that an important issue that has been neglected is how some young women make decisions about when they will have children – something that cannot be explained through ignorance

surrounding sex and contraception. She further contends that: 'Current policy fails to recognise that some young women will become pregnant because they feel it is the right decision for them, regardless of the services available and guidance offered' (Arai 2003b).

Arai further argues that young women having children at a young age, may be a sign of maturity, as opposed to immaturity, because many young mothers have experienced significant adversity and view parenthood as a meaningful option; 'some young women have a strong orientation to motherhood...particularly for those women who have had to grow up quickly because of early life adversity' (Arai 2003b, p.213). Arai's relatively small scale qualitative research study allowed her to delve deeper into the subjective experiences of teenage pregnancy and motherhood. By exploring the meanings, feelings and thoughts attached to such experiences, the research provided a clearer understanding of teenage pregnancy and motherhood while simultaneously exploring how far the dominant discourse connects to the accounts provided by young mothers themselves. The connection between these two dimensions is crucial. If the dominant discourse fails to connect to the accounts of young mothers, ultimately our understanding of the phenomenon is limited as is the policy responses discussed earlier. As her research indicates, young mothers are also subjected to the stigma and prejudice surrounding teenage pregnancy and motherhood. Ultimately the dominant discourse not only prevents such stigma being challenged, but rather, reinforces it.

Allowing young women to express their own views about their life decisions in their own terms can also help to justify the argument that such decisions should not always be thought of as problematic. This is especially the case when we consider the life stories of such young women which produce a more nuanced account of teenage pregnancy and motherhood. This is because it prioritized the accounts of young mothers and not those of powerful others. So, for instance, it gives access to the thinking which lies behind the decision to become a teenage mother:

'What can you do when you grow up around here anyway? There's too many kids going to school and then nothing for them to do. There's no decent jobs, and then they wonder why girls get pregnant. For me it was because I wanted to do something – I wasn't gonna do nothing, like, so that's like, that's like my job – being a mum to K (baby son)' (female, aged 17) (Cater and Coleman 2006, p.31)

It has made me more settled in, like, myself, because I have a goal now and I have something to achieve and I have to bring her up the best way I can and give her the best of everything and do what I can to help her grow up and not be like how I am. (Corlynon and McGuire 1999, p140)

Through a critical appraisal of the literature, and in direct opposition to the assumptions made within public policy, Duncan further shows how teenage mothers express positive attitudes towards motherhood, describing how motherhood made them feel stronger, more competent, more connected, and more responsible (Duncan 2005, 2007, Duncan et al 2010). What is particularly interesting for government policy is how, for many young mothers, parenting seems to provide the impetus to change direction or build on existing resources, so as to take up education, training and employment (Duncan 2007, p.308). Similarly Graham and McDermott in their systematic review of qualitative research on teenage pregnancy and parenthood, found that: 'despite material disadvantage and social censure, teenage motherhood opened doors into valued roles and supported relationships'. (Graham and McDermott 2005, p. 34)

Such alternative perspectives offer important insights and ways of thinking about teenage pregnancy and parenthood. They are not just giving a voice to young mothers but giving a different understanding of the issues both within and around teenage pregnancy and motherhood.

They give an insight into not only how young mothers feel and interpret the factors we have discussed, but also how such factors mediate their lives and how they consequently respond. As Graham and McDermott argue, we need to draw on qualitative research to bring subjectivity and agency back into the focus (McDermott et al 2004). This can also provide a critique of the quantitative reviews and the assumptions of policy to which young mothers are subjected.

The Changing Social Context – Youth Transitions and Young Women at Risk Discourse

Discussions surrounding teenage pregnancy and motherhood must recognise how the social context of young people's lives has significantly changed over the last quarter of a century. Within Britain the growth of 'extended' transitions (historically the transitions of a small upper-middle class elite) has become the assumed universal norm for all young people regardless of social class (Furlong and Cartmel 2007; Kehily 2007). Indeed, educational opportunities and participation in higher education has increased for all groups, especially working class young people over the last few decades (Furlong and Cartmel 2007). Significantly, this is within the same context that shows how the demographics of teenage pregnancy have not witnessed an alarming upsurge in the number of pregnancies - as is often claimed by the media - but rather a steady decline in rates since the 1970's. This changing social context, raises the question as to why it is that conception rates are so *comparatively* high? And why is it that some young women from the UK decide to take on the role as mothers (and why these are primarily those from disadvantaged backgrounds) whilst some in other circumstances (predominantly from more advantaged backgrounds) decide to terminate their pregnancies? (See Lee et al 2004; Tabberer et al 2000). Whilst such questions have been explored through 'insider accounts' (as detailed above through qualitative research), the following discussion will draw more upon the wider literature that sought to explore such questions with a particular emphasis on the notion of 'individualised rationalisation' (Furlong et al

2003). This involves a contention that for some young women teenage pregnancy and motherhood could be viewed as a rational choice against which, the backdrop of transitions to adulthood are highly unequal and polarised.

The puzzlement concerning rates of teenage pregnancy appears not to be as mystifying when set against the backdrop of increasing inequality within the British context. The socio-economic climate within Britain goes some way in explaining why some young women are opting to have children at a young age as a life changing decision, when other options in what has become an increasingly polarised society seem distant and unrealistic. In 2001, the UK had the fifth highest child poverty rate in the EU (Bradshaw and Mayhew 2005, p.35). At the start of the 1980's the UK had a child poverty of 12 per cent. However, this rate more than doubled during the 1980's, continued to rise slowly during the 1990's and only since 1998/1999 has it started to fall (Bradshaw and Mayhew 2005, p.36). The most recent data available has demonstrated that whilst the official child poverty rate fell by 18 per cent between 1998/99 and 2008/09, we are likely to witness a rise in 2010/11 as a result of the recent cuts to welfare and public spending (Stewart in Holden et al. 2011). During this time, transitions to adulthood also significantly changed, and despite widening participation rates in higher education and increasing staying on rates post-16 and post-18, such opportunity structures also seem to have become more polarised. (Furlong and Cartmel 2007; Kehily 2007; Macdonald and Marsh 2005; Jones 2002). Furlong and Cartmel suggest that traditional forms of inequality remain intact but our perception of these processes has been obscured by social changes taking place (Furlong and Cartmel 2007 p.33). They argue that: 'despite the fragmentation of experiences and the growth of non-linear routes, it is still possible to predict labour market outcomes fairly accurately on the basis of social class (via educational performance) and gender' (Furlong and Cartmel 2007 p.140).

It is suggested that in the current climate, as traditional forms of social class reshape and reconfigure, educational success has become the

focus of young people's biographies, and the foundation of subsequent inequalities. Whilst transitions are undoubtedly characterised by non-linearity and unpredictability (Furlong and Cartmel, 2007; MacDonald and Marsh 2005), the literature points to the tendency for young people to fall into two camps:

- The extended transition: mostly associated with middle class young people, characterised by extended dependency, pro-longed period of engagement with post-16 education before moving onto university and then employment;
- The accelerated transition: associated with working class young people, young people who are not engaged in some form of education, employment or training (NEET), teenage pregnancy and the alignment with traditional forms of adulthood based around social class and gender. Coles has argued that it is this group of young people who have been the focus of much government policy since the 1990's (Coles, 2000, Coles et al 2002, 2004). Such policy agendas include the Teenage Pregnancy Strategy and young people labelled as NEET.

As we can see, changes in youth transitions have resulted in a '*widening gap between those on the fast and slow lanes to adulthood*' (Bynner et al 2002 p.25; see also Bynner 2001; Jones 2002; Evans 1997; Furlong and Cartmel 2007; Johnston et al 2000; Webster et al 2004). Young mothers fit within the 'fast track' camp. The importance of understanding the *meaningful* negotiations young women make on this 'fast track' transition to adulthood are fundamental. Focusing on such variations within the decision making process, Lee et al found that the personal situations of young women, rather than their moral views, were the biggest influence on their decision to carry on with the pregnancy or not. They stated that:

'Those who were facing poverty and disadvantage were generally more 'pro-life' due to deeply embedded factors entwined in social deprivation, the attitudes of family and friends and the accepted behavioural norms in their communities (where youthful pregnancy

is more common). Moreover, those who perceived their lives as insecure and unsettled were more likely to see becoming a parent as a positive change. By contrast, those who had plans to go on to further education and a career were more likely to choose a termination'. (Lee et al 2004 p.42)

Smithbattle has also documented the value of exploring the life stories of young mothers (Smithbattle 1995; 2000; 2003; 2007). Her argument below is extremely thought provoking, especially in the ways in which she touches upon the relationship between structure and agency.

'Teenagers do not autonomously invent their futures, but rather adopt the futures that are available to them as members of a family, ethnic group, social class, and community... These young mothers' sense of gaining or losing, of doing better or worse, of becoming a better person or remaining adrift, was interpreted against the background of what preceded the pregnancy and what they imagined for themselves in the future...[thus] mothering is not always viewed by teenagers or their parents as detrimental or limiting, but rather confers adult status and supplies a social identity that is familiar and consistent with the wider social world of restricted educational and employment opportunities...'
(Smithbattle 1995 p.32)

The fast track route to adulthood, whilst often depicted as a 'poor' transition for young people, can, therefore, be viewed as very much a rational choice for some young people when we take into account the varied social and cultural milieux young people inhabit (MacDonald and Marsh 2005). Transitions to adulthood have received a huge amount of interest especially as a means to understand the processes involved with regards to social inclusion and social exclusion (MacDonald and Marsh 2005; Bottrell and Armstrong 2007; Webster et al 2004 ; Furlong and Cartmel 2007). However, the complexities of youth transitions have often been overshadowed by over simplistic accounts that often miss the meanings young people attached to the decisions they make, and the

nature of the agency they employ. As teenage pregnancy has been heavily criticised for assuming such an experience is problematic (especially when from the vantage points of young mothers themselves), so would assumptions that view the transitions young people negotiate as either good (extended) or bad (accelerated). Whilst such explorations are vital for understanding the experiences of young people in contemporary society, it is imperative that they bring young people's subjectivities back into focus.

One way to explore such subjectivities is to explore the concept of 'rationalised individualisation' (Furlong et al 2003): Furlong and colleagues outline their rationalised individualisation model of youth transitions in the following terms: 'We use the term 'rationalised' rather than 'rational' in recognition of the dynamic and reflexive nature of the process.' Adding the term 'individualisation' reflects social change in late modernity and helps 'draw attention to the fact that the permutations of structural and situational capacities are virtually infinite and therefore traditional models based on social classes lead to a simplification of transitional processes' (Furlong et al, 2003 p. 7)

Furlong et al argue that:

"An adequate account of youth transitions has to recognise that any mobilisation of capacities is preceded by rational (or rationalised) action. In our view, individual action can be construed as rational if it is appropriate given the situation faced by an actor and the beliefs that they hold. Thus if a young person living in a depressed labour market resists attempts to make them join a training scheme in the belief that participation is unlikely to lead to employment, these actions could be construed as rational. While rationality can be expressed on an individual level, it also has a collective dimension in which rationalities are mediated by sub-cultures as an expression of collective experiences." (Furlong et al, 2003, p.11)

In order to explore the agency young people employ, and to better understand the ways people act that seem appropriate to their own circumstances, notions of rationality provide a useful analytical framework. Appreciating the construction of individual biographies entails an understanding of how people may reconstruct events and biographies in ways which give their lives an overall meaning and consistency (Heinz, 1991). They are also particularly adept at helping us understand how individuals contribute to the shape of their life course transitions by being active agents of their biography (Heinz and Kruger 2001)

However, Furlong et al are careful not to over emphasise that individual subjectivity in the form of rationality, is a powerful entity that can overturn structural determinants. They argue that outcomes are largely determined by a set of resources and contexts which are largely structural, but which also involve personal agency. They argue that structural factors (such as class, gender and ethnicity) play an important role, and generally have a more powerful impact on outcomes than other factors such as motivation and personal determination. Despite this, they believe that rationality is an essential part of the process that often gets overlooked: 'Outcomes are never secured without some rational intervention by individuals and are always subject to post hoc rationalisation in which individuals seek to explain an outcome by reference to some combination of personal agency, constraint and/or opportunity' (Furlong et al, 2003, p.19). What makes this model particularly appealing is the ways in which it draws attention to the subtle ways in which young people live out their lives, and provides a theoretical construct whereby we can explore the linkages between structural determinants, reflexivity and individual agency.

Through explorations of qualitative research with young mothers, Duncan has argued that policymakers are guilty of making the 'rationality mistake' in assuming that teenage parents subscribe to economically driven cost-benefit type plans around education and employment in a drive to maximise personal benefits. As Duncan comments: 'Becoming a young mother or father can be rational and moral in terms of their everyday

worlds of family, community and locality, and parenting can be seen as more valuable than employment' (Duncan, 2007, p.325)

In a similar vein to Duncan, Harris et al provide a strong critique to policy approaches that neglect the decision making processes young women negotiate through motherhood. Of particular contention is how policy has focused on education and employment as being the pinnacle for tackling the social exclusion young mother's face. They argue that 'social class ultimately shapes many young women's views of young motherhood and strategies based on presumptions that teenage motherhood is 'a mistake', 'a problem' or 'abnormal' and that caring for children rather than paid working is a failure, are irrelevant to the lives and experiences of young mothers and are unlikely to succeed in encouraging young mothers into EET'. (Harris et al., 2005, p.31). The association between social class and decision making surrounding childbearing is also in Jewell and colleagues' (2000) study. The working class women in this study considered the age range 17-25 to be the optimal age for child bearing. Their middle-class counterparts, however, reported late 20's or early 30's as the best age (Jewells et al 2000; see also Geronimus 1997).

The notion of gender and class are particularly crucial for Anita Harris (2004) who discusses the 'at risk girl' (with the teenage mother being a prime example) struggling to counteract the polarisation experienced in a socially unequal and 'risky' society. Harris draws upon the polarities she explores between the "can do" and "at risk" girl. She states that: "success, personal effort, and self-invention have become linked together in the project of surviving in a risk society. Through these discourses young women are disciplined into creating their own successful life trajectories and taking personal responsibility if they fail" (Harris, 2004).

Harris explores the "can-do" and "at-risk" positions in relation to young women as workers, consumers, and mothers and demonstrates how a normative image of the girl for our times both relies on class and race stratifications that remain deeply embedded within society. Harris's discussion is particularly enlightening as it shows the development of a

polarisation between the 'successful' girl and the 'at risk' girl and the tensions that arise when we explore such concepts in the light of notions of class inequalities, and the related 'pathologisation' of certain femininities.

Summary and Conclusion

So far this chapter has drawn upon discourses that provide two alternative ways to look at teenage pregnancy and motherhood; 'factually' involving turning to statistics, trends and correlations, and secondly through qualitative research that highlights the complexity of teenage pregnancy and motherhood through the accounts of young mothers themselves. Whilst I do not dispute large scale statistical studies hold real value, it has sought to demonstrate that we need to be very cautious when interpreting the lives of young mothers against them and reaching any conclusions about their subjective realities. It is one thing to paint a picture of the demographics of this group but it is another to claim teenage pregnancy is therefore 'bad' per se. As this chapter has demonstrated, especially when we listen to 'insider' accounts this is not always the case. Alternative discourses have shown the complexities of teenage pregnancy and motherhood and how for some young women it can provide a positive and valued identity. The changing social context for young people is also significant and any discussion of young people making the transition to adulthood need to appreciate young people's varied experiences of this journey and more importantly how these transitions are regarded as meaningful.

An aim of this chapter was to go beyond providing a descriptive account of 'good' versus 'bad' evidence/research, but instead to explore the underlying influences that can often get overlooked or overshadowed. We have discussed within this chapter how perspectives can be conflicting. What can make one perspective more appealing than the other is how we interpret and respond analytically to the discourses we are bound within.

It is therefore important to remember, we are not passively observing teenage pregnancy and motherhood but we are interpreting it - as are the teenage mothers themselves. This is key; different norms, values, and subjectivities impinge upon our understandings and interpretations. We need to critically explore the dominant discourses we are bound within and the effects these discourses have on our interpretations of teenage pregnancy and parenthood.

Teenage pregnancy and parenthood alongside the main discourses surrounding them are social constructions. They are culturally defined, open to change and differences are found both within and between socio-cultural milieux. This calls into question the taken for granted assumptions that are found within dominant discourse and the consequent policy responses to a perceived 'social problem'. As we have found through an alternative perspective that draws on 'insider accounts', teenage pregnancy can be understood very differently and this opens up alternative discourses for exploration. The possibilities of these alternative discourses hold real meaning to the lives of young mothers as they challenge the negative stereotypes and the assumptions that they have to negotiate on a day to day basis. These alternative discourses can also impact on the lives of young mothers by informing policy and making it more responsive to the needs of young mothers. The second half of this chapter will now turn to the theoretical framework that has been developed to explore teenage pregnancy and motherhood. Through a number of under explored research questions, it will be argued that teenage pregnancy needs to move away from static conceptualisations, to more fluid and dynamic conceptualisations that represent teenage pregnancy as more complex and nuanced.

The Employment of a Conceptual Framework for Exploring Teenage Pregnancy and Motherhood

Theoretical framework – taking a holistic approach through time

This literature review has so far identified research questions that warrant further exploration, and are thus embedded within the empirical element to this thesis. Avenues for further research include; the importance of listening to the accounts of young mothers (drawing upon their use of alternative discourses), and how negative representations and the stigmatisation of teenage mothers impacts upon subjectivity (esp. feelings of self-worth, self-efficacy and confidence). The literature has also shown how young mothers are embedded within a social environment that deems them 'at risk' and thus subject to immense pressure including from policy makers and practitioners. These policy interventions are unique to the policy landscape that preceded it - how young mothers interpret such intervention alongside wider systems of social and cultural support is integral to our understanding of contemporary experiences of teenage pregnancy and motherhood. Deconstructing wider discourses of motherhood and youth have also enabled teenage pregnancy and motherhood to be embedded within a standpoint that questions normative transitions to adulthood and wider ideological constructions of motherhood.

Domains

Whilst attempting to find answers to these questions will form the basis of the findings presented in this thesis, the literature points towards the need to treat teenage pregnancy and motherhood as a complex and fluid phenomenon. This is especially in regards to the many ways it can change its shape over time and be influenced by a range of factors that not only *link* but *overlap*. In response to this, an exploration of certain

domains will unfold that are likely to best represent the complexity of teenage pregnancy and motherhood.

The two main domains that will be the focus of this thesis are the '*economic-material*', and the '*social*'. These two domains have analytical similarity and both encompass a range of sub domains that offer a comprehensive account to the key domain in question. For example, the '*economic*' encompasses the more structural aspects of young mothers lives; low and/or insecure sources of income and dealing with poverty (making *income* a sub domain), instability of accommodation and complex and frustrating dealings with housing agencies (*housing*), and insecure negotiations through education and employment and training (*NEET*). The '*social*' domain encompasses informal social and cultural systems of support from family, friends and parents. More formal systems of support that are also to be explored include dealings with different professional groups such service providers, personal advisors and health practitioners (midwives, GP's) etc.

Self-Concept

Also of critical importance will be how the two main domains described above interact with the women's notion of the '*self-concept*'. This dimension of their lives explores self-worth, self-efficacy and confidence in relation to their evolving identities as "mother-to-be" and eventually motherhood. Of particular interest here will be the women's responses to various self-images portrayed in interaction with their multi-faceted social world, including dealing with processes of stigmatisation. The potential strength of using such an approach is moving beyond the combining of domains used in previous longitudinal qualitative research (see for instance Henderson et al., 2007) (which are largely about spheres of *activity*) with others, which are to do with *emotional aspects of people's lives*, and the way in which these impinge upon *identity* and *subjectivity*.

Motherhood as Fluid and Dynamic

The transition to motherhood is the main focus of this enquiry. Conceptualising the dynamics of pregnancy and motherhood as a 'career', in line with the framework used by Macdonald and Marsh (2005) places more emphasis on the transitional aspect of this identity shift from a young person to a young adult. Subsequently, the consideration of such a transition as conferring adult status will be emphasised. Within their study of young people making the transition to adulthood, Macdonald and Marsh's notion of the 'family career' encapsulated the route into adulthood for some of the young people within their sample who became teenage parents.

This thesis also views motherhood as the dynamic development of a 'maternal career'. However, what makes such an approach unique to its field is how this thesis utilizes the framework discussed above (the exploration of domains and their interaction with the notion of the 'self-concept') alongside qualitative longitudinal methods that explore the development of a maternal 'career'. Combining theoretical frameworks in this manner provides more depth and detail to these under-explored research questions. For example, research has failed to explore the consequences of stigmatisation, especially the impacts it can have on a young mother's self-esteem and confidence *through time*. Once again, this highlights how the specific content and configuration of the '*economic*' and '*social*' domains can change over time and how they interact with the notion of the 'self-concept'. Viewing teenage pregnancy and motherhood as a journey; an experience that changes its shape as young women grow and respond to the social world they are embedded within is key. Encapsulating this notion of *time* moves away from *static* conceptualisations of teenage pregnancy and motherhood and reasserts its complexity. The specific employment of Qualitative longitudinal Research (QLR) methods will be discussed in the next chapter but some of the basis of QLR is the employment of theoretical perspectives and concepts as the basis of analysis. And these need to be discussed here. These two elements are: longitudinal research allows for a better

purchase to be gained in the analysis of the relationship between structure and agency. And the second is that it allows for a focus to be given on the importance of critical moments. These will be discussed in turn.

When discussing Qualitative Longitudinal Research (QLR), Neale and Flowerdew highlight *time* and *texture* – the interplay of the temporal and cultural dimensions of social life as the conceptual foundation for QLR:

*'In longitudinal qualitative research, time is not simply linked to trend data or linear trajectories. It is mediated through a **cultural turn** that explores the detailed **textures** of social life – the subjective meanings and active crafting of social relationships, cultural practices and personal identities and pathways. It is the **interplay** of time and texture – or the temporal and cultural dimensions of social life – that gives LQ research its distinctiveness. Understanding how people move through time, use time or relate to time – their strategies for making sense of the past or navigating their futures – requires an understanding of the varied and individualized circumstances of their day-to-day lives.'*

(Neale and Flowerdew, 2003, p. 192)

The longitudinal aspect of this research study will attempt to draw out a detailed picture of the lives of a sample group of young mothers, sketching out their journeys from the initial discovery of pregnancy, their experiences during the nine months of pregnancy, their experience of labour and birth, to the fundamental identity change as they embark on the transition to motherhood. Transitions to motherhood and developments over time in relation to under-explored research questions will be integral to the research element of this thesis. Conducting social research with the same individuals over time will provide data that is rich in both detail and depth.

Critical Moments

Combining a longitudinal framework with a holistic approach may also be instrumental in enabling the identification of what has been termed a range of different 'critical moments' to emerge from the biographical accounts of young mothers (Thomson et al., 2002). Research with young people has sought to explore 'critical moments' in the construction of adulthood. For instance, Thompson et al sought to ask if 'critical moments' in the construction of adulthood (young people's biographies) can be identified and if so, what part do they play in the processes of social inclusion and exclusion. Like other research in its field (Hodkinson and Sparks, 1997; Johnston et al, 2000; Macdonald and Marsh, 2005) they found that 'critical moments' could act as turning points in youth transitions. For instance, particular life events and experiences – such as, parental separation, bereavement or ill health – are found to have significant effects on the nature, direction and outcomes of an individual's transition to adulthood. The influence of 'critical moments' on young people's lives can develop a more nuanced account of transitions to adulthood and add more purchase on the interface between structure and agency. In regards to the theoretical framework and empirical element to this thesis, it can also provide an insight into the interface between the economic and social domains and therefore, the interface with the development of motherhood as a maternal career and how such interactions impinge upon the women's subjectivity (self-concept).

Henderson et al focused on 'critical moments' by employing a qualitative longitudinal approach. They believed the strength of using such an approach was how the significance of 'critical moments' could be revisited and revised over time. They also argued that: "A focus on critical moments draws attention to the significance of biography and the configuration of timing, resources and resourcefulness." (Henderson et al, 2007 p.20). The resources young people have access to include a range of social and cultural resources (i.e. material resources), with resourcefulness also encompassing a young person's competence and/or determination to draw upon these different resources. Indeed, a

longitudinal approach was integral to their conceptualisation of 'critical moments' for they believed they may not be regarded as significant at the time but only with hindsight.

Critical moments are often deemed to be highly consequential. For instance, a critical moment in one aspect of a young person's life (family separation, bereavement or an incident connected to drug/alcohol misuse) can have consequences on other aspects of their life such as their school to work transition. Henderson et al. found that some critical moments appeared to be more consequential than others. However, this was often due to resources available to young people and timing of critical moments within their lifeline, so could vary depending upon the young person in question. They argue how the configuration and timing of events become significant, alongside the extent to which young people are able to respond with their resources and resourcefulness (Henderson et al, 2007 p.21).

By exploring 'critical moments' in relation to teenage pregnancy and motherhood, we may find distinct 'critical moments' emerge. For example, the experience of unprotected sex and the feelings/emotions to emerge from this, falling in love, and the realisation that a relationship is breaking down all could be regarded as highly consequential 'critical moments' for young mothers and mums-to-be. Young women informing their own mothers of their pregnancy and the changes that take place from such a disclosure is also referred to as highly significant (Cater and Coleman, 2006; Letherby et al. 2002; Mitchell and Greene, 2002). Acceptance during the later stages of pregnancy, especially in regards to how family members may "come round" to the idea of the pregnancy is also deemed to be highly consequential (Cater and Coleman, 2006; Letherby et al. 2002, Smithbattle, 1995). Sexuality, conception, pregnancy, childbirth and motherhood involve critical moments when young women have to make important decisions. Experiences such as pregnancy and childbirth may encompass a range of 'critical moments' that are unique to the lives of young mothers and mums-to-be.

It is the dynamics and workings of 'critical moments' in relation to teenage pregnancy and motherhood that I am particularly interested in. Thinking about how critical moments may emerge from the relationship between the '*economic*' and '*social*' domains, and how these interactions impact on the women's notion of the 'self-concept', could be highly significant. Not only could this develop our understanding of teenage pregnancy and motherhood but it may also provide insights into how intervention may be more attuned to the needs of young mothers. Adapting the concept of 'critical moments' to the study of teenage pregnancy and motherhood may also be advantageous for exploring the emotional aspects of young mother's lives - something that forms an integral part of this thesis. This is especially the case in regards to the process and impact of stigmatisation, and how young mothers interpret and respond to encounters that could be highly stigmatising.

Conclusion

The theoretical framework that forms the basis of this thesis provides a unique opportunity to delve into under-explored research questions that not only acknowledge complexity, but also encompass the notion of time, providing depth and detail by describing and analysing change over time.

A theme running throughout the literature review has been the need to draw upon the subjective accounts of young mothers and to question how far the dominant discourse actually connects with these accounts. The following chapters will discuss how this theme has been embedded within the methodological approach adopted, and consequently the research findings. Under explored research questions have developed from a thorough analysis of the research literature and as discussed, will be explored through a distinct theoretical framework – a qualitative longitudinal approach that encompasses the notion of time.

The four main research questions that form the empirical element to this thesis include an exploration of what might be the key domains in young mother's lives, and what critical moments might be specific to the experience of teenage pregnancy and motherhood:

1. How can we best understand the “teenage pregnancy” and “motherhood” as the dynamic development of a maternal “career”?

Motherhood

- What *meanings* do young mothers attach to teenage pregnancy and motherhood?
- How does motherhood impact on the young women's self-concept?
- How do young mothers experience the different stages to motherhood?
- How does motherhood impact upon other key domains in the young women's lives such as economic (housing, EET, income) and social (informal and formal relationships and systems of support)?
- Does the passage of time allow young mothers to re-negotiate their mother identity?

2. What are the other main domains which interact with “motherhood” within the lived experience of the sample? Here the focus will be upon the interplay between:

- economic-material factors including, housing, benefits, and involvement in (or dis-involvement from) education, employment or training;

- Social network factors including informal networks with the participants own mother, father and other family members, relationships with partners, and more formal patterns of social support offered by advisors or other professionals or project workers;

Economic/Material Domain

- How do women negotiate encounters with the labour market, education or training?
- What factors either positively or negatively contribute towards 'successful' outcomes with education, employment or training?
- How do young mothers negotiate the structural determinants of their lives such as poor housing, welfare benefits and low income?

Social Domain

- What do young mothers think of local services/support available to them, and do they cater for their needs?
- Are young mothers receptive to policy interventions targeted towards them?
- How do intimate relationships change through time?
- How do formal and informal support networks intersect and change their shape over time?
- What are young mother's views and experiences concerning the support gained through close social networks such as family, friends and partners

3. Can we identify “critical moments” in these two domains and what can we learn about how these occur and interact?

Critical Moments

- Do critical moments emerge from the accounts of the women that are tied explicitly to the experience of teenage pregnancy and motherhood?
- Can the identification of critical moments help deliver interventions at the right time, which are more attuned to the needs of young mothers?

4. How do these strands of development (and any associated “critical moments”) interact and how do they impact upon the emotional development of the young woman in terms of her concept of “self”, associated feelings of self-esteem and self-confidence, and notions of self efficacy in terms of her feelings about being able to be able to take charge of events in her own life and those around her, and build positively towards a planned future?

Self-Concept

- How do young mothers feel they are represented in society and how does this affect their confidence and feelings of self-worth?
- How do young mothers negotiate the stigmatisation sometimes attached to teenage pregnancy through time?
- How does motherhood alter the women’s notion of the ‘self’?

Exploratory questions:

- To gain a greater understanding of ‘teenage pregnancy and motherhood’ through the accounts and experiences of young mothers themselves;
- Explore the more intangible dimensions to social life that often get overlooked within mainstream policy and research

Qualitative Longitudinal Research (QLR)

- What are the domains within young mother's lives that seem particularly significant and how do these overlap and interlink with each other *over time*?
- What contextual and intervening conditions appear to influence or affect participant change through time?

Thesis Outline

Chapter One

Chapter one has opened up with an exploration of the dominant 'discourses' that have constructed teenage pregnancy and motherhood as problematic. Uncovering the relevance of these discourses has provided the basis for exploring the construction of teenage pregnancy and motherhood within the UK context, and how policy frameworks have developed in response. The chapter has outlined the social demographics, policy frameworks and research evidence often cited when exploring 'risk' factors and poor outcomes associated with early childbearing.

The main goal of chapter one has been to critically explore the social construction of teenage pregnancy and motherhood so that we can better understand *how* and *why* it has been denoted as a social problem. Under New Labour the policy approach was quite substantial and like no other policy framework that preceded it. New Labour engineered a 10 year co-ordinated 'National Teenage Pregnancy Strategy', the main impetus behind this being the contention that early childbearing was both a cause and consequence of social exclusion.

The chapter has argued that by exploring the development of teenage pregnancy being seen as necessarily 'problematic' we can open up avenues for alternative discourses to be considered and appreciate the nuances that accompany the lived 'realities' of young mother's lives. The chapter has therefore drawn upon alternative discourses that primarily consist of young mothers own accounts. These alternative discourses demonstrated the real tensions that lie between a government strategy that viewed teenage pregnancy as inherently problematic versus the accounts of young mothers themselves. The changing social context for young people growing up in early 21st century has also been discussed. Of particular relevance to the lives of young mothers has been how

transitions to adulthood have become highly polarised reflecting deep seated inequalities amongst young people. Of great importance to this chapter was the assertion that set against the backdrop of limited opportunities and deprivation, early childbearing for some young women can present itself as a rational option and confer a valued adult identity. This calls into question the taken for granted assumptions that are found within dominant discourse and the consequent policy responses to a perceived 'social problem'.

The chapter concluded by outlining the research questions that have developed from a critical appraisal of the research literature. It also provided an account of the theoretical approach adopted for exploring these research questions. This being the view that teenage motherhood is best seen as the dynamic development of a 'maternal career'. However, what makes such an approach unique to its field is how this thesis utilizes a particular framework (the exploration of domains and their interaction with the notion of the 'self-concept') alongside a qualitative longitudinal approach that explores the development of this 'maternal career'. It is further argued that the basis of qualitative longitudinal approach is also the employment of theoretical perspectives and concepts (briefly described above) as the basis of the *analysis*. This being: that analysis through time allows for a better purchase to be gained in the analysis of the relationship between structure and agency. And the second is that it allows for a focus to be given to the importance of critical moments.

The theoretical framework that forms the basis of this thesis provides a unique opportunity to delve into under-explored research questions that not only acknowledge complexity, but also encompass the notion of time, providing depth and detail by describing and analysing change over time. The longitudinal aspect of this research study will attempt to draw out a detailed picture of the lives of a sample group of young mothers, sketching out their journeys from the initial discovery of pregnancy, their experiences during the nine months of pregnancy, their experience of labour and birth, to the fundamental identity change as they embark on

the transition to motherhood. For some of the young mothers research data spans a five year period whereby we can witness real developments taking place across significant aspects of their lives such as the women getting married, the expansion of their families and relationship breakdowns. Transitions to motherhood and developments over time in relation to under-explored research questions will be integral to the research element of this thesis.

Chapter Two

This chapter offers an in-depth account of the methodological approach chosen to explore the research questions outlined at the end of chapter one. The empirical basis of this thesis takes a qualitative approach. As previously discussed the qualitative approach adopted is concerned with tracking change and continuity in the lives of a sample group of young mothers through taking a longitudinal approach. In doing so the thesis has chosen to adopt a mixed method approach; involving individual semi-structured interviews over time, ethnography and visual methods with young mothers.

The methodology chapter is broken down into two parts. The first half concentrates on why and how I have chosen to research young mothers and in doing so draws upon my own epistemological and ontological position. It then goes on to describe QLR as a distinctive perspective offering a unique way of understanding and knowing the social world. The links with biographical research will also be discussed; especially concerning its value in uncovering the dynamics of distinctive social processes.

The second half of the chapter focuses upon the actual research process itself and includes a breakdown of the methods, sample and procedures including ethical considerations. A sample group of 18 young mothers who took part in the individual semi-structured interviews were recruited into the study. Involvement with various projects targeted to support the needs of young mothers comprised the ethnographical aspect of the

research study. Visual methods involved participants constructing their own 'digital stories'. This involved the aid of visual instruments such as photos, documents and the audio voice recordings of the research participants as they re-told a significant aspect of their 'life story'. In combination these methods offered great depth and richness to the data overall.

Chapter Three

Chapter three is broken down into two parts. The first half of the chapter explores the role of kinship and intimate relationships the women form and sustain throughout the course of the research project. The second part examines the notion of critical moments and how these were identified and deemed significant both across time and across the research sample.

The maternal career is explored in relation to the social worlds of the young women. How the women developed over time from mothers who could be described as having a 'fragile self', to mothers who developed a growing confidence and 'maturity'. Whilst the changing shape of motherhood is described through its various stages and various experiences the women encountered, emphasis is placed upon embedding this 'maternal career' within the social worlds the young women inhabit. In doing so, relationships with significant others are drawn upon and the significance of how young people's lives are *linked* with others is deemed integral.

Finally, the chapter will explore the relevance of critical moments within the lives of young mothers. Through exploring critical moments the multi-faceted nature of their lives is drawn out. It will be argued that whilst critical moments are a means through which we can identify the more structural dimensions to the women's lives they also play witness to the interplay between structure and agency. Of particular focus will be how critical moments can be identified within key domains, how they played a

fundamental role in steering their lives in different directions, and how such moments can alter a subjective sense of the self.

Chapter Four

Building from the analysis, chapter four will explore how the young mothers experience the stigma attached to teenage pregnancy and motherhood. One of the main findings to develop from analysis of the data was the pervasiveness of stigma on the lives of the young women and how they negotiated this over time. Fundamental to the development of the chapter will be the question of how young mothers discuss a moral dilemma (i.e. being a teenage mum) and attempt to repair what Goffman would refer to as a spoiled identity? (Goffman, 1963).

Chapter four will draw upon findings that indicate how young mothers are aware of how they are perceived, how they manage stigmatisation as well as factors that can either exacerbate or neutralise this experience. It will be argued that fundamental to the findings is how the above are negotiated through time in an overall endeavour by the young mothers to 'prove' themselves in order to reinforce their status as 'moral' or 'good' mothers.

Overall, it is hoped that such findings further highlight that young mothers are far from a homogeneous group and consequently the experience of stigmatisation will also vary, and as will be explored, often dependent upon young mother's circumstances and biographies.

Chapter Five

Chapter five closes the research findings through two carefully chosen case histories that provide further illustration of key themes. The purpose of contrasting and comparing the two case histories is so that we can appreciate, in detail, the multifaceted nature of their lives and how teenage pregnancy and motherhood is very much a heterogeneous experience. This is drawn out through the journeys of two women who

come from the same broad structural backgrounds but nevertheless experience teenage pregnancy motherhood in very different ways.

However, focusing upon individual lives is not just an appreciation of their uniqueness but also recognition of the social context in which they are told - what is essentially the interface between the individual and the social. They are therefore particularly valuable in being able to understand in great detail the processes that can lead to either social inclusion or exclusion. For example, the case histories allowed us to explore how engagements with education and employment are played out within their lives, how they were experienced differently, and how they intersected with other key aspects of their lives. The emergence of critical moments will also be highlighted. It will be argued that case histories are particularly adept at highlighting critical moments and can be relatively precise in identifying their timing and the processes that lead to their emergence.

By drawing upon two detailed case histories this chapter aims to reinforce the importance of understanding how young mothers negotiate the early stages of motherhood. The initial transition to motherhood is a *key stage* and these case histories illuminate this journey with great depth.

Pregnancy and transitions to motherhood are often described as an emotional rollercoaster and the identity change is profound. One of the strengths of this chapter is how it draws upon data spanning over a five year period – taking us from the initial transition to motherhood through to the experience of being a mother as their children start school.

Whilst the case histories chosen for this chapter focus upon the individual, and therefore cannot be said to be typical or representative of teenage mothers on the whole, they both illustrate similarities and a relationship with the wider research sample.

Chapter Six

This chapter provides a synthesis of the research findings. It will aim to draw together the key arguments embedded within the thesis and develop a coherent outline of how the thesis explored and answered the research questions. Reflections on the research study, especially with regard to its longitudinal aspect will be discussed as will the particular challenges and limitations to the empirical research.

The chapter will highlight how its approach to researching teenage pregnancy and motherhood offers a valuable and original contribution to the literature. Viewing teenage pregnancy and motherhood as a journey; an experience that changes its shape as young women grow and respond to the social world they are embedded is integral. Encapsulating this notion of *time* moves away from *static* conceptualisations of teenage pregnancy and motherhood and reasserts its complexity.

The chapter will also discuss the research findings implications for policy drawing attention to the foundational principles that provision needs to be non-judgemental and respectful. The prospects for young parents as the coalition government has come into power will also be reflected upon especially with regard to how young mothers are likely to fare under the coalition's far reaching reforms to social policy. This is especially important when set against the austerity cuts that are likely to hit the most vulnerable the hardest. Concerns will also be raised surrounding the likelihood that provision for young parents will be varied and dependent upon geographic locality. Considering the often stated correlation between teenage pregnancy and deprivation, it will be argued that such impacts are likely to only entrench poverty and disadvantage.

Avenues for future research such as a greater focus upon the experience of stigma as well as how the research questions could be refined to reflect notions of difference and diversity will also be explored. Indeed, what the research study was unable to explore will be reflected upon. For instance, whilst the narratives do not lack depth and detail, it is important to remember that they are geographically and socially located in a certain

context and are therefore only partial. It will be argued that larger studies should be employed in order to delve deeper into the heterogeneous nature of this experience. Different cultural contexts, the experience of ethnicity and social class, as well as the experiences of certain groups overrepresented as teenage parents (such as 'looked after' young women), are all avenues for further exploration using QLR.

The chapter will end by reflecting upon how social policy is now at a junction, essentially the interface between the policy frameworks from the last government to the emerging policy frameworks under the new coalition government. The chapter will conclude that whilst such changes are in their infancy and therefore a lot of work can only be speculative, research evidence indicates a number of challenges to the policy agendas that are unfolding. Research exploring how young mothers might respond to this changing social context is therefore extremely valuable and timely.

Chapter Two:

Methodology

Introduction

This chapter outlines the methodology chosen for the research. This will involve describing the recruitment of research participants, the methods used to collect data and finally how the data was analysed. Whilst a detailed breakdown of the research methods and process will be discussed, another important element within this chapter is an account of the epistemological position adopted. This is concerned more with giving an account of *why* particular strategies were selected and *why* they were felt to be appropriate for the research questions being addressed. Importantly, this also encompasses why such strategies are believed to produce what could be termed 'legitimate forms of knowledge' that best answer the research questions, aims and objectives (Stanley, 1990).

Such discussions broadly take a feminist perspective. Whilst it is recognised there are a plurality of feminist methodologies and perspectives, there tends to be the general agreement that adopting a feminist perspective involves the realisation that 'how something is done and why' is as important as the methods used to do it. Of further critical importance is the recognition within feminist research that the experiences of women are brought to the fore and made visible (Maynard and Purvis, 1994). This is especially true for research on motherhood where many groups of women, especially teenage mothers, continue to be unrecognized as competent social actors (Reinharz and Chase, 2003). According to Campbell and Wasco, the ultimate aim of feminist research is to 'capture women's lived experiences in a respectful manner that

legitimizes women's voices as sources of knowledge' (Campbell and Wasco, 2000, p.783)

This chapter is arranged in two parts. The first section discusses the background and reasons behind researching teenage pregnancy and motherhood, leading onto an account of the epistemological and ontological position adopted. This section finishes by discussing the theory and value of 'Qualitative Longitudinal Research' (QLR); an integral method central to the research as a whole. The second section of this chapter is more concerned with outlining the methods chosen and giving a detailed account of the research process. Within this section three distinct methodological approaches will be discussed: ethnography; individual qualitative semi-structured interviews with young mothers; and visual methods. Towards the end of the chapter we will explore ethical issues associated with these methods.

Part One

Researching Young Mothers

The previous chapter outlined how this thesis is driven by what are perceived to be the fundamental tensions between dominant discourses and alternative discourses. The first can be construed as viewing teenage pregnancy and motherhood as inherently problematic (Botting et al 1998; Hobcraft and Kiernan 2001; SEU 1999). The second focuses on accounts provided by young mothers themselves (Arai 2003; Cater and Coleman 2006; Smithbattle 2007). The literature review sought to highlight the main criticisms in regard to the 'deficit model' of teenage pregnancy and parenthood. Compelling evidence, often using qualitative methodologies, was drawn upon which often resulted in producing findings with strikingly different results from those found within the dominant discourse/mainstream research (see, Arai 2003, Brown et al 2002, Cater and Coleman 2006, Lawson et al 1993, Phoenix 1991, Smithbattle 1995).

Such research has opened up the way for an alternative understanding of teenage pregnancy and motherhood and questioned the pathological stance that has a tendency to dominate society's view on such an issue.

Because this research project sought to give primacy to the accounts of young mothers, a qualitative methodological approach was deemed most appropriate. Qualitative methods are characterised by fluidity and flexibility which makes them particularly adept at exploring the interpretations, meanings and subjective experiences of vulnerable research participants (Lee 1993; Melrose 2002; Miller 1997; Wiebeln 1990; Thomson 2002, 2003). Furthermore, whilst quantitative methods can address answers to 'what' questions, qualitative methods are best suited to exploring the 'how' and 'why' (Holland, 2007). Specific qualitative approaches have been chosen that aim to explore the experience of teenage pregnancy and motherhood with more depth and meaning. For example, biographical and qualitative longitudinal research methods are the main vehicles through which I will explore my research questions. These distinct qualitative approaches have a range of advantages when applied to studying the complexity of social lives. For instance, the longitudinal aspect of this research project draws on the life stories of young mothers as their lives develop and not just a reaction to events as they reportedly experience them at a single moment in time. Such methods also provide a distinct contribution to the literature on teenage pregnancy and parenthood as they have rarely been utilized.

Epistemological Position

This study was influenced by the philosophical tradition of interpretivism. Interpretivism takes an epistemological position of understanding the social world by attempting to analyse the interpretation of what the world is by its participants. Like many other qualitative researchers prime importance is placed upon viewing the social world through the eyes of the people we study (Bryman, 2004, p.279). Such an approach not only paves the way for alternative understandings and discourses of social

phenomena to develop, but ensures a commitment to the values and priorities instrumental when both conducting and analysing the data produced within feminist research.

Observing the social world and conducting qualitative research requires one, in the words of Robert Park, to: 'Go get the seat of your pants dirty in real research' (R. E. Park, 1927). This statement has much prominence for me. The silence of the voices of young mothers within the research literature has contributed to misconceptions surrounding many of the key issues within the public arena. This fundamental flaw is often observed by young mothers themselves. For instance, studies that have gained the views of young mothers have noted how they question the accuracy of mainstream research and the resultant images such research tends to portray:

"There are a lot of things that people say about young mothers – that we have got no ambition, that we're just young people that want to get pregnant to get flats. I will tell you now, whether I got pregnant or not, I am a determined person and I would have got my own flat anyway".

(Corlynon and McGuire 1999, p.110)

"Another social statistic, another dull life. Some people have the wrong opinion and think you just have babies so you can stay home and screw the government but it's not like that – well, it isn't for me anyway".

(Alexander et al, 2010, p.144)

Relating to the observation of the young mothers discussed above is the work of Liz Stanley (Stanley, 1990). From a feminist standpoint, Stanley

discusses the 'act of knowing' and the potential problems concerning the production of such 'alienated knowledge', within the academic mode of production. She argues: "the result is alienated knowledge, a product apparently complete, bearing no apparent trace of the conditions of its production and the social relations that gave rise to this" (Stanley, 1990, p.11).

It is partly because of these potential problems that Stanley argues for the need to take the research and writing process within the social sciences more seriously. Epistemology is the foundation for methodology and we need to be open and reflective about the process of research and the many issues that can arise within this process. A number of what Stanley refers to as feminist epistemological principles influenced not only the research behavior but also the analysis and consequent thesis as a whole. This practical set of research behaviours are shown below and should be embedded within and related to:

- the researcher-researched relationship;
- emotion as a research experience;
- the intellectual autobiography of researchers; therefore
- how to manage the differing 'realities' and understandings of researchers and researched; and thus
- the complex question of power in research and writing.

(Stanley, 1990, p.12)

Feminist epistemology has contributed immensely to advancements in the theory and practice of social science methodology by incorporating feminist concepts and by addressing the power relationship between theory and experience (Stanley and Wise, 1993). Feminist epistemology and the theory of feeling, belief and experientially based knowledge are intrinsic to the basis of this empirical research study (Stanley and Wise, 1993). Finally, what is crucial to this thesis and its empirical basis is that

female epistemology enables us to push the parameters of discourse rather than draw firm conclusions from dominant discourse surrounding teenage pregnancy and motherhood. Of great importance to this research study is the endeavour to provide an insight into the 'personal' and 'social' dimensions of young mothers' lives in the pursuit of a more nuanced account of teenage pregnancy and motherhood that reflects the lived 'realities' of young mothers' lives.

It is through challenging and pushing the boundaries of dominant discourse that we need to reflect upon the fact there are things we cannot know without going out and looking for them. However, the art of 'finding out' what is actually out there is illusive. In short, what do we regard as 'reality'? Is it the large scale quantitative research studies that conceptualise teenage pregnancy (and the factors surrounding it) as problematic? Or is it the way young mothers conceptualise their worlds? For instance, how do they make sense of the social world they are embedded within; how do they negotiate it; and finally what do they regard as success or failure within this context? Which perspective do we ultimately lean towards and why? My own epistemological position and the values surrounding it believe that without including the accounts of young mothers, what research actually claims to 'know' is seriously limited. Oakley argues that the traditional, masculine, research model not only objectifies and depersonalizes research participants, but also strengthens the power held by the researcher (Oakley, 1990). Through her own research that prioritised the accounts of young mothers, Smithbattle became critical of what she terms is the predominant 'scientific gaze' which makes generalisations detached from the lived experiences of young mothers themselves. She argues that the scientific gaze overrides any knowledge that the subjects of their study possess. This thesis begins from the assumption that the way young mothers express their opinions and feelings about pregnancy and motherhood is crucial to an understanding of teenage pregnancy and parenthood as it is lived today in contemporary society (Smithbattle, 1995, 2003).

Whilst much care has been taken to address unequal power relationships within the research process, care needs to be taken not to romanticize the research process by *solely* aspiring to the employment of feminist methodologies and ideals. As Lawler has argued: 'the search for a 'pure' feminist methodology can be the search for an asocial research 'space' which is free from the workings of power' (Lawler, 2000 p.9). It has been argued that it can be impossible to totally break down power relationships within the research process and failing to recognize such limitations also can lead to the occlusion of differences between women (Lawler, 2000). Thus, whilst my epistemological position, values and beliefs aim to challenge unequal power relations within the research process and provide a space in which young mothers can feel empowered to voice their experiences/accounts, there are limitations. It is only through reflecting upon ourselves as social researchers and being open about the complexity of the research process that we can counteract such limitations. Maynard has argued that feminist work needs to be rigorous if it is to be regarded as intellectually compelling, politically persuasive and policy-relevant. This calls for: 'being clear about one's theoretical assumptions, the nature of the research process, the criteria against which 'good' knowledge can be judged and the strategies used for interpretation and analysis. In feminist work the suggestion is that all of these things are made available for scrutiny, comment and (re)negotiation, as part of the process through which standards are evaluated and judged.'(Maynard in Maynard and Purvis, 1994, p.25)

It also needs to be recognised that my epistemological position and feminist standpoint is representing a small aspect of what I believe to be relevant in what is a highly nuanced, complex and disputed field. There are a number of feminist epistemologies or ways of doing feminist research (Maynard and Purvis, 1994; Stanley and Wise 1993; Holloway and Jefferson, 2000; Hughes, 2002). No one feminist approach stands out to be the 'true' feminist approach, but rather a number of competing claims need to be negotiated. It is within this environment that I have chosen what I feel fits within my field of study and what I argue is

important to researching women's lives. The nuanced nature and complexities of feminist research cannot be discussed in depth here but I hope the recognition placed upon such complexities can justify the choices made for what I have argued is the feminist standpoint embedded within the research process for this thesis.

The literature has also highlighted the importance of moving away from arguments that seem to imply there is a 'right' and 'wrong' way of doing social research (Holland and Ramazanoglu 2002; Letherby 2003; Maynard and Purvis 1994; Mason 2002). Such arguments often involve the dichotomy of positivist and subjectivist approaches to conducting research and as a consequence have historically involved competing claims between qualitative and quantitative research. Whilst I am clear about why I believe my research produces valid knowledge which both combines experiential based knowledge and theory in relation to the lives of young mothers, there are a number of methodologies that could have been employed or combined that are just as valid. In doing my empirical research in a certain way and stating the reasons for doing so I am not trying to imply that this is the *only* 'correct' way but I want to be very clear that much of the literature has indeed produced 'alienated' knowledge in relation to teenage pregnancy and parenthood and this is influenced by the epistemological, ontological and methodological approach researchers choose to adopt. My research, albeit with its own distinct limitations, seeks to play a part in rectifying this.

Biographical and Qualitative Longitudinal Research (QLR)

This section of the chapter discusses using biographical and longitudinal approaches to studying teenage pregnancy and parenthood. This will enable a more detailed understanding of teenage pregnancy and parenthood. For instance, over time what can group biographies tell us about transitions through and within a range of domains, both reflectively (looking back in time) and prospectively (looking into the future)? An important feature of this approach would be to provide better support to

teenage mothers not only from the vantage point of their own expressed needs but how, over time, the jigsaw puzzle may come together and highlight pertinent issues formerly overlooked through a snap shot picture. Thus, group biographies documenting journeys through pregnancy and motherhood are a means through which this thesis will explore a number of research questions. Whilst a methodology in its own right, the literature on QLR has also pointed to such an approach being a distinct way of understanding and knowing the social world (Flowerdew and Neale, 2003; Corden and Miller 2007; Neale et al 2011; Holland 2009). A more detailed account of why this approach was chosen is therefore needed as biographical and QLR is not only a unique perspective that has been employed within the social sciences, but one which is central to this research study and the main vehicle through which we can gain a more nuanced account of teenage pregnancy and motherhood.

The Turn to Biographical Methods within the Social Sciences

Within the social sciences there has been a significant rise in the usage of biographical research. Indeed, interest in this approach appears to be growing rapidly. Chamberlayne et al concisely conceptualize such change as a 'biographical turn':

(The) 'turn to biographical methods...is a statement about the scope and influence of a shift in thinking which is currently shaping the agenda of research and its applications across the social science disciplines. This shift, which amounts to a paradigm change or a change of knowledge culture, affects not only the orientations of a range of disciplines, but their interrelations with each other. In general it may be characterised as a 'subjective' or 'cultural' turn in which personal and social meanings, as bases of action, gain greater prominence.'

(Chamberlayne et al, 2000, Introduction)

More widespread acknowledgement of the value and potential of biographical research have been voiced both historically and contemporarily at several points over the last 30 years (see Denzin 1970; Roberts 2002; and Saldana 2003). Recognition is also given to the diverse range of methods that can be employed when using such an approach. For instance, memory books, photos, documents, diaries and life-grids are all methodological tools that have been productive when conducting biographical research (Backett-Milburn et al 2007; Holland et al 2005 and Bell 2006). More creative methods can also be applied when conducting biographical research. For instance, part of the research for this thesis explored life stories through 'digital storytelling'. This method used a range of digital technologies as a means for young mothers to construct their own life stories. This included the aid of visual instruments such as photos, documents and the audio voice recordings of the research participants as they re-told a significant aspect of their 'life story'.

Characteristics of Biographical Research

Despite much variation, an overriding theme running through the literature is the intrinsic potential that biographical research can offer into gaining an understanding of the individual life within its social and historical context (Atkinson 1998, Cole et al 2001, Denzin et al 1998). The interlinking of the 'personal' (individual biographies) with the social context makes biographical research highly relevant to a range of contemporary social issues. For example, in chapter one it was demonstrated how teenage pregnancy and parenthood has been placed high on the political agenda for action under the umbrella of tackling the causes and consequences of social exclusion (SEU, 1998; SEU 1999).

Further to this, life histories or stories help us understand the meanings people attach to action as part of their lives, how the multitude of events and experience are made 'sense of', and how accounts are made by individuals to define their 'presence' and their social world (Roberts,

2002). Whilst the relationship between structure and agency is a contentious one, a deeper understanding of this relationship through such research must be an advantage overall. MacDonald and Marsh, refer to this when describing their own empirical research using a biographical approach:

'The twists and turns of individual life stories are not the outcome of pure human agency, nor are they purely individual phenomena. The interrogation and comparison of detailed accounts of individual's lives...allows us to comprehend the shared social conditions and objective constraints against which these life stories are made and how these were perceived and responded to in similar and different ways by our informants.'

(Macdonald and Marsh 2005, p.43)

Indeed, an integral aspect to biographical research is how its data analysis explores the dynamics of distinctive social processes, so relevant to contemporary social thinking regarding the direction and consequences of social change (Beck, 1992; Cartmel and Furlong 2007; Giddens, 1991). This direct link with social theory is important as social scientists have argued that biography should move beyond mere narration and storytelling of the particular into more abstract conceptualisations, interpretations, and explanations.

Biographical research is used for a variety of empirical and theoretical purposes and is applicable to both historical research and contemporary social issues within the social sciences. However, what makes it particularly appealing for a number of researchers is how biographical research, like qualitative research in general, is characterised by 'openness' and relates directly to the epistemological position described earlier. For instance, biography with a concern for the way a specific individual perceives and construes the world, moves the researcher toward the subject's perspective, rather than the point of view of powerful others.

The Employment of Biographical Approaches Within the Wider Literature- a Focus on Youth Studies

Two approaches that employed QLR with groups of young people over time have been influential for the design and theoretical outlook with regards to the methodological approach chosen. First of all, Webster et al (2004) notion of 'careers' within disadvantaged young people's transitions to adulthood, helped embed the importance of motherhood as the key focus of this thesis and how this experience can be viewed as the dynamic development of a maternal 'career'. Secondly, Henderson et al notion (Henderson et al, 2006) of domains helped conceptualise the key areas in young people's lives and how these change their shape over time as well as overlap and link with one another. Both approaches draw upon very similar research methods and theoretical standpoints and some might argue that the notion of 'careers' and 'domains' are more about differences in terminology rather than any distinct approach in itself. However, both approaches could be argued to be fundamentally different in the sense that it is possible to have careers within domains (or even across them), but domains are *not* careers. Arguably then, it is possible to use the notion of domains without the *dynamics* implicit in the notion of careers.

Reflecting upon the differences and similarities between the two conceptual frameworks, motherhood as a 'career' best conceptualised the movement associated with the transition to motherhood and how this transition often confers adult status. Henderson's use of 'domains' on the other hand (whilst encompassing change and/or continuity) best conceptualised the persistence of certain structural determinants in the young women's lives. The transition to motherhood, and the meanings attached to motherhood is the primary focus of this study and being able to distinguish between the two was also advantageous for keeping this focus. One of the key distinctions between the two approaches however, is that Webster et al developed a strategy of breaking down their notion of 'careers' into sub-careers studied also over time. For them this best reflected their samples multi-faceted transitions to adulthood. Whereas

Henderson et al focused on the notion of 'domains' and how over time their sample experienced change and continuity within and between these. The strength of Webster et al is how they focused upon a distinct group of young people in one locality and therefore had the advantage of being able to bracket the sample into sub-samples over time with particular depth. Henderson et al., however, included a large number of young people from around the UK who came from differing socioeconomic backgrounds and held a particular interest in comparing and contrasting varied transitions across the UK and across the social classes.

Webster et al study focused on socioeconomic deprivation and how young people living in deprived communities negotiated their transitions to adulthood. Their fieldwork took place between 1998 and 2003 (involving three waves of interviews with the same young people). This study sought to establish the importance of youth transitions and developed a range of careers that seemed to encapsulate the experiences and routes into adulthood for different "groups/categories" of young people within their sample. Further waves of research saw the development of these careers into the main sub-samples, these being the education, employment and training sub-sample, the family sub-sample and finally the criminal/drug-using sub-sample.

Of particular relevance for this thesis is the family-sub sample which mainly included young parents. (Ten of the eleven women studied by Webster et al. had had their first child as a teenager). Tracking change and continuity within this sub-sample lead the authors to assert what seemed particularly relevant to these young mothers over the course of their research. With regards to the young women's negotiations with the labour market (i.e. the interface between the maternal career and economic-material domain) they state that:

'Among parents, and young mothers in particular, childcare responsibilities and the precariousness of childcare arrangements continued to restrict paid employment. Most chose to stay at home and

delay employment to care for young children, in the context of lack of opportunities for decent, rewarding employment. The availability of childcare opportunities was more important than education, training and employment opportunities, but the former was a necessary condition for longer-term opportunities to be realised’.

(Webster et al, 2004, executive summary)

Henderson et al. employed a biographical methodological approach in exploring ‘youth transitions’. The rationale for using this approach was to gain an understanding of the holistic and dynamic character of the lives of young people growing up in Britain at the turn of the twenty-first century (Henderson et al 2006). This research involved understanding how the lives of a diverse range of young people changed and developed over a ten year period. Interviewing the young people over this period allowed them to create a series of retrospective, and prospective accounts as the research participants projected themselves into an imagined future. Their biographies were thus told backwards (retrospectively) as well as looking forward (prospectively). The latter involved asking the young people about their hopes, fears and expectations for the future.

Understanding young people’s transitions to adulthood using this approach developed an awareness of the importance of ‘critical moments’ within people’s lives when intervention may have positive or negative effects. This too is highly relevant to my own research aims (see p.56). Henderson et al sought to highlight was how biographical methods offer a contextualised understanding of human agency. Further analysis led to the conclusion that biographies can highlight the different trajectories of young people alongside an exploration of the factors which may have had an influential effect. For instance, they argue that:

“in taking a biographical approach in understanding youth transitions it is possible to see the logic of young people’s biographies as underpinned by a subjective sense of competence, and recognition of that competence by others including peers, family, institutions and professionals. It is the

experience of such recognition (or its absence) that underpins the investments and disinvestments that these young people make.”

(Henderson et al 2006, p.32)

Thus biographical approaches are a means to understand youth transitions and aspects of social exclusion that some young people experience within the contemporary socially structured landscape. During a time of huge social and economic change within society, such an approach is vital for mapping transitions and linkages between various domains in young people's lives (Furlong and Cartmel, 2007; Henderson et al 2006; MacDonald and Marsh 2005).

Henderson et al explored multiple domains, their linkages with biographies and the opportunities for 'recognition of competence' within these different domains. The chosen domains within young people's lives they studied included leisure, education, work and the domestic domain (Henderson et al 2006, p.30). They also demonstrate the ways in which the specific content and configuration of these domains changed over time. This was a useful tool to adapt for the methodological approach in this thesis in the study of young mothers. For instance, the empirical research in this thesis also explored two key domains (Economic/Material and Social), the linkages between them, and the relationship to the biographical accounts of the young mothers and the wider research questions. Relationships, housing, employment, education, informal and formal support networks, involvement with support projects, self-esteem, motherhood, pregnancy, stigma, and finally aspirations and ambitions for themselves and their children were the key areas I sought to explore. Whilst this was very similar to the approach Henderson et al used, it was also distinctly different as it sought to examine the interface of these domains within the research question that focused upon the notion of 'self-concept' within the young mother's lives. This was especially the case in regards to confidence and self-worth in their developing identities as mothers and how experiences within other domains could impinge upon this.

This thesis sought to use, but go beyond, the approach taken by Henderson et al focusing upon four main research questions and the relevance and differences between the '*economic-material*' and '*social*' domains. I also wanted to look at how these different dimensions linked and competed against one another. For instance, how did the social context (often involving deprivation) impact on the role of a mother and how did the stigma attached to being a 'teenage mother' impact on the feelings, emotions and levels of self-confidence in relation to motherhood. This was not an easy task to undertake as many aspects of such emotional dimensions are intangible so therefore can be difficult to measure/quantify. Thus, a strength of using such an approach is the combining of domains (which are largely about spheres of *activity*) with overriding research questions that explore the more *emotional dimensions of the women's lives*, and the way in which these impinge upon *identity* and the women's *self-concept*.

Greater depth and detail can be gained by focusing upon one sub group of young people (with similar characteristics) rather than exploring issues across a wide range of young people from a variety of backgrounds. Henderson et al study was wide ranging and this meant their findings, at times, seemed to lack detail and depth. Webster et al overcame this by focusing upon young people in one locality with a shared set of circumstances (deprivation), but still encompassed young people with a varied set of circumstances (young parents, young people with drug and/or alcohol problems etc.). By focusing upon only one sub set of young people, in this case young mothers, it is hoped we can really utilize the use of domains and explore the notion of transitions in greater depth and with greater relevance to the *specific* issues associated with teenage pregnancy and motherhood.

Like Henderson et al and Webster et al, the research described in this thesis was longitudinal. Thus, it explored the domains discussed above and how the linkages between these changed over time. This was particularly useful in regards to retrospective and prospective reflections and projections. Questions used to explore this involved asking the young

mothers to envisage themselves and their situations at various stages in their lives. In a similar vein to Henderson et al, the young mothers in this study were asked to envisage themselves and their situations at ages, 20, 25, 30 and 35 years of age. Later interviews reflected upon any changes in relation to these initial predictions, ambitions and aspirations.

Biographical Methods and Social Theory

The promise of biographical approaches in relation to understanding and expanding social theory has been well documented (Chamberlayne et al 2004; Roberts 2002; Saldana, 2003). This is especially the case as a way to understand how individuals make sense of their lives within the dynamic processes of transition and change (Furlong and Cartmel 2007). It also helps us understand the relationship between structure and agency. This is especially the case when we consider the ways in which individuals attempt to manage their lives during what some have construed as very uncertain times (Beck, 1992, Giddens, 1991). During these times it is argued that rapid social change and the fragmentation of experiences make it extremely difficult to plan for the future or manage biographies (subjectively or objectively) in any meaningful sense (Furlong and Cartmel 2007). This begs the question as to how young mothers manage such circumstances and make sense of their lives within such a complex and changing social context. A great deal of work within the 'youth transitions' literature has sought to make sense of the issues young people face during times of change (Furlong and Cartmel 2007; Henderson et al 2006; Macdonald and Marsh 2005). However, young mothers are somewhat 'transitionally' speaking unique to the conventional youth transitions literature, and warrant a deeper exploration. Indeed, as Smithbattle has argued, not only are the context and characteristics of young mothers in regards to gender, class and ethnicity powerful in deciding routes into adulthood, but motherhood as a symbol of adult status is also crucial in determining such pathways (Smithbattle, 1995, 2003). This is especially the case when considering

identity formation and how motherhood offers a reinvention of a young women's identity.

Many studies have analysed some of these issues in a broader sense, by drawing upon the theoretical ideas of Beck and Giddens on the 'risk society', and made use of their concepts of individualisation and reflexivity (see the reflexive project of the self – Giddens 1991) to explore the meaning of 'exclusion' in modern Europe (Furlong and Cartmel 2007; Harris 2004; SOSTRIS 1999; Heinz and Marshall 2003). For example, research has explored the experience of risk, and the various strategies adopted by individuals who are exposed to social exclusion, using a socio- biographic research method. This concluded that: 'Reflexivity became a useful way of thinking about individual life-strategies, and how successful they were likely to be in overcoming situations of risk and exclusion' (SOSTRIS, 1999, p.21). The theoretical grounding of their research was based around a socio-biographic methodology and explored the difficult balance between theory and individual experience:

"We see our subjects as purposeful agents in their own lives, as part-authors of their own biographies, so to speak. But because we are sociologists, our interest is nevertheless to identify typical patterns in these lives, to see, as C. Wright Mills once put it, 'the public meanings of private problems'. To do this we have developed the idea of life-journeys, formed in response to different experiences of social risk and opportunity. These are in each case, 'typical' socially-structured experiences of lives in contemporary Europe...but such experiences, however much they can be seen as a product of 'structure' or social forces, external to an individual, are always lived in particular ways...our research aimed to capture the particularity and lived texture of our subjects' lives, at the same time as defining aspects of them which can be seen as typical within a particular social context and history".

(SOSTRIS, 1999, p.44)

It is thus apparent that the theoretical literature can also draw upon the importance of 'biographical research' (the study of life stories) and conversely biographical research can draw upon sociological theory to understand and make sense of the data produced. This is an important two-way relationship and both approaches, whilst they place emphasis on different aspects, can contribute to one another in order to offer a deeper understanding of the experience of teenage pregnancy and motherhood during times of social change and uncertainty.

Young Mothers Life Stories

What can biographical and longitudinal methods bring to my research study, and more precisely, my research questions? Longitudinally we are tracking movements within people's lives; walking side by side with the research participants as they experience pregnancy and motherhood. This is at the same time as asking research participants to reflect on the past, present and future in regards to the research questions that link with their biographical accounts. Their life stories bring together a range of experiences and factors that interlink. Fitting together pieces of life's jigsaw helps to provide a more clear and concise picture not only of their biographies but also of how they see and interpret their social world.

The final part of this chapter will explore the reasons behind combining biographical methods and QLR as part of my research that seeks to explore teenage pregnancy and motherhood. It will be argued that both approaches not only sit comfortably together, but when combined, provide greater depth to the detailed accounts that the young mothers involved in this research. Finally, the policy implications relating to biographical and QLR research will be discussed as not only a means to develop policy initiatives that correspond more successfully to the lives of young parents, but also how the involvement in such research may become an empowering experience.

Policy Implications

Biographical and QLR can provide knowledge that is emotionally embedded, makes connections through the stories being told, but most importantly, gives primacy to the personal meanings of the research participants. It was through much consideration in regards to why I initially chose this area of research that it became apparent it was overwhelmingly driven by a number of desires. Such desires were predominantly centred on the need to counteract the negative stigma attached to teenage pregnancy and parenthood (that so frequently has to be negotiated by young parents) in conjunction with developing a space and means through which the often-neglected voices of young parents can be heard. Biographical and QLR seemed to fit neatly with what I argued to be important. Indeed, further analysis of the methodological literature on the advantages of using biographical and QLR highlighted how such an approach had real potential as a means to achieve many of my aims and objectives. This section of the chapter will draw upon a range of evidence, that when combined, builds a strong argument as to why I believe this to be the case.

There is an important strand in the literature on teenage pregnancy and parenthood which points to the lack of acknowledgement concerning the accounts of young parents (see, Arai 2003, Cater et al 2006, Lawson et al 1993, Phoenix 1991, Smithbattle 1995). Biographical and QLR with an emphasis on 'personal meanings' can counteract this by validating the knowledge of the subjects under study. This can be produced through a process that prioritises the accounts, meanings, interpretations and biographies of the research participants. This validation of knowledge tends to be eclipsed within the dominant discourse and policy approaches looking at teenage pregnancy and parenthood. It is only through prioritising the personal meanings put forward by participants that we can challenge these deficit assumptions.

Chamberlayne et al concisely capture the value of intersubjectivity as a feature of biographical research, which can be central to not only

research but also practice. For instance they state that there is a: 'potential closeness between biographical research methods, new policy thinking, and effective and sensitive practice.' They go on to further state that: 'taking account of interrelationships between micro and macro levels is clearly essential to the contextualising of professional practice, and perhaps to professional 'survival' in conditions of uncertainty and instability' (Chamberlayne et al, 2004)

Because biographical research emphasises the perspective of the service user, a biography can potentially be transformed into empowering practice (Chamberlayne et al, 2004, Denzin and Lincoln 1998). Policy makers and practitioners can learn from the stories they hear. Research being put into practice has the capacity to make a real difference to the lives of marginalised groups such as teenage parents through making the previously invisible visible. Policy frameworks such as the 'Teenage Pregnancy Strategy' can learn a great deal from such research, which would seem even more relevant for a government eager to embrace evidenced based policy, and places a great deal of emphasis on service users and their involvement within the policy process (Tisdall et al 2004, Pinkerton, 2001). This has especially been the case concerning marginalised groups such as teenage parents who are often described as being 'difficult to reach'. This, combined with the pathological stance of research builds an even stronger case for the potential of biographical and QLR to improve and develop policy initiatives that correspond to the lived experiences of young parents.

Group biography, which focuses on not so much the individual experience, but experiences within the context of a group, adds a further dimension to the transformative possibilities of biographical research. For instance, do patterns emerge through biographical and longitudinal analysis? Group biography can offer insights into problems of social structure and mobility and the many ways in which groups can be enabled to come together which can be an empowering experience in itself.

“Stories can have transformative possibilities...life history work that provides theoretically framed stories has a part to play in bringing together individuals who, for the most part, stay separated from one another and do not develop a collective identity as an oppressed minority”

(Sparks, 1994 p.178)

It is further argued that:

‘in constructing meaningful accounts of our life – our story – in everyday experience we relate them to our contacts who in turn respond with their own stories. The attribution of meanings in an interactive process with others can overcome problems or changes in life experience.’

This helps us remember that the subjective reality of the individual and their biographical experience helps us not only think about the individual experience but their experience within the context of the group and wider social framework. Denzin also touches upon the possibilities of studying life stories in the context of a group:

‘the life history may be the best available technique for studying such important social psychological processes as adult socialization, the mergence of group and organizational structure, the rise and decline of social relationships, and the situational response of the self to daily interactional contingencies. It is easy to conceive of life histories carried on entire organizations, social groups, or even communities’.

(Denzin, 1970, p.257)

The link with Qualitative Longitudinal Research (QLR)

Biographical research and QLR share many common features that make its combined application not only worthwhile but also more advantageous. Roberts makes a direct connection between biographical research and

QLR. For instance, when referring to how 'lives should be studied over time' He states that: 'the analysis of life stories gives us powerful insights into how individuals reshape their sense of past, present and future and their social relations and thus respond to sociocultural and economic changes' (Roberts, 2002, p.22). He further states that the notion of time is a crucial component of biographical research: 'in the construction of narrative, in the way individuals move backwards and forwards between past/present/future in consciousness, in the models of research used in oral history, life cycle, career, and in age cohort studies' (Roberts, 2002, p.171)

The notion of 'process' is embedded in QLR as it is in biographical research. As Becker highlights: 'the life history, more than any other technique except participant observation, can give meaning to the notion of process' (Becker, 1970, p.116). When describing the key components to QLR, Saldana identifies *duration*, *time* and *change* but places emphasis upon time and change processes as very much contextual and flexible: 'I feel we should be flexible and allow a definition of change to emerge as a study proceeds and its data are analysed. Ironically yet fittingly, we should permit ourselves to change as a study progresses' (Saldana, 2003, p.12).

When discussing the rationale for Qualitative Longitudinal Research (QLR), Neale and Flowerdew highlight QLR as a theoretical orientation: a distinctive way of knowing and understanding the social world. They believe there are a number of benefits and advantages of QLR that are very familiar to those within the biographical literature. For instance, they state that:

*'it is **through time** that we can begin to grasp the nature of social change in their personal lives, and the ways in which structural change impacts on the lives of individuals. Indeed, it is only through time that we can gain a better appreciation of how the personal and the social, agency and structure, the micro and macro are interconnected and how they come to be transformed. It was this*

need to take account of the dynamic nature of people's lives that led to the development of longitudinal research methodologies for, by their very nature, these designs embody the notion of time.'

(Neale and Flowerdew, 2003, p.190, emphasis added)

The wider literature on QLR draws attention to what makes this approach unique and what lies behind the rationale for employing such an approach. A growing literature has developed that focuses upon the emerging theory, principles and practices of QLR. This literature demonstrates that the notion of 'time' is the crucial medium through which data is collected and explored. 'Timescapes', a network of leading academics practising QLR state that QLR is conducted in ways that show a particular concern for the multiple dimensions, meanings and dynamics of time. They state that QLR often involves the following interrelated, core data collection/generation strategies:

- Intensive and extensive tracking of individuals, inter-generational and family groups across time to document changes and continuities in people's lived experiences and linked lives as they negotiate their passage through the lifecourse;
- Waves of data collection...and a range of data generation methods combined together in ways that produce a richly textured, detailed and contextualised data set

(Timescapes, 2011)

The longitudinal aspect of this research study will attempt to draw out a detailed picture of the lives of a sample group of young mothers, sketching out their journeys from the initial discovery of pregnancy, their experience of labour and birth, to the fundamental identity change as they embark on the transition to motherhood. Transitions to motherhood and developments over time will be an integral element to the research

element of this thesis. Conducting social research with the same individuals over time, combined with a biographical approach, served to provide data that is rich in both detail and depth.

QLR also links with a biographical/life story approach to studying people's lives because of the closer examination of the dynamics of distinctive social processes. Tracking movements and experiences through time with individuals as they are being lived, allowed an examination of the holistic nature of the women's lives and how one domain (such as housing) could have an effect on other domains (for instance, not only the education/employment domain but also self-esteem and self-worth in regards to the homemaking domain) both *temporarily and through time*.

Like biographical research QLR has the potential to impact on operational and strategic policy making. QLR provides strengths and opportunities to not only identify but influence potential avenues for policy development. QLR can draw attention to the multiplicity of factors that impact on people's lives, the particular contexts in which these emerge, and the changes which occur over time. Through the dissemination of my research findings such insight can be gained with policy having the potential to be more receptive to the needs of young mothers from the vantage point of young mothers themselves.

Part Two

Methodological Approach Chosen

The methodological approach chosen for this research study has involved three different strands of qualitative social research methodologies: individual semi-structured interviews over time; ethnography; and visual methods. Strand one of the research involved individual semi-structured interviews over time with two cohort groups of young mothers. Cohort group one (see table 1.4) involved three qualitative individual semi-structured interviews at different points in time with a sample group of

nine young mothers. The three different sets of interviews took place over a five year period starting from when the mothers had only recently given birth, with children ranging from three months old to roughly seventeen months old. The second cohort group involved semi-structured interviews over time that first took place when the young women were pregnant. The second interview with cohort two took place in during the end of 2008 and start of 2009.

The second strand of qualitative research involved ethnography through involvement in projects that aimed to support the needs of young mothers. The third strand of qualitative research involved visual research methods through a project titled 'digital storytelling'. A more detailed account of the fieldwork and research process is shown below.

The Research Process

Stage One - Literature Review

The first stage in undertaking this research entailed a review of the research literature on 'teenage pregnancy and motherhood'. This was crucial in developing an understanding of the most relevant topic areas to be focused upon as well as the overall direction the research would take. Such familiarity was also crucially important in gaining an insight into the gaps in the research literature and thus informed my research questions (see below), aims and objectives. Mason places great importance on this stage of the research process. For instance she highlights that while selecting a broad or general research interest can be relatively easy, it can be much more problematic moving on to a set of more specific research questions. She emphasizes the difficulties that can arise during this process and states that 'researchers should be clear about what is the essence of their enquiry and should express this as an 'intellectual puzzle', with a clearly formatted set of research questions.'(Mason, 2002, p.18)

Individual Semi-Structured Interviews

In total, 18 research participants spanning both cohort one and cohort two took part in the individual semi-structured interviews. A total of 40 individual interviews took place with all research participants over the course of the research study (over 5 years). Initially cohort one were recruited as part of my BA and further interviewed during my MA and PhD studies (three individual interviews over a five year period). Cohort two were initially recruited during my MA and followed up during the PhD fieldwork stage.

The in-depth interview is the most commonly used method of qualitative research. In-depth interviews allow researchers to access complex knowledge from an insider 'without the preconceived biases inherent in using existing structured instruments that may contain items irrelevant to local populations' (Schoenberg et al 2005, p.92).

A considerable amount of time was spent on formulating a set of questions that would help me answer and address the main research questions shown above. Having reached consensus on the main focus of enquiry the next step was to design a topic guide (see appendix 3) which would be used as a tool within the first phase of the research project (the initial individual semi-structured interviews with young mothers).

The interviews were conducted in a manner that allowed the participants a great deal of freedom to discuss issues they felt were particularly important to them. Whilst I had a topic guide that I wished to follow, there was also leeway given allowing the women to tell their stories with as few prompts as possible. This allowed conversations to be more natural as this was my overall objective when conducting the interviews. I primarily wanted the young women to discuss the themes I had chosen but in their own terms, in their own time and as naturally as possible. Through this approach I could also re-consider my research questions and adapt them. For instance, allowing the women to feel they could discuss issues that were important to them made me realize the many subtle ways in which the stigma attached to teenage pregnancy can impact upon their lives,

especially in regards to self-confidence and self-worth in relation to motherhood.

Whilst the first phase of the interviews with participants entailed a specific and focused set of research questions, a different approach was taken when conducting further waves of research interviews. The aims and objectives are very different between the two phases of interviews and the main aim of the follow up interviews was to explore the process of motherhood, tracking continuities and change over time amongst the participants.

Before each second phase interview the transcripts from the initial interviews were studied in depth. From this, some of the most prominent issues and the circumstances of the participants were noted and transferred into a template that I would familiarise myself with before the follow up interviews. This template then became a useful tool for reference when discussing a range of issues and circumstances for the participants. Each template brought to the follow up interview covered a range of themes relating to the key domains and key aspects to the women's maternal careers that I wished to explore:

- Pregnancy
- Motherhood
- Housing
- Financial situation
- Support networks
- Relationships
- Education and employment
- Involvement in projects aimed at supporting the needs of young parents

- Aspirations and thoughts on the future

Throughout the interviews and in relation to the themes above, aspects of the women's lives that can be more difficult to conceptualise and measure such as self-esteem and self-worth were explored. I was particularly interested in the more emotional aspects of the women's lives and how feelings of self-worth and confidence not only change over time but how these related to significant life experiences. For example, 'looks' from the public when taking public transport and walking down the street were explored in relation to the women's self-worth and motherhood. The relationships and treatment with health professionals during pregnancy and beyond were also explored. This research sought to explore how these encounters made the young women feel in regards to motherhood and how they negotiated such situations. Significantly, I wanted to explore how they felt at the time and how they reflectively perceived such encounters and developed coping strategies to deal with them. The time dimension of this process was also important and explored.

With participant's permission, all interviews were tape recorded and fully transcribed. The transcripts were then analyzed using a thematic approach. Thus, themes were drawn out from the transcripts using an inductive approach with the aim of exploring previously under-explored issues. Notes were also taken after each interview, outlining feelings and observations both during and after the interviews had taken place. These notes were also drawn upon when analyzing the data.

The inclusion criteria for participants to be involved in the research were that they had become pregnant at age 19 or earlier. For cohort two the women had to be age 19 or under and towards the end of their pregnancies. A clear breakdown of the exclusion criteria is shown below. The exclusion criteria enabled the identification of individuals who could be put at risk of harm by their inclusion in social research.

Participants presenting any of the issues below will be excluded from the research
Age – Under the age of 16
Mental illness
Learning Disability
Psychological distress

When attending projects and building relationships with young mothers I approached those I felt had a range of different experiences. For example, this involved having a sample group that appeared to have various degrees of social support from family and friends. The main characteristics and background information at phase one for the young women is shown below:

Table 1.3 - Cohort Group One – Phase One, Interviewed 2004

Cohort One	Age at first interview	Age when pregnant with first child	No. of children	Relationship status	Housing	Employment / Education
Becky	18	17	1	In relationship with baby's father	Permanent social housing	Part-time student
Gemma	20	18	1	Recently separated from baby's father	Permanent social housing	Part-time paid employment
Jessie	16	15	1	In relationship with baby's father	Temporary Social Housing	Not in education/ employment

Lauren	17	16	1	Single	Lives with mum. Awaiting Permanent social housing	Full-time student
Claire	21	19	1	Single	Temporary social housing	Not in education/ employment
Anna	17	16	1	Single	Temporary social housing	Not in education/ employment
Sophie	17	14	1	Single	Permanent social housing	Not in education/ employment
Ella	20	16	2	In relationship with baby's father	Permanent social housing	Not in education/ employment
Laura	18	17	1	In relationship with baby's father	Permanent social housing	Not in Education/ Employment

Table 1.4 - Interviews Over Time with Participants in Cohort One

Participant	Interview One	Interview Two	Interview Three
Becky	2004	2006	2008
Gemma	2004	2006	2008
Jessie	2004	2006	2008
Lauren	2004	2006	2008
Claire	2004	2006	2008

Anna	2004	2006	2009
Sophie	2004	2006	2008
Ella	2004	2006	N/A
Laura	2004	2006	N/A

Table 1.5 - Cohort Group Two – Phase One, Interviewed 2006

Cohort Two	Age at first interview	Age when pregnant with first child	No. of children	Relationship status	Housing	Employment/ education
Chloe	17	13 with first child. 17 at time of interview with second pregnancy	1	In relationship with baby's father	Permanent social housing	Going back to college (suspended studies)
Ruth	16	16		In relationship with baby's father	Temporary social housing	Recently stopped paid employment
Louise	16	16		In relationship with baby's father	Lives with mother/applying for social housing	Part-time paid employment. In college
Jade	18	18		In relationship with baby's father	Temporary social housing	Considering paid employment
Kirsty	19	19		In relationship with baby's father	Temporary social housing	Not in education/ employment

Amy	16	16		In relationship with baby's father	Temporary social housing	Not in education/employment
Emily	18	18		In relationship with baby's father	Permanent social housing	Recently stopped paid employment. Receives Maternity allowance
Hayley	20	19		Single (on-off relationship with baby's father)	Temporary social housing	Not in education/employment
Helen	17	17		In relationship with baby's father	Temporary social housing	Not in education/employment

Table 1.6 - Interviews over Time with Participants in Cohort Two

Participant	Interview One	Interview Two
Chloe	2007	2009
Ruth	2007	2008
Louise	2007	2009
Jade	2007	N/A
Kirsty	2007	N/A
Amy	2007	2009
Emily	2007	2008
Hayley	2007	2008
Helen	2007	N/A

Ethnography: Involvement with the 'Baby Space' and 'Bumps' projects

Whilst later sections of this chapter will cover in more depth the mixed method approach within this research it is felt that the depth and richness of the data would have been limited without the inclusion of this ethnographic aspect. Ethnography was conducted through the involvement of local projects aimed at supporting the needs of young mothers. In total three support projects were attended. Ethnography at the first project commenced from 2004 and was sustained over a three year period. This three year period entailed attending on an ad hoc basis, so say for an initial four months to return a year later for another four months and so on. This project took place within the centre of a northern city in England and was accessed by young parents from a variety of localities surrounding the city. The main aim of this project was to provide childcare for young parents so they could come together and be supported to return to education or employment. The organization delivering this project provides employment and learning advice, as well as offering information and support on jobs, training, education, money and benefits.

The second project provided support to pregnant young women under the age of 20 and was ideal for recruiting cohort two who the inclusion criteria required to be towards the end of their pregnancies. I attended this project twice over two years for the duration of ten weeks on each occasion. The project ran twice annually and ran for a total of ten weeks on each occasion. The aim of this project was primarily to provide targeted ante-natal support to teenage mothers but also involve a range of professionals responding to the multifaceted nature of the issues the women presented (i.e. housing, benefits advice, and guidance on returning to education/employment). The final project attended developed from the project titled "Baby Space". This entailed 'digital storytelling' and is discussed within the visual methods section. All projects were partly funded through the local Teenage Pregnancy Strategy Board (TPSB).

Ethnography has the benefit of working closely with the subjects being studied in a unique way (Gilbert 2001, Thomas 1993, Hobbs et al 1993, Skeggs 1994). Ethnography involves participant observation and has been described as:

'...a conscious and systematic sharing, in so far as circumstances permit, in the life activities, and on occasion, in the interests and effects of a group of persons. Its purpose is to obtain data about behaviour through direct contact and in terms of specific situations, in which, the distortion that results from the investigator being an outside agent is reduced to a minimum' (Kluckholm 1940).

It was also through this experience that many of the research participants were recruited for the individual semi-structured interviews. Getting to know many of the research participants before conducting interviews benefited the quality of data produced as participants felt more relaxed and open with the interviewer. Such relationship building also greatly contributed to keeping in touch over time with the participants and their willing involvement with the second and third phase of the research.

Techniques used within this local project setting to produce data for analysis were:

- direct observation of events (observing relationships and interactions between participants and professionals within the project setting);
- social interaction in the field with the subjects of the study (such as informal conversations and interactions with the participants involved in the project);
- informal interviewing (informal conversations with participants in relation to the research questions).

(Gilbert, 2001, p.146)

To record such data, fieldwork notes were taken straight after visiting the project rather than during the course of observation. This was deemed to be most fitting because of the specific setting and group dynamics.

Indeed, it is believed that an attempt to write notes within the setting would have been inappropriate and more of a hindrance to the research process. Certainly such a research approach entails ethical dilemmas. For instance, whilst I was very clear about who I was and what my research involved, the group dynamics and my presence at the project for a long period of time enabled the clients at the project to forget about my identity as a researcher and regard me more as a project worker/friend. Because of this, my role needed to be constantly clarified throughout my time at the projects (see later discussion on ethical considerations).

Relationship building, albeit with its own distinct ethical dilemmas, is an approach I found to be integral to the research process overall. An integral aspect to my research was how the researcher and researched made an investment through a two-way process of relationship building that had huge rewards. This is especially relevant to marginalised groups such as teenage mothers and mothers-to-be. Young pregnant women and mothers are often referred to as a 'difficult group to reach' (Liamputtong, 2007). This is because their lifestyles are often described as chaotic; involving insecure housing situations, financial difficulties and relationship breakdowns. This combined with the stigmatization of teenage pregnancy and parenthood makes this group not only hard to get involved in research but also to feel it is "safe" to be honest about their experiences due to the fear of being judged and stigmatized even further through the research process.

Visual Methods: Digital storytelling

In line with the biographical approach to this research, this thesis sought to explore life stories through 'digital storytelling'. This method used a range of digital technologies as a means for young mothers to construct their own life stories. This included the aid of visual instruments such as photos, documents and the audio voice recordings of the research participants as they re-told a significant aspect of their 'life story'.

The course on which this project took place entailed a seven week programme involving practitioners who work with young mothers on a project that aimed to provide an insight into further and higher education. It was run within, and funded by, a local university as part of its widening participation agenda. The project sought to build confidence and gain a number of relevant skills including computer literacy and learning to be at ease with new technologies.

As a social researcher, what made it particularly useful to the doctoral research was that it covered in a unique way a number of the themes on the identity and self-esteem of teenage mothers. It gave the young women the opportunity, in a safe environment, to discuss and reflect upon their lives and to tell “their own story” in their own way outside of the interactional structure of a research interview. Significantly, it enabled them to reflect upon past experiences, good and bad, and also consider how far they have come and what they had achieved within this time. For many of the women this was also quite an emotional experience and they found it surprising (some would say “shocking”) that they had failed to previously reflect upon such issues. For some young women this could involve discussions around the experiencing of being ‘looked after’ (in the care of local authorities) and for others the negative aspects of their pregnancy most notably the reactions of others.

Whilst all stories were unique they encapsulated the feelings and emotions surrounding the identity of becoming a mother which was particularly useful as a means to further explore my research questions through a different medium. Over a number of weeks the women searched for photographs and documents they wished to include and, after seven weeks, produced a short story which was audio recorded.

My involvement included facilitating and observing the women constructing their stories and helping them audio record their story. This was often told in a very emotional way and could at times raise the ethical issue associated with research as potentially causing harm. However, the mothers had sole responsibility for their work and many of their stories

were extremely personal. Whilst the mothers could struggle with this at times, they all produced something they highly valued and felt it was a worthwhile experience.

Whilst methodological insight into visual methods has been described as scattered and confined to very specific areas (Banks 2001), there is a wealth of literature that demonstrates the value and use of visual methods within the social science disciplines (Banks 2001, Prosser 1998, Pink 2001, Heath et al 2009, Knowles and Sweetman 2004; Kaplan 2008; Rose 2001). It has been argued that, as visual methods in qualitative research develop, their place within applied social research and evaluation will be further developed and play more of a more prominent role. There is a diverse range of visual methods used with young people including photographs, films, artwork, timelines, video diaries, life collages, scrapbooks, memory books and drawings (Bagnoli 2009; Weber 2008; Bragg and Buckingham 2008; Holland and Thomson 2005; Rose 2007; Leitch 2008).

Visual methodologies are a particularly useful tool for conducting research with children and young people as they have the possibility to be more inclusive and age appropriate when compared to traditional research methods such as the individual interview. Jewitt suggests that they have the potential to be more advantageous on a number of fronts. For instance, she has argued that because we constantly use visual methods to interpret our lives, visual methodologies are particularly suited to exploring the everyday realities that more traditional methods can overlook or struggle to get close to (Jewitt 1997). Visual methodologies are also particularly adept at exploring sensitive topics with young people. For instance, in comparison to the traditional research interview such mediums can allow for a 'safe' space whereby young people feel comfortable expressing feelings and emotions that otherwise would be difficult to verbalise. They also provide particularly vulnerable groups of young people an opportunity for self-expression that might otherwise not be available to them through more conventional means. This is especially the case for young people who do not have the capacity to verbally

communicate. Much research tends to exclude on the basis of impairment (Nind 2008, Oliver 2009). It is essential that researchers adopt unconventional or alternative approaches that are more responsive to the age, impairment, experience and preference of research participants. For instance, 'Talking Mats' is a visual methodological tool particularly useful for conducting research with people who do not use speech as a form of communication. This is a pictorial framework made up of both picture symbols and vocabulary text that aim to represent a vast array of topics. As a research method it has been described as a particularly useful tool to explore young disabled people's transitions and feelings surrounding aspects of social care (Murphy 1997; Germain 2004; Mitchell 2010).

Booth and Booth employed visual methods in their research study that sought to explore the experiences of mothers with learning disabilities. 'Photovoice' was described as an ideal approach for allowing participants to show rather than tell of their experiences: "Photovoice' uses photography as a means of accessing other people's worlds and making those worlds accessible to others...A growing number of researchers now recognise the importance of engaging with people who have learning difficulties in ways that subvert the barriers to communication and participation erected by what Bell & Newby (1977) have called the 'normative methodology' contained in standard text books..." (Booth and Booth 2003, p.431).

Inevitably, the practice of visual methods has led to the argument that they produce new forms of knowledge that can help extend our understanding of social phenomenon. In a study that sought to explore young people's experiences of multicultural formation and racism, Back highlighted how the images young people produced, whilst initially surprising, revealed considerable subtleties within the everyday spatial maps they produced. For instance, at one of the research sites described as demonstrating entrenched racism, the young Bengalis in the study had developed strategies to convert 'this ostensibly white racist place into a

space that was both navigatable and habitable. This involved constructing a series of 'boltholes', be it in the form of libraries or youth clubs, or other safe urban niches across which safe passage could be negotiated (Back, 2007, p.68).

Both caution when using the visual as an analytical tool, and the appreciation of their value are expressed by Beck. He argues for a photography that listens:

*'These photographs are not unproblematically realist; they are produced by many hands. What is compelling about them is precisely the attention to dialogue, their way of reaching out and of trying to read the signs, but always from a particular point of view. The city is ground anew in this lens. It may be labouring the point but the reason why there are no quotations from Bill, Jackie or Shireen here is that they communicate with us through their photographs...it is not what they **say** it is what they **show** that is important. This is another way to think about the place of photography in accessing and investigating social life. Here images are not 'eye candy' but contain the essence of the message. The photographs also invite a reading that transcends purely visual terms of reference within wider ranges of senses...I think there is also an invitation being issued in these photographs. To hear the still voices of the citizens who inhabit these pictures we have to listen as we look at them'*

(Back 2007, p.113)

The experience of using visual methods as part of the mixed method approach within this thesis helps to demonstrate its value. It provided a unique way in which a number of the themes and research questions could be explored. Whilst the end products (digital stories) were used for analytical purposes in themselves, the experience was an analytical process from the beginning of the project right up until the end. Thus, relationship building, natural conversations, field notes and observations

were taken throughout my time at this project. Indeed, some of the most in-depth data came from discussing the lives of the young women as they constructed their stories using a very natural and relaxed approach.

It is important to note that the women involved in this project included some of the young mothers within both cohort group one and two but was not entirely made up of the participants involved in this research study. Despite this it was decided that all the 'digital stories' would be drawn upon as this was what the women desired.

Consent, Confidentiality and Ethical Considerations

From the outset a great deal of attention and care was paid to ensuring the research methods were conducted in an ethical manner. Various ethical guidelines were drawn upon that helped inform the design and conduct of the research. These included the ESRC ethical framework (ESRC 2005) and the 'Statement of Ethical Practice for the British Sociological Association' (BSA 2002). The importance of gaining informed consent was taken extremely seriously. All research participants, and young women attending the projects where the participant observation took place, were given an information sheet (see appendix 1). This described the main aims and objectives of the research, what research participants were likely to experience if they choose to be involved (including the sorts of questions focusing upon particular topics, the recording of interviews, measures to protect their anonymity and to protect confidentiality etc.), and how the research findings would be disseminated. Before each interview took place a consent form stating the purposes of the research and what participants' involvement entailed was read through and signed by all the participants (see appendix 2). At this stage discussions took place so that all participants were clear about their voluntary involvement. It was also made clear that if they had any questions or wished to withdraw they could do so at any time. When attending the "Baby Space" and "Bumps" project introductions were made and my intentions and aims for attending

the project were also made clear. All participants had to feel comfortable with the different research methods being used and the mothers appeared to be very keen to ask questions about what my research involved. It was also made clear that participation was purely voluntary and all those involved had to have an understanding of this. All participants were aware that the research was being used to complete research as part of my doctoral studies. Anonymity and confidentiality of the participants was to be ensured through changing the names of the participants as well as the names of close family members (son/daughters, friends), the name of the projects they attended and the location of the research all were given fictional names. Research data was kept in electronic form, on University Server and also on a home computer which was password protected. Hard copies of transcripts were kept on University premises, in locked filing cabinets.

There are also a number of challenges and ethical issues associated with QLR that need careful consideration (Ward et al 2003; Holland et al 2006). For instance the ethical issues of qualitative research can become stronger where long term relationships exist between the researcher and researched. Issues of confidentiality are on-going and require greater consideration and maintenance over time. Gaining and maintaining informed consent is also an on-going process throughout the longitudinal research in comparison to research that may only need to gain consent once. It is also worth noting, that over time, as relationships between the researcher and those being researched become stronger, ethical issues could arise as to what the researcher or those being researched expect from such relationships. For example, could research participants make a clear distinction between what could be regarded as a long standing friendship and the professional research relationship that I sought with the participants? The accumulation of data through longitudinal research produces data that is greater in depth and detail which also raises possible problems. This is especially the case when presenting the findings of QLR, as greater depth and detail has the potential to threaten confidentiality as individuals may be detected from the uniqueness of the

biographical details collected. For instance the case histories in chapter five provide so much detail, albeit anonymised, that to publish data in this form may threaten participant confidentiality.

Because this research involved young people who could be described as 'vulnerable', an ethical submission form was submitted to a university ethics committee for approval. This is now commonplace regardless of the client group being researched. This submission form included issues around safe storing of data, anonymity, confidentiality and the time span allocated for young mothers to consider their involvement in the research. It also covered how the interview would be conducted when children are present and how I would deal with the situation of a participant becoming distressed, especially when discussing sensitive issues. All these issues need careful consideration alongside an action plan if issues do crop up and need to be addressed. One particularly difficult subject I had to discuss with the participants prior to their involvement was procedures if disclosures and risk of harm became evident. This had to be conducted in a very sensitive manner, especially when we consider the life experiences of some of the young women (some had experienced being 'looked after') and the stigma attached to teenage pregnancy and parenthood. Experience of working as a youth worker for the local council (over 5 years) and the training involved in this role was extremely useful. Experience with local support services and youth provision also became useful if it was felt the young women needed signposting to relevant support services about which other social researchers may not have been aware.

It is important to note that ethics is not as straight forward as text books sometime imply. For instance, a distinction can be made between 'real life' ethics and 'text book' ethics (Burke, 2009). This refers to the complexities of ethics within the research process and the many ways in which issues can arise without prior warning or consideration. These issues are not easily resolved as they cannot necessarily be identifiable prior to research taking place and can often have to be dealt with spontaneously. This can involve not only emotional encounters which can

be distressing to the participant but also discussion of sensitive topics can also impact upon the researcher. There are not a set of rules when conducting research, and although guidelines minimize risk, ethical issues are often fast moving and dynamic. Thus, 'text-book' ethics may seem rather self-evident but can also crop up in the research project rather unexpectedly. Whilst 'text-book' ethics can seem clear cut, 'real life' ethics are complex, messy and situational. In line with the fundamentals of QLR, ethics don't stand still; they are changing all the time. Because of this it is important to see ethics as a process rather than a fixed agenda to be addressed at the single point of time when forms have to be filled in and an application for clearance is made. Attentiveness to the mothers and their children was paramount throughout my research, and the ethical dimensions, especially when using a mixed methods, needed careful consideration and care throughout.

Analysis

All the research data, including transcripts, fieldwork notes and digital stories were imported into Atlas ti for analysis. Whilst it is recognised that qualitative software packages have limitations, it was a means to organise and manage a vast amount of data across a lengthy time period. Not only was it advantageous as a means to store and manage the data but also helped retrieve quotations and thematic themes across cohorts and time frames in a reliable and robust fashion. There are limitations of using software packages which also need consideration. Some researchers voice concerns over whether it leads to a detachment from the context and narrative of research participants. I was acutely aware of this from the start and took the view that analysis derived from using the software could only be used as a guide to analysis and had to be used with a degree of scepticism.

The attitude adopted was that there was no real alternative to simply reading all the transcripts and becoming familiar with the data. After

Careful reading and re-reading of transcripts, key themes and sub themes were developed into a framework for triangulating and organising all the material, in line with the conventions of good qualitative research (Silverman 1999; Denzin and Lincoln 2000). Triangulation refers to the combination of methods to explore one set of research questions (Mason 2006). Mason, states that triangulation encourages the researcher to approach their research questions from different angles, and to explore their intellectual puzzles in a rounded and multi-faceted way (Mason, 2002 p.190). Similarities with the practice of grounded theory were drawn upon when analysing data (Glaser and Strauss 1967). This process involves the development of categories that illuminate the data, then an attempt to saturate the data in order to draw out the relevance of such categories across the wider data set, and finally the development of key themes which can be applied to the wider social context. At its most basic, grounded theory attempts to generate theory through research data rather than testing hypotheses produced in advance of data collection and analysis

Analysing longitudinal data has its benefits as well as drawbacks. The relationships built with research participants over time leads to a greater awareness and insight into the specific make-up of someone's biography which in turn leads to a greater familiarity with the research data and its context. The re-listening and analysis of interviews prior to further interviews taking place furthers this and overall leads to a closer proximity with the data that can sometimes get overlooked through both large sample frames and interviews with participants that take place at only one point in time. So, whilst in many ways time consuming and labour intensive, the pay offs are potentially substantial when it comes to analysis. Ultimately, becoming familiar with the data is enhanced with the practice of QLR which is intrinsic to the reliability and validity of the research findings.

Another means through which to pay particular attention to the distinctiveness of QLR was the use of an analytical framework devised by Saldana (Saldana, 2003). This framework that covers the notion of time

within each research participant's journey is included within appendix 4. As can be seen in the matrix, it is an interrelated, multi-celled chart for qualitative data entry and analysis. Of prime importance to this tool for analysis is focusing upon the change processes involved in each individual interview at certain points in time. This matrix enables researchers to pool, summarize, and transfer qualitative data from a selected time period of a longitudinal study onto a readable one-page format. Saldana argues that: 'the primary functions of the matrix are data management and to reduce and categorize field observations from a selected time period to assist the researcher with "analysis at a glance," if you will' (Saldana, 2008, p.301).

Saldana also compiled a set of questions which were drawn upon to help guide analysis: These are broken down into three distinct groups; *Framing* questions which focus on the management of the particular context of the study's data and locating them in the process; *Descriptive* questions which involve describing what kinds of change occur; and finally *analytic* and *interpretative* questions which are about explaining how and why changes might have occurred and also explaining the nature and meaning of those changes. Examples of the questions in each group that Saldana suggests help guide analysis of longitudinal data are shown below:

Framing Questions:

- What is different from one pond or pool of data through the next?
- When do changes occur through time?
- What contextual and intervening conditions appear to influence and affect participant changes through time?
- What are the dynamics of participant changes through time?

(Saldana, 2003, p.67)

Descriptive Questions:

- What increases or emerges through time?
- What kinds of surges or epiphanies occur through time?
- What decreases or ceases through time?
- What remains constant or consistent through time?

(Saldana, 2003, p.99)

Analytic and Interpretive Questions

- Which changes interrelate through time?
- What are participant or conceptual rhythms (Phases, Stages, Cycles, and so On) through time?
- What is the through-line of the study? (a through-line describes, connects, and summarizes the researcher's primary observations of participant change)

(Saldana, 2003, p.127)

The research conducted for this thesis also takes on the challenge of using an inductive approach. I refer to this as a challenge because to be purely inductive implies the absence of prior values and assumptions. However, as Maynard has argued:

'no feminist study can be politically neutral, completely inductive or solely based in grounded theory... all feminist work is theoretically grounded; whatever perspective is adopted, feminism provides a theoretical framework concerned with gender divisions, women's oppression or patriarchal control which informs our understanding of the social world.' (Maynard in Maynard and Purvis, 1994, p.23)

This suggests that, whilst it is impossible to free ourselves from what we bring to the research project, we can take measures to be reflective and

counteract outside influences (for instance, our own impacts upon research). The more reflective, open and honest we are, the more we are systematically negotiating a range of issues that are overlooked within the process of research. Indeed feminist research is 'consciously reflexive' and it is to these issues that we will turn to next.

Researcher Reflexivity

The research took place over a five year period with some individuals involved for the duration of that time (cohort one). As stated within the introduction to this chapter, feminist research ultimately aims to bring to the fore the lived experiences of women and make their voices heard and valued as legitimate sources of knowledge. An inherent feature of taking this stance is also to recognize my role as a researcher within this framework/standpoint and the power relations involved. It is imperative therefore that I consider the impact I had on the process and outcomes of the research, especially when concerning groups of vulnerable research participants.

From the outset I was passionate about the need to hear the voices of young mothers and provide an account that best reflected the nuances of teenage pregnancy and motherhood. Inevitably, this research interest was influenced by my own mothering identity as well as my own experience of having a child during my teenage years (at the age of 17 years of age). Because of this I had an emotional closeness to the research topic. The feelings that accompany such a shared identity with the research subjects had to be given careful consideration and reflection throughout. I was also aware that, at times, I chose to share experiences with the women, and this had to be considered with regard to the collection of data and its analysis. For instance, on occasions I decided to share with the women my identity of being a young mother as this felt appropriate at that time. I felt that the women had shared so much with me that it was unethical to withhold aspects of my own identity that they may have felt they should have access. This was ever more pronounced

with the longitudinal aspect of the research and how I was consciously building rapport with the women over time. It would have felt inappropriate to effectively avoid questions that the women asked me in relation to my own mothering identity whilst I could relentlessly explore theirs (see Matsumoto 1996; Oakley 1990; Watts 2008 and Finch 1984; Edwards and Ribbens 1998 for a fuller discussion on such feminist ethical dilemmas). It is important to note, the information shared was limited so that it had minimal impact upon the research data. For instance, whilst I might have shared with the women that I had had a daughter at 17, I did not necessarily share with them how I *felt* about this experience (i.e. whether I felt it was positive or negative), but only that I had an *awareness* of this experience.

This emotional closeness to the research ultimately impacted on my own experience of the research. For instance, at times I felt empathy and understanding when listening to the women's stories. Whilst it is fundamental to reflect upon my own input, I felt this close proximity to the research topic was beneficial and spurred my dedication to really listen to what the women were highlighting to be of particular importance to them. On some occasions, sharing my experience of having a child at a similar age, made the young women feel 'safe' in the sense that they would not be judged. Whilst in some ways I had a deeper understanding into some of the issues, it is critical to acknowledge that my understanding was indeed only my experience and not that of the other women involved in the study. The research process enabled me to reflect upon this and further appreciate the multiplicity of identities the women held and how young parents are far from a homogeneous group.

Conclusion

This chapter has sought to give a detailed account of the research process and methodological approach chosen. As has been discussed, a mixed method approach; qualitative individual interviews, ethnography and visual methods are the main vehicles through which the research

questions will be explored. Central to the research is its longitudinal aspect. This is a distinct qualitative approach that involved tracking continuities and changes through time with a sample group of young mothers. This provides a distinct contribution to the literature; especially as such an approach has rarely been utilized with young mothers. The biographical accounts of young mothers, reflectively (looking back in time) and prospectively (looking forward in time) will be explored. This is within the conceptualisation of various domains; the '*economic-material*' and the 'social', and the ways these domains relate and compete with one another. The following chapters will turn to an exploration of the findings starting with a detailed account of the changing shape of motherhood, kinship, intimacy and support networks.

Chapter Three:

The Changing Shape of Motherhood and the Role of Significant Others – Kinship, Intimacy and Support Networks

Introduction

This chapter seeks to do two main things. The first is to demonstrate and illustrate the ways in which motherhood changes over time. Within this theme, we examine some of the key stages of this emergence of motherhood. We also examine the ways in which kinship relationships and, sometimes turbulent, relationships with partners provide ebbs and flows in the development of a more confident and evidenced realization of "good motherhood". The chapter begins with the young women's accounts of the transition to motherhood, how motherhood changed their lives and how, as time elapsed, they perceived themselves to have changed as mothers – most notably in gaining a growing confidence in their mothering identities. The focus of the chapter is, therefore, on the development of a maternal career, the various stages that accompanied this and its relationship to other aspects of their conception of self.

The second half of the chapter focuses upon the development of an understanding of 'critical moments' and the ways in which this can help our understanding of the complex careers of the young mothers who participated in the research. In exploring critical moments, we examine how these can be seen to occur within the four main domains covered by the research.'

Becoming a mother – The ‘Fragile Self’

The wider literature on teenage pregnancy and motherhood has provided strong empirical evidence to suggest how becoming a mother can be a key turning point within young mother’s lives (Arai 2010; Duncan 2010; McDermott et al 2004; Smithbattle 1995). The relevance of becoming a mother being a critical moment will be discussed in due course but for the time being a focus will be placed upon how the young women described their transition into motherhood, what this newly acquired role meant to them, and finally through QLR how they perceived themselves to change through time.

When reflecting upon the discovery of pregnancy all women discussed the initial shock and apprehension at the news. The women within the sample stated that they had not planned the pregnancy and that they feared disclosing the information to family and friends. Disclosure was often met with disapproval, and in most cases, the women received pressure to have an abortion. Previous experiences of abortion, and expectations of condemnation resulted in many women withholding the news of the pregnancy until firstly, they felt they had made their own decision, and secondly, that the pregnancy was at a “safe” stage so that an abortion was not a viable option. Chapter four draws upon accounts that describe feelings throughout pregnancy, and in particular the ‘felt shame’ of others when their bodies became visibly pregnant (p.186), or in the words of McDermott et al “physical markers of immorality” (McDermott et al, 2004). This ‘felt shame’ of significant others, often close family members, resulted in feelings of embarrassment and shame. As the research progressed, reflections on what would have ordinarily been a ‘happy’ event for ‘other’ women (pregnancy) was met with a sense of disappointment, regret and in some cases bitterness that this was denied to them.

The initial transition to motherhood was a difficult time for the women across the sample. Despite the excitement surrounding becoming a mother, the women were often having to deal with multiple problems

(housing, financial difficulties, relationship problems), whilst also adjusting to their new found identity of being a mother. However, what made this stage particularly difficult was the social disapproval the women encountered, and the awareness of the stigma that accompanied their status as 'teen mums' (also see chapter four). Making the transition into a highly stigmatised identity conjured up vulnerability and a 'fragile' self-identity. As chapter four will demonstrate, the negotiation of their stigmatised identity was alleviated by their families beginning to accept the pregnancy and impending motherhood. This often occurred towards the latter stages of pregnancy and the initial transition to motherhood.

Feelings entering motherhood entailed a complex mix of emotions. This often involved assessing their confidence to be a 'good' mother in a social context which offered them a pre-judgement as the 'bad' mother associated with their 'master status' (Goffman, 1963) as a 'teenage mother'. Tensions between the positive, life turning aspects of motherhood, in comparison to the difficult emotions that young motherhood could provoke in such a disapproving social climate are therefore worthy of consideration. In a sense it could be described as a trade-off between steering their life in what they felt was a better direction, but also having to deal with the stigma and difficulties teenage motherhood could evoke (also see chapter four).

For cohort one, who spanned the whole five years of the research period, further developments took place across their maternal careers that indicated a growing confidence in their mothering identities. As the research drew to a close, the distance travelled for the women was quite considerable when compared and contrasted to the first wave of interviews. The women had developed a growing confidence in their mothering identities, partly influenced by achievements, experiences and possibly developmental processes associated with age. In all, a theme of feeling more self-assured and empowered emerged from the accounts of the young women.

Becoming a mother was by far the central identity to which the young women built the rest of their lives (for instance, worker, friend, partner and student). Whilst these other dimensions of identity were to varying degrees significant and life changing in their own ways, motherhood provided the women with an overarching identity to which they strived to be successful. The following quotations describe how being a good mother was the pinnacle – the real bone of contention as to whether or not they were achieving the things in life they held dear to their hearts. For some of the women this was ever more important against the backdrop of early life adversity such as family breakup, poor parental relationships, deprivation, and traumatic events (fathers suicide) , which made giving their children, what they perceived they missed out on growing up, ever more important.

Gemma: Like if I had the money and everything. I do want to like, if she (daughter) has got a talent in something and that. I do want to help her and stuff like that. Like I love my Parents and stuff. But there were loads of things I wanted to do but they didn't really give me the opportunities to do them. (Age 20, became a mother at age 18, few educational qualifications)

.....

Laura: I want her (daughter) to like do things and have like good memories you know. That she's had a good childhood. That's really important to me. Like cos I take her to 'mums and tots' and things. I mean I know it's not a big deal but it's good to see her playing and stuff like that. I take her swimming and that. And when she's older I want to take her to like do different classes and things. I want her to do like ballet. I want her to like do loads of stuff like that. (Age 18, became a mother at age 17, few educational qualifications)

The quotations below highlight a prominent theme throughout the sample – this being the notion that becoming a mother has provided them with the impetus to change their life for the better. Within policy terms, what

precedes the pregnancy often gets overlooked (Arai 2010, Smithbattle 1995). For the young women within my sample, to be a good mother provided a valued identity in which they could feel worthwhile. In comparison to what often preceded the pregnancy they now have something/someone to live for.

Researcher: Do you think being a mum has had any impacts on parts of your life, say education or work?

Becky: Yeah, it's definitely pushed me to do something with my life, rather than sitting in everyday. It's given me the boost I needed to go to college, to get some, you know, get some qualifications, do some things for myself for a change.

Researcher: Do you think you would have done that if you hadn't had Adam?

Becky: No, I think I'd still be dossing around doing my own thing. (Age 18, became a mother at age 17, few educational qualifications)

.....

Laura: I've changed completely since I've had Ellie (daughter).

Researcher: Right, is that good or bad?

Laura: That's good cos, I just use to be wild. I use to be out, I use to go to work about seven days a week get some money and then every night. I use to be out as soon as I finished work, meeting different lads you know. (Age 18, became a mother at age 17, few educational qualifications)

.....

Gemma: I didn't enjoy sixth form. It was horrible, I got bullied and it was like the worst years of my life. I just didn't know what I wanted to do in my life so I think having Esme (daughter) has made me

think oh I want to do this. I think I want to do nursing. (Age 20, became a mother at age 18, few educational qualifications)

.....

Chloe: I don't need to go out and get drunk. I don't need to go out around town. It's made me grow up this time (second pregnancy). It's made me realise that none of that matters anymore. As long as my kids have got they're life and stuff it doesn't really matter about me anymore. (Age 17, became a mother with first child at age 13, few educational qualifications)

.....

Researcher: What's the most important thing to you now in your life? (Interview three)

Claire: Max (son)

Researcher: So why is he the most important thing to you then?

Claire: Because he's the only thing really. Sometimes I think, if I didn't have Max I wouldn't be here. I really do. I just think if I had nothing to live for, I'd get a bit down and things (depression). (Age 25, became a mother at age 19, few educational qualifications)

Chloe reflects on the transition to motherhood. She describes that whilst becoming a mother has possibly closed doors to her, when placed in the context of what preceded her pregnancy, motherhood steered her life in a better direction. Chloe felt “*disgusted*” looking back on her life before her children arrived.

Chloe: When I look back on my life I feel disgusted. I think how could you do things like that. Because some of the things I did was so wrong. Some of the things that I took (drugs). You know my life; I was on the wrong track. (Age 17, became a mother with first child at age 13, few educational qualifications)

She partly tries to explain or excuse this as due to her complex and difficult biography. Chloe had been a young carer for her mother from a young age and experienced severe abuse from her elder sisters. Chloe described how things progressively got worse for her when she started secondary school. She rarely attended school and started to mix with the “*wrong crowd*”. This eventually led to drinking alcohol and taking drugs on a daily basis.

Chloe: Frankie (daughter) saved my life really

Researcher: Did she? In what way?

Chloe: Because basically I was addicted to like drugs and drink really. I'd really really gone off the rails. You know, cos basically my sister Amy use to bray us all when we were little. And you know I've seen a lot of bad things you know that I shouldn't have done (domestic violence). And I just started hanging around with all the wrong people, taking a lot of drugs and drinking a lot. You know, if I didn't have a drink in the morning I'd shake and I'd be really really bad. So Frankie (daughter) saved my life really.

Chloe: My mum got really bad when I was eleven. I mean she got really bad when I was eight. But it didn't take a toll on me until I was about ten or eleven. As soon as year seven started (first year at secondary school), I think in year eight I went about ten days out of a whole year. You know if I wasn't looking after my Mum (young carer) I was in bed trying to sleep off like if I'd been up with her all night. That's when I started drinking and all that.

Becoming pregnant was a life turning event in that it steered her away from a cycle of destructiveness.

Chloe: “In a bad way it has made me realise I've stopped having a life. But then in a good way it has made me realise I didn't have a life (before becoming a mother) and the path I was taking was all

wrong for me". (Age 17, became a mother with first child at age 13, few educational qualifications)

The rewards of motherhood were also discussed across the sample:

Emily: It's very rewarding. Obviously when they are little, their first smile and their first step and there's all them first things. But of course now, after doing all of them, all he has now is words that he can say. But even at Christmas, I was more excited about him opening his presents and seeing the look on his face (pause). It's just no matter what mood you're in, they don't care, they know you're here. And he'll come over and give me a kiss and give me a love and he makes me laugh. And we run about when Richard's (partner) at work. I run about the house like chasing him and he's screaming and laughing and I'm in fits of tears because I'm laughing so much. It's just rewarding. There's nothing else like it. (Age 19, became a mother at age 18, few educational qualifications)

(Interview Two)

.....

Laura: The best things about being a mum are being responsible for somebody for else, having to do everything for somebody else, teaching them new things. Watching them walk for the first time, stories, feeding them proper food for the first time. Even having them in your arms for the first time. I think those are the best things. In general just having them there in your life. And being lucky that you've got your child when some people haven't been able to have children or whatever. (Age 18, became a mother at age 17, few educational qualifications)

(Interview One)

Towards the final stage of the research the women often discussed how they had transformed as mothers and how through time they had acquired confidence in mothering. The women had “grown”, adapted, “*learnt life’s little lessons*”, and often described themselves as much more “mature”. As Lauren concisely sums up: “*its weird how much growing up you do in the space of just literally a few months*”. This finding was undoubtedly born out through the larger time frame that cohort one had accumulated through the longitudinal aspect of the research. Cohort one offered real insight into motherhood at later stages of the research project when their own children had developed significantly and started school etc. Reflecting upon their biographies, they recognised life was full of “ups and downs”. As Sophie stated, “*things that (she’ll) remember for good reasons and then things (she’d) want to forget*”. The majority of the sample discussed an awareness of the mothers they previously were (unconfident and unsure) and the mothers they had become (confident with a greater sense of self-efficacy). On the whole, the women had become much more comfortable and self-assured with motherhood.

Researcher: So how do you feel about being a mum now?

Becky: I still enjoy it; I mean he’s great but terrible two’s! He’s got such an attitude on him (pause)...I feel more, I feel settled with the fact I’m a mum now. Before, it was like oh my god! You know, I got this kid! Now it’s normal you know, I feel like a mum now. I didn’t before, I just felt like Becky. (Age 20, became a mother at age 17, few educational qualifications)

.....

Lauren: I now feel more confident and I feel better about it... Before I couldn’t accept that that was my life, but now I can and I like it. (Age 19, became a mother at age 17, few educational qualifications)

Reflections and Re-evaluations

Some participants may have felt uncomfortable discussing their difficulties at the start of the research. It would appear that only with the passage of time could the mothers reflect upon and feel comfortable discussing what could be deemed to be their greatest worry. This being what society assumed of them – that they would not be ‘good’ mothers.

At interview three Jessie reflects upon her frame of mind at the initial stage of the research project (interview one) and how she would have found it difficult then to admit her feelings in regards to motherhood. Only through time, and with a growing confidence in her identity as a mother, can she appreciate this:

Researcher: So what was it about joining a group like ‘Baby Space’ (support group for young parents) that you really didn’t like the idea of?

Jessie: I think I was shy and probably embarrassed.

Researcher: Do you think it was hard getting use to being a mum then? Because you wouldn’t really discuss that at the first interview.

Jessie: I think I must have just thought I was a crap mum. Because I was 16 and how could I be a mum, that’s how I saw it. I didn’t want people to watch me with my baby, it’s that sort of thing, I think it was that. Just weren’t very confident at all, about anything really.

Researcher: That’s interesting because I remember asking you whether or not you thought you were judged because you were a young mum and you said you didn’t think you were, but maybe you did then?

Jessie: I probably did but I thought I’m not going to say that to you then! (Age 20, became a mother at age 15, currently studying at undergraduate level)

Whilst reflecting upon motherhood, another research participant describes how she might change things:

Claire: I think urm (pause). I wish I had done it different. Because he acts older than he is. Because for a long time I'm been on my own with him, I think I've kinda talked to him like an adult. Which I've not done purposefully really. I just think it's just happened because I'm on my own with him. He's always been a good talker, right from when he was young. Cos obviously I would constantly talk to him. So now when he talks you'd think he's older than he is if you know what I mean. (Age 25, became a mother at age 19, few educational qualifications)

(Interview three)

The ways in which participants re-evaluated and reflected upon their initial transition to motherhood was insightful as it raises questions in regards to whether or not many of the mothers in cohort two when interviewed (their children were relevantly young) may have employed similar tactics of avoiding the real difficulties/uncertainties in regards to their new found identity of being a mother. It is also worth noting that this is something mothers may experience regardless of age (Gillies, 2007; Miller 2002, 2005, Thomson 2011), and may possibly only be pulled out through a longer time frame.

The Role of Kinship and Intimate Relationships alongside the Development of a 'Maternal Career'

Research findings have indicated that the intimate relationships mothers form play a prominent role within their lives – often providing critical support at times of need (McDermott et al 2004; Mitchell and Green 2002; Letherby et al 2001). QLR allows for the exploration of these relationships through time – demonstrating the often fundamental shifts that take place with persons holding particular importance and intimacy in their lives. For many of the mothers these shifts in significant relationships took a similar course. For instance, many of the women began with a dependence upon

close family members. This was often accompanied by a lack of confidence in mothering. The support of family members was often very important when acquiring increasing independence as new relationships formed. Notions of 'family' subsequently shifted, and a growing confidence in their mothering identity evolved. Exploring this dimension to the women's personal lives highlights the value of informal social support networks. However, whilst kinship played a crucial role, the specific composition of the support networks varied across the sample and a small minority of the women had limited informal support networks to draw upon. This was primarily due to many of the women having complex family backgrounds commonly, with the breakdown of the child/parental relationship during their own childhood. Despite this, the role of kinship was still significant as they drew upon support from other family members (mostly grandparents), and whilst such relationships were primarily played out from a distance, they still played an important role for the women. Interestingly, for some women in the sample who described their relationships with their mothers as extremely difficult whilst they were growing up (often resulting in a relationship break down), becoming a mother themselves could re-invigorate this relationship and re-establish their own mother/daughter relationship. An exploration of the women's maternal career, and crucially how the women's lives are linked to significant others, will now be considered.

Kinship - The Intersection of the Social Domain with the Women's Maternal Career

As outlined in the introduction, journeys into and through motherhood were not taken alone and the relationships that the women formed with significant others were of great importance. Carol Smart has sought to reinsert the relevance of the personal – the importance of exploring the emotions and the feelings that accompany the most personal and meaningful relationships people form with one another (Smart, 2007). Through a sociological study of relationships and connectedness, Smart sought to move away from “the flat world of most sociological accounts of

relationships and families to incorporate the kinds of emotional and relational dimensions that are meaningful in everyday life” (Smart, 2007, p 3). She argues that feelings, emotions, memories, biographies can be the vital threads in the fabric of personal life but are often left in the shadows or in the margins of sociology (See also Holland 2007; Weller and Caballeron 2009; Burkitt 1997; Craib 1995). Like Smart, I would argue that sometimes we miss the more taken for granted dimension of social life through the focus upon what can often jump out at us – the more obvious.

In relation to teenage pregnancy and motherhood, McDermott et al., also highlight the importance of kinship and intimate relationships within young mother’s lives. This is especially with regard to how such relationships are an integral resource against the backdrop of limited material resources, resulting from poverty and deprivation. They argue that the emotional, practical and financial support of families (mothers in particular) helped maintain a positive maternal identity, ultimately helping to support the relationships young mothers had with their children (McDermott et al, 2004, p.26). Indeed, a prominent theme to develop from the analysis of the data was the importance of kinship, and with regards to QLR, how these relationships change over time. The following discussion describes the important role families play, most notably the women’s mothers, in the lives of the research sample.

Kinship - Relationships with Mothers

Whilst Anna’s mother initially disapproved of her pregnancy (she herself had become pregnant at a young age and discouraged this for her daughter), when she encountered relationship problems with the father of her child she provided critical support at a time of need. This was an unusual set of circumstances because both Anna and her mother were pregnant at the same time. However, even with this complex situation, Anna’s mother helped nurture her daughter’s confidence in becoming a

mother. When asked about who provided crucial support to her during pregnancy, Anna replied:

Anna: My Mum. When it came to the problems with Daren (ex-partner and father of her child) and his family, she did pick me up cos she's been through it herself (teenage pregnancy and relationship breakdown). So urm and after they got use to the idea (of her pregnancy), I found it really difficult to say oh you're gonna be a Nanna and things like that and when Noah came along (son), I tried not to call her Nanna or anything like that cos I wasn't sure how she'd react or what to do really. But it made it easier when my brother came along because my brothers only four months older than Noah so it made it easier. Because she use to show me everything to prepare me for Noah because I only had four months left then, we had more fun because I spent a lot of time with my younger brother. So me and my younger brother are very very close because of the time I spent with him learning how to change nappies. So my Mum showed me everything then, how to feed, change nappies, things like that, so it made it more, easier. So I could ask my Mum, and I chose to ask my Mum to come into the labour room with me. (Age 17, became a mother at age 16, few educational qualifications)

It is worth noting that when interview three took place, Anna had chosen to move away from the local area in which the research sample were recruited in order to live nearer her parents. Throughout the research, Anna displayed a constant desire to be closer to her family, especially her mother.

The comments below highlight the practical support families can provide for one another. Everyone in the sample had encountered periods of being reliant upon welfare benefits and often struggled financially, especially with regards to furnishing and decorating a house after being allocated permanent social housing. The wider literature (as reviewed in chapter one) provided an abundance of evidence in regards to the

deprivation young mother's experience. Listening to Ella's account of hardship adds a further dimension to how deprivation is played out within the context of kinship. In this case it included support from her family in making her living space habitable:

Ella: My Mum and my Nanna between them have spent an absolute fortune on this house. They put a new kitchen in, all the cupboards and worktops and sink and stuff. They decorated this room and that lot for me, put the floor in. I mean the floor cost a hundred quid. The whole house was bare (when she moved in). I mean you can tell, all the floors everything was taken up, my Nanna paid for the kitchen floor, my Mam paid for all this in here (living room). And they (Benefits Agency) give me two hundred quid from the council to decorate the whole house, and I thought yeah! , I mean my bathroom looks like it's been hit by a bomb!

Researcher: So did it need a lot of work doing when you moved in?

Ella: It was awful, and they thought it was suitable to move in! There's no flooring upstairs at all. I mean I put some wood effect lino in the bathroom now that my Uncle give me. But there was nothing absolutely nothing. (Age 20, became a mother with her first child at age 16, few educational qualifications)

Along a similar vein, another participant discusses the emotional support (as well as practical and financial) family can provide. This also demonstrates that despite limited financial means themselves, her parents display a commitment to make sure their daughter is provided with basic items of furniture that can be often taken for granted:

Researcher: Is your family quite important then, when you do have that time you spend time with them?

Louise: Definitely, I mean every weekend, even yesterday my Mam and Dad came round here to sort out and move my fridge and everything so I could put my kitchen table and that lot up. Urm

my Mam doesn't get paid until next week so they don't have that much money to last and she went out and bought me two chairs to sit at my table (in the dining room/kitchen). And then my Dad goes "Oh we've got no money" and all this lot. But my Mam went out and did that so I can sit in there. Cos I mean we just bring food in here (living room) and I've cleaned this floor on my hands and knees with the wipes and stuff. And if it can keep everything out of here. I'm always with my Mum she always phones. My Nanna always phones. She phones me and my Sister like every other day. (Age 16, became a mother at age 16, few educational qualifications)

Intimate Relationships with Male Partners

Clearly kinship networks played a significant role, providing the women with a crucial resource to draw upon at times of need. However, such relationships were negotiated with other significant people in the women's lives. Across the sample this involved the development of intimate relationships with male partners. Two distinct themes are important here: the harmful nature of these relationships (such as the experience of domestic violence); or the positive, re-assuring nature of these relationships (settling down in a secure, stable relationship). With regards to the harmful relationships women experienced, the role of kinship (and especially the women's mothers) will be highlighted. The following case study draws upon one participant's description through time of having to negotiate and break free from a violent relationship, and how her mother was a consistent point of call and support.

Case Study - Claire

At the start of the research project Claire had recently ended a long-standing relationship with an older man who was the father of her child. Claire described the hurtful and harmful nature of this. She was aware that her mother disapproved of her relationship with the man and that this

objection was longstanding. At interview two Claire describes below how things had developed, and whilst intimate relationships with other men had been unsuccessful, her mother had been a consistent point of call throughout. At interview three Claire felt disillusioned with the idea of “settling down” and forming a serious relationship. This was placed in the context of past experiences.

Interview 1: (Age 21, became a mother at age 19, few educational qualifications)

Claire: When I was pregnant he hit me with a jack bar on my legs. So, yeah, he's been violent. Urm, I'm trying to think of other things he's done. You know the glass tomato ketchup bottles? He's whacked me over the head with one of them. He's, or he's hit me with a belt and the buckles stuck in my head and I've had to go to casualty. Urm, he use to like try and suffocate me. But obviously you try and kick the boot in or sommet. Cos, he use to say that I was violent. But when I had a drink, it just all come to a head, what he's done to me and I'd kick off, I'd have a go....

Researcher: What does your Mum think?

Claire: She hates him, cos he use to, when we had an argument he use to drop me off at my Mum's and just abandon me.

Interview 2 – (Age at interview- 23)

Claire: I found it hard to get him out of my life. I started to see him again. He was around a lot after the last interview but it wasn't until I moved here that it got into trouble you see.

Researcher:Last time we spoke you had a bit of an up and down relationship with your Mum?

Claire: I think that was because of Max's (son) Dad to be honest. He use to come round every day, with his bag of washing. Although we weren't together, we weren't together one bit; he

obviously thought that we were. Not thought that we were, you know what I mean, use to just take the mick, expecting dinners, you know.

Interview 3 – (Age at interview- 25)

Researcher: Last time we spoke, the police had become involved; you had been beaten up quite badly.

Claire: Yeah, my Mum had to sit and listen to everything that he'd done with solicitors and she didn't really realise that it was quite that bad until then but...

Researcher: So how long would you say he had control over your life for?

Claire: Since I met him. From, I think I met him when I was 18. I was happy for about 2 months and then he hit me for the first time. And then he threatened me to stay with him and even when he started seeing someone else he use to come round all the time. And yeah, how I eventually got rid of him in the end was getting an injunction out on him. And that's when I was here (alternative accommodation).

Claire: It was Max's (son) age that made me think, 'Right I'm not having this!' And I just thought, he's (son) going to remember this. And he really battered me. And I had to leave Max here and run over the road to my friends. And then we called the police and that and that's when I got my Mum involved and got a solicitor and that and that's how I had to do it.

Researcher: How do you think you've changed as a Mum?

Claire: Well I'm probably a lot stronger because I haven't got him in my life, a lot stronger. I've got my own mind now. I'm not scared living my life because one phone call and I'd be wherever he wanted me to be. So I've not got that. I think he's messed the rest

of my life up because I can't get into a proper relationship or anything..... After such a bad experience it's so hard to trust. I don't think I've dealt with it. I was supposed to get counselling and things. But they were like there's such a long waiting list and things. I think they fobbed me off. I was in touch with the 'women's refuge' but they were completely useless. And then the doctors offered me some kind of counselling but there was a massive waiting list.

Researcher: How's your relationship changed with your Mum over time?

Claire: Well we fell out after I dropped the charges and didn't speak for some time. But I didn't stop her seeing Max (son) or out. Because I wouldn't do that. But urm we got quite close again, really close. We went away together and things. And I go down and spend some time with her, quite regularly. And she adores Max. So yeah we're quite close. She speaks her mind. But I think she's just more concerned.

Claire's case history highlights the importance of kinship, changing notions of motherhood, but also the experience of 'harmful relationships' that many of the women encountered at some point in the research. This was predominantly at the start of their journeys into motherhood and concerned relationships with the fathers of their children. Research wider afield has highlighted the experience of violence/abusive relationships young mothers can encounter. Within a national evaluation of Sure Start Plus, 14 per cent of the young women had disclosed domestic violence during their pregnancies (Wiggins et al, 2005). Exactly why teenage mothers are more likely to encounter domestic violence is unclear. This is further complicated by the experience of poverty being correlated with domestic violence and young mothers being more likely than other groups to experience financial hardship and multiple deprivations (SEU 1999; UNICEF 2001; DfES 2004). Despite the lack of research within this area, it was an important theme to emerge from the data. This is an area

that remains relatively unexplored, especially from the vantage point of young mothers. The experiences of these relationships were mostly discussed reflectively highlighting again the value of QLR. It may have been too painful or ambiguous to the women when they were in the midst of such difficult experiences. But as with Claire, the passage of time, could provide a more balanced view of the processes and feelings attached to such relationships.

The push and pull of such harmful relations is voiced by another research participant who experienced a very volatile relationship with her partner. At interview one Chloe was pregnant with her second child to a partner with whom she had one child already. Within the interview she discussed how her partner was previously addicted to alcohol and had been arrested for various criminal offences. Whilst friends and family tried to advise her against continuing with this relationship, Chloe felt she had to make the relationship work.

Chloe: Me and John split up cos of a lot of stuff that went on (between the space of interview one and two). But even though I could think of so many words to describe him, he makes me laugh and he makes me smile, he gives me the passion for life, to get up and fight every day... I was with him for so long. We'd be together for five years. For some people as young as me and John that is a long time and we've got two kids together. And we've been through so much. Unbelievable the things that we've been through, we've pulled through all of it and the only reason... but he was violent, it went on for a long time, years and years. I don't know it's weird, John gives me passion and everything but I know the bad side of him and that's what puts me off. That's what scares me and makes me want to. I just think to myself, 'Can I realistically go back to him and that bad side of him comes out again? Can I or not?' He says though that he's changed and he wouldn't hit me. And I have seen a change in him. I've seen a side that I've never seen before, just like so caring and so nice to me. And he makes me

laugh. The other day I was laughing so much my stomach was hurting and my cheeks were burning because I couldn't stop smiling. And I don't know I just felt really happy. Then I think to myself, 'Maybe If I just take that chance of being with him, take the chance of whether he's going to change or throw it all back in my face?' But if he hasn't changed I know I can walk away and at least I can say I've tried.

Researcher: What advice do your family give?

Chloe: They all hate John, they all hate him, obviously because he use to hit me and that. (Age 19, became a mother with her first child at age 13, few educational qualifications)

Another research participant disclosed the experience of domestic violence between the space of interview one and two and how, because of it, she had finished this relationship:

Researcher: So what happened with his father then? Because when I interviewed you last you kind of, you were with him. But it was a bit rocky, and you were a bit worried that you would, umm, probably split up, say, within six months of Jacob (son) being born.

Amy: He umm, he was...he was knocking me about. (Age 18, became a mother at age 16, few educational qualifications)

Relationship Breakdown

The sense of failure the women voiced in regards to the relationships with the fathers of their children turning out for the worse is voiced by a young mother below:

Anna: I do feel emotional, I feel emotional talking about my past and everything, urm. Because I never wanted my life to turn out like that. I've always wanted a proper family for my son and things and the way that me and Darren (father of her child) were it was a

very volatile relationship. It wasn't a good relationship to be in, for either of us really. (Age 17, became a mother at age 16, few educational qualifications)

The quotation above from Anna displays deep regret that her relationship with the father of the child (Darren) had broken down. She thought he was 'the one' but felt he let her down when it 'boiled down' to the realities of parenthood. She wanted to be a family (they set up house together for a short space of time) but she felt he didn't take on his responsibilities. Anna believes there has always been potential problems though and discusses a long history of problems with Darren (lots of arguing and breaking up). She also felt he was somewhat controlling as he prevented her from making friends. At the time of the interview Darren has no contact with Anna or his son.

A lack of support, and resentment resulting from the failure of fathers to take on their responsibilities, is also voiced by Hayley below:

Hayley: He was lazy. He wouldn't get a job. He wouldn't even sign on. He wouldn't...even if he did have money he would never give me any. Just sit on this sofa all day. Never do any tidying up. Never really watch Luke (son). I mean I was working, having to look after Luke, having to, you know, look after this place and him as well. It was like having two kids and I just had enough. (Age 20, became a mother at age 19, few educational qualifications)

Whilst many of the women experienced what could be described as harmful relationships, it is important to realise that they did not take the decision to break up lightly. The women often spoke of the love they felt for the fathers of their children and their initial aspirations to "be a family" together. The realisation this would not be the case, and the destructive nature of such relationships clearly hurt the young women, with their accounts often demonstrating a sense of failure or feelings of heartbreak. It was a difficult process breaking away from destructive/harmful relationships as a sense of dependency had evolved. There was also a

sense of fear in regards to what the future would hold and if anyone would “*want them*” as a single parent.

Gemma: As soon as I've said to anybody I've got a son they run a mile or just turn round and so yeah ok then I'm gonna like, 'I'll talk to you tonight but don't expect me to phone back or anything'. (Age 20, became a mother at age 18, few educational qualifications)

.....

Becky: Because I'm young and everything and because now I'm not with her Dad it's like meeting new people. And then you tell them that you have a baby and that and... I just feel like nobody will want me. (Age 18, became a mother at age 17, few educational qualifications)

Reflecting upon Past Relationships – the Value of QLR

Jessie below describes her reflections on what was a particularly difficult relationship for her. Field notes also highlighted my concerns in regards to Jessie's relationship with the father of her child. For instance, fieldwork notes highlighted possible tensions/difficulties that seemed apparent when her partner was present. Jessie also discusses the importance of kinship and how this also changed over time.

Jessie - Interview 3

Jessie: It would seem everywhere that we lived Nathan (ex-partner/father of their child) would attract idiots and it would just completely affect my life. I couldn't live a normal life, it was just so difficult.

Jessie goes on to describe the finishing of their five year relationship (with Nathan):

Jessie: He got some alcoholic piss head tramp in my house. And I just rang my Mum and said please come and get me and that's... I

lived with my Mum for a year and I sort of saw him at weekends. And he saw Evie (daughter) and I thought 'We'll sort it out!' Because at that point (pause) I don't think I was in love. But I relied upon him. I needed him. I thought that I needed him because I'd not known anything else.

Researcher: So how have things changed?

Jessie: Well I'm not with Nathan anymore. I think I've grown as a person a lot and realised there is more to life than just putting up with shit. Obviously I'm at college now. Evie is at school, and I've got a better relationship with my Mum. And I've got a new boyfriend.

Researcher: So looking back how would you describe your relationship with Nathan?

Jessie: It was good, some part were good. And he did make me really happy. But he drank too much. And he had a lot of bad stuff in his past that he needed to deal with and he wasn't ready to deal with it. And until he does I don't think he'll be able to move on as a person. Nathan's life now is just as Nathan's life was then if not worse. So it proves to me that he was the one holding us back really. It must have been because my life has moved forward so. He's got no job. He's got nowhere to live. He hasn't seen Evie (daughter) for weeks.

Researcher: So did you feel that relationship was trapping you in a way?

Jessie: Yeah. But at the time I completely loved him. So I felt it was (pause) I couldn't leave him because I loved him too much. And I still love him now in a way. But I just can't. I just think certain relationships are not good for people

Researcher: And then you relationship with your Mum, what changed in that respect? How did that improve over time?

Jessie: I don't know. I think I just needed her. For that time in my life I just needed her. And I was scared, I had nowhere to live and she hasn't been there for me like that before. And she was. And that weren't easy either because I didn't feel like, I hadn't lived with her since I was nine. (Age 20, became a mother at age 15, currently studying at undergraduate level)

Jessie's discussion was interesting as whilst her relationship with her mother had been particularly difficult from an early age, motherhood had brought her together with her mother. Mike Stein conducted research with young people leaving care (some of whom were young mothers) to explore why some young people exhibit high levels of resilience whereas other young people leaving care can present relatively low levels (Stein, 2005). He argued that for some young people, motherhood facilitated the renewal of family links and improved relationships with their mothers and their partner's families, while contributing towards levels of resilience.

Other participants with similar difficult family histories also experienced similar reinvigorations of their parental/child relationship. For instance, Ruth's relationship with her mother had greatly improved despite adverse experiences growing up with her mother. She had been "kicked out" of home at the age 15 when her relationship with her mother changed due to her mother re adjusting to "coming off the drink". Ruth described herself as being mature for her age because of having to fulfil her caring responsibilities (looking after her brothers whilst her mother was struggling with an addiction to alcohol). Despite these difficulties, it was her pregnancy that enabled her to change her relationship with her mother:

Researcher: And you feel like your relationship's changed (with her Mother) since you've become pregnant... that it's more positive now? Why were you kicked out when you were younger then, was it just relationship breakdown?

Ruth: Yeah, and we just clashed... Cos when Mum came off the drink, she didn't like how I... how I, you know brought Jake and William up (her brothers) so...

Researcher: So who did you live with again... your Granddad?

Ruth: For a little bit, yeah. And then erm...

Researcher: Were Social Services involved because you were 15?

Ruth: No

Researcher: So has your Mum been really influential during the pregnancy then... that's been positive?

Ruth: Yeah.

Researcher: Do you think you've ever had that relationship with your Mum before?

Ruth: No. We've never been so close as we are now.

Researcher: So you had quite a rocky relationship with your Mum?

Ruth: Yeah. At first we did. But now like, now I'm pregnant and..., I don't know we just, we got more closer now. But I think it was, cos we was so alike that we were clashing all the time. She's trying to tell me what to do and I didn't like listening to her.

At interview two Ruth discusses how this renewed contact has been sustained:

Researcher: So do you think you're relationship has changed with your mum since you've had Alex (son)?

Ruth: Yeah, it's better. It's much better now. She'll always help me if I need anything. Like if I need money she'll always help me with stuff like that. If I have a worry, I'll ring her and say like 'is this alright, is this ok?' And she'll be like yeah that's fine and stuff like

that. (Age 18, became a mother at age 16, no educational qualifications)

Positive Relationships - Settling Down as a Family

This research project has witnessed young women making the transition to motherhood, leaving the family home, becoming independent, and then forming new and meaningful relationships with significant others. As such developments took place, it is necessary to reflect and question what marriage and intimacy mean to their identity as mothers. As the opening case histories demonstrated in chapter four, reliance upon the women's mothers lessened over time and new relationships with male partners took greater prominence within their lives. For some women this meant they obtained their ideal family.

As the research project drew to a close, many of the women had formed new stable relationships after the breakdown of their relationship with the father of the children. This was mainly for cohort 1, whereas cohort 2 were predominantly with the fathers of their children despite some participants encountering difficulties. All women aspired to very conventional family structures – to get married and have more children. Whilst relationships did not necessarily work out, and some mothers became very guarded of forming future relationships, the aspiration of “settling down” in a conventional family unit was overwhelming. The sense of security, and ultimately finding someone to settle down with and love, made them happy. This is highlighted below by participants who had experienced relationship breakdowns with the fathers of their children, formed new relationships and in some cases had more children and got married.

Anna: Now I feel...I feel like I got a family that I wanted now because I'm settled. I'm in my own home now. Ummm. I'm married. I've got my little boy who's sorted now. I've got a little baby (second child), like it should have been the first time round with my son. Ummm, which makes me feel happy. He's happy (son) and

Ethan (husband)... because he does bring him up (Ethan is not the biological father of her first son), he makes me happy. Ummm which makes me feel better because I know he gives him what a real Dad should be giving him. And that makes me even happier, just having that. (Age 19, became a mother at age 16, few educational qualifications)

.....

Sophie: I'm really secure and settled. I feel really...I'm glad that I've met Nathan and sometimes I think maybe we... we maybe rushed things. But I'm glad we did rush things because I wouldn't be happy like I am now. I don't know what I'd be doing now. (Age 21, became a mother at age 14, few educational qualifications)

.....

Gemma: Well you know, I was happy with Greg before. But now you know we are happily married. It's going to be two years in June and we have a baby together now. (Age 24, became a mother at age 18, few educational qualifications)

Kinship and significant others

Whilst some women had limited resources to draw upon from their local area (difficult relationships with parents) other family members came into play and performed a vital role, even if this was at a distance through regular telephone calls.

Researcher: So your relationships got better (father of the child). What about your relationship with, umm, your family, like your Dad?

Hayley: I hardly ever see my Dad to be quite honest.

Researcher: So that's kind of...not as strong as what it used to be in the last year (comparison to last interview). Why do you think that is?

Hayley: I don't really know. I don't know. He just doesn't seem to make me happy. And then when I ring him he's like "Why haven't you rang me?" And I think well...you're my Dad, you're meant to ring me you know, but... I haven't really seen much of him to be quite honest.

Researcher: And what about your Aunty and Nanna, because I remember you saying you were really close to them and they helped you a lot during the pregnancy.

Hayley: Yeah yeah, they live in Deaken (four hour train journey). My Aunty came up last week. It's only the second time she's seen Luke (son). And then my Nanna's coming up, like in, just after his birthday I think, July, with her Sister.

Researcher: Oh right. So you still keep in quite close contact?

Hayley: Yeah. Oh yeah, I speak to my Nanna every day. (Age 21, became a mother at age 19, few educational qualifications)

.....

Becky: Me and my Mum have never been close, I've always been closer to my brother Richard and my younger brother Tim. Cos it's like when my Mum was working she used to work early in the morning so we never saw her in the morning and it was like I use to look after my brother. And if she went out after school, I'd be cooking his tea, sorting out his uniform and everything. So I've always been close to Tim (younger brother) as well.

Researcher: You mentioned your Gran earlier. How do you get on with your Gran?

Becky: She's always been my Mum in my eyes, like ever since I've been a little baby. She's always been the one that's always been there. I've always been really close to my Gran. There's nothing that could ever rip us two apart.

Researcher: Do you still see her quite a lot?

Becky: Yeah, I'm actually gonna meet her after this, so

Researcher: Oh, fantastic, does she live near you?

Becky: Well, she lives in Harone (one hour train journey). But we see each other as much as we can. I go over and stay there and she'll come over. And when like her friends go on holiday. Cos they go away quite often, she'll come and sit they're houses and we'll get together and have dinner and stuff. So it's really nice.

Researcher: So she's been there for you a lot?

Becky: Yeah

Researcher: How is she with Adam (son)?

Becky: Yeah she loves him. She's like making him his duvet for his cot and everything. She sews and everything. She does everything for me. She's done my fitted sofa covers, net curtains. She does duvets, blinds. She's just, she's always there for me. (Age 18, became a mother at age 17, few educational qualifications)

The following quotation draws attention to the role of reciprocity within such support networks and highlights the importance of kinship in the widest sense – grandparents are important.

Researcher: Are they (Grandparents) really supportive then?

Ella: Oh yeah definitely, I mean my Nanna always say's oh, my Granddad he's the worst one. I don't know if it's cos he's quite poorly. He can be annoying. He feels like he has to do something for you. So every time we go round it's here have a fiver for the

bairns. I don't know whether he thinks I go round there cos every time I go round there he's like here's a tenner for this that and the other. I don't know I think, well when she (daughter) go's round there he just lights up. I mean my Nanna says as soon as we go he's back to, 'I can't breathe' and all this lot. And when ... she's (his granddaughter) there he likes to play with her because I think he obviously, I think he realises that he doesn't have long left. I mean he not, he's only seventy- two. But he smokes. He's got breathing problems. But when she's there (daughter), I mean he can't talk or owt, but he just seems to be all jolly and walking about and that lot. But I, I mean I love going round there. But sometimes I think, 'Oh I just can't be bothered putting these two in the pram'. She hates being in the pram. But I can't push the double pram and watch her. (Age 20, became a mother with first child at age 16, few educational qualifications)

One participant involved in the study however, stood out as being particularly lacking the support from friends or family. Amy had encountered many problems (domestic violence, depression, isolation) and her relationship with her family took a turn for the worse.

Researcher: Does anybody help you out Amy? Like you're Mum, or...

Amy: No, I don't talk to my mum or nowt. I don't talk to any of them.

Researcher: So you...your relationship with your Mum's changed, cos it wasn't too bad before was it?

Amy: Yeah. She's got her own issues and stuff.

Researcher: And do you find that hard? Do you want that...?

Amy: I'm not bothered anymore to be honest; I'm not bothered about any one.

Researcher: Right, why do you feel like that?

*Amy: All I think about now is my kids and James (boyfriend).
Because they don't bother with me so why should I bother with
them? You know, they don't really care. So why should I care?*

Researcher: Why do you feel like they don't care?

Amy: Because they don't bother!

Researcher: So you don't hear much from them?

*Amy: No, not really. (Age 19, became a mother with first child at
age 16, few educational qualifications)*

Amy was unusual compared to the rest of the sample as she stood out as being particularly lonely and isolated. She lacked the social networks that the other mothers described and had limited contact with support groups of any kind (such as 'Baby Space' and 'Bumps'). Amy was receiving advice and guidance through a 'Connexions Personal Advisor' (targeted intensive support for young people), but this had started to diminish due to her PA reducing her case load as she had worked with Amy for some time.

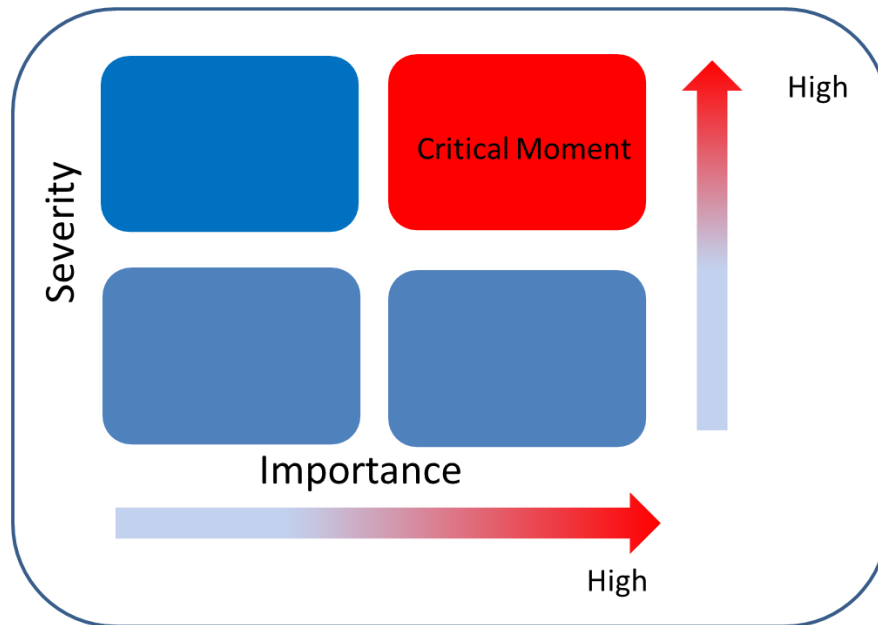
Critical Moments

This section focuses upon both the structural and personal dimensions of the women's lives through a focus upon what will be termed as 'critical moments'. Uncovering critical moments through QLR has much potential. For instance, longitudinal research is particularly adept at highlighting the processes attached to particular outcomes that can inform policy and effective interventions. The majority of research participants had encountered targeted provision aimed at young mothers as well as wider universal welfare/social policy structures (housing provision, claiming welfare benefits). Witnessing such processes unfold through time with the added benefit of participant reflections (re-assessing and re-interpreting events at different points in time) helps to understand the impacts of policy intervention, and how they are responded to by those to whom they

are directed. Rarely is there the opportunity to explore longitudinal data of this kind in research, due to the limitations of most funding streams. In relation to Henderson et al's research with young people, they explicitly draw attention to the value of this methodological approach in being able to identify critical moments: "a focus on critical moments draws attention to the significance of biography and the configuration of timing, resources and resourcefulness" (Henderson et al., 2007, p.20).

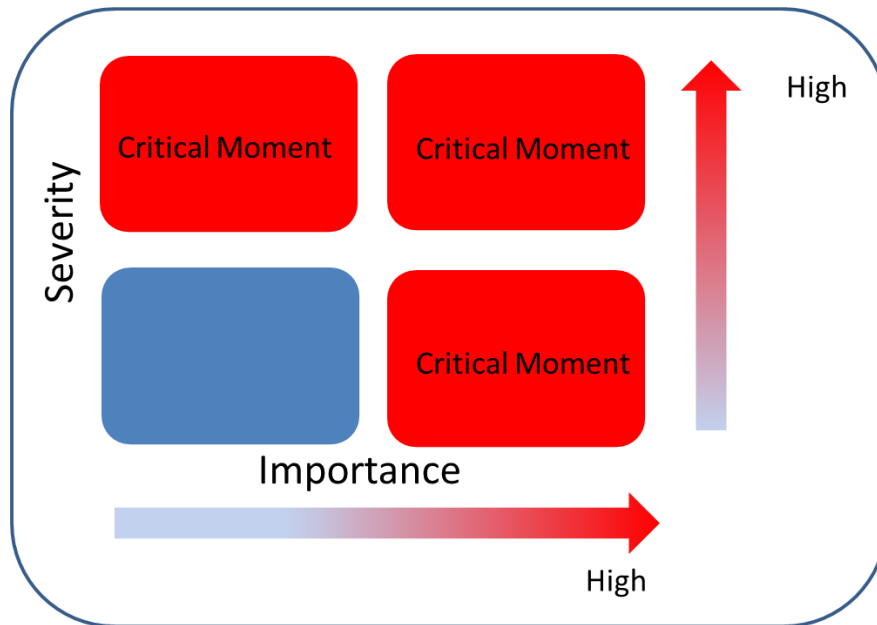
Research with young people has sought to explore the significance of 'critical moments' (Thomson 2002, MacDonald and Marsh 2005, Holland 2007). However, what we define as a critical moment is not an easy task partly due to the various ways in which researchers have sought to conceptualise such events/experiences. Sociologists have described the relevance of such defining moments in various ways. For instance, as 'epiphanies' within narratives (Denzin and Lincoln, 1998), as 'fateful moments' with the potential to be empowering (Giddens, 1991) or as 'turning points' (Rutter, 1990b). Thomson and Holland loosely define 'critical moments' as: 'an event described in an interview that the interviewee or the researcher, or both, understood as having important consequences for the young person's life and identity (Holland and Thomson, 2009). Of particular relevance for this thesis is the identification of 'critical moments' that can be drawn out through QLR with young people (see chapter two for a more detailed account of Henderson's QLR methodology). Henderson et al sought to assert and identify the relevance of critical moments in young people's biographies with a particular focus on the consequential nature of these moments – especially their role in the process of social inclusion or exclusion. Identifying critical moments within a QLR approach also had the benefit of being able to revisit critical moments in young people's lives and revise them if necessary. Such a process allowed for the realisation that whilst critical moments may not be regarded as important at the time, with hindsight they can come to the fore in young people's biographical accounts. What was highly significant for Thomson was the timing of critical moments and the resources available to the young person at that

Figure 1.3: Literature based ‘critical moments’ model



However I believe that through analysis of the research findings, an instance of apparent low importance or low severity has the long term potential to result in a critical moment. I believe we are only able to categorically dismiss a specific moment as none critical if it is of both low importance and low severity. This is represented in the figure below.

Figure 1.4: Extended ‘critical moments’ model



The model allows for a better recognition of the subtleties and nuances of ‘critical moments’ as a narrative device, and places equal importance on those critical moments that have repercussions on the ‘self-identity’. A focus on only moments that are of high importance and high severity runs the risk of being deterministic. Whilst a spectrum does indeed have value in highlighting the continuum of ‘agentic’ and ‘fatalistic’ ‘critical moments’ (the choice/fate continuum developed by Holland and Thomson, 2009), existing frameworks often risk underplaying those ‘critical moments’ deemed significant and meaningful to the young person (often in relation to their self-identity), whilst placing prime importance on ‘critical moments’ deemed as ‘fatalistic’ or of great ‘magnitude’ (such as death/illness).

I would argue that no individual biography will be exempt from ‘critical moments’. Each individual will experience a set of events that are felt to be significant or meaningful in steering their biographies through the life course. These can be easily identifiable through insider accounts (research participants), or through detailed analysis in QLR by outsiders (the researcher). The employment of ‘critical moments’ should be a

means through which *both* young people and researchers are able to interpret biographies, in a way that allows for a rich description of life events that are deemed meaningful or significant. As has been argued, these moments may not necessarily be dramatic or of great magnitude, but can be constructed as significant, symbolic and meaningful to the individual in question. This is highlighted by Shildrick and MacDonald's exploration of 'critical moments' in the lives of disadvantaged young people: 'Sometimes such critical moments appeared relatively trivial or mundane (to us) but carried dramatic and literally self-explanatory weight for the interviewee. Matty (aged 20) traced his later criminal career back to a process of school disengagement from his early teens and the comment of a particular teacher that 'you'll never make anything of yourself'...the significance of this moment to Matty is also clear in that he honed in on its details, several years later, in seeking to explain the life course of his life since then' (Shildrick and MacDonald, 2008, p.7). It is interesting to note that this critical moment was identified against the backdrop of other 'critical moments' deemed to be 'dramatic' and believed to have great potential for disruption to the life course (such as rape, friends committing suicide, death of a family member etc.). Criminologists Laub and Sampson also identified a range of key 'turning points' that could be deemed relatively mundane or trivial, but nevertheless steered their sample of young men away from a life of crime. Analysis of longitudinal data identified these key turning points as work, marriage and the military service (Laub and Sampson, 2003).

The use of critical moments also needs further refinement in order to appreciate the diverse experiences of young people. For instance, certain aspects of a young person's identity may take prominence (i.e. teen mother identity; having a substance (mis)using identity, being a young offender, the experience of disability), and result in a distinct set of 'shared 'critical moments amongst different groups of young people. It is these very critical moments that are most likely to have repercussions on the 'self-identity'. For example, the findings from this thesis demonstrated that the experience teenage pregnancy and motherhood gave rise to a

distinct set of 'shared' critical moments (the realisation of becoming pregnant, the acceptance of pregnancy, relationship breakdown, being allocated permanent housing). These are presented below in what has been described throughout as the four main research questions:

'Maternal career' - Becoming a mother

This identity change was by far most the most significant moment to occur for the young women and was often described as an event which changed their orientations/ direction of their lives. The women within the study spoke of the decision they had to make as to whether or not to go ahead with the pregnancy. And whilst many were encouraged not to do so, all women described a desire to keep their baby. This decision was a defining critical moment, which ultimately turned their life in a completely different direction in comparison to the course it was taking before the pregnancy occurred. As described earlier, the transition to early motherhood was mainly seen as positive. However, despite often commenting that, with time, they 'wouldn't change things', some of the women discussed this against a background in which the ideal situation of having children when they were older and settled in a stable relationship.

Lauren: If I had the choice, I'd have Leo a little later on when I was a bit older. But, I don't know, I couldn't. No I don't think I would, now I've got him. Cos I think I'd be like, 'oh I want him now!' (Age 17, became a mother at age 16, few educational qualifications)

.....

Gemma: Even though I wouldn't change her (daughter) for the world and everything. I'd definitely say to her don't have kids until say like she knows she's met 'Mr Right' sort of thing, once she's married and stuff. I mean, well you never know even if you do get married, you could end up getting divorced and stuff. Like I can still go and get a career and stuff. Like I can still go and get a career

now. But it just makes it harder cos I've got Esme (daughter) to think about as well. I can't just go off to Uni. I've got to think about childcare and stuff like that. (Age 22, became a mother at age 18, few educational qualifications)

In relation to the women's adjustment and preparation for the transition to motherhood, was the critical moment in which the women's families (especially mothers) came round to the idea of the pregnancy. This was a key turning point for the women and the sample often spoke about this moment as a time when they felt their families accepted their decision to keep the baby, and consequently they could also feel more confident in regards to their forthcoming identities as mothers.

Helen: My Grandma was really excited and she was one of the main people that was pushing me to get him aborted in the first place. And she was really excited. (Age 17, became a mother at age 17, few educational qualifications)

Kirsty: Towards the end of the pregnancy she got really excited. I knew that she was happy about it one time. Cos she came in from the 'Park Outlet' (Large retail outlet) and she didn't talk about it or anything, you know that I was pregnant. And she came in from the 'Park Outlet' and she goes 'oh, I've got this little hat'. (Age 19, became a mother at age 19, few educational qualifications)

Material/Economic Domain -Employment/Education

Entering the labour market or returning to education also served to increase the women's self-confidence and feelings of self-efficacy. In some cases it also led to an improvement to their material well-being. Women's encounters with the labour market or educational opportunities proved to be highly significant. The quotation below by a research participant describes the decision to take up employment as a positive move:

Emily: ...I've grown up so much since having Ian (son), you know. I've got my own little family, and probably since I started working, I think I've grown up more. (Age 19, became a mother at age 18, few educational qualifications)

.....

Sophie: I only took my exams (a matter of weeks after having her baby) to prove a point to people that I could. I didn't want to at first and then I thought I do want to do it because I'll benefit from it when Josh goes to school. But then people think I'm gonna just quit school do nothing. And I thought I'll prove them wrong, I'll go sit my exams. (Age 17, became a mother at age 14, few educational qualifications)

.....

Becky – But the day I passed and I'd done all my last assessments, I sat that there ...my portfolio finished. I'd like gone outside. There's some benches outside the cafeteria. So I sat there, looked at my portfolio and thought, that's it! I've finished! All I wanted to do was cry because I didn't think I could do it! So... It felt so good that I'd done it. And it's like, I'm actually qualified for something... (Age 20, became a mother at age 17, obtained NVQ in Beauty Therapy)

Most women had encountered negative experiences of the education system prior to pregnancy. Returning to education offered an opportunity to tackle some of their negative perceptions of education, gaining confidence in themselves and their potential to achieve what they previously deemed unobtainable. Of most significance was the confidence gained contributing to their 'good mother' identity, as the women spoke of the importance of not relying upon welfare benefits, improving their financial situation, and ultimately providing a better life for themselves and their children. As will be argued in chapter four, it was also an avenue through which the women could overturn negative

assumptions regarding the stereotypical teen mum. It was also an alternative identity alongside that of a mother that for some had the added benefit of expanding their social circles.

Successfully managing the labour market or returning to education was not necessarily easy, and a great deal of complexity surrounded such encounters. Women often had to re-assess their aspirations and review their approach to barriers or obstacles that cropped up at different points. Many of the women, who returned to education soon after the birth of their children, often dropped out prematurely because of the difficulties managing a work/home life balance. However, most returned at a later date, albeit often changing direction due to a development of a clearer idea of what career they wished to follow.

The complexity of managing childcare and returning to work/college at a time when the women felt comfortable leaving their children is crucial for policy. The wider literature has sought to highlight the misconceptions surrounding the decisions mothers make with regard to taking on employment or education and how it has often been wrongly assumed that mothers will inherently make the decision based on estimates of financial gain (Duncan and Edwards, 1999). This is not always the case and research has also demonstrated the overarching importance of 'being there' for their children as taking priority (Duncan, 2007).

Emily: I never want to work full-time because I don't want a nursery nurse knowing him more than I do. And I don't want him not wanting to come home from nursery if you know what I mean. (Age 19, became a mother at age 18, few educational qualifications)

.....

Gemma: Everything went so quickly from being 18 to 20 and having her (daughter), so I just want to have a couple of years where I'm chilled out. (Age 20, became a mother at age 18, few educational qualifications)

.....

Laura: Well, I think it is important to sort of like be there for them. Sort of be there in the early years and that's why I haven't really gone back to work. (Age 18, became a mother at age 17, few educational qualifications)

For young parents this has particular significance as a huge amount of policy focus has been placed on engaging young parents in some form of employment, education or training as soon as possible after the birth. My research highlighted young mothers attempting this, and being supported in doing so. But dropping out prematurely due to the complexity of managing a happy work/life balance, as well as not really having a clear idea of career aspirations was also evident. Managing the labour market could be fraught with difficulties especially with regards to returning at the 'right time' and in being supported to make the right decisions.

Jessie: I could do a night course or something like that. But I don't see the point in doing a night course when I don't know what I want to do. I mean I could do a night course in Business Studies or Accounts or something like that but it might be a waste of time. I mean it's alright it being on my CV, but all it is is a bit of writing at the end of the day. (Age 16, became a mother at age 15, few educational qualifications)

.....

Becky: I still don't know what I want to do. And I don't see the point in going to college until I do know what I want to do. (Age 18, became a mother at age 17, few educational qualifications)

.....

Ella: I mean, obviously I aren't working at the moment. It would be impossible for me to work with two of them now. But I would love to go back to work. I wanna do something. I wanna do a business course. I mean I could go to college and put her in the crèche. I

mean I don't know whether it would cost me anything and I don't know whether he's too young and everything. At the moment my Mum has said when she's finished training she can choose her hours when she's a health visitor she can work like three full days or a full week if she wants to so she said she'd help me. But if I went back to work now it would cost an absolute fortune. (Age 20, became a mother with first child at age 16, few educational qualifications)

.....

Claire: I keep thinking about it (returning to college). But, I can't get my head round doing assignments and all that sort of thing. And I don't know. I really wish I knew what I wanted to do. I mean I always wanted to work with kids but after working in that nursery, no, no thank you, I don't want to do it. But I just wish I had an interest in something but I don't. I just can't think of anything that I would want to do but I don't want to be sat like, well I work in customer services and I don't want to do that all the time

Researcher: So you're finding it difficult to think about what direction you want to go in then?

Claire: Yeah definitely and time is plodding on for me isn't it really. It is. It worries me. Like I say it's a bit of a dead end job really. Its crap money...And after working I don't want to go back on income support. And I don't know if I'd have to pay for it now (college)....and going back with all the 17 year olds. It scares me.

(Age 25, became a mother at age 19, few educational qualifications)

Worryingly, for the young mothers who became pregnant during their compulsory schooling, the education system was perceived to have significantly let them down:

Chloe: I went to school for a bit then. Then the school turned round to my mum and said look she's (Chloe) a liability. We can't have her in the school. Because I was pregnant, if I got knocked in the hallway they didn't have insurance to cover me.

Researcher: How did that make you feel when they said that?

Chloe: It made me feel like excluded from everything. Cos I do want to get my education you know. I've always said ever since I got pregnant, I don't want to be someone... I'm not trying to be nasty, but you know an elderly person can say 'well you got pregnant young and just sat on benefits doing nothing for the rest of your life'. You know, I don't want to be like that. I want to be someone who's got a life and got a good job and makes something for their kids. And I felt like they were stopping me doing that.

Researcher: Did you challenge it?

Chloe: Yeah, my mum did and they rejected it.

(Age 17, became a mother with first child at age 13, few educational qualifications))

Social Domain- Relationships breaking-up

The social domain encompassed a range of experiences that proved to be turning points in the women's lives. Moving on from what many of the women described as 'harmful relationships' were, as we saw earlier in the chapter, highly consequential. Reflecting upon these relationships clearly demonstrated the impact that such relationships could hold over the women, and in more extreme cases, the experience of domestic violence. A defining critical moment for all the women who experienced such relationships was making the decision to break away from them. With hindsight; women discussed the importance of this critical decision. Reflective narratives provided an awareness of how they felt at the time, what prevented them moving forward, and having made the break, how

their lives consequently unfolded. Such decisions demonstrated how the women were often active agents in control of their lives – in other words the women acquired a distinct sense of the self, fundamental to their feelings of self-efficacy and agency. Knowing why things happened as they did, how the experiences in life make you the person you are, and how you learn from these to inform future decisions is a momentous event in the women’s lives – when they realised this, they felt a sense of empowerment.

The short case study earlier in the chapter, of a participant (Claire) who described her account of domestic violence through time, described the moment when she was being beaten up by her partner, and realised that her son would remember this. *“It was Max’s (son) age that made me think, right I’m not having this **and I just thought**, he’s (son) going to remember this, and he really battered me and I had to leave Max and run over the road to my friends, and then we called the police and that, **and that’s when** I got my mum involved and got a solicitor and that and that’s how I had to do it”.*

For Jessie, it was *only with hindsight* that she could appreciate the importance of her decision to break away from a relationship and how, as a consequence, her life improved. She described the difficulties encountered when making the decision to let go of someone you love. But it was only with hindsight that the destructiveness of such relationships became apparent:

*“... **at the time** I completely loved him. So I felt it was (pause) I couldn’t leave him because I loved him too much. And I still love him now in a way but I just can’t, I just think certain relationships are not good for people”*

Material/Economic Domain - Housing

The majority of the sample (17 out of 18) experienced being placed in temporary social housing as some point. This was a difficult experience for all of them. They described the problems associated with the

condition of the housing (cramped, poorly decorated, damp), the uncertainty of where they would be permanently located (and the real fear of being placed in an undesirable area away from friends and family), and the length of insecure and temporary accommodation before being offered a permanent home. For many of the women, the length of stay in temporary accommodation was substantial (often all the way through pregnancy and into the early stages of motherhood). For some this also involved running up rent arrears. It was also extremely difficult for the women to take on education/employment without a secure housing base.

Jessie: I think when she (daughter) was a little baby I was really down. But now, I think it's just, I've got nothing to do (feeling down). I was supposed to be going to college in September. I'd sorted it all out but with this housing (was found intentionally homeless by the local authorities). I just can't have all that in my head. So I can always go back to education later on. But at the moment the priority is for me to get a job so we can private rent and have money basically. (Age 18, became a mother at age 15, few educational qualifications)

In some cases the mothers actively avoided making attachments within a locality. Anna comments on the below:

Researcher: Have you ever considered joining a mother and toddler group?

Anna: I have done but I think I'd probably wait till I have a bit more of a routine with him, and I'm a bit more settled in an area. 'Cos they could move me any time really. So I don't want to have to make friends then pack up and go sort of thing. I'd rather wait until I know where I am going to be permanently. (Age 17, became a mother at age 16, few educational qualifications)

Finally being allocated housing provided the women with a sense of security, established their independence but more importantly allowed them to feel “settled” with their family home for themselves and their

children. The lack of stability and insecurity caused a great deal of anxiety. Finally obtaining a secure base was fundamental to their well-being. It also allowed the women to plan for their future.

Helen: Yeah cos, I know it's...mine, and it's only me who's coming through the front door. And when you're in shared accommodation, cos at the time anyone could come in. So, anyone who lived there could bring anybody. You don't know who they're friends are and, you know, what circles then run in and... I just feel a lot happier because I'm letting in who I want and I know who's... here rather than, you know, being in with a load of strangers.

Researcher: And is this permanent accommodation as well?

Helen: Yeah. I can settle because I'm not...I'm not having to move again and... all that. (Age 17, became a mother at age 17, few educational qualifications)

Whilst this critical moment was defining in the sense that it was something the women yearned for, it was often fraught with difficulties. Whilst the realities of being placed in housing initially described as 'bad areas' were sometimes dispelled through actually living there, the lack of control over where they are allocated housing, and for many, the difficulties being placed far away from networks of support were all important.

Researcher: So you were quite relieved when you got offered this place?

Ella: Well I was, I was offered, I was glad that I got a house. But, I didn't want to be over here. I wanted to be near my Mum and that lot. But obviously... I mean everybody says oh 'Crowthorpe's' (local area) really bad and that. But this streets actually quite nice and there's a direct bus route to my Mum's ...But I don't, the only person I see more often is my Nanna, so

Researcher: So do you think you spend a lot of time on your own where you would have seen more people?

Ella: Yeah, I mean while Darren's (partner) working obviously. He works during the week and he plays football on a weekend. So I hardly ever get to see him. My sister she lives in town so basically so she doesn't, she doesn't come over here cos she works on a morning and she does whatever on a night. I don't really see any of them

Researcher: So you feel quite lonely at times?

Ella: I do yeah, I mean obviously I could go somewhere but it's costing me about a tenner on the bus a week. If I need to go somewhere, it costs me like two pound a time to get there and back. (Age 20, became a mother with first child at age 16, few educational qualifications)

.....

Sophie: I'm trying to get a move from here cos there's so much fighting; the police are round all the time. Someone had a knife to somebody else and I heard them kicking him, someone down the stairs the other night. I rang the police at about half past eight/ nine o'clock. But he (her son) has nightmares. He won't go to bed. He just started sleeping through three months ago and now he won't go to bed because he's frightened. So most of the time he sleeps in my bed with me. I won't go out when it's dark, not when I've got him. And I won't open my door if I'm not expecting anybody and if I can't see them. I've phoned the police but I said if the people in the building knew it was me who rang them my windows would be put through and my life would be hell. I told the housing association that's why I'm hoping they'll get me a move closer to my Mums. But they've said there's nothing they can really do... All my friends and family are in 'Bexy'.

Researcher: Do your parents worry about you. You obviously want to be closer to your Mum and Dad. Do they worry about you being here? Do you talk to them about it?

Sophie: Yeah, when all the trouble goes off, I mean I've been on the phone to my Mum at two o'clock in the morning crying my eyes out because I don't like it. My Dad has said to 'Foundation Housing' that he's sick of coming down here driving in the middle of the night to sit with me to make me feel better.

Researcher: Does he do that then?

Sophie: I ring up just for some support and my Mum kicks my Dad out of bed, "get dressed, go pick her up or go sit with her". And then he comes round. He might only stay for ten minutes... But because I've got an insecure tenancy I can't move. (Age 17, became a mother at age 14, few educational qualifications)

Self-Concept and the Development of Self-efficacy

Through the passage of time, the women gained a realisation that they were, holding a certain degree of control over their lives. The women often described a lack of control or agency at the start of the research project. This could also be played out across a whole range of social sites. For example, their housing situations, and significant others in positions of power, when the women felt particularly vulnerable and unconfident. But as time passed the women developed an awareness of their resilience in the face of adversity, to deal with issues that life threw at them. And through such experiences, a subjective sense of self-efficacy and maturity began to be voiced.

Claire: Having Max has made me, me. And basically all the things that I've gone through have made me a stronger person. And I think I'll always appreciate that. I think doing it on my own (single parent), to start with. Because I know I can be on my own, I know I can be independent and I don't need anybody really. So I know I

can survive. (Age 25, became a mother at age 19, few educational qualifications)

(Interview three)

Maternal Career - Obtaining their Ideal Family

Meeting someone to settle down with and form what the women described as their “ideal family” was a defining moment in the sense that they finally obtained what was a consistent aspiration for themselves and their children. Settling down in a serious relationship or getting married enabled the women to re-assess their identity assert their worth as ‘moral mothers’. The women often spoke of such relationships as making them feel content and happy, and consequently put their wider aspirations in perspective. For instance, having finally obtained their ideal family made ‘family time’ ever more significant. This could also make them re-evaluate their encounters with education/employment, or whether or not to expand their family, and/or adjust their social lives.

Thinking into the future, Claire discusses her aspiration of ‘settling down’:

Claire: I want to be settled down. I want nothing more than Max (son) to be happy in a stable family life. I want that. Especially for Max’s stability. I must admit, I’ve been with a few people and it’s not been very nice (domestic violence). I’m strange really because in some ways I say I don’t want to commit to somebody, but then I think in ten years’ time I’d hope I would be. I don’t want to be on my own for the rest of my life. (Age 25, became a mother at age 19, few educational qualifications)

Social Domain – Targeted support

For some women their decision to engage with “targeted provision” (such as the ‘Baby Space’ and ‘Bumps’ project) provided them with critical support at times of need. Encounters with professionals working on these projects could also help affirm their “good mother” identity when they felt

particularly vulnerable to stigmatisation. Findings so far have also highlighted encounters with professionals who provide other forms of critical support. This included helping to change accommodation and engage with preparations for the return to education/employment. Crucially, “targeted provision” (such as the ‘Baby Space’ and ‘Bumps’ project) could also provide a safe space for the women to come together and support one another. While universal (all-age) provision could be stigmatising, targeted provision offered an environment where all women shared an identity – the experience of being a teen mum. These support groups were particularly important during the start of the research project, at a time when the women had only recently become mothers. This was a time when they could be particularly unconfident within a social context that stigmatises and judges them as mothers.

Helen: You just think that everyone is turning their nose up at you so when you hear someone say ‘oh you’ve done well and everything’, it makes you feel better. They just confirm that you’re doing things right. (Age 17, became a mother at age 17, few educational qualifications)

.....

Anna: Because I’ve been there and I know I can speak from experience to people, it’s not what I’ve read in a book or studied at Uni or College or whatever, it’s something I can give my own personal thoughts on...I think young parents need a lot more support. There’s lots of young mums who are at home and they feel very lonely and they don’t have any friends. It needs to be made a bigger issue than what it already has done and that’s why I feel it’s a shame that ‘Baby Space’ is no longer. I was really upset when I got the letter (project drawing to a close due to lack of funds) cos I thought it’s not fair that that has to work like that. I got a hell of a lot out of it, it made me more confident, and it gave me something to look forward to. It gave me something to get dressed and go out for and to realise that there is help out there.

Researcher: What do you feel you got the most from that project then?

Anna: I learnt to be myself and not to be somebody else that I weren't really. (Age 19, became a mother with first child at age 16, few educational qualifications)

.....

Becky: Jane (Practitioner), she's fantastic. She deserves a medal for what she does. She's was always supportive. You know, when I was like "I wanna do something, I want to do something" (return to education), and then if I didn't do it she would be like "oh, you're not ready for it don't worry". She just does so much. I mean anyone that I've ever met that she's worked with; she'll just do anything for anyone. She always puts them first. (Age 20, became a mother at age 17, few educational qualifications)

.....

Sophie: They were more subtle, instead of 'big in your face look what you've got', they were more you know, just making me more confident and a little bit stronger, which is what I needed. (Age 21, became a mother at age 14, few educational qualifications)

Another young mum reflects on the importance of being seen as a young person with promise and potential, rather than as she puts it "just a number or a statistic":

Hayley: It's when they remember you, and they're like "how's Luke?"(Son). And it's just nice that you're not just a number or a statistic. They understand, and they don't judge you, you know they think you need a little bit more help. And you're not just some young person they want to get off the streets for a couple of hours to try and get them on the straight and narrow. They're more, they want you to do things and they want you to succeed. (Age 21, became a mother at age 19, few educational qualifications)

Social Domain/Self Concept – Felt Stigma

There were 'moments' when the mothers experienced 'felt stigma' and consequently needed support and reassurance from others (Goffman, 1963). The 'looks' women spoke of, or encounters when they felt directly exposed or 'discredited' are moments in the women's lives that they remember distinctly. Such powerful encounters could be defined as a critical moment in so far as it was a reinforcement of their stigmatised identity. Such experiences are without a doubt hurtful and heart felt. They knew what that look meant – it spoke a thousand words and inevitably impacted upon their sense of self.

Becky: His Grandma and Granddad were just so horrible to me. I went to go stay with his Grandma and Granddad cos he was living there and they just didn't talk to me or anything. Just totally ignored me. They were just really really horrible and his Granddad would make comments as if I was a slag or something. (Age 18, became a mother at age 17, few educational qualifications)

.....

Emily: Well, they don't, sometimes it's not what...they don't even say anything. It's just how they look at you, and you...you know. (Age 18, became a mother at age 18, few educational qualifications)

.....

Ruth: "Now cos my bumps coming along, people look sometimes, and you know... If they look at me like that I just look away, and I think 'think whatever you want to think' you know. They don't know me so they can't judge me, for what they see you know. I'm not really...I try not to let it bother me but it does sometimes. And because I've been walking down the street on my own now with Stephen (boyfriend) in prison. You know I'm always on my own. And I always walk places you know so... So it's a bit hard. If I had

Stephen (boyfriend) with me I wouldn't feel so bad... (Age 16, became a mother at age 16, no educational qualifications)

Such discussions have real relevance for policy. By uncovering the significance and timing of critical moments, interventions have the potential of being applied more directly in ways that respond to the lived 'realities' of young mother's lives.

Conclusion

This chapter has sought to highlight the more intangible dimensions to social life that often get overlooked (Smart 2007) It has explored the complexity of social relationships and how individuals change their identities through time, depending upon a varied and overlapping sets of factors that may be both individual and structural. What has become apparent from the data presented is the importance of informal networks of social support within which the women are embedded. A policy framework that fails to acknowledge the *social*, the meaningful relations mothers sustain and maintain over time, misses a fundamental part of the make-up/jigsaw. The importance of kinship, especially mothers, providing emotional, practical and financial support has been illustrated. But so too has the consistency of these relationships through time. As has also been demonstrated, women encountered harmful relationships and relationship breakdown with their partners (mostly the fathers of their children). And whilst kinship relations could at times be fraught, they also proved to be important during times of need. However, of particular relevance for policy is how some young mothers lacked these informal social networks and, as a result, found motherhood as being particularly isolating and lonely.

This chapter has sought to highlight the role of kinship, placing it within the context of the changing shape of motherhood for the research sample. QLR can be particularly helpful in examining the transformation of identities; the twists and turns in people's lives as revealed through their (multiple) biographical accounts. This chapter has therefore aimed to

take a glimpse into such movement, essentially a *moving motherhood* – from young women who were predominantly lacking confidence at the start of the research to more mature self-assured women who described an acquired confidence in mothering.

Finally, the notion of critical moments has been also explored. Critical moments transcend and linked together the key domains of the women's lives. We have demonstrated how these were both structural and emotional/subjective. Such discussions have also highlighted how critical moments can be subtle. They do not necessarily jump out at you. Rather through the passage of time they can become recognised as having more profound significance.

Thus, one issue this thesis has sought to grapple with is unearthing and bringing to the fore the more intangible dimensions to social life. Within the literature, critical moments tend not to be discussed in such a way. They are often described in quite dramatic terms – a family bereavement or drug overdose for example. However, this thesis seeks to examine how critical moments can work in much more subtle, but nevertheless powerful, ways. Whether this is the realisation of a necessary relationship breakdown, or the 'look' a young mother receives from onlookers as she walks down the street or is sitting on a bus. Such subjective feelings can become defining moments in the women's lives. They either affirm a sense of powerlessness through society's assumptions that women cannot easily overturn, or in the case of deciding to break free from a harmful relationship, provide a sense of empowerment that they are indeed active agents in control in their own lives. The realisation of such agency seemed to give the women the impetus to strive for something better for themselves and their children.

This chapter has focused upon the development of a maternal career and how this interfaced with the social domain in the young women's lives. In doing so, aspects to the women's lives have been explored that often evoked the most powerful feelings voiced. With a focus upon hearing the accounts of young mothers and what was deemed most important to

them, this chapter has been integral to achieving this aim. Furthermore, this is something which is ever more significant against the backdrop of a dominant research and policy agenda that discounts the feelings and emotions of young mothers, at the expense of quantifying the problematic status of teen pregnancy through a focus on poor outcomes. What it means to be a mother and how women perceive themselves to change in regards to motherhood was explored. We also witnessed how the women are not negotiating motherhood in a vacuum. The intimate, close, personal relationships with significant others, whether this is kinship (mothers, grandparents), or intimate relationships with partners, are integral.

Chapter Four:

Notions of the ‘Good’ Mother and Consequent Impacts on the Construction of a Stigmatised Identity

This chapter opens up with a review of the literature on notions of the ‘good mother’, and more specifically, how young parents fail to live up to the ideals of the dominant social norms that surround motherhood. The chapter will then demonstrate the relevance of stigma to the lives of young parents. A key question posed will be that of how young mothers discuss a moral dilemma (i.e. being a teenage mum) and attempt to repair what Goffman would refer to as a spoiled identity (Goffman, 1963).

The second half of the chapter addresses some of the most pertinent questions that developed from the review of the literature. Through a discussion of the research findings the experience of stigma will be brought to the forefront. It will be demonstrated that young mothers frequently experience stigma both in their daily lives and as their identities unfold through time. Findings that indicate how young mothers are aware of how they are perceived, how they manage stigmatisation, as well as factors that can either exacerbate or neutralise this experience will be drawn upon. It will be argued that fundamental to the findings is how the above are negotiated through time in an overall endeavour by the young mothers to ‘prove’ themselves in order to reinforce their status as ‘moral’ or ‘good’ mothers.

Introduction

‘Teen pregnancy’ is regulated through public and institutional discourse, and young working class women have become subjected to the power and regulation of such discourses. Whilst women have greater

opportunities to 'choose' motherhood, when or whether to have a child and in what context, the white middle-classes often function as the norm for mothering. The result of this is a tendency for all women, (regardless of class and race) to discuss their own motherhood in relation to dominant social norms. Vanessa May argues that it is not easy for women to detach themselves from such norms: "individuals cannot simply choose which social norms to engage with... there are some ubiquitous social norms that all mothers must position themselves in relation to in order to claim a moral self" (May 2008, p.473).

However, what it actually means to be a 'good' mother is an extremely complex and difficult ideal for women to obtain and negotiate. Phoenix and Woollett argue that what is widely accepted as 'good mothering' by 'good mothers' is socially constructed and has political implications and consequences (Phoenix and Woollett in Phoenix et al 1991). Whilst, teenage mothers are a prime example of a group who do not fit within the 'good mother' category, prescribed expectations of motherhood fail to recognise that mothers in different social circumstances (for example from different social classes) might experience motherhood differently, and may have different understandings of what motherhood actually means and what it feels like to mother (Edin and Kefalas 2005; Miller 2002, 2005; Thomson 2011). As Gillies (2007) has argued; dominant discourses about motherhood both circumscribe and conflict with the range of practices of mothers as they care for their children in everyday life. She explores the consequences this can have on the lives of working class mothers:

"Motherhood is often assumed to be a classless practice (Duncan, 1995).... Motherhood is central to contemporary individualised and codified representations of class, with disadvantaged mothers depicted as ignorant, promiscuous, uncaring, irresponsible and most significantly, undeserving. Without the language of class to explain their lives, such mothers are set apart, misinterpreted and ultimately blamed for the social and economic marginalisation that characterises their lives..... drawing back from class as an explanatory framework has seen the re-casting of

disadvantage as a moral disease passed on through the family". (Gillies 2007, p.19)

Insights through qualitative research highlight how young mothers endeavour to distance themselves from the category of 'bad' mother by building personal respectability through ideas and images of being a 'good' mother (Arai 2003; Phoenix 1991, McDermott et al 2004, Mitchell and Greene 2002). Such research has demonstrated that rhetorical accounts of why young mothers deem themselves to be 'good' mothers is integral to a positive sense of self. For example, Mitchell and Greene found that distinguishing themselves as 'good' mothers in relation to other mothers, who are deemed as 'bad', enables them to escape stigmatisation and build a positive self-identity (Mitchell and Greene 2002).

Macdonald and Marsh (2005) also found this to be the case within their sample of disadvantaged young people. This research took place within a locality that had high rates of teenage pregnancy and interviewees were described as 'brutal' at times in regards to their evaluation of young mothers. However, whilst strong views were held on teenage pregnancy, such views were rarely applied to themselves, their friends or family, and moreover, to anyone they knew particularly well. The young mothers within the study regarded their mothering as responsible and legitimate and in order to defend such representations they made stark comparisons between themselves as 'good' mothers and other local women whom they deemed to be 'bad' mothers. Examples of 'bad' mothering included, irresponsible behaviour (such as drinking with young men on the streets), promiscuous behaviour (some women were referred to as 'slags' and condemned for having multiple children to different fathers), and being calculative welfare scroungers (having children to obtain council housing and receive welfare benefits). Macdonald and Marsh believed that the young mothers differentiated themselves from the 'bad' mothers described above in order to preserve personal and family respectability. They argue that the condemnation voiced towards irresponsible 'bad' mothers provided evidence of:

“rhetorical attempts of people to distance themselves from negative reference groups and to defend personal and family reputations against the continuing stigma that attaches to poor people and neighbourhoods”. (MacDonald and Marsh 2005 p.199)

This chapter will engage with the difficulties teenage mums encounter when trying to resist dominant subject positions (Weedon, 1989). In particular, it will be argued that we need to reflect upon the emotional impact of discourses on women’s subjectivity. Indeed, whilst becoming a mother is a life-changing experience, we need to ask a range of questions that are relevant to the lives of teen mums. For instance, how do young mothers create a positive identity for themselves within such a disapproving social context? What strategies do they employ to resist negative stereotypes and social disapproval? In what ways do teenage mothers discuss being ‘good’ mothers? Do they defend their parenting? How do they describe successful parenting? Crucially, how do young mothers discuss a moral dilemma (i.e. being a teenage mum) and repair what Goffman would refer to as a spoiled identity? (Goffman, 1963). These questions have been under-explored in relation to teenage pregnancy and motherhood and the following findings will provide more detail in regards to the impacts, negotiations and finally the coping strategies teen mums employ to counteract against dominant discourses and stigmatisation. Before delving into the research findings, a review of the wider literature on stigma, and how young mothers have discussed this experience, will be explored.

Negotiating a ‘Spoilt’ Identity as a ‘Teen Mum’– The Management of a Moral Self

In Erving Goffman’s (1963) ground-breaking book *Stigma: Notes on the Management of Spoiled Identity* he defines stigma is an “attribute that is deeply discrediting” and that reduces the individual “from a whole and usual person to a tainted, discounted one” (Goffman, 1963 p.3). As we have seen norms around motherhood, youth and the family are extremely powerful; young women who breach these norms risk embracing such a

'spoilt identity'. When Goffman discusses a spoilt identity he is referring to a discrepancy between an individual's *actual* and *virtual* identity. Virtual identity is described as the assumptions and anticipations that people make about an individual on the basis of first appearances whereas a person's actual identity is described as the attributes that a person can actually prove to possess (Goffman, 1963 p.3).

Jones and colleagues provided an account of stigma from a social psychological perspective (Jones et al., 1984). Whilst acknowledging how stigma differs across and within cultures, they also emphasise the universality of stigmatisation: "we cannot escape frequent contact with those who deviate noticeably from norms of appearance and behaviour" (Jones et al. 1984, p.5). Jones et al explain how stigmas vary by the degree to which they are seen as justifiable by the stigmatised and the stigmatiser. The notion of perceived blame is crucial here. This is especially with regard to the level of responsibility placed upon an individual possessing a stigma (Jones et al, 1984, p.56). Those judged to be responsible are treated worse. Another key factor that influences the experience of stigma is the degree to which there is a perceived danger posed by the stigmatised. One way of managing stigma is to repent: "the repentant deviant is one who acknowledges a fall from grace, and by that fact confirms the validity of the normative system his behaviour has transgressed." (Jones et al, 1984, p.65)

This chapter is focused on the management of a spoilt identity and the stigma teenage mothers feel and experience throughout pregnancy and motherhood. However, the concept 'stigma' is highly complex and has often been accused of being used in a rather arbitrary fashion. It has a tendency to lack clarity and meaning, partly due to the variations in the definition of stigma itself. Whilst this thesis is unable to cover all these issues in depth, it acknowledges the complexity of the term and refines its focus to the key issues associated with stigma that appear most relevant to teenage pregnancy and motherhood (See Link and Phelan 2001; Ainlay et al 1986 for more information on the complexity of the concept of stigma)

Link and Phelan conceptualise stigma by applying the term when elements of labelling, stereotyping, separation, status loss, and discrimination co-occur in a power situation that allows the components of stigma to unfold (Link and Phelan, 2001). They argue:

“in our conceptualization, stigma exists when the following interrelated components converge. In the first component, people distinguish and label human differences. In the second, dominant cultural beliefs link labelled persons to undesirable characteristics- to negative stereotypes. In the third, labelled persons are placed in distinct categories so as to accomplish some degree of separation of “us” from “them”. In the fourth, labelled persons experience status loss and discrimination that lead to unequal outcomes”. (Link and Phelan, 2001 p.367)

This concept of stigma is particularly useful as it points to the outcomes of stigma that not only focus upon often stated individual psychological consequences, but macro level factors that can create a dramatic impact on the distribution of life chances. They concisely capture their conceptualisation by bringing together the main components:

“stigmatization is entirely contingent on access to social, economic, and political power that allows the identification of differentness, the construction of stereotypes, the separation of labelled persons into distinct categories, and the full execution of disapproval, rejection, exclusion, and discrimination” (Link and Phelan 2001, p.368)

Revisiting their theory of stigma, in 2004 Link et al. add emotional responses to stigma as a further dimension. Within this, the stigmatiser is likely to experience anger, irritation, anxiety, pity and/or fear as part of the stigmatisation process, whereas the stigmatised may feel embarrassment, shame, fear, alienation and/or anger (Link et al. 2004). Link and Phelan believe that tackling stigmatisation entails a multidimensional approach, including the need to either change deeply held stigmatising beliefs within powerful groups, or the power balance between groups.

Young Mothers and Felt Stigma – The Wider Literature

In discussing the stigma attached to teen pregnancy, Whitehead argues that pregnancy and motherhood could lead to 'social death' (Whitehead 2001). This was on the basis of qualitative research on young women and a comparison between those who became pregnant and those who did not. McDermott et al conducted a synthesis of qualitative research that highlighting a sense of resilience and of resistance to stigmatisation in young mothers. They also found that transitions to motherhood could intensify such stigmatisation, and how young women could often feel they were being judged in regards to their mothering ability:

Elizabeth: "It's like when I'm on the bus and she starts crying and I see people looking and I know they think it's because I'm young I'm not a good mum". (Letherby et al, 2001p.21 found in McDermott et al 2004)

Not only does stigmatisation impact upon their identities and feeling towards being a mother, but also upon their mothering practices and life choices:

"The synthesis indicated that the tension between attempting to do the best for their children by seeking support from health and welfare agencies and evading social disapproval was a considerable source of stress for the women. In many cases, it resulted in them avoiding health and support services". (McDermott et al 2004 p.29).

Of particular concern to them, was how the synthesis indicated stigmatisation to be encountered across a wide range of social environments such as: schools and education facilities, health, welfare and housing services, in their neighbourhoods, and from their families. McDermott et al sought to highlight that whilst resistance and resilience was evident through the accounts provided by young mothers, the real impact of stigmatisation still persists.

Further research within this area has provided an insight into processes of stigmatisation by following three different generations who had experienced having a child at a young age (Hirst et al 2006). Despite how the research had not set out to focus upon processes of stigmatisation, they found that a sense of stigmatisation endured throughout their lives. This provided a valuable insight into processes of stigmatisation *over time* as well as how such experiences can vary *between* generations. They argue that feelings experienced across generations included:

- Needing to avoid/ avoiding 'disclosure' at work
- On-going fear or distrust of health/ social care professionals
- Anger towards media portrayals of young parents
- Not meeting or defying social class and/or parental expectations (potentially leading to feelings of guilt or low self-esteem many years later)
- Missed sense of youth, feeling left out of youthful activities
- Need for affirmation later in life
- Striving to prove oneself over and above expectations of older parents
- Sense of having to do 'more' or 'better' to be accepted".

(Hirst et al 2006 p.6)

Exploring stigma across generations highlighted the how this experience is far from transitory, but instead may be endured over many years. For some, the stigma felt as a teenage mother is still an issue some fifty years later. For instance, reflective accounts, through (biographical) interviews of 'older generation' young parents, demonstrated the power and endurance of stigma. This was more pronounced from those who described themselves as middle class. For one of the oldest generation mothers, the stigma she felt from her middle class family and social environment was hard felt and internalised some forty years on. She still felt a strong sense of "letting her family down" and "bringing shame" to her family and neighbourhood and commented:

“Everything in my life...came together to make me feel humiliated and embarrassed and immoral and not worthy of consideration, because that was the message I was receiving from everywhere, it was what I was getting from my parents, it was what I’d got from school, it was what I was getting... from antenatal services, so I hadn’t got anybody to tell me anything different, so ...that’s what I believed. I was just this ...person that was completely unworthy of attention and respect”

(Kate, oldest generation mother, found in Formby et al, 2010, p.106).

Whilst wider research with young mothers tends to affirm the above, it is striking how such findings can become overshadowed in the pursuit of wider research aims. The relevance of the stigmatisation described above is rarely emphasised even though consequent feelings and encounters are powerful and persistent. That young mothers can be described as resistant or resilient to such stigmatisation (McDermott et al 2004; Mitchell and Greene 2002) should not overshadow the impacts upon their sense of self, throughout their lives and within a range of social sites. The above research gives a unique insight into a range of complex feelings and emotions that are subject to change. Feelings of anger (towards negative representations), fear or distrust (towards formal systems of support), guilt or low self-esteem (through the disappointment family members can voice) are complex emotions they have to contend with. How do young mothers manage these feelings? As the above describes, this may be through avoiding disclosure of their status (which must entail complex emotions in itself), striving to prove oneself through doing ‘more’ or being ‘better’ and a need for affirmation in one’s life. All these strategies do not necessarily deal or provide closure to the emotions that develop from stigmatisation but rather create a complex relationship between different emotions that have to be dealt with throughout their lives. This is also very much dependent upon circumstances whereby stigma can potentially be exacerbated or neutralised for that matter.

So far, this chapter has demonstrated that the identity of a teen mother holds such a pervasive stigma, embodying so many discriminatory stereotypes, that it could be argued this identity occupies what Goffman refers to as their 'master status'. This refers to the idea that the negative trait a person possesses (the stigma) becomes the 'controlling one' (Goffman, 1963). This chapter will now turn to a detailed account of how the young mothers from this study negotiated their stigmatized identity of being a 'teen mum'. The strength of the findings are that we can explore the management of a 'moral self' through time, and identify, as will be discussed, factors which either neutralize or exacerbate the experience of stigma. Fundamental to the forthcoming findings will be the question posed earlier of how young mothers discuss a moral dilemma (i.e. being a teenage mum) and attempt to repair what Goffman would refer to as a spoiled identity? (Goffman, 1963).

Introduction to the Research Findings

Stigma – Young Mothers negotiating a 'Moral' Self

'I found it surprising how after so many years, and after Sophie's life had clearly improved from the last time we met, she still found the experience of stigma upsetting and painful. At 'digital storytelling' this was clearly evident. We both tried to find a quiet corner so she could make her audio recording and it was clear that Sophie felt uncomfortable through her body language. We found it difficult to find somewhere private and I felt frustrated that the project had not thought this through. The need for privacy became apparent as Sophie retold a very emotional account of her experience of pregnancy and early motherhood. The shame that Sophie had been made to feel was clear. I was previously unaware to the degree to which this experience was painful for her. This only became apparent as she retold her story. I felt extremely sad for her that she still found this hard and people had clearly made

her feel rejected and worthless. When Sophie had finished she was close to tears. I'm not sure why Sophie decided to make a 'digital story' over what was clearly such a painful episode of her life. Maybe it was important for her to feel she could take part in such activities that 'other' mothers maybe take for granted. However, this experience clearly opened up difficult emotions associated with being denied such mothering experiences.'

(Fieldwork notes – Digital Storytelling, June 2006)

The stigmatisation of teenage pregnancy and motherhood has failed to come to the fore despite such an experience holding real relevance to contemporary understandings and lived experiences of young mothers. It will be argued that such an oversight has real consequences, not only in regards to a crucial gap in the literature, but also in regard to how we understand, support and engage with young mothers. As will be demonstrated here, young mothers frequently experience stigma both in their daily lives and as their identities unfold through time. Not only has little attention been paid to the actual experience of stigmatisation but very little research has sought to understand how this experience should be viewed as a process. Fundamental to the forthcoming findings is the experience of stigma through time and importantly how young mothers negotiate this. In line with the wider theoretical framework such discussion will encase descriptions within a holistic approach, i.e. the interconnectedness and overlapping nature of the key domains chosen for analysis. It will further demonstrate the value of QLR – the processes attached to such an experience over time.

Teenage pregnancy has been shown to be highly stigmatising , impinging upon many aspects of young mother's lives including their sense of self (Arai 2009; Duncan 2007; McDermott et al 2004, Whitehead 2001; Yardley 2008). This is especially the case when we consider the multiple aspects to the discriminatory discourse in which it is embedded. Different

negative connotations are associated with the four key research questions as outlined below:

- **Maternal Career**– Single parent, Unruly/neglected child, Unmoral
- **Economic-Material Domain** – Welfare dependency
- **Social Domain** – ‘Failed’ life, ‘Lost youth’, Promiscuous behaviour, Failing communities – underclass thesis
- **Self-Concept** – Low aspirations/low self esteem

Fundamental to the forthcoming findings is how the above are negotiated through time in an overall endeavour by the young mothers to ‘prove’ themselves in order to reinforce their status as ‘moral’ or ‘good’ mothers. It is within this context that we must acknowledge the constant reinforcement of the stigma of teenage motherhood through time and how this is then responded to in its various guises at different points in time. For instance, some of the ways in which the mothers negotiated stigmatising discourses was to ‘speak’ a moral discourse that drew upon conventional norms that could counteract stigmatisation. This discourse was strongly influenced by the young women entering the labour market, returning to education, settling down in a ‘normative’ two parent family and gaining a sense of achievement in their child’s ‘successful’ development.

Researcher: Do you feel like you have to prove yourself?

Laura: At first I did but now I don't care. All they have to do is look at Ellie (daughter) and they know she's happy. And they know she's well looked after. And anyone that looks at her, she gives them a smile. And I've done the best I can. And I know I have done so no one can tell me different. Because I know I have brought Ellie up the best I can. (Age 20, became a mother at age 18, few educational qualifications)

Four main themes have developed from the data and will be outlined briefly. To begin with, we will discuss the awareness of stigma amongst the sample, highlighting the shared consensus of what constitutes a

stereotypical 'teen' mum. Secondly, the factors which either neutralise or exacerbate the experience of stigmatisation will be explored. Thirdly, the consequences of stigma will be discussed, drawing more on intangible dimensions of social life such as the emotions that can be provoked. Finally the chapter will explore how the experience of stigmatisation should be viewed as a process which is open to change over time and relational with a range of domains in young mother's lives. Overall, it is hoped that such findings further highlight that young mothers are far from a homogeneous group and consequently the experience of stigmatisation will also vary, and as will be explored, often dependent upon young mother's circumstances and biographies.

Awareness of Stigma

All research participants were aware of the stigma attached to teenage pregnancy and motherhood, but how this was understood as being directly relevant to their lives varied significantly.

Ella: Umm, not gonna cope as well or got a career. And also maybe sort of make ...make out that if you're from a bad background. Rough council estate or, umm, been in care or... I do think they portray that as...that's what a young parent is. Somebody from a council estate that's been allowed to run wild and do what they want. (Age 20, became a mother at 16, few educational qualifications)

.....

Chloe: They're basically saying we're like sluts really. Too young to be able to have protected sex because we're drunk and taking drugs or something. And then they (teenage mums) end up pregnant, can't cope and then end up having they're kids taken off them. (Age 17, became a mother with first child at 13, few educational qualifications)

Another participant commented:

Anna: Money grabbers, spongers, that sort of thing, slags (Age 17, became a mother at 16, few educational qualifications)

One participant describes the invalid assumptions people might make with regards to the biographical accounts of young mothers and consequently when young women might feel ready to have a child:

Louise: I don't think people know how to judge people. I mean people judge people because of their age and not how they act. Some people who are pregnant at eighteen might have had to look after they're Mum because they've got MS or ME and they've had to grow up quick. I don't think it's got anything to do with age. I think it's how that person is in their head. And how they deal with things and deal with people. (Age 19, became a mother at age 16, few educational qualifications)

It was interesting that despite an awareness of how others may judge them according to the negative stereotypes discussed above, the majority of the sample adopted a strategy of “*not letting what others thought bother them*”. As later discussions will highlight, this was invariably a *coping strategy* the mothers employed in order to deal with the feelings, emotions and encounters stigmatisation could trigger.

Researcher: And how does that make you feel?

Ruth: I don't feel anything, I just think they're just idiots; they need to get a life. (Age 16, became a mother at age 16, no educational qualifications)

.....

Helen: I've lived round here all my life and people I've known all my life who've watched me grow up won't even speak to me now. They just look down they're nose at me. They just look at me as if I'm a piece of shit you know. Well I'm just like, you know, I'm not bothered. Just get on with your life; I've got more important things

to do. (Age 17, became a mother at age 17, few educational qualifications)

The notion of 'time' is embedded within the statement below and was common across the sample. The fact that this coping strategy has been developed over time suggests that stigmatisation does indeed impact upon their lives and that the women have an awareness of how they have had to negotiate this:

Researcher: And how do you cope with that then when that happens?

Amy: I just ignore. I don't think about it anymore to be honest, I don't see (the) point. (Age 18, became a mother at age 16, few educational qualifications)

.....

Louise: I don't really care anymore; I use to notice it more when I was pregnant, I use to be more paranoid about what people were thinking. In my head I'm not as paranoid, thinking you know "oh their looking at me". I don't really care anymore because I know what I'm like with him (son). It's not my problem what they've got to say. (Age 18, became a mother at 16, few educational qualifications)

.....

Researcher: Do you find it quite hurtful?

Emily: No. No, not really. I've learnt to let a lot of things go. I've learnt things are more important than what people say. It doesn't bother me. It doesn't hurt me. It just makes me angry. And now I think, if anyone said anything about my age I'd say "please don't patronise me". Because in my age I might be a kid, or a young person or whatever, but in my head I'm not. (Age 19, became a mother at age 18, few educational qualifications)

The women were very clear that the only people who really mattered were those who knew them personally (friends and family). A common discourse was drawn upon here, especially in regards to the importance of those who knew them offering reassurance that they were indeed good mothers. For those who were pregnant, significant others could display confidence in them becoming good mothers. This reinforces the importance of professionals and practitioners being aware of supportive/unsupportive family relationships.

However, friends and family could also hold highly stigmatising attitudes and did not necessarily always provide a protective barrier to social stigma but could themselves reinforce it (felt shame of others). For some, this intensified as they became visibly pregnant:

Gemma: "My mum wouldn't even look at me hardly, and like when I was like patting my belly and stuff she was like don't touch your belly and stuff like that" (Age 20, became a mother at age 18, few educational qualifications)

.....

Anna: "I felt really awkward, like when I started getting my bump, I didn't feel like I could show it, you know, I hid it, especially in front of my family cos I was embarrassed. Because they weren't happy about it, I felt embarrassed to be proud that I was pregnant which spoilt it for me. Because I wanted to show off that I was pregnant and proud". (Age 17, became a mother at age 16, few educational qualifications)

.....

Louise: My mum was a bit horrible really, urm, I think she really cared about what other people thought. She was like don't touch your belly and stuff like that; don't make it obvious that you're

pregnant". (Age 16, became a mother at age 16, few educational qualifications)

.....

Chloe: Its hurts more when people close to me judge me. Like my Dad did when I got pregnant with Frankie (daughter). You know he thought that I was just a cheap slapper you know. That I wouldn't be a good Mum. He judged me really bad. (Age 17, became a mother with first child at age 13, few educational qualifications)

The felt shame of others could intensify the more challenging aspects to coping with stigmatisation, especially as highlighted above; when the young women's bodies became physical markers of 'immorality' (McDermott et al, 2004). In effect, the young women had to contend with their own emotions to their changing bodies alongside their family's shame. The literature provides a wealth of information that indicates how pregnancy for women regardless of age can be an emotional and challenging experience (Bailey, 1999; Chase and Rogers 2001; Millar, 2005; Ribbens 1994). Add to this the awareness of their family's shame as their bodies display their pregnant state must be extremely difficult and painful. The women were made to feel embarrassed and shameful of their pregnant state. The felt shame of those close to them was evidenced as the women's mothers asked them not to 'make it obvious' and showed clear signs of discomfort if they 'touched their belly'. This indicates that not only is this potentially a stressful time for young parents, but clearly the families of such young women also struggle with the pervasiveness of the stigma attached to their daughters status.

However, this was not static and families who were damning at the beginning of the research often changed their perceptions and relationships with the women later on in the research study and became more positive and supportive. Where this happened this was significant in that rejection by someone close to them had been lifted. Below, a young

mother describes how the birth of her son became a critical moment that repaired the relationship with her mother.

Emily: She didn't like me being outside when I was pregnant because the neighbours were really talkative. But when he was born she invited the neighbours round (laugh) to come and see him. Me and my mum are best friends now. I've sort of got closer to my mum and my dad since the last interview. (Age 19, became a mother at age 18, few educational qualifications)

Whilst stigma was evidenced within close family relationships, those within the wider community could also contribute towards stigmatisation. Invariably, young mothers are often encountering stigma both within their public lives, as well as what might at first hand be assumed to be a safe space for them to retreat from the effects of stigmatisation – their own homes and family relationships. Goffman discusses the public arena as being a particularly difficult one (Goffman, 1963). One participant's description of encountering direct stigmatisation and abuse in public places highlights this point very well:

Sophie: People who didn't really know me, like people down my street, like friends, I got a lot of abuse in the street.

Researcher: What sort of stuff?

Sophie: I went to pick my little brother up from a disco and they'd be like 'slag', you know. Throwing mud and just stupid things. (Age 17, became a mother at age 14, few educational qualifications)

Another participant comments:

Helen: I was pushing Alex (son), I was walking back home and two teenage lads came up to me and said 'do you think you're rock hard pushing that pushchair, you're only about fifteen!'...he really

wound me up. I was raving and then I just walked on and I started crying to myself.

Researcher: Why did you start crying?

Helen: Because I was angry and when I get angry I get a bit like that. And because I am quite sensitive when it comes to it. But I don't know, it probably made me feel crap as well. (Age 17, became a mother at age 17, few educational qualifications)

It is also the case that young mothers themselves are not exempt from holding and displaying stigmatising and judgmental attitudes themselves. For instance, some of the older mothers within the study attempted to distinguish themselves as 'different' to the younger teenage mothers. There were also differentials built around social class. This 'dis-identification with the group' has been found in other research where young mothers seek to distance themselves from teenage mothers simultaneously whilst condemning 'other' teenage mothers as conforming to common negative stereotypes (Crocker et al, 1998). Chapter four also explored the relevance of MacDonald's and Marsh work within this area, whereby they believed that the young mothers within their study differentiated themselves from the 'bad' mothers in order to preserve personal and family respectability (MacDonald and Marsh 2005).

For instance, field notes for July 2005 contain the following entry.

"At 'Baby Space' today we were waiting in the lobby as the women brought their children in to drop them off at the crèche. Rachel had already dropped her son off and we were chatting as we waited around for everyone else to turn up. We had an interesting discussion around how she felt within the group and how she was finding it difficult making friends. She describes how the age difference between herself and the other mothers (only a couple of years) is creating barriers. I was surprised by this as she didn't

stand out as being significantly younger. On reflection though the women often discuss their age and how old they were when they became pregnant. This appears to be significant and a consensus has possibly emerged surrounding what is a more 'respectable' age to become pregnant during the teenage years than others.

(Field work note, July 2005)

.....

Kirsty: I mean it is a bad thing. I don't agree with it at all, 13, 14, 15 year olds having kids. But I moved out of home when I was seventeen so I grew up really quick. By the time I was eighteen I knew how to budget and I knew how to you know... (Age 19, became a mother at age 19, few educational qualifications)

.....

Claire: It's not nice but I don't think somebody that age should be having that many kids (referring to a 17 year old mother with 3 children). That's my personal opinion. It's like what I said at 'Baby Space' (project), that 12 year old that's pregnant, that's shocking! (Age 21, became a mother at age 19, few educational qualifications)

Factors which either Neutralise or Exacerbate Stigmatisation

The social worlds in which the women maneuver consist of a varied range of social actors who can either neutralise or exacerbate stigmatization. Discussions earlier focused on the young women's own mothers, but other family members could also reinforce the stigma of teenage pregnancy and motherhood. One mother below describes a particularly degrading experience by a member of her boyfriend's family. This person had recently become a mother herself but sought to publicly voice her disapproval of Gemma by using her as an example of how not to lead your life to her own daughter:

Researcher: And what images do you think they give then? What negative stuff then?

Gemma: Urm, just like the way they treat you. Say for instance, his family they were just like really horrible to me, and I just think well if anyone else in their family was expecting a baby I don't think they would be that nasty to them. And I remember his Auntie. She's got a daughter. And when I was pregnant she was having a little party or something for her birthday. And she goes, "Oh yeah, we should take Gemma in there and say "Don't do this, this is not what to do when your eighteen". (Age 22, became a mother at age 18, few educational qualifications)

Certain public spaces left the women particularly vulnerable to the negative judgements of others such as on public transport of which many of the women were heavily reliant. This was a common theme across the sample and most women described the 'looks' they encountered whilst using public transport. As the second participant describes, feelings of embarrassment emerged. She also believed looking younger than her years contributed towards people's negative judgement of her.

Researcher: Can you remember when we previously talked about how some people had an impact upon you like, you were at college and people called you a slag and, you know, and you know, people kept looking at you funny. Do you still feel that's the case, does that still...?

Becky: Yeah. You get old...it's not young people now, it's old people. Especially, because he doesn't like buses. And when I used to go to college I used to have to get on two buses with him. Umm, and he'd cry and you'd get people like (huff) looking at you. (Age 20, became a mother at age 17, few educational qualifications)

Another research participant also commented:

Laura: If I'm on the bus and stuff, because I look younger than I am and everything, they probably think I look about fifteen and stuff and they just give you a dirty look

Researcher: So how does that make you feel?

Laura: I just ignore them, like I just carry on talking to Ellie and stuff. I just think she (daughter) loves me so

Researcher: Do you feel you have to prove yourself?

Laura: Urm, in a way cos sometimes I do get embarrassed like. I think, Ellie! Don't start being naughty cos they'll think that I'm really bad or something... (Age 20, became a mother at age 17, few educational qualifications)

.....

Jade: I'll tell you what is awful. When you're in a doctor's surgery or on a bus and you're baby starts crying and people look at you thinking shut that kid up and there's nothing you can physically do to shut him up (son). And you think everybody is looking at you or judging you. (Age 18, became a mother at age 18, few educational qualifications)

When the women made the transition to motherhood, this new found identity opened up potential encounters with new public spaces that needed consideration (joining mother and toddler groups, baby swimming classes etc.). Offering a shared space in which the young mothers could come together (targeted provision for young mothers) shielded the young mothers from stigmatisation. Whilst provision that was developed for the specific needs of young mothers was often used by the sample in positive terms, most women had encountered more universal provision at certain points in the research process. The quotations below describe the real barriers young mothers face accessing provision that is open to women of all ages. Such encounters were often highly stigmatising for the women

and they voiced how, upon attending, they felt lonely and left out by the 'older' mothers.

*Anna: I go to the Community Centre (mother and toddler group),
But they're all older mums again and they don't really speak to me.*

*Researcher: Why do you not feel like they don't speak to you
then?*

*Anna: Umm, I don't know if it is because I'm younger or if it's just
because ...or maybe they don't want to say something because
I'm younger. Umm, I'm not sure. I do think maybe it is because I'm
young that they're not sure what to say to me. I feel...it's not...it's
quite... I feel quite lonely when I go, I'm sort of sat on my own and
everybody's in their own little groups. And I'm just sat on my own.
And it is quite upsetting. And I do feel quite tearful when I go. But
he needs to be with somebody (child). They can sit in their own
little groups and even turn their backs to me which makes me feel
really upset, umm, because I'd never do that to anybody. I'd never
turn my back to...like turn my chair round and leave that person
sat on their own, umm, even if I didn't want to speak to them. So I
do find that quite hard. (Age 22, became a mother at age 16, few
educational qualifications)*

Another research participant:

*Researcher: Umm, have you joined any mother and toddler
groups?*

*Amy: I did use to. But I don't go anymore, for the simple fact that I
get judged on how old I am. Umm, I didn't see any young people
there! (laugh) - They were all old. You know, they were all older.
No one...no one spoke to me, I was just sat there with Jacob
(son)...just...you know (laugh)*

Researcher: So what do you think people...?

Amy: They think because I'm young that they can't talk to me, because they think that I'm just gonna...they can't handle a conversation with me... It's hard for me to get out nowadays, so... You know I just tend to stay in all time ...that's something that gets me depressed. (Age 18, became a mother at age 16, few educational qualifications)

Another research participant had similar sentiments:

Researcher: You went to 'Sure Start', didn't you?

Louise: Yeah. But like, they were all old people. Not old. But, like, not my age. A lot older than me.

Researcher: Why did it put you off?

Louise: Because they, it's like now as well, you get people looking down on you, especially if you...? As well. Yeah. They just don't think you should have kids, do they, but... Well I only...I didn't go to it, I just...my Mum drove in and, uhh, I just looked in and they was all old. I just said no, I'm off home. (Age 18, became a mother at age 16, few educational qualifications)

.....

Researcher: Have you joined any mother and toddler groups?

Helen: I joined one at Bexton, but they were all older and very clicky so I didn't like it. Everyone was whispering and saying look at the young un and all that. And I'd even had Alex's (son) photo taken when he was about three months old and I didn't go back for them. It was a professional picture as well. They just made me feel right uncomfortable. They just kept looking at me. But I know what I'm like; I just get paranoid, completely paranoid. But I don't know, they just didn't make me feel very good at all. And because Alex was probably a bit young then, three months, I was just sat doing nowt. (Age 17, became a mother at age 17, few educational qualifications)

Another Participant:

Jade: Older mums might judge younger mums. I suppose, older people look down on younger mums. Because they think that they're going to be rubbish, or that they've got no money. If I went to a group where older mums were I'd expect them not to want their kids to play with Billie (son) because I'm a younger mum. (Age 18, became a mother at age 18, few educational qualifications)

Having two children significantly exacerbated the stigmatisation. Much of the discourse surrounding 'reckless teenage mothers' allows tolerance for one mistake and accordingly being awarded an opportunity to 'repair' the damage done by quickly returning to education or employment. However, to make the same 'mistake' twice receives intense condemnation and such disapproval is reinforced within policy frameworks. This is also evidenced through policy focusing upon preventative work with young mothers at risk of second pregnancies (DCSF 2007):

Researcher: Do you feel like you're treated different... not just there, at other places?

Amy: Oh yeah, I'll be treated differently at other places as well. People my age always do, you know, who's got kids, especially two, you know, to...two different fathers, you know.

Researcher: What do you think people assume then?

Amy: A young teenage slag. But I'm not. (laugh) You know. I know just thinking about it back then; I was only pregnant with one baby! (laugh)

Researcher: So has it got worse do you think?

Amy: Yeah. Oh yeah, definitely, because I've got a double push chair with two kids in it. (Age 18, became a mother with first child at 16, few educational qualifications)

.....

Anna: I didn't want to disappoint my family. I didn't want them thinking, oh no, she's got herself in the same situation again. Another baby and she's going to be on her own again.

Researcher: Did you feel people around you would judge you then?

Anna: Maybe other people who never knew me would think 'oh she's got another one on the way', you know. She's only twenty or whatever, I did think that people would think that about me and that's why I was more keen to get married before the baby was born. (Age 19, became a mother with first child at age 16, few educational qualifications)

.....

Chloe: Every time I get on a bus you know with my pushchair, especially since I've got pregnant (second child) all I've heard is whispers. I've had arguments with people on the bus about it because they've said to they're friends and that, 'oh isn't that disgusting, she only looks about eighteen or nineteen and she's got a baby and another one on the way'. And I've said "you don't know me. You don't know the life that I've been through. You don't know how mature I am. You don't know if I'm a good mother. You don't know anything so you can't judge me". (Age 19, became a mother with first child at age 13, few educational qualifications)

Another Participant:

Researcher: So have you joined any mother and toddler groups?

Ella: No not yet. I mean I went to one and it just; everyone just gets in their little groups and stuff. And I think I go in and, because I maybe am young or whatever it's like 'oh look at her, she's got two kids both under two'. I don't know, I think it's just people think it's

wrong having two. (Age 20, became pregnant with first child at age 16, few educational qualifications)

As the women made the transition to motherhood they entered an identity with real social disapproval of which they are acutely aware. This was experienced across and within a range of social sites and over time they seemed to become highly attuned to what people thought of them or why they had perceived themselves to have been treated differently to others. This did not necessarily involve the spoken word – of great explanatory power to the women was the ways in which they described the ‘looks’ they encountered from ‘others’:

Hayley: I notice it more is from the older people, like from old people. They stare at you a lot. (Age 20, became a mother at age 19, few educational qualifications)

.....

Laura: Well, they don't, sometimes it's not what...they don't even say anything. It's just how they look at you, and you...you know. (Age 18, became a mother at age 17, few educational qualifications)

.....

Ruth: I was going to think about you know, going to swimming and stuff, but they are all older people and I do...

Researcher: So what was it about this swimming, ante natal class that really put you off? The older women?

Ruth: It was just that... because of... They think they're better than you and you know...

Researcher: Feel like you're judged then?

Ruth: Yeah. Really. I don't know it's just... I don't care what people think of me it's just that... the looks I, and it's a bit you know, and not feeling myself. Where I can be myself you know

so... (Age 16, became a mother at age 16, no educational qualifications)

Despite the 'tough exterior' the women often tried to display, more open discussions during interviews highlighted the hurtful and painful social dimensions of felt stigma (I would describe this as the rare episodes when the women 'let their guard down' with regards to how other people's comments actually bothered them). When discussing such issues some of the women often came across as quite vulnerable. Especially in some situations such as maternity units, doctor's surgery or buses. Those feelings whilst in hospital after giving birth and dealing with felt stigma in such an environment must have been particularly hard for the women not to internalise. It feels as if the women often hide the emotions (to themselves and others) that go hand in hand with such painful experiences. These unresolved emotions have repercussions on how the women feel about themselves and how they handle themselves in similar encounters. A relationship between painful reflections and feelings of resentment later on in the study were apparent in some cases:

Gemma: But you still remember how they treated you back then and it makes you kind of bitter. (Age 20, became a mother at age 18, few educational qualifications)

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Becky: It makes you feel ill when you think about what it was like then. (Age 22, became a mother at age 17, few educational qualifications)

Maternity wards were environments which were often mentioned where the women felt extremely vulnerable at what was already quite a difficult and emotional time. The need to address this is crucial, especially when we consider the risk of post-natal depression and the strong emotions the women will be encountering after such an intense experience:

Researcher: What was it like on the maternity ward? You know after you gave birth. What was that like?

Amy: (laugh) I just kept in my little cube, my little cubicle. I just kept quiet. I always had my curtains shut.

Researcher: Did you? Why?

Amy: Because the women, the women in the same room as me, but they were all...older, y'know. (Age 18, became a mother with first child at age 16, few educational qualifications)

Another research participant:

Researcher: Did you go onto the maternity ward?

Ruth: I didn't really like that much. Cos I was in with like quite old women as well.

Researcher: So how did that make you feel? What was it about that...?

Ruth: I just closed, I closed myself off. With my curtains really.

Researcher: Yeah, so you felt like you had to close your curtains? Why was that?

Ruth: Just that I didn't really feel that comfortable. Cos I was young, I think they were looking down at me sometimes. (Age 18, became a mother at age 16, no educational qualifications)

However, provision provided in a non-judgemental and respectful way can counteract such negative encounters. For example, the women also spoke of some positive encounters with health care professionals. Such encounters provided recognition that they were 'doing a good job' and instilled in them the confidence to believe in their capabilities to be 'good mothers'

Gemma: "She just like didn't judge me or anything. She was just really nice. Sort of like after I had her and everything she sort of

gave me confidence that I was a really good mum. She was always saying like she was proud of me and you know like you know, I've done really well and I'm a good mum and everything" (Age 20, became a mother at age 18, few educational qualifications)

A young mother discusses what she perceives to be the advantages of attending a support group for young pregnant women:

Hayley: I suppose you benefit from not being judged. You're not sort of sitting there and thinking. You're sat there and you're comfortable because its other young people and you're not feeling you're getting judged so you're concentrating on what they're (practitioners) saying. (Age 20, became a mother at age 19, few educational qualifications)

Other factors such as social class and ethnicity could influence the experience of stigmatisation. Whilst the demographics of the sample were predominantly white reflecting the characteristics of the local area in which the research took place, the participant below describes the added stigma (and racism) associated with her ethnicity:

Researcher: So you talked about how people make assumptions and stuff. Do you feel like, people judge you then, and how ...how do you feel like you might be judged if that's the case?

Louise: Yeah. The other thing is, because we're brown as well, and if I'm not with Mark (white father of the child), they...they assume...that...The other day at work, this was well funny, I was talking about Mathew (son), and the woman says to...she went 'Oh haven't you got any sisters that are married with kids that can look after him?' And I was like, you what. 'Cos I'm Asian?! I was thinking you stupid cow. And people just look at you and they must think that we're all, like, Muslims or summat.... It does my head in. And they always look... peer in the pram.

Mark (father of child/boyfriend): You can see them looking to see what he's (son) like can't you?

Louise: Yeah. When we were getting on bus the other day. Well when I was getting on the bus. This woman was 'oh can I have a look'? Probably to see if he's brown or white or whatever... It does my head in.

Researcher: So how does it...how do you deal with that? How does...you know, does it have an impact upon on how you feel or anything?

Louise: It just annoys me

Researcher: And do you like deal with it in a certain way, or do you just...

Louise: I just come home and moan to Mark (boyfriend).

Researcher: Does it make it harder being a mum sometimes, do you think? Because people judge you and make assumptions?

Louise: Yeah. Cos...if I were...if I didn't have Mathew (son) because like before when people used to stare at me just because of my colour, I used to just say summat. But you can't now can you? Because if you shout or anything then he (son) knows and he gets stressed, doesn't he. He doesn't like shouting.

Mark: There was a woman in town, weren't there? She walked into the pram and, she (Louise) says 'watch where you're going'. So this man says 'why don't you talk fucking English'!

Louise: That did my head in, she walked into the pram.

Mark: ...all she (Louise) says was "Watch where you're going" and he says "Why don't you talk fucking English".

Louise: It just winds me up cos it's like, especially because I've grown up in Leighton (large multi-cultural city in the north of

England), nobody's ever said anything to me in Leighton. And I don't think they would because it's all different, different races, yeah. But here, you don't see any...well you do now...there's a few more colours isn't there, but... it's full of whites! (Age 18, became a mother at age 16, few educational qualifications)

The majority of the sample provided background information indicating that they came from lower socio-economic backgrounds often associated with teenage pregnancy. However, this was not always the case and three out of the nineteen women defined themselves as middleclass and becoming pregnant was a real shock to what they assumed their transition to adulthood would entail. The quotation below draws on the differing perceptions of teenage pregnancy which seem to be linked to social class:

Emily: I never thought I'd get pregnant at that age so... I was devastated when I found out. I wasn't brought up to be pregnant at eighteen, well, my parents are not like that. My Mum didn't have me until she was married with my Dad. My Dad was quite old when he had me and they've always been quite a respectable couple and always brought me up really well, and I didn't expect to be pregnant at eighteen at all and I don't think they had. I knew that they would be disappointed in me but I was disappointed in myself. Because I knew that I wasn't brought up to be pregnant that young. (Age 18, became a mother at age 18, few educational qualifications)

Consequences of Stigma

The consequences of stigmatisation can seem on the one hand seem rather insignificant through the accounts of young mothers 'not allowing others to bother them'. However, uncovering clearly painful experiences and the measures young mothers employed to 'hide away' (maternity wards), unearths their vulnerability and sensitivity to their stigmatised identity. It was striking how the tensions within narratives seem to

contradict one another and much analysis had to delve into the less tangible aspects and consequences of stigmatisation. My analysis has led to the conclusion that the affects of stigmatisation are much greater than we have acknowledged and this has partly been due to the difficulties deciphering complex and contradictory narratives.

Young mothers are felt to hold a stigmatising identity but perceive this to be 'wrong'. Yet it can impact upon their self-esteem and confidence and influence their ability to recognise themselves as a 'good mother'. The following quotation highlights this difficulty and raises questions as to how the women negotiate this tricky situation. The complication is that, whilst being subjected to stigma, they are also aware that they have to 'prove to 'others' that they conform to conventional norms that surround motherhood.

Kirsty: I Think it makes you feel uncomfortable ...being able to maybe breastfeed in public, or, umm. I think it takes that confidence away because you, that you're not meant to do that sort of thing. Umm, and like a lot of young parents maybe don't breastfeed because they don't think that they should maybe be doing that at that age. (Age 19, became a mother at age 19, few educational qualifications)

Indeed, the 'gaze' of 'others' acts to constrain parenting at times:

Becky: I don't like telling him off in front of people. Umm, because I think people would be like, oh look at her, especially with me being younger, they'll notice me more. And so I feel like I can't be myself, even now, umm, with him being at an age where he's into kicking and things like that, I don't feel like I can...shout at him. And people look at me and I come away feeling that I'm a bad person because I don't feel like I can... actually be myself. (Age 20, became a mother at age 17, few educational qualifications)

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Anna: I'm very aware of what I'm meant to do and what I'm not meant to do. Umm, because I don't like smacking him anyway... I feel terrible anyway when I do it. But I do completely think... more about what people are thinking about me, than actually disciplining him. (Age 19, became a mother at age 16, few educational qualifications)

The need for the young mothers to 'prove' themselves was a persistent theme that ran not only throughout the sample, but many of the women's narratives through the time frame of the research. This highlights the value of qualitative longitudinal research and how it enables participants not only to reflect upon their past but how their narratives, reflections and ambitions change through time:

Researcher: So it doesn't make you feel like you have to prove yourself, or does it make you feel...

Ella: Not any more, no.

Researcher: Do you feel like you had to prove yourself at one point?

Ella: Yeah but I don't anymore, because it's my life, not theirs. You know. I don't care what anyone thinks anymore. (Age 22, became a mother at age 16, few educational qualifications)

(Interview two)

Another research participant:

Researcher: Umm, do you feel like you have to prove yourself then?

Louise: I did at first, I don't know. I don't care now. I've got over it. Probably because I've turned 18 now. I don't care anymore. Umm, but before I did, yeah.

Researcher: In what ways did you think you had to prove yourself? How did you...

Louise: I...cos I were young, and I looked...well I still do look young, but I'd try and make myself look older, or, I...I don't know.

Researcher: You've grown up that bit more, and you've kind of...

Louise: Yeah. I don't know. It's weird. You just...now I just think bollocks to 'em. Just let them think what they like. But if you think about it, in olden days there were loads of people having kids at like sixteen, seventeen, so they can't say anything.

Researcher: So what do you think has changed then?

Louise: I don't know. Umm. (pause) I don't know. Cos it....people want to live a bit first now don't they. (Age 18, became a mother at age 16, few educational qualifications)

(Interview two)

.....

Laura: I was shy. I lacked a lot of confidence. I think I was quite obnoxious actually, the fact that I'd get in there first and I'd be like you know, "I don't care what you think because I'm me". It was my defence. You know, "I don't care what you think". My wall came up. And I didn't want that to come through with Ellie (daughter). But now it's like I'm more confident and now she's got more confidence. (Age 20, became a mother at age 17, few educational qualifications)

(Interview two)

Whilst the participant below states that she did not necessarily feel the need to prove herself, she is aware that she *has* proved people wrong:

Chloe: I don't feel like I have to prove myself but it's nice to know that I have. I don't see why I have to prove myself to anybody. I am who I am and if you don't like it then I don't care. You know, you can go away. I don't want you in my life. That's why I fell out with my Dad. I fell out with my Dad for a long long time about it. You

know, he thought that I was doing everything wrong and now I've proved him wrong. And he will admit that but I didn't set out to prove him wrong, I just did. (Age 19, became a mother with her first child at age 13, few educational qualifications)

Powerful 'others' (such as doctors, midwives, teachers, benefit/housing officials) can contribute to the social isolation and withdrawal of young mothers who are in need of their support. Powerful 'others' holding stigmatising attitudes only contributes to the difficulties of engaging vulnerable young women who may already have built mistrust of services/provision from their adverse biographies prior to pregnancy. The following participant demonstrates the barriers professionals can create at crucial points in people's lives. Thought needs to be given to the potential consequences of such action, especially when, as the forthcoming account discusses, depression is a significant factor in the women's lives:

Researcher: So, what were the midwives like?

Amy: Oh yeah, umm, one of them though, it...I think she was like the...the boss, the midwife, but she was so...horrible!

Researcher: In what way? How did she talk to you?

Amy: Like I was a kid. And that does my head in. You know, just because, you know, I know I'm seventeen, but, she spoke to me like I was a kid.

Researcher: So do you think she treated you like that because you were younger?

Amy: Yeah. Yeah. It makes me sick. You know, it makes me feel...sick...They shouldn't...they shouldn't do that. It's like I went to the doctors a couple a weeks ago, about my depression. Do you know what she turned around and said to me?

Amy: I didn't even mention the kids... I said it was everything else, you know, about my depression. And she turned around and said

to me, "Well I think, because you're young, because you're seventeen, you're not coping with having two kids". And I couldn't believe it. I thought to myself, if I was thirty years old and went in there, and was depressed, either she would have...put me on them pills, which I don't want to go on anyway, or, you know, put me in contact with a counsellor or summat. I did see, she did turn around and say to me, "I'm not putting you on any pills", and I says, I don't want them, I don't want to be put on any pills, I want to speak to someone, you know.. But, I can't believe she...I haven't been back there since.

Researcher: So, why haven't you been back there since?

Amy: Because of what she said. That I'm not coping because I've got two kids. It's got nothing to do with kids, if it wasn't for my kids, you know, I wouldn't be able to cope! (Age 18, became a mother with her first child at age 16, few educational qualifications)

.....

Ruth: One of the midwives, I think she's a bit stuck up... cos she said to me... cos I'm not really good about you know benefits or stuff like that. She said 'have you been thinking about you know work and stuff?' and I told her I was working. And she just said that I haven't got a clue or anything you know...

Researcher: Did she say that to you?

Ruth: Yeah

Researcher: So then how... how did you feel...?

Ruth: I felt like, I don't know, like she was... She was judging me you know, and I thought 'Right little ... you know'. She just belittled me... (Age 16, became a mother at age 16, no educational qualifications)

.....

Jessie: When I was having Evie (daughter), I felt like my midwife was mad at me. Cos she was so strict and like "do this". And I felt she was mad at me because I was young. I think people get angry when young people get pregnant. (Age 20, became a mother at age 15, currently studying at undergraduate level)

In direct opposition to the image of a 'tough exterior', vulnerability can be drawn out that exemplifies the more unnoticed, intangible and painful consequences of stigmatisation. One young mother discusses how after a certain amount of time, and after hearing the 'failings' of 'teenage mothers' so often, it becomes difficult not to take such representations on board and internalise them as if there must be an element of truth:

Researcher: Does it hurt when you hear stuff like that then?

Claire: Yeah, of course it does, because it makes you actually think that. I mean that, Graham (ex-partner) has said stuff like that so many times, and it makes you actually think, you know, 'Well am I?'

Researcher: So do you find it difficult sometimes to feel good about yourself?

Claire: Yeah, like, I don't know, if I can't get Max (son) something that I want, and he's (ex-partner) been slagging me off and that. And it makes you feel like you're not worth being a mother, and you're not a good mother. It starts like hitting home doesn't it? When they keep repeating it to you. (Age 21, became a mother at age 19, few educational qualifications)

.....

Chloe: My Nanna. When I was pregnant with Frankie (daughter), she said you're never going to cope. Just sly little digs. About childbirth and how to be a Mum and stuff.

Researcher: How does that make you feel then?

Chloe: Like shit to be honest (Age 17, became a mother with her first child at age 13, few educational qualifications)

The consequences of stigmatisation do not just manifest themselves by young mothers internalising criticisms which directly impact upon their subjectivity, but can also have material consequences too. The woman below describes how she felt she was being judged at college and how this influenced her decision to drop out from education. Such experiences have consequences that are multifaceted. Stigma can impact on subjectivity and dis-engagement with education, and when students drop out that can affect their chances of social mobility. Such a process can also produce further social isolation which can then lead to further stigmatisation.

Amy: Oh yeah, I did go back to college. Yeah. I... I went to go do a manicure and pedicure course. But, I got judged on that because I was pregnant, and that I had a child already. The teachers and stuff, so I just left, I got bored of it.

Researcher: So what happened there then? How were they judging you? What were they doing?

Amy: Oh...it's like...they just made little comments, umm I can't remember what comments, but there was, like, little nasty comments about... like look at her she's already got one (child) and another one on the way. (Age 18, became a mother with her first child at age 16, few educational qualifications)

Another woman describes her experience of stigma within the work place:

Emily: I don't like it at work, when they're talking about kids and I'll be friendly and I'll say "oh yeah, my little boy". I can't remember what ward I was on but she turned round to me and said "How old are you?" and I said I was nineteen and she said "what? You're only a kid yourself". And I thought you patronising bitch! You know, I didn't say anything, but I didn't talk to anyone for the rest of the day. That was one of the nurses.

Researcher: How does that make you feel?

Emily: Pissed off. It doesn't make me feel self-conscious or self-aware, it just makes me pissed-off that they're judging me. They don't know, obviously they don't know. People think, if kids have kids, they're not looking after them. They're not clothing them nice, they're not feeding them right or anything they're just you know, they're fashion accessories and it's not the case at all. (Age 19, became a mother at age 18, few educational qualifications)

How the Experience of Stigmatisation Changes over Time

Young mothers do not encounter stigmatisation as a one off event, but as an experience it should be viewed as a process that is open to change over time. Indeed, stigma is not a static or a fixed attribute, but rather is best thought of as fluid and dynamic. At its very basic, stigma concerns the relationship between human interactions and the *process* of devaluation. Holistically, how the young mother's negotiated stigma through time cannot be viewed alone but has to be placed in the context of wider changes and continuities that the young women encountered over time. The following themes seem to be highly significant and are explored in the following chapter as critical moments within the women's lives, which through their very nature impacted upon the women's sense of self:

Transitions into and Through the Labour Market/Education

For many of the women, as the research progressed, achievements in regards to education or employment seemed very important in regards to 'proving' they had negotiated some of the stigmatising discourses associated with teenage pregnancy and motherhood. Such achievements offered them a sense of pride. Having achieved qualifications or taken up employment seemed to provide evidence to 'others' who may judge them negatively, and provided a positive affirmation that they were successful and not associated with the "scrounger" expectations associated with

teen pregnancy. Proving to others, themselves and their children that they were not the stereotypical teenage mum was a reoccurring theme throughout the narratives. Getting qualifications or securing employment enabled them to prove to themselves and to others (including their own children), that they are “set apart” from, and different from, the stereotypical teen mum. Tensions must be difficult to manage as they fought to reinforce their good mother identity whilst also having to reassure themselves that such stereotypes do not hold ‘truth’ at least to themselves. Of particular importance was the ways in which the women spoke of their children offering a great sense of pride in themselves as mothers:

Helen: I've brought him up on my own. Everything that he does, he's got, I've done for him. And it's just like your mine, and I've done that. (Age 17, became a mother at age 17, few educational qualifications)

.....

Sophie: Just because someone has a child when they're young doesn't mean that they're going to end up not doing anything with they're life. Cos all you've got to do is meet him (son).

Researcher: So do you kinda feel like really proud of Josh (son)?

Sophie: Yeah, I mean Josh's reading levels are way higher than any child in his class. You know, he went to see his headmistress on one of the first days back because he's reading the books that the older kids are reading, not just the year above him like a few years above. So he can read like anything. And his teacher actually came out to me. And she was just saying "I've never met a child that can read like that at his age". And I just think I must have done something right. And I was on my own (single parent) with him for so long. (Age 21, became a mother at age 14, few educational qualifications)

'Moral' Mothers

Changing family forms was pronounced within the sample, sometimes at surprisingly quick speeds. Despite such changes in circumstances, what was consistent was the importance the women placed upon obtaining or aspiring to the conventional family form. From the outset, the majority of the sample aspired to being part of a "conventional family" (married couple with children (plural) and aspired towards this even when they had not (yet) achieved it. As the research progressed, many of the women broke up with the father of their child/ren but many went on later to meet someone else whom they went on to marry. Even where marriage did not take place immediately they formed "serious relationships" where marriage was still an aspiration. This form of being "wedded" to the 'ideal' offered them further evidence that they were 'moral' mothers. It further distanced them from the images of promiscuous women whom resigned to being part of 'fatherless families' so often assumed by the stereotype of "teenage mothers". This also served to alter their maternal identity and subjective sense of self. Below, Anna discusses the importance of her maternal identity and how this encompassed the notion of her 'ideal family' through time. Comparing research encounters at different points in time allows us to witness how this has been of great importance to her maternal identity, and also her presentation of a 'moral self':

When I first interviewed Anna I remember coming out of the interview and feeling worried about her as she appeared depressed and was struggling in a one bedroom flat waiting to be allocated permanent housing. I remember how she felt lonely, isolated and set apart from other mums because of her status as a teen mum but also her status as a single parent. But by the closing periods of the fieldwork, the distance travelled for Anna from that first interview was immense. Because of her aspirations for "her family" she "found someone" with whom to "settle down" and was so enabled to "complete her family". Helping Anna put together her 'digital story' was an enjoyable process as she took great delight in

sharing and discussing her wedding photos as well as her experience of having another child. The importance of this was evident through an excited 're-telling' of her critical moments (having children and meeting her husband), and how her life had "come together" to form what was always important to her – 'her own family'. I was surprised by how much effort and thought she had put into this 'digital story' – it was clearly very meaningful to her. Anna titled her story 'From the Heart':

(Fieldwork notes – Digital Storytelling)

The following is a section taken from the audio recording of her digital story:

"...Ethan asked me to marry him in July 2005, I was so happy, I couldn't believe how my life had changed. Noah (son) had the perfect Dad, someone who loved him like a Dad should love their son... My wedding was perfect, just how I had imagined it to be when I was a little girl. As I said those vows to my man it felt so right and I really meant every word. The smile on my face was so big that day...After the excitement of our wedding, we had our baby to prepare for... at 5 am, Saturday the 21st October 2006 I went into labour with my second son and gave birth to him after 17 hours and twenty six minutes... and that was another one of the best moments of my life, I was married to a great husband and had two perfect little boys who I love very much and they make me feel that I may only be twenty one but I have the perfect family."

(Audio recording from Anna's 'Digital Story')

'Maturity' and a Growing Confidence to 'Mother'

The women often discussed how the transition to motherhood, alongside the passing of time, had made them more mature and/or grown up. This 'maturity' obviously offered a range of 'social skills' to respond or deal with stigma. However, it also needs to be recognised that, as time passed

and the women became/looked older, the stigma was perceived to have diminished. Indeed 'looking older than ones years' (or indeed 'younger than ones years') seemed to make a difference to how the women believed others perceived them. This reinforces the conceptualisation of embodiment encompassing the physical body as well as subjective feelings and thoughts that influence behaviour. Feeling more mature, alongside looking 'older' was significant. As was discussed through the case histories, 'maturity' was used as a metaphor that best reflected the change processes that the women had felt at different stages in their maternal careers and how this encompassed a range of subjectivities.

Chloe: 'I'm a lot more responsible. People have said I've grown up a lot, I'm more mature now but you've got to haven't you? I feel a lot more sensible.' (Age 19, became a mother with her first child at age 13, few educational qualifications)

(Interview two)

Reflections and Re-evaluations of Motherhood

Reflections and re-evaluations were key to how the women contextualised stigma. For some participants this was particularly noticeable in that they could (and did) clearly reflect on their achievements and how motherhood had made them the women they were. A lot of the young women discussed the experience of motherhood as making them "stronger". Motherhood had made them empowered to deal with potential problems. However, reflecting upon their past could also entail re-evaluating painful and difficult experiences in relation to stigma. Fieldwork notes especially highlighted this but it was also apparent from the interviews. They found it difficult to talk about and conceptualise stigma. After all, to do might serve to undermine the coping strategy they had employed of 'not letting what others thought bothers them'.

I can't seem to understand why the women are providing so many contradictions with regards to stigma. On the one hand the women come together and discuss the ways in which they encounter judgmental and stigmatising attitudes but brush over this as if it fails to bother them as they so often state. However, they also discuss occasions whereby they have been hurt and it clearly does bother them. During many of the interviews so far I have listened to the women's narratives that consist of two opposing stories' – one that highlights their strength in being able to 'ignore' stigma, and another in which the women clearly are hurt and affected. Often when probed it is something they once again prefer to wash over as if it is inconsequential. Despite probing Ruth today on occasions that were hurtful it was as if she had built a barrier in being able to be openly honest about her feelings with regards to stigma and how others can indeed affect her. It feels frustrating that this is clearly an issue but one that is censored to a certain degree across the sample.

(Field-work notes – taken after interview with Ruth, 2008)

It is difficult to not couch the experience of stigmatisation in the ways young mothers perceive their overall status as 'teenage mothers' over time. Whilst the women often defended their status as teen mums, as the research progressed and the women became older they often reflected on the difficulties of being a young parent. This was often expressed in terms of their new found 'maturity'. However, the transition to motherhood is not quite so black and white in the sense that motherhood also steered them in a positive direction and contributed to their positive sense of self. This sometimes spurred them to return to education or stop taking drugs/alcohol etc. Teenage pregnancy is also often discussed in a positive way through the women's narratives - making them 'stronger' individuals.

Conclusion

The opening of this chapter demonstrated how teenage mothers are represented as 'bad' mothers. The empirical findings from this thesis sought to emphasise the difficulties the women faced negotiating motherhood within this space. In a similar vein to the wider literature, being perceived as a 'bad' mother is something the women sought to counteract (Mitchell and Greene 2002; Phoenix 1991; Hirst 2006; McDermott et al 2004). However, this was not an easy task for the women. Teenage pregnancy is regulated through public and institutional discourse, and young working class women have become subjected to the power and regulation of such discourses. Resistance against cultural discourses; of what is so often taken as common sense 'good mothering', involves complex psychological processes. This is because resistance would involve both being perceived by others as a 'bad mother' and internalising this depiction and feeling like a 'bad mother'. Hughes (2002) reminds us of the complex process at play when we consider the more subtle interplay between agency and structure: "as subjects we have agency to act in ways that we think appropriate. Yet the gaze of the other does work to regulate and discipline us" (Hughes 2002, p.12). Working class women (especially working class mothers) are consistently gazed upon and surveillance has become an accepted common practice which only intensifies subjectivities (Gillies 2007). As chapter one demonstrated this is especially acute for young mothers who are subjected to the TPS and other multi-agency targeted policies directed towards them (SEU 1999b).

Considering the dominant representation of teenage mums as 'bad' mothers, one of the main questions posed at the start of this chapter was how young mothers discuss the moral dilemma of being a teenage mother, and repair what Goffman would refer to as a spoiled identity (Goffman, 1963). Analysis of the data produced through QLR allowed for a more detailed exploration of stigmatisation, both as an experience negotiated across the sample, and also through time. Findings have

offered an insight into a whole range of aspects to the experience of stigmatisation; including how the mothers perceive stigma, how they respond and negotiate their way through it, and what the consequences of these processes are.

How the mothers perceived and responded to stigma was varied, and dependent upon changing circumstances and biographical accounts. It was clear however that both formal and informal social networks could either significantly neutralise or exacerbate stigmatisation. For instance, family members could provide a protective barrier to stigmatisation, instilling in the mothers a sense of confidence that they are 'good' mothers as could formal support through practitioners/professionals. However, we have seen how this was not always the case, with family relationships open to change over time and formal support and encounters with 'powerful others' being extremely damaging and stigmatising. These stigmatising encounters only reinforce the contemporary relevance of work such as Goffman. His work has been instrumental in helping us understand the processes whereby society punishes and condemns young mums using the idea of a tainted individual. According to Goffman those individuals who stigmatise teenage mothers believe them to be "thoroughly bad, or dangerous, or weak... reduced in our minds from a whole and usual person to a discounted one." (Goffman, 1963). Such conceptualisations hold contemporary relevance especially when put in the context of the contemporary power relations within young mothers lives.

Another important point to consider is whilst stigma could work in subtle ways, it is a powerful phenomenon; being internalised affecting young mother's subjectivity, and also affecting their material circumstances and access to provision. In many ways, it can be described as a hidden problem - it can be difficult to uncover due to the complex and contradictory narratives young mothers draw upon. We have seen how one of the coping strategies young women employ is to draw upon a discourse of how it 'doesn't bother them'. These subtle, but powerful and contradictory accounts in regards to stigma are insightful. During the early

stages of the research young women presented contradictory accounts about “not being bothered” by the judgements of others yet still clearly feeling the impact of condemnatory behaviour in public spaces. Further analysis also uncovered the more painful consequences of stigma by momentarily provoking feelings of worthlessness, anger, shame, resentment and possibly longer-term depression associated with low self-efficacy.

It is also noteworthy that there was widespread reporting of depression across the sample. This often resulted in medical treatment mainly through prescribing anti-depressants. Yet this is, at least partly attributable to the social identity of being a ‘mum’ (but note – not necessarily a teen mum). Research has pointed to depression being an indicator of stigmatisation and young mothers have been shown to be particularly at risk of post-natal depression in particular (Ermisch and Pevalin 2003). The young mothers within this study often openly discussed the experience of depression. However, whilst it would be inappropriate to assume that depression was a direct consequence of stigmatisation, it is definitely an area worthy of further investigation. From the women’s narratives, it is clear that they often go through particularly difficult times (such as depression) which may compound or contribute to the patterns of social disapproval they encounter.

Stigma, as a dimension to social exclusion is often neglected. A further crucial, but also often neglected finding was the way in which the stigma associated with teenage pregnancy overlaps with other forms of inequality such as social class and ethnicity. Further work needs to explore this dimension in more depth as it warrants a thorough understanding in order for policy to respond appropriately and sensitively to painful and hurtful experiences. As we have seen, young mothers do not experience stigma as a one off event, but it persists over time in various guises and is relational with a range of key domains in young mother’s lives such as the material/economic and social domains, and the interplay with the women’s maternal career and self-concept.

As has been highlighted, young mothers have to contend with a range of emotions that impinge upon their subjectivity; self-doubt, desire to succeed, proving they are 'good' mothers and the effects of internalising the criticisms of others to name a few. Relatively little research focuses on the more intricate details regarding the stigma young mothers encounter. Where it does, it is often referred to in passing through wider research questions and objectives. The findings from this thesis have sought to address this gap in knowledge by providing a valuable insight into the process of stigmatisation and the consequent feelings young mothers can experience.

Chapter Five:

Contrasting Case-Histories; Exploring Depth, Detail and Diversity

This chapter concludes the empirical findings by drawing upon two contrasting case-histories. These case-histories provide a detailed illustration of the key themes that have been previously explored within chapters three and four. It starts with a brief description of the perceived advantages of the case study method of analysing data from QLR data before describing two contrasting cases in some detail. The analysis of these two cases is then discussed with a focus on the four main research questions being explored in the thesis:

- How can we best understand “teenage pregnancy” and “motherhood” as the dynamic development of a “maternal career”?
- What are the other main domains which interact with “motherhood” within the lived experience of the sample? Here the focus will be upon the interplay between:
 - economic-material factors including, housing, benefits, and involvement in (or dis-involvement from) education, employment or training
 - Social network factors including informal networks with the participants own mother, father and other family members, relationships with partners, and more formal patterns of social support offered by advisors or other professionals or project workers;

- Can we identify “critical moments” in these two domains and what can we learn about how these occur and interact?
- How do these strands of development (and any associated “critical moments”) interact and how do they impact upon the emotional development of the young woman in terms of her concept of “self”, associated feelings of self-esteem and self-confidence, and notions of self efficacy in terms of her feelings about being able to take charge of events in her own life, and build positively towards a planned future?

The Value of Case Histories

When exploring the literature on case studies, Thomson’s work seemed most relevant and was drawn upon to provide both direction and a framework (Thomson 2009, Thomson 2007). Thomson’s work draws on qualitative longitudinal case histories to examine the connection between the biographical and the social/political context (Thomson 2009). Accessing the social through the individual (and through case histories) is integral to Thomson’s approach. She also argues that detailed case histories can provide a unique type of insight to social science and social policy research. She argues that “by engaging in the detail of ... contrasting lives I will capture something of the character and feel of contemporary youth that goes beyond and beneath what is possible when working on a larger canvas...a focus on the particular enables insight into the complex interaction between psychological and social factors, over time” (Thomson 2009, p.3).

Access to data from longitudinal qualitative methods (LQM) allows for analysis initially to be “diachronic” (examining data across time) rather than the more usual “synchronic” analysis (comparison of aspects of cases at the same point in time) more typical of data analysis in the social sciences. Diachronic analysis is the basis of this chapter as it follows

individual narratives (and the themes that developed from these stories) over time. Utilizing detailed case histories has been valuable to the data produced overall as it not only allows us to tap into the multifaceted nature of young people's lives, but it also allows us to explore in more depth the complex and deep data set that longitudinal research can produce. It is important to note that exploring case histories is more than simply a chronological account of change through time. As Thomson states, it is: "an exploration of how the individual is involved in creating that change, in specific temporal and social context. It gets away from a simple before-and-after or cause-and-effect model of behavioural change and points towards a more dynamic interplay of timing, resources, and resourcefulness" (Thomson 2007, P. 578).

Bertaux and Delacroix highlight the role that life history methods can play in uncovering the cultural meanings and changings in *social relations* rather than individuals or groups:

"A single life story, although it may make fascinating hearing and reading, although it may bring to the mind of the researcher many hypotheses about how this or that social world actually functions, needs to be supplemented by other life stories, or by other kinds of materials in order to stand as sociologically relevant 'data'. Five life stories of individuals not connected to each other constitutes five separate pieces, perhaps five gems, but with no cumulative power unless they are from the same social world" (Bertaux and Delacroix 2000, p.74)

Through the use of the two case studies in this chapter, we are attempting to reveal the ways in which the social world of teenage pregnancy and motherhood in the early twenty-first century in Northern England is socially constructed in the interplay between social economic structures and the active struggles of young mothers for control over their own destinies.

Case History One:

Sophie's Case History - the Emotional Dimensions of a Stigmatized Identity

The following case history highlights not only descriptive changes to have taken place over time in regards to housing, relationships and education but also how the stigma attached to teenage pregnancy and motherhood changes through time as do the various strategies that are employed to deal with this.

Interview One – 2004 (Age 17)

I first met Sophie when I interviewed her in a ground floor flat (within a six story block) she had recently been allocated through a local housing association. This was a permanent tenancy of a two bedroom flat in social housing. Sophie was a single parent and lived independently with her son who was approximately two years old. However, whilst Sophie had been eagerly awaiting independent housing for some time she was unhappy with her accommodation. She felt unsafe due to disturbances within the block of flats which often involved violence (tenants fighting outside) and domestic violence occurring within the flat next door. There were also issues around substance misuse (drug raids alongside tenants' overtly using drugs such as cannabis). Sophie also felt she was placed too far away from her close family and friends who were her main source of support. She eagerly wanted to be re-housed so she was closer to her parents with whom she had a good relationship. This first interview was intensive in the sense that it covered a wide range of issues that were very emotional for her. She described a range of difficult experiences she had to deal with prior to the interview.

Prominent to Sophie's story of pregnancy and motherhood was the age at which she became pregnant (14) and her consequent school experience.

The way she felt she was treated by her teachers was clearly a difficult experience for Sophie and she reflects upon the negative consequences and feelings this evokes/d.

Sophie: ...and then school, oh god, when I left school I think there was only three or four teachers who actually spoke to me. I failed my English exam because my teacher wouldn't speak to me

Researcher: ...How does it like have an impact on your feelings you know. How did it make you feel about being pregnant?

Sophie: Yeah, I use to think something that is so beautiful and most people do it and people have got such a problem with it

The emotional responses that developed from what Sophie describes as rejection from her school environment are hard felt and as will be discovered, seem to be persistent through time.

Researcher: What would you describe as the most important things are about being a Mum?

Sophie: Obviously the way I was brought up (two parent household) is how I want to bring him up. But it changes obviously because I'm on my own. I just think, I can do it myself, prove to everyone I can do it because everyone thought I would fail drastically. I'll prove them all wrong.

A prominent issue for Sophie is how she believes the father of her child provides little support. This relationship has broken down. Not only does she describe this relationship as unsupportive but regrets ever having had a relationship with him. Sophie doesn't hide the negative feelings she

feels towards the father of her child and you can sense these are strongly felt. This is especially in regards to how she feels it is unfair that he has failed to take on his parental responsibilities whilst she feels she has had no choice but to do so and her life has changed dramatically as a consequence. Sophie openly discussed her disapproval of how he has failed to 'grow up' and expects more of him in regards to being a father to their son.

During the interview more formal mechanisms of support for her were discussed where it is clear that she received professional support at the time of the interview through an intensive Connexions 'Personal Advisor'. She regards this relationship as very positive and useful not only in regards to issues such as housing rights and benefits advice, but also someone whom she could trust and felt comfortable with to discuss her problems. Unfortunately this relationship was due to come to a close and Sophie felt unhappy about this. She understood the reason for this as Sophie was approaching the age at which Connexions responsibilities for her would normally come to an end and, furthermore, her PA was changing jobs and was closing down her case load. This situation was also made easier through the support of another practitioner whom she had recently got to know through a project titled 'Baby Space'. This project aimed to support the needs of teenage parents within the locality in a group setting (see methodology chapter).

Sophie discusses how it can be difficult at times being open with people about having a child at a young age (14). Some social situations were particularly difficult to negotiate. For instance, even though she aspires to have the 'conventional family', Sophie recalls a situation that made her feel rejected and consequently doubts her prospects of ever 'settling down' with anyone else. This situation involved a young man in whom she was interested. But he had publicly humiliated her when finding out she had a young child (he showed an interest in her but upon finding out she had a child voiced how he 'wouldn't go anywhere near her' in front of Sophie and her friends). This was hard for Sophie to deal with as having a conventional family is what she grew up with and she always imagined

that her future would be the same. She felt disappointed in herself and this reinforced her negative subjective feelings about herself and her prospects during this difficult part of her life.

When discussing her future aspirations Sophie considers both the possibility of returning to education in order to better provide financially for herself and her son (she wanted to train to become a mobile hairdresser), but also the importance of combining this with being a 'good' mother. Sophie believes being a 'good' mother entails 'being there' as much as possible during her son's younger years so she and her son don't miss out on one another. Being a mobile hairdresser appeals to Sophie because of the flexibility it may provide in juggling both family and work.

Sophie describes how "everything" has changed since becoming pregnant. She doesn't appear to get out much and describes how her depression keeps her in. Sophie believes that whilst she has grown apart from her school friends regarding them as having 'abandoned' her when her son was born. On the other hand, Sophie's parents seem to play a vital role within her life and she often refers to them as providing support and looking out for her during what she feels is a difficult time in her life. Of particular concern during this interview is how Sophie's 'depression' appears to becoming a real barrier for her to overcome. Her parents recognise the isolation and loneliness but Sophie feels her parents have been very proactive in encouraging her to get out of the flat. The time spent at her parent's house appears to offer a break from an environment (her flat) where she feels very isolated, lonely and unsafe.

Sophie: I don't have a social life. I stay in and play with Josh (son) all the time.

Researcher: Do you not get out much?

Sophie: I didn't use to when I first moved in. My Dad use to come round and get annoyed with me cos I just wanted to stay in. I didn't have the motivation and I was just so depressed. And I thought I

don't want to. I just want to stay in and play with Josh and do nowt. I don't want to face anyone. I don't want to talk to anyone. I went out on Sunday for the first time and I only went to the shop with my friend and then back to my Mums and had a couple of drinks.

Interview Two - 2006 (Age 19)

The next round of individual interviews coincided with the ethnographical aspect to the research in which some of the mothers participated. I had recently been involved with Sophie on a project titled 'Digital Storytelling'. This project was a seven week programme and used a range of digital technologies as a means for young mothers to construct their own life stories. My involvement included facilitating and observing the woman constructing their stories and helping them audio record them (see methodology chapter). Not only did this provide unique ethnographical data but it was also useful as I was aware of any major changes or consistencies that could be explored during the course of interview two. During this time it became clear that Sophie had not only matured but appeared more confident all round (field notes highlighted the differences). The interview allowed for the context of these changes to be more fully explored.

Since we initially met, of great importance to Sophie was her change of accommodation. Her involvement with targeted provision with young mothers and the key worker who ran this project supported her through putting a strong case for different accommodation together which would have been very difficult for her to do on her own. She felt more settled and secure and had begun to build some positive relationships with neighbours. Sophie had also discussed an increased confidence with 'mothering' and was actively involved in activities that would address difficult parenting issues. For example, she had begun to use a chart that encouraged her son to eat the right things and appeared to be making a huge difference to addressing 'bad' eating habits that were a worry to her. She felt very positive about the progress she had made with this. She

was also actively involved in her son's playgroup and was considering taking up a committee post that seeks to gain parents views and deal with the day to day running of the playgroup. She felt pleased that she had been approached and surprised that people would value her contribution and consider her.

Sophie had also started a new relationship with a man she had recently met through a friend. Whilst she spoke of this relationship very positively she also described a sense of not wanting to completely 'let her guard down'. She felt she needed to take this relationship slowly and wouldn't completely commit until she felt it was safe to do so because of past experiences and what she felt would be in the best interests for her son. It was clear that Sophie was excited and very keen on this young man but the barrier she was possibly creating protected her against being hurt if the relationship did not work out in the long term.

Overall, Sophie also felt positive about her involvement in 'digital storytelling' and was to further this with her involvement in a course on 'Is higher education for me?' This project gave her a focus during the week, a chance to make and meet friends and engage with the possibility of returning to education or employment through the support of the professional project workers. Through this she could work on issues such as compiling a CV and developing her interview skills.

On many fronts things had improved greatly for Sophie. But she still appeared to need support and reassurance that she was indeed a 'good' mother. The need to prove people wrong when it came to negative stereotypes associated with teenage pregnancy and parenthood was also still in evidence. Her body language and how she clearly became upset when discussing this issue demonstrated the impact that stigma played within Sophie's life and how harshly she felt judged. During my time with Sophie on the 'digital storytelling project' this was most apparent. This project involved compiling a life story and Sophie chose to focus on becoming a mother. She found it very emotional going over the past and re-living her feelings at certain points in time (photos of pregnancy) and

still referred back to her bad experiences during pregnancy (particularly her rejection at school). Looking through the photos of her pregnancy reminded her of an unhappy time and was clearly an unpleasant emotional experience for her and conjured up a range of feelings.

Whilst Sophie describes how parental support had lessened since the first interview she still sees her parents regularly and values their relationship. Sophie's parents seem to be actively involved in her life and enjoy being grandparents to her son. However, as she has matured she feels more independent and reliance on her parents has changed as a consequence. Sophie was also in the midst of taking a series of driving lessons which she feels will increase her independence even more as she won't have to rely on her parents to take her shopping.

A prominent development since the first interview with Sophie was how a social life had emerged. Going out 'around town' and drinking in local bars/clubs was a new experience for her. Sophie had only recently turned eighteen so was old enough to be involved in this type of social activity and it seemed to offer her a new identity. It also seemed to be an escape from the loneliness that being a single parent could entail as well as the pressures and strains of motherhood. However, Sophie recognises how the start of a relationship seems to have tempered this somewhat but as discussed earlier 'letting her guard down' is something she has to negotiate.

Interview Three – 2008 (Age 21)

It was a surprise visiting Sophie for her third interview. She looked very different and appeared to be keeping very well. Her hair was a different colour and style, she wore more 'stylish' clothes and had lost a significant amount of weight. Not only did she appear physically different but she was much more mature and her home environment also seemed to have changed despite it being the same house I visited before. It was clear that between that space of time (roughly two years) Sophie had invested in decorating her home and consequently appeared more 'house proud'.

When the final interview took place it came as quite a surprise that Sophie was at the later stages of planning her wedding with only seven weeks left to go. Clearly things had progressed and worked out with the man she was afraid to 'let her guard down with' (see second interview) as this was the man she was planning to marry. She was clearly happier all round and during the interview she reflects upon the past and how she has arrived at a positive situation with which she now feels quite content.

Sophie discusses a six week period since the previous interview in which three significant incidences changed her life for the better. The first involved her applying for a job and having a successful interview resulting in her current employment (part-time retail work). The second incident to have occurred was her boyfriend (whom she just started dating at the second interview) proposing to her. The third was finally passing her driving test. Taken together in close succession Sophie believes these things had significantly changed her life for the better. They gave her an increased sense of self-confidence and steered her life in a different direction.

Sophie: So I'd got a job, got engaged, and there was something else quite big, I can't remember what it was, but all within six weeks. And everything just kinda spun around from there. That was it, I passed my test, I took my driving lessons and I passed my test.

Researcher: How did all that feel?

Sophie: I was emotional anyway because I'd passed my (driving) test. I was really excited. And then we went away and Nathan (boyfriend) proposed and I was just not expecting it. Normally I'm quite switched on you know, Cos he's not very good at keeping secrets. And then obviously I was just shocked when he proposed. And then I came back and within a few days I went for an interview and got the job the same day. I was just like 'wow'!

Sophie engineered some structures to her family life in order to sustain what she believes is important. Friday night is 'curry night', Saturday entails shopping and Sunday is 'going to the park', relaxing and having fun together as a family. Having 'family time' is key to Sophie's life and this takes a high priority. Sophie's parents still also play an important role in her life but she discusses and reflects upon how this relationship has changed and matured over time:

Researcher: "How have your relationships changed with your family and friends?"

Sophie: "Urm, with my family I've grown apart from them. I don't need them as much to take me shopping. I still see them every couple of weeks. I speak to my Mum like near enough every day still".

Researcher: "So you're still really close?"

Sophie: "Yeah but in the sense that it's more of a mutual relationship now. Because I don't need her emotionally as much. We can have more of a friendship. We can do normal things instead of her always trying to work out if I'm on a high or a low, or her being permanently concerned about my mental state (Laugh). (Sophie is referring to her earlier experience of suffering from depression, see interview one)

Sophie seems to be dealing with her negative experience of pregnancy and schooling through providing evidence that she is bringing up her son well alongside returning to night school to obtain her English GCSE that she believes she failed due to her negative experience of becoming pregnant whilst at school (see interview one). Sophie takes great pride in her son's achievements and believes this proves she must have done 'something right'. She talks about his development with reading and how his teachers are really pleased with his progress. However, reflecting upon how people made her feel is still upsetting. She discusses how her involvement with 'digital storytelling' (re-calling her life story to do with her

journeys through pregnancy and motherhood) was emotionally draining. She found it so upsetting reflecting upon this time in her life. She also confesses that she recently chose to throw away the digital story she had produced as she had moved on and it reminded her of a difficult and emotional time she'd rather forget.

Researcher: Have you still got that digital story?

Sophie: I don't know where it is. I think I saw it a couple of weeks ago but I'm not sure if I got rid of it. It was a bit, I think I watched it and cringed so much.

Researcher: Did you?

Sophie: It was awful, when I did that, urm, it drained me so much, like emotionally.

Researcher: You found it quite emotional didn't you? What was it about it that you found...?

Sophie: Just going back, urm, but I did it on my course last week, (night school, English GCSE). There's only a few of us and my tutor asked about teachers and things like that. At which point I spoke about like everything that had gone on and I got back and I said to her when I went on Wednesday, I was like, I was so drained. Because it's just going back to a world that was hideous. It's like, my house and my family now is a million miles away from when I was at home and when I was in my flat. Cos, Josh (son) doesn't remember, being in the flat which is a blessing. But I think it was more going back to Josh's dad and just the situation that we had there.

During the interview Sophie discusses the possibility of becoming a counsellor/working with young mothers and being able to support young people similar to other professionals who have supported her in the past. However, Sophie wants to be relatively 'grounded'; her expectations of a certain career /life turning in a different direction, whilst not currently a

high priority, is definitely a consideration and something she may move towards in the future. She is not putting pressure on herself but clearly does have aspirations.

Sophie: I want a better job. Like before, I wouldn't mind if I worked in a supermarket. But I think I want a career now instead of just a job. I'd like to further my education and get something, but when something becomes available and when it feels right. I'm not thinking I want to go become an estate agent or a pilot or anything like that. I definitely want to do something that involves people. Something along the lines of counselling or helping out teenage parents because I know exactly how difficult it is.

When leaving this final interview I reflected upon the rapport developed with Sophie, appreciating the honesty and time she had given in order for me to listen and ask questions regarding her life-story. I felt happy that things had improved but couldn't help feeling that if she had been allowed to be at peace with herself (i.e. the experience of stigma had been eradicated or lessened) then her life-story would have been somewhat easier. The need to prove herself was a key theme running throughout Sophie's story and it appeared that only recently was she dealing with this constant desire to prove herself and seek the positive approval of others. That Sophie still feels she is set apart as being different from 'other' older mothers is also evident:

Researcher: Looking back through time, from when I first met you up until now do you feel like you've had to continue to prove yourself and do you feel like you still have to do that in certain ways?

Sophie: Yeah, I do because even the parents of Josh's (son) school friends, "ooh scandal" you know, and "she's only young". And I mean they've all seen Josh, they all know him and they all know me. But at the same time when Josh's being naughty or not doing as he's told in the playground I just think, I can see people thinking, "Oooh look at him (son). That's cos she's young"

Furthermore, that Sophie had to prove to *herself* that her life was not a failure was particularly thought provoking. She also felt a desire to prove to her son when “he gets older and asks questions” that she made something of herself and was not the stereotypical teen mum. What was very clear from Sophie’s life story was how her early encounters (in particular schooling) had profound affects (especially upon her emotional well-being) and this seemed to be a prominent issue she had to deal with over time.

The need to make ‘something of herself’ was profound for Sophie. She had greater clarity of her past and a clearer vision of what the future would hold. She seemed more at peace with herself but she has had to work hard at this and ultimately ‘prove to ‘herself’ and ‘others’ that she has not failed as was so often assumed when she became pregnant at the age of fourteen.

Researcher: So do you think working (employment) made a big impact on your life then?

Sophie: Yeah, because I’ve never had a job before. I mean I was grown up in a sense that I had Josh (son), and I had to be a parent and responsible. But now I’m more worldly. I understand the importance of being a good (pause), You know, I did before but, like going to work and not phoning in sick because I’ve got a bit of a sniffle. We pass that onto Josh. He’s not had a day off school since he started.

Researcher: So do you think it’s important going out to work and being the breadwinner and bringing in money?

Sophie: Yeah, I mean I only do part-time but it’s still, we both go to work, urm just so that Josh (son) can see. Cos obviously when he gets older I’ll have to sit down with him and explain to him the ins and outs of everything that happened. But I can say to him “look what I went on to do”.

Sophie describes her journey through time in a reflective manner which sums up her 'ups and downs' concisely:

Researcher: If you could reflect back on your life when we first met at that flat how would you describe your journey? How would you describe it from then to now?

Sophie: Traumatic (laughs), urm I don't know, like a rollercoaster, because I've had lots of ups and lots of downs (pause), probably a rollercoaster in the dark because I never knew what was coming or anything like that. It was good and it was bad, you know I've grown and I've had some fantastic things that I'll remember for good reasons and then things I'd want to forget. So a rollercoaster in the dark.

Case History Two

Lauren's Case History – Negotiating the Transition to Motherhood – Dealing with Impending Independence and an Identity Shift

Lauren's case study draws attention to the sometimes acute processes attached to adapting to motherhood. The specific make-up of her maternal career, material/economic and social domains, and her self-concept are graphically illustrated below capturing some of the extremely complicated negotiations through time. As has been reiterated throughout, it is important *not* to view these key areas in isolation but rather as a complex web of interrelationships that change their shape and meaning as the story unfolds.

Interview One – 2004 (Age 17)

When I first interviewed Lauren she was 17 years old, had become pregnant at the age of 16 and had a son who was eight months old. Reflecting back on her pregnancy was difficult for Lauren as she had had a previous pregnancy where she felt she was forced to have an abortion by her family as they believed she was too young and wouldn't be able to manage on her own. This occurred relatively near to her second pregnancy (3 months beforehand) resulting in her dealing with the emotions of the abortion alongside finding out she was pregnant again. The second pregnancy brought on a mixture of feelings; shock that she was pregnant again, fear that she would be pushed into having an abortion, feelings from the previous abortion (she was adamant that she did not want to go through that "awful" experience all over again), and a desire to make sure she kept the baby this time. In order to take control of the situation Lauren said that she made sure she kept the pregnancy undisclosed until she felt it was "safe" to tell people (i.e. enough time had elapsed so that a termination was not possible).

Lauren: I was sixteen when I found out I was pregnant. I really cried when I found out. I was pregnant before I had Leo and I was pushed into getting rid of it. I was pushed into it by a lot of my family and then I moved in with my boyfriend at the time. I found out I was pregnant again three months later so I was really upset. I didn't tell my Mum for ages you know till it was safe. I thought I'm not going through that again (abortion), it was so awful.

Lauren was waiting to be allocated housing (through a local housing association) but at the time of the first interview lived with her mother in a small two-bedroom flat. Her housing situation was a major concern at the time as Lauren was very anxious about where she was going to be housed. She disliked the idea of being housed in an area with a bad reputation and disliked the lack of control over choosing an area to live. Lauren was afraid of being placed in temporary accommodation because of the negative experiences she had heard about from friends who had

been in similar situations (other young mothers she had met through a local project). Another main concern for Lauren was the prospect of being on her own (living independently) and how she would cope with the impending responsibilities. Tensions arose from this predicament. On the one hand Lauren was unhappy with the current housing situation (living with her mother) and yearned for more space and control. But she was also concerned about her lack of experience of living independently and how she would actually cope on her own.

Lauren was single (she had split from the father of her child during pregnancy). She also received very little support from the father of her child due to the fact he was sent to prison during the latter stages of her pregnancy. Reflecting back on this relationship she believes it was not a happy one but at the time she felt dependent upon him and was unable to see herself being without him. At the time of the first interview Lauren was at college full-time studying business administration even though her initial plan was to pursue a modern apprenticeship in hairdressing. She described how she felt different to everyone else at college because she was the only one on her course who is a mother.

Researcher: Do you find that quite hard, being the only mum?

Lauren: Yeah, it's like I'm in a different, completely different category to everyone else, that's why I like 'Baby Space' (local support group for young parents)

Lauren describes herself as a highly sociable person and has regular contact with a close circle of friends (none of whom have children themselves). Lauren places a great deal of value on these relationships especially as she dislikes "being on her own". Whilst describing a recent night out with such friends Lauren also discusses the difficulties adapting to motherhood. She said she felt constrained at times because she is unable to be fully involved in the social life her friends have the freedom to enjoy. She describes herself as a "party girl".

Lauren: I'm a bit of a party girl really. I mean if I hadn't had Leo I know for a fact that I'd have a job and I'd be out nearly every night. Urm and I've always had a lot of friends. I've still got friends I just don't see them as much.

Researcher: As much as you'd like to?

Lauren: Yeah, I'm not one for being on my own, I really don't like being on my own.

Lauren appeared to be finding motherhood difficult. Within the interview she said on many occasions how difficult it was and how she never imagined how tired she would feel. Some indications that Lauren was suffering from depression were also apparent during the interview and Lauren was very explicit in regards to how “everything” was difficult and getting her down.

Researcher: So now you're a mum how different is it from how you imagined it to be?

Lauren: A lot, it's harder. Like I feel really down and stuff

Researcher: Do you feel like that a lot of the time?

Lauren: Yeah

Researcher: Can you pinpoint anything that makes you feel like that?

Lauren: No, just everything...I knew it was going to be hard but I didn't know it was going to be this hard. You can't imagine it until you're in that position can you?

Lauren struck me as someone who was outspoken and would readily voice her honest opinions. She wanted to ‘tell it how it was’ and distance herself from saying or doing what was the expected. We had known each other prior to the first interview as I had been involved in some ethnographic research at a local project with which she was involved. Lauren had recently stopped attending the project due to being at college

full-time. Whilst, she has valued her time there she was not as reliant upon it as other participants. However, she recognised the value of attending this group for support, to meet other people in similar situations, and have a break from motherhood. Prior to attending this project, Lauren was also involved in another support group titled 'Bumps'. She also found this helpful, especially the advice and guidance on labour and birth followed by how to look after a newborn baby (bathing and feeding etc.).

At the time of the first interview Lauren's relationship with her mum was complex. On the one hand she described her mum as a positive role model (she describes her as a successful single parent; having Lauren at a similar age, bringing up Lauren on her own, going on to University and securing a 'decent job'), but then also discussed how their relationship was tense and that they often argued. Lauren also had a poor relationship with her own Father whom she now rarely sees. Lauren feels her Father has been a poor parent as he was rarely there for her when she was younger and has generally been unsupportive over the years. Lauren described her home environment as difficult as she felt her Mum judged her parenting and was critical of the choices she made. She said she found the flat crowded and having her own space was becoming a real issue. Her Mum clearly became involved in parenting and actively took an interest in the decisions Lauren was making for her son, for instance, what and how often he is fed. This could irritate Lauren at times as she felt her Mum was often negative and critical.

Whilst Lauren is aware of a stigma attached to teenage pregnancy she was adamant that this rarely affected her. Despite this she was aware of the 'looks' people give her when out in public but believes that because she appears older than she actually is, people seem to be less judgemental. However, she said that the doctors' surgery was the most difficult environment in which she was conscious of the stigma that is attached to her identity as a 'teen mum'.

Lauren: "Like when I go to the doctors and stuff I feel a bit...I don't know, I just think cos they're looking at me and thinking 'oh God look how young she is'"

Interview Two – 2006 (Age 19)

Between the first and second interview (2 years), Lauren had been offered permanent accommodation and was housed in a two bedroomed, semi-detached house. Whilst it was not her ideal location, after living there for some time (roughly a year and a half) she believed the area was not as bad as she had first thought. On the whole she felt settled and happy. Overall, Lauren appeared more upbeat in comparison to the first interview and seemed to enjoy taking the opportunity to discuss any developments that had taken place since we last met. A significant development from interview one, was how Lauren had developed a serious relationship with a man of whom she spoke highly. Gareth seemed to offer Lauren a great deal of support and she felt he had a positive impact on her life as he had calmed her down somewhat (i.e. ameliorated her 'party girl' reputation). This relationship seemed to be serious. He was involved in her son's life, and they had been together for a total of eight months.

Lauren: It's brilliant. It's like, changed me for the better, definitely, without a doubt – Like I'm more responsible now and I'm more bothered about the house than going out. And I've just calmed down a lot since I've been with him.

Lauren still classed herself as a highly sociable person and (like before) still valued her social life and in particular nights out with friends. Lauren described the difficulties she encountered when she initially moved into her house and lived independently for the first time. She described the complexity of this situation and used examples of how she had friends move in and out in order to deal with what she believed to be a phobia of being alone and the 'need' for other people's company. Whilst she still found this hard, she believed she had improved significantly since the

initial move. However, 'being alone' in the house is something she still had to contend with and to avoid this she went as far as employing strategies such as staying over at her Mums or inviting a friend over. This discussion brought to light the severity of her 'fear' and highlighted the insecurity she felt with such independence.

Researcher: How did you find it? Cos, like you never lived independently before and you were quite afraid of being on your own?

Lauren: Urm. I had someone living with me for a while, like a friend.... But, umm, and then, they moved out. And then another friend moved in with me and when she moved out I had a long period of being on my own and I got used to it...and I liked it. And then another friend, Lucy, was having trouble at home so I said well come and stay here. And then she went and I had to get used to it all over again. She didn't stay very long, problems sorted themselves out, and umm, then I was on my own again. And I liked it again. And then someone from college came to stay with me, when it was the Christmas holidays. And she just didn't go home, and then, I was like, you know because I'd got a boyfriend by this point. And I was like, well I'm not being funny but... And so she went and Gareth stayed a lot, and now he just stays all the time. So I have had periods of being on my own, but I used to have to take sleeping tablets because I was on my own.

Lauren: If I was to be on my own now I'd hate it. Like if Gareth goes out on a night out I have to stay awake until he comes home. But if he like tells me... in advance then I'll find some other ...way of like someone staying over or I'll go stay at my Mums or something.

This also relates to previous discussions (see interview one) where Lauren describes the restrictions motherhood has placed on her social life. Whilst the importance of going out is still acknowledged, Lauren

believes she has moved away from a 'phase' where she felt she was going out too much.

Lauren: And like...even after I moved in here, I was going through a phase of going out all the time, like three times a week or something. But then since I've met Gareth (present boyfriend) I've calmed down and everything.

Researcher: Because you said...you described yourself as a bit of a party animal. You felt restricted and umm, you know...

Lauren: Yeah, I do still feel restricted, like every time... but I've calmed down in going out. I still have to go out at least, like, once every two weeks otherwise I just don't feel sane. Even if it's just to the pub for a couple of hours, I've still gotta go out. I can't...I couldn't stay in every single night for more than two weeks, it just...it just drives me mad.

During the interview, Lauren discussed how she had grown and matured as a mother in comparison to the mother she was beforehand (interview one). Whilst she felt it had taken her time to adjust to motherhood she was happy and content with the current situation and was enjoying motherhood. She discussed how she felt guilty in respect of how her son didn't necessarily have the best start because she found motherhood so hard to begin with. But she emphasised how things had become a lot easier and therefore she feels more confident. Clearly changes had occurred in regards to how she felt about motherhood and how her identity as a mother had changed over time. Lauren acknowledges the difficulties she had adapting to motherhood from the first interview and as suspected she did indeed suffer from post-natal depression for which she had sought medical intervention. Because of the difficulties of adapting to motherhood and how the early stages of her son's life felt 'bleak', Lauren discusses the complex emotions that can be felt, especially guilt.

Researcher: So how do you... feel about being a Mum?

Lauren: I feel more confident. And I feel better about it and like...I ...I know...before I couldn't really accept that that was my life but now I can, and I like it.

Lauren: I don't know, I like...I really...when I was pregnant I was like really excited about having a baby and everything. But it was just such a shock. And I got a bit like... I went to the doctors and I got like... antidepressants and everything for post-natal depression. But I came off them quite quickly when I moved in here. But I don't know, because I...I don't really know how I felt, I was just like, what am I doing? I loved Leo (son) but...I don't know. It's a lot different now and if I look back to how I felt then I feel really guilty. But loads of people go through it (post-natal depression), don't they?

At the first interview Lauren was studying full-time at college doing business administration. Because of the work load and childcare demands with a young baby she felt she was unable to finish this course and had to drop out. However, since then Lauren had returned to college and was studying media publishing full-time. She enjoyed this course and spoke of how she would like to continue her studies by applying to a University. Whilst she spoke of some difficulties (managing the work load) her tutor had spoken to her about her potential. This appeared to have an impact on Lauren as it gave her a sense of her own capabilities and self-belief in order to finish the course.

Lauren: Like, she'll help...she helps me a lot. Like, she...I have a lot of time off, but I think...she said to me before, that she knows I've got the potential to do it. And she knows that something good will come out of it. So she don't wanna just give up on me straight away, so.

Researcher: And then you...you want to go onto University? Do you know what you want to do at University?

Lauren: Media. Cos you can get into all sorts from, like. You can get into like journalism and then there's like PR and marketing and stuff like that.

At the time of the second interview, Lauren also said she was struggling financially and currently had a key worker (attached to her local housing association) who was helping her sort out a large amount of debt which was becoming a real issue of concern. Previous to this key worker, Lauren had a 'Connexions' key worker (Intensive Personal Advisor) who supported her. But because she moved out of the required age remit this support ended. Overall, Lauren believed that she accrued her debts through paid employment and the consequent complexities of claiming a combination of 'Working Families Tax Credit' (WFTC), its childcare element and housing benefit.

Lauren: I've just got so much debt through working. I had like, two jobs, in the time I weren't at college. And uhh, some of it was due to laziness...laziness in myself. Like, 'Housing Benefit', umm, wanted some proofs (certain documents) and I couldn't find them. And then I got into arrears with my rent and everything. And then urm, nursery, well 'Tax Credits'...pay seventy per cent don't they? And they urm, paid me in a lump sum, and they didn't tell me they was going to do that, so I then...I thought, ooh I've just got this money! I wonder what that's for and spent it. And then, uhh, I realised, I'm gonna have to pay this off.

Researcher: Right

Lauren: So they hadn't made it clear what they was going to do...so I assumed you got more with 'Working Tax Credits' anyway because I've been told that before. So I just thought ... And, by that time I was in loads of debt with nursery, so, I was in debt with nursery and in debt with my rent and it's just... I thought about leaving college...and getting a full-time job, in something I can train up in, cos I wasn't...I didn't...I don't like having no

money, so I went to this income support interview thing, that you've gotta have every six months.

Researcher: Is that what you're on at the moment then?

Lauren: Yeah. And uhh, we worked out if I got a full-time job on minimum wage how much I'd get to myself after paying rent and bills and all the rest of it. And it worked out at like £50 and I thought I'm not working 36 hours at minimum wage, after my nursery and stuffs run out, to get £50 for myself, not a chance. And with my debts and everything, most of that £50 would get paid out to them anyway, so I wouldn't be any better off. So I thought if I stick to college, stick to University and just...put up with it, then in the end I'm gonna be better off.

When discussing her main systems of support Lauren said that she receives the most support from her mother. She spoke highly of how her relationship with her mother had improved significantly and in times of need she will not only confide in her but her mother provides a shoulder to cry on. Whilst they clearly have a close relationship once making the move away from the parental home, motherhood had become easier and as a consequence she feels significantly better.

Researcher: Last time we spoke, I asked you, how you were finding, like, motherhood and you said it was a lot harder than you imagined it to be and you got down quite a bit. How's motherhood now? Do you feel like it's changed?

Lauren: Yeah, I think it's got easier since I've moved out. Because we (Mother) was having a lot of arguments anyway and umm, we've always been like that. Not like, we love each other...loads, and I couldn't be without my Mum, I know now she's done loads for me. But living in a small two bedroom flat. With like living in such a small space, like me and Leo (son) had to share a bedroom that was like...really small. Well it weren't like, really small, it did for me. But for me and Leo (son), and then to share with my Mum

as well and she was like, disagreeing with my parenting skills and saying I was doing everything wrong. ... So it...it just sort of got me down a bit.

Lauren: But now, I live on my own, do my own thing, look after Leo, I just feel loads better.

During the interview Lauren had a disturbing phone-call from her ex-partner (father of her child) as she had just found out he had been released from prison. Her main concern was that her son may be hurt by a new father figure walking in and out of her son's life in a similar vein to what she had experienced in her own childhood.

Lauren: I'm not saying he (ex-partner) weren't good with Leo or anything, he was. He was brilliant and he really bonded...But umm...as soon as he got sent down I thought I'm not having him...in and out of Leo's life like this. I can't see Leo hurt like that. And it's hard because I don't wanna stop Leo seeing his dad, cos that's harsh on Leo. But I don't want him messing with Leo's life.

The importance of Lauren's own biography is important here as it gives meaning not only to the present but what she hoped the future might hold. It also highlights the anxieties that can be felt in respect of male role models within her son's life and her fears that her son might experience something similar

Researcher: What are you wanting from the relationship...Have you thought that far ahead yet?

Lauren: Not really thought that far...I want to get married and have babies. [laugh] I don't know. With Leo it was like, he's been...in the eight months that he's been there, Martin's (Leo's Dad) been there about six weeks...a bit. And Gareth's been like, the strongest male role model that he's had.

Lauren: In the future I'd like to (get married), definitely, but, like I sometimes think I'd like to do it now. But then it's all the emotions,

you know... I just think I want that...family. I've always...I've had a happy childhood and everything but I've never had like a proper family. It's always just been me and my Mum, which I wouldn't change because I love my Mum and she's like... she's like a sort of role model... because...I've had Leo and I'm on my own...And she had me and she was on her own. But, and she went to University and everything and I just think if she can do it, cos she had me when she was eighteen, then I can do it.

Lauren: But because I've never had the family, you know, spending quality time with your parents and stuff. I've just always had my Mum, I...I never had any...I sometimes wish I had had that, but I know I've got a lot better than loads of people... And I know my Mums done her best for me and I wouldn't...like I said I wouldn't change that for the world. But sometimes I do get envious and I think that's what I want for Leo. But then, I don't know that it will all get into a broken family and stuff, so it's...I don't know.

Interview Three – 2008 (Age 21)

When I visited Lauren for the third and final interview she appeared tired and slightly run down. This may have been partly due to being at work all day then having to deal with picking her son up from afterschool care and the usual day to day routine of cooking tea and putting her son to bed. But as the interview progressed she said she had some difficult issues on her mind that she felt uncomfortable discussing at the present time.

A major development since the last interview was that Lauren had split up from her previous boyfriend Gareth. She described how she had come to realise how she was unhappy with him and felt he was too immature for her. In all, this relationship had lasted for two years but, on reflection, Lauren believes she was unhappy for at least half that period. She also felt very confused as to when and whether or not she would even meet someone else and settle down and guarded about letting a relationship become serious and someone to be involved in her son's life again.

Whilst she still aspires to being married one day and possibly having more children this aspiration seems more ambiguous compared to the previous interview. However, she reiterates the need to avoid a “broken family”:

Lauren: I know I want to get married one day.

Researcher: Yeah, because at the last interview you said, one of the things you wanted was to be married and have more babies.

Lauren: At some point, yeah, but not yet. I don't think I want to have another baby until I've got that family situation....

As the quote demonstrates clarity doesn't necessarily develop with time and changes in circumstances can cast a re-evaluation of previous expectations or aspirations. Such uncertainty was clearly difficult to deal with:

Lauren: I do want to get married at...one day. But my attitude to life at the minute is just...completely confused.

Lauren: Well I'm happy with it (life). I've got good friends, good family, good...everything, good...lifestyle. I'm luckier than a lot of people. I do get out a lot more than most people my age who've got children, but, I am really happy with. But I don't...I don't know what the future holds and I don't know what I want out of it. It's quite scary if I think about the future. If I think what will I be doing in five years, it scares me....Unfortunately I think it's a bit of bad time...to talk about stuff like that. If you know what I mean? I don't...I really, really don't know. You can't predict anything, it's so...life's so confusing, life goes one way or the other... I just find it really, really hard to picture my life, because it's...Life is just really really unpredictable and you don't know which path you're gonna take or what's gonna happen.

Her social life was still a big element for her. She went out at least once a week (usually a Saturday) to socialise with friends. However, this was no

longer as fulfilling as it used to be as many of her friends had settled down and therefore in Lauren's words had become "boring". This prompted Lauren to think about settling down herself.

Lauren had also finished her college course in 'media publishing', gained a qualification and was proud of this achievement. However, she had decided that pursuing her previous aspiration of going onto University was out of the question. She was unsure of what she really wanted to do, afraid of getting into more debt and generally found it hard to think of what direction her life would take. In contrast to interview two, finding employment was therefore the preferred option for Lauren and she was currently working full-time doing an administrative role. She enjoyed working, especially the social aspect to her job as this involved making friends within the workplace.

Despite her achievements, Lauren's poor 'self' image was apparent when she discussed how she felt about herself (and how she perceived others felt) in regards to education and employment:

Lauren: I haven't got the commitment, that's my main problem with everything. Everyone was surprised that I managed to hold my...my job down. Because I just...I've got no concentration skills and I've got no commitment to anything.

Researcher: That can't be true [laugh]

Lauren: It's true! I'm like a child, I don't even know how I managed to have one!

Lauren ... I was...I was proud of myself because I never, ever thought I'd pass college. Like I say I'm really indecisive and I'm really unpredictable. So, I could have just got bored and dropped out at any point. And the same with my job. A lot of people thought I wouldn't stick it out but they thought I wouldn't stick college out.

Lauren: Sometimes I like to prove people wrong though

Lauren seemed to take the final interview as an opportunity for self-reflection; and more often than not this was critical self-reflection on motherhood. Lauren really took the lead on discussing her movements in regards to motherhood and how this had changed through time. A great deal of reflection was employed. Her blunt honesty was surprising, especially as it went against the grain of the conventional good mothering discourse (Phoenix et al 1991, Silva et al 1996).

Lauren clearly states she would do things differently if she had her time again and that she was not ready for motherhood. But then she also states she wouldn't want to change things. Very rarely does the literature on teenage pregnancy and parenthood pick up on such ambiguous and complex interpretations and the tensions that lie between the bond developed between a mother and her child.

Lauren: It's just people know what sort of position you're in. Like, they won't ring you up and be like, are you coming out? And when you say no I can't get a babysitter; 'Oh but please', and pestering and making you feel...not making you feel like you have to go out but making you realise that you can't go and do that. So I don't know, people didn't understand whereas they do now...

Lauren: Well, I wouldn't change anything. But I...at the time I was really defensive and everything. But, for the first few years of Leo's life I was shocking and I know I was. I can't even remember a lot of his baby years because I've tried to block it out. Now I'm a lot better because I've matured and stuff and I can accept that I was, like, not very good then. But I was far far too young to have that kind of responsibility ... I was quite naïve really, and to have a baby on my own, when I just turned seventeen. It was stupid.

The defensive strategies Lauren employed not only helped her deal with emotions and feelings she felt were inappropriate at the time but allowed her to block out feelings that were too raw for her to deal with.

Lauren: And I think I got a bit of post natal depression and stuff, I just...and because I am such a social person, I...and I couldn't do things...it...I don't know, I think I felt like he was holding me back, whereas I ...I understand more now, it was...It wasn't a very nice time, but I would never have admitted that at the time. I would have been like "Oh yeah, I'm fine. It's brilliant" Because I ...I knew it wasn't the right thing to be thinking. But, no, I...I was far too young. I was only a child myself. ...I just thought the doctors were ridiculous..., first they offered me counselling and they never gave me it. And then they just handed me anti-depressants at 18...17/18, just handed me anti-depressants and were like, here's a solution. And it wasn't. Cos I don't know whether it was post natal depression. ...Because I don't think I was really depressed. I just think I didn't want a baby ...when I had one. Which isn't ...which I know isn't very nice. But...

Researcher: So you've reflected upon that quite a lot then do you think?

Lauren: I wouldn't make the mistake of getting...having a baby. Not mistake, but having another child now. Because I know I'm not ready. I think...in the first few years I just potted on and got on with it...Where as now, if he does something I'm proud of him, and I feel a lot better towards being a mum, than I did... I think Gareth (previous boyfriend) in some...a lot of ways did me the world of good, for settling me down and realising ...Before I met Gareth, I was horrific.

Lauren reflects upon the difficulties that arise when sensitive issues are discussed with honesty and in the light of the social disapproval that mothers can face. Lauren feels tension between what is the 'right' thing to think and feel in regards to motherhood and her actual feelings. She feels she has made sacrifices through having a child at a young age. She also believes the demands of early parenthood prevent or make it difficult to take part in conventional activities/experiences that peers within her age

group would be pursuing and strongly argues that she would discourage other young woman following a similar route to herself.

Despite this Lauren feels she was destined to have a child when she did because she believes everything in life happens for a reason and that she is finally happy through learning to adjust to motherhood:

Lauren: It's weird how much growing up you do in the space of just literally a few months. I'm quite open about it though, now. I really...I think I'm quite honest about a lot of things, though. It's quite hard to be honest sometimes because of the disapproval that you get. You can just see it in some people's eyes

Researcher: What do you mean disapproval? In what way?

Lauren: Like, if you talk like I've said about being a Mum, I think I'm only speaking to you about this because it's part of your work, and you know. Like not being very good with Leo (son) and stuff. It's not something that I talk about very often because people would disapprove and because people don't understand. I was far too young ... You don't realise how hard it actually is and the massive sacrifices that you make. And, like I say, I wouldn't change anything now, but then, the first couple of years ...I was never bad with him, But...I don't know, I can't describe it. I wouldn't want to change it now, but I wouldn't advise for anyone to have babies at that age. It's just st...stupid, they're still children. They've got their whole lives ahead of them. Having...having Leo prevents me from doing so much. Like I said I wouldn't change it, but it does.

Researcher: Like what...what kind of stuff?

Lauren: Like stuff, like, people my age do. Like, going out, going on holiday, travelling, going to University, you know. It doesn't prevent it but it makes it a lot harder. Like running your own house. I have to worry about gas and electric and rent. Whereas, most

people have to worry about...if have they got enough money this month to buy that new...I don't know, anything.

Researcher: So you kind of feel like it has prevented you from doing a lot of things. So how do you imagine your life if maybe you hadn't had Leo so young?

Lauren: I don't know, I think I was just destined to have a child. [laugh] I think everything in life happens for a reason... but, I don't know. I'm happy with my life, really happy with it now. But for a long time I wasn't and it took a lot of adjustment.

Lauren: ... I still have like a...a phobia of being on my own, like. If I don't go out at the weekend I'll get really, like, down, because I'm just at home on my own all the time. And I'm...like a really sociable person. I need to be around people, which was why, half of the reason that I got the job...went for a job was because I was just at home on my own, all the time. And I was driving myself mad... I have to have other people's company. And I've got a lot of friends at work and stuff so that's good.

Reflecting upon her journey through time, Lauren fails to draw attention to any specific event that she believes to be important despite an earlier discussion where she described a range of critical moments within her life (school, becoming a mother, finishing college, employment). According to Lauren's account, the importance of acknowledging how she has changed as a person through time and how as a result her outlook on life has been altered takes precedence. Lack of control appears to be present in Lauren's interpretation of her life, especially with regard to how she feels unable to determine or predict which direction her life will take. Changes in circumstances and how life can be unpredictable play a key role to how Lauren perceives her life and future direction:

Researcher: If you could think back to, right at the beginning when I first met you to now. How would you describe that journey?

Lauren: I just think...I don't think anything major has happened or changed. I just think I've matured and grown up and have a completely different attitude to what I did then. Like when I was with Gareth (ex-boyfriend) I was all like...it was all like happiness and smiles and it was like, well, you get with someone, you get married, you have babies and that's what happens. But...it's not like that at all... Life's got loads of ups and downs. That's just the way it is.

Yet it is clear as the final interview closes, and through a great deal of 'self' reflection, that *all* she really wants from life is to feel settled and loved:

Lauren:...whereas, I think I just really...I think all I really, really want is to be set...not at the minute, but in the future, to be, like, settled down and... loved. [laugh] That's really cheesy, isn't it?

Making sense of the cases

The two cases represent two contrasting journeys through teenage pregnancy and early motherhood. Furthermore these two very different stories are set against the same broad structural backgrounds; they went through the same social housing route, went to similar schools, experienced similar responses in public spaces to the "sight" of teenage motherhood, and made use of similar sorts of support from the immediate family and friends and more formal patterns of support from special projects and professional workers. This is what makes them sociologically pertinent. The two life stories tell of the two young women going through similar stages of "struggle" in the difficulties they faced and with similar "moral compasses" pointing to better futures of being a "good mother" surrounding and supported by a "proper family" and feeling "settled down", bench-marks of socio-cultural aspiration drawn from the social milieux in which they were brought up. Sophie and Lauren had struggled through this in different ways and were at different points. This is what enables us to use these cases as means of beginning to provide answers

to the research questions being addressed, and to refine some of those questions in the light of the examination of these cases.

Maternal Careers and its early influences

For both Lauren and Sophie, pregnancy and early motherhood is described as having “changed everything”. This suggests that the primary domain at this point in their lives became the ‘maternal’. The transition to motherhood was a critical moment whereby the women’s identities significantly altered and as such influenced the key domains in their lives such as the economic and social domains.

But the “everything” that was changed was slightly different for the two young women. This indicates how, during this phase, the different domains interfaced with one another and the experience of motherhood was heavily influenced by this interaction. Throughout the course of the research their maternal careers appeared to go through three distinct stages:

Stage One

After the initial transition to motherhood the women displayed a fragile self. Both Lauren and Sophie appeared particularly vulnerable at this stage and were encountering difficulties adapting to motherhood. Lack of confidence in their mothering identity was most apparent at this stage which is understandable considering both the emotional upheaval and the social stigma surrounding their newly found identity. This was further compounded (or possibly caused) by the experience of depression. Sophie explicitly discussed depression at interview one paying particular attention to how her housing situation was contributing towards this. Lauren discussed how ‘everything was getting her down’ at interview one and later reflected upon her experience of post-natal depression (interview three). This fragile self is linked to stigma and dominant discourses surrounding ‘proper’ motherhood.

Stage Two

After a few years had passed, the women discussed a growing confidence in mothering associated with having 'matured'. Both Lauren and Sophie used the term 'matured' as signalling a shift in the self that encompassed awareness of how they had developed into subjects with agency to deal with the trials and tribulations of life. This development of self-efficacy was especially apparent when compared to the 'fragile self' discussed above at stage one. Feeling more empowered undoubtedly developed from having over-come earlier challenges, which in turn contributed to them feeling more confident in their mothering identities.

Stage Three

Whilst the metaphor of 'maturity' was drawn upon, both Lauren and Sophie had reached a phase in their mothering identity where they felt much more connected and reflective of the mothers they 'were' (unconfident and unsure) and the mothers they had 'become' (self-assured and resilient). Earlier struggles had been resolved and the passage of time had 'settled' their lives to a certain degree and increased their subjective awareness. Enough time had passed for the women to acquire the 'evidence' that they were indeed 'good' mothers – something they did not possess as they initially embarked upon motherhood. However, despite commonalities, their lives had taken a different course at this stage. Sophie had obtained her ideal family type whereas Lauren had ambivalent feelings and uncertainty in regards to what the future would hold.

The experience of 'mothering' in itself did not move the women through this process; rather it was in combination with the other key domains within their lives that the maternal career developed.

Material/Economic Domain

Housing

Both women experienced the same housing process. This journey entailed initiating a move from the parental home by placing themselves on a social housing waiting list, before being allocated permanent social housing provided by the local council. Despite this same process, their experiences upon moving into their permanent independent housing were distinctly different. Whilst both women were housed in areas perceived across the sample as having 'bad reputations', the reality of this for them were poles apart. Sophie was placed within a block of high rise flats and felt unsafe, scared and isolated. Lauren however, was pleasantly surprised that the 'reality' of her housing (semi-detached house) was not as bad as she had first envisaged. Housing being a sub domain of the 'economic' domain had profound consequences on the women's experiences of their maternal career and the interface with other sub domains such education, employment and training. For Lauren, housing provided her with the space she felt she needed to gain confidence in herself as a 'mother' or as she put it 'feel better' about motherhood. For Sophie, her initial housing was debilitating, it contributed to her depression and she felt powerless to change things. After moving into alternative housing (interview two) Sophie's life took on a more positive direction. Not only was it an area where she felt safe and comfortable living but it opened up social networks for her. The women's housing histories were unusual when compared to the rest of the sample as they had not experienced temporary social housing and the acute feelings of instability and insecurity that this experience entailed.

Education

Despite similar financial circumstances and struggles managing on welfare benefits, the women's experiences and feelings towards education and employment were also distinctly different. The stigma that Sophie experienced at school impacted upon her future relationship with

education acutely - in fact, she actively avoided it for many years. Her first step to returning to education was within a project where she felt safe to do so. It was a project developed for young mothers, and with professionals that she had built strong relationships with and who were non-judgemental and respectful (Digital Storytelling/Is Higher Education Right for Me?). Over time, and with acquiring a growing confidence, Sophie chose to return to education in a way that dealt with her stigmatising experience at school. She chose to re-take her English GCSE at night school as this was by far the most stigmatising experience she encountered. Feeling rejected at school evoked negative feelings for Sophie throughout the five years. Whilst aspirational, Sophie also felt it imperative that she balanced education/employment with 'being there' for her son whilst he was young.

For Lauren she engaged, dis-engaged and re-engaged with education over the course of the five years. This was associated with having an unclear idea of what career she aspired to and the problems she encountered at different points in time in regards to managing her parental responsibilities alongside studying. Both women displayed a lack of confidence in their educational ability but this seemed to emerge from differing experiences. The stigma at school for Sophie contributed greatly towards her lack of self-confidence and self-worth. For Lauren lack of self-confidence developed from what she perceived to be a critical awareness of herself, namely the contention that she did not have the ability to 'stick something out' and 'others' around her also had the same perception. Stigma was not as acutely felt like Sophie partly reflecting the age difference between the two women of when they became pregnant. For instance, whilst acknowledging being set apart from others within her age group at college, this did not appear to be of a great concern to Lauren.

Upon entering the labour market Sophie describes how this experience impacted upon her self-worth and made her feel more 'worldly'. It was also critical as a means to display to her son the values of 'hard work' and 'prove' herself as being set apart from the stereotypical teenage mother

that so many people assumed of her. Working offered the women the evidence that they were indeed investing in the 'good mother' identity. Gaining employment was a key moment in the development of Sophie's self-concept whereas for Lauren it was more mixed. Positive and negative experiences of the labour market were experienced. She felt it was enjoyable and provided the 'social' dimension to her life she craved (interview three) but also felt it contributed to her hardship rather than alleviate it (interview two). Indeed for Lauren at interview two the discussion of debt was one of her prime concerns and it had escalated so much that she received professional support to help her deal with this.

Social Domain

The social world the young women inhabit consisted of kinship networks that provided an integral source of support. This was especially during the initial transition to motherhood when both women displayed a 'fragile' sense of self. For Sophie, the support provided was perceived to be fundamental to her well-being. Her parents played a crucial role at a time when things were particularly difficult, for instance, when she was dealing with depression, felt isolated, unhappy and lonely with her housing situation. For Lauren, her relationship with her mother was much more fraught at the beginning of the research. This was likely to reflect how she was struggling with the transition to motherhood, partly contributed by a lack of confidence and the difficulties of living in cramped living conditions.

QLR allowed us to witness the dynamics of these kinship networks over time and what factors contributed to change occurring. For Sophie, her change of accommodation, expanding social network (friendships), involvement with projects, and 'settling down' gradually contributed to her well-being, self-efficacy, and overall her confidence in motherhood itself. This change in the 'self' led to greater independence and a changing relationship with her parents – a relationship she describes as much more 'mutual' during the final interview. For Lauren, moving out of the family home allowed her to gain a sense of independence in mothering and the distance allowed for a re-invigoration of her relationship with her mother.

Despite initial tensions, Lauren clearly holds a significant relationship with her mother, who she respects greatly for being 'successful' and goes as far as to describe her as a positive 'role model'. The support her mother has provided to her through time is apparent when she discusses the value of this relationship – her mother has always been there as 'a shoulder to cry on.'

Both women formed significant relationships with male partners over the course of the five years. After the initial breakdown of the relationship with the children's fathers Lauren and Sophie felt somewhat guarded about forming future relationships but then embarked upon a serious relationship during interview two. This was what both described as the pursuit of 'settling down'. The experience of this type of relationship conjured up what the women described as the obtainment of their 'ideal' family. This generally consisted of the typical nuclear family set up with the aspiration of marriage and more children. At interview three, these relationships had taken a different course with Lauren breaking up with Gareth whilst Sophie was weeks away from getting married. Needless to say, Lauren felt very ambiguous when asked about what her future would hold, whereas Sophie described a sense of happiness and security that she had finally 'settled down'. Both women at interview two discussed how the development of these relationships altered their social lives with their close circle of friends. For Lauren this was particularly significant as it enabled her to reflect upon her life and as she put it 'calm down'.

The ways in which the women described their social friendship networks, and the importance they placed upon these also differed. For Lauren her social circle of friends and re-negotiating the identity of being a 'party girl' took prominence through time. Sophie felt lonely after her friends abandoned her (interview one) but after moving accommodation and being involved in various projects had started to build up a close circle of friends that she socialised with (interview two). For Lauren however, the 'fear' of 'being on her own' was a constant theme that ran through her narrative. How she dealt with this involved complex feelings (fear and

guilt) and coping strategies (friends staying round, sleeping tablets, staying with her mother).

The interface between personal social networks and the more formal social networks were demonstrated through the course of the research. Unsurprisingly when the women needed support the most (the fragile sense of self stage) formal systems of support played an integral role. Sometimes formal support could provide 'powerful others' to act in ways and influence the women's circumstances that were unobtainable to the women and their families. An example of this was the ways in which formal support 'fought' the battles with the housing department where Sophie and her family felt powerless and were continuously informed by housing officials that they could not do anything for her (i.e. move her). The change of accommodation was critical for Sophie and this is something she could not have done without the support of the key worker who had expertise and influence within this area. For Lauren she received critical support from a key worker employed by her housing provider who specialised in dealing with debt. Both women also attended targeted provision during the earlier stages of motherhood and this was voiced as beneficial for seeking support but also providing a safe space for mothers in similar circumstances to come together.

What was interesting with QLR is how we could see the interface between formal and informal social support change through time. For instance, kinship and close personal relationships were drawn upon the most when the women made the initial transition to motherhood, and whilst dependence on these relationships lessened somewhat, they continued to play a constant role that the women valued in their personal lives. Formal support was also drawn upon at the start of motherhood, but through the passage of time this petered out and was perceived to be no longer needed. Such findings add to the importance of what is a huge identity shift as the women make the transition into a highly stigmatised identity and how this conjures up vulnerability and a 'fragile' self-identity.

Critical Moments

Critical moments occurred within both case histories. Sophie was very explicit during interview three when she discussed key turning points in her life, whereas Laurens subjective narrative was much more ambivalent possibly reflecting their differing levels of self efficacy at different points in time.

Lauren experienced a range of critical moments throughout the duration of the research project. Reflectively drawing upon the experience of abortion highlighted how this impacted on her decision to 'keep her baby' and be able to stay in control of this process. Another key critical moment for Lauren was the resolution, and indeed dissolution, of her first significant relationship in the pursuit of the 'settling down' narrative. Her relationship with Gareth was seen to have 'calmed her down' and provided what she felt was an opportunity to take a look at her life and reassess her social life.

Her encounter with a tutor at college also seemed significant. This relationship appeared to instil in Lauren a sense of belief in herself that had an impact on her self-concept. The tutor openly discussing with her how she saw potential in her and how 'something good' will come out of her continuing her studies altered her subjective sense of self. Moving out from home was also a significant moment that allowed her to deal with her anxieties surrounding independence and 'going it alone'. Separating from her mother in this way was critical in repairing what had become a fraught relationship as well as allowing Lauren the space to gain confidence in motherhood. During interview three Lauren discusses the realisation of how her social networks have changed through time. Whilst her friends had now themselves started to settle down and have children and whilst this was difficult for her, it was a critical realisation of how her life is taking a new course and what she relied upon before (nights out with friends) will have to be renegotiated.

For Sophie, she explicitly referred to three turning points in her life that happened in close succession to one another. Her self-concept changed

considerably at this stage and she discussed these three incidents as having great prominence. Firstly she was proposed to by her then boyfriend who she went onto marry, secondly she passed her driving test, and thirdly she was offered employment after attending her first interview. These were significant achievements for Sophie considering her low self-esteem and her constant desire to prove her worth. From the analysis of Sophie's narrative, other critical moments included her change of accommodation and recollections of direct encounters with teachers at school whereby she internalised a deep sense of felt stigma.

Self –Concept - Changes in Self – esteem, Self-confidence and Self-efficacy

The women's notion of self-concept changed through time. Sophie felt the stigma attached to her status as a teen mum through time and often discussed the need to prove herself over and above what is expected of older parents. This felt stigma was internalised as never being quite right. For Sophie though, it went further than this, and became what Goffman referred to in chapter four as her 'master status'. The interface between structure and agency was demonstrated through the ways in which Sophie negotiated her stigmatised identity. For example, the accumulation of Sophie's 'achievements' allowed her to draw upon 'evidence' that enabled her to prove her worth and consequently feel better about herself.

The notion of the 'self' is also heavily influenced by someone's biography and cultural context. For Sophie becoming pregnant at such a young age was out of the ordinary within her family context growing up, whereas for Lauren her mother had also had her as a teenager and brought her up as a lone parent. For Sophie therefore the stigma experienced was far more acute, and for Lauren something that is experienced within her family albeit heavily discouraged and frowned upon. Crucially, Sophie became a parent at 14 whereas for Lauren she became a parent at 16. This age difference was significant in how they both experienced stigma - it was far

more acute for Sophie with her experiences of school being particularly stigmatising.

Laurens self-concept was influenced more by her negotiations within her social sphere and how she managed independence and motherhood. Reflections on motherhood, and how her life would unfold, were much more ambiguous. This was especially evident at interview three when she described a real sense of powerlessness in being able to steer her life in a particular direction.

Relationship with the Wider Research Sample

Whilst the case histories chosen for this chapter focus upon the individual, and therefore cannot be said to be typical or representative of teenage mothers on the whole, they both illustrate similarities and a relationship with the wider research sample. As previous chapters demonstrated, a number of themes were present within their storied lives that represent similar experiences amongst the wider sample. For example themes centred around housing (the need for security and to be settled), maturity (reflecting upon the 'self' and becoming more mature over time), relationships (relationship breakdown and the importance of 'settling down') and stigma (negotiating a stigmatized identity and the need to 'prove' a 'good mother' identity) are just a few of the themes that developed from an analysis of the wider research sample that were present within the case histories already discussed.

Chapter Six:

Synthesis of Research Findings and Conclusion

This thesis centred on a set of research questions developed from a review of the literature outlined in chapter one. Chapter one gave an account of the demographics of teenage pregnancy and parenthood within the UK context, with a particular focus on dominant discourses and the emerging policy frameworks under New Labour to tackle teenage pregnancy – most notably the ‘National Teenage Pregnancy Strategy’. Chapter one also sought to explore alternative ways of thinking about teenage pregnancy and motherhood. It did this by exploring critically the ‘pathologisation’ of teenage pregnancy through alternative accounts of teenage pregnancy and motherhood, at the heart of which were the perspectives of young mothers themselves. Through an exploration of the two alternative standpoints, real tensions were apparent – the Government strategy that viewed teenage pregnancy as inherently problematic, versus the accounts of young mothers themselves. These latter accounts highlighted how the experience of teenage pregnancy and motherhood was much more nuanced and not necessarily problematic. Of particular importance was how, for some women, teenage pregnancy could be a positive, life changing event – a contention which is directly opposite to the dominant discourse and the impetus behind much policy.

Exploring these questions seemed particularly important in furthering our understanding of the contemporary experiences of teenage pregnancy and motherhood. A qualitative methodological approach was employed as it lended itself to overcoming what the thesis has so far described as a statistically dominated analysis of the issue, which in itself has been argued to be a contributory factor in the ‘pathologisation’ of teenage pregnancy and motherhood. The qualitative approach adopted in this thesis is concerned with exploring the subjectivities of teen pregnancy

through the accounts of young mothers themselves, how they negotiated a stigmatised identity, how they drew upon support from both formal and informal sources and finally how they responded to the policy frameworks in which they were embedded. A distinctive perspective, that lies at the heart of this thesis, is based upon the methodological Qualitative Longitudinal Methods (QLR) approach. Adopting this was an important means through which teenage pregnancy and motherhood could be viewed as process rather than a one off event to occur in young women's lives. The other unique theoretical approach which allowed teenage pregnancy and motherhood to be viewed through a different lens was the adoption of a holistic framework whereby the interlinking of key domains within young mothers lives could be explored. Such holism added weight to the complexity of teenage pregnancy and motherhood as it reflected the multifaceted nature of the young women's lives.

The main findings from data analysis conducted for this thesis were presented across three chapters. These sought to reflect the emotional and personal dimensions to the women's lives. It was argued that, whilst the personal and emotional dimensions to teenage pregnancy and motherhood often get overlooked in mainstream policy and research, these can be shown to be of great significance. The research findings were presented both synchronically (cross case analysis) and diachronically (the latter through case studies) which allowed for the uniqueness of QLR data to be presented and explored:

Chapter three explored the changing shape of informal support networks through time. The role of kinship, in particular the support of their own mothers, was explored, as well as the changing shape of relations with male partners. This chapter aimed to focus on the personal and emotional – the dimensions to social life that can be difficult to get close to and bring to the fore but, as the chapter demonstrated, these are nevertheless integral to our understanding of social phenomenon. Finally, chapter three also explored the notion of critical moments. Such an exploration highlighted the structural dimensions to the women's lives as well as the agency they employed through time to steer their life in a

particular course. Employing the concept of critical moments, and identifying patterns across the sample, also allowed for an appreciation of the policy frameworks of which the women were embedded and how they responded to various targeted provision at different points in time.

Chapter four offered an insight into the multifaceted nature of stigmatisation; including how the mothers perceive stigma, how they respond and negotiate stigma, and what consequences are attached to stigmatisation. It was striking how, across the sample, the experience of stigmatisation was, at times, a painful experience, and discussions with the young women provided insights into the nature of their vulnerability. In chapter four it was argued that, in some accounts, this often gets unnoticed as a result of the coping strategies mothers employ. One such strategy is the denial that other people's judgments actually 'bother them'. In contrast, data in this chapter sought to reinforce the importance of acknowledging the impact of stigma, especially with regards to the impact it can have on young women's self-confidence and notions of self-worth. It was argued that such an oversight has real consequences. Stigmatisation needs to be given greater importance, especially as it was experienced across a whole range of social sites the women encountered in their daily lives.

Chapter five sought to provide the depth and detail that QLR produces through the analysis of two detailed case histories. Both of these explored the transition to motherhood and the development of this through time. They also provided an overview of the multifaceted nature of teenage pregnancy and motherhood through the interplay of the 'maternal career', with the material/economic and social domains of their lives, as well as their changing self-concept. The two case histories also helped highlight the complexity of teenage pregnancy and motherhood. They sought to reinforce the overarching argument embedded within the thesis; the need to view such an experience as fluid and dynamic. Such a standpoint aims to move away from the static snap shot picture that depicts teenage mothers as failing at one point in time, to a more nuanced account that reflects their journeys into motherhood and changes through time.

Detailed case histories such as these allowed for diachronic analysis and were a means through which justice could be given to the accumulation of detail accomplished through longitudinal data. Presenting case histories in such a way allowed for a close examination of the multifaceted nature of young mothers lives and therefore the need for a policy framework that similarly embraced such a holistic approach.

What can we learn from the research findings?

Case Histories – Motherhood as Dynamic and Multifaceted

The case histories demonstrated the value of QLR by providing the depth and detail that, through the accumulation of longitudinal data, such a methodology can offer. Through the exploration of a detailed account of the twists and turns in the two case histories lives, we could witness a multiple range of factors relating to the key domains (economic/material and social) and how they overlapped with one another including the development of a 'maternal career' and the women's self-concept. These cases studies not only provided depth and detail through QLR but they brought to attention the complexity of teenage pregnancy and motherhood, especially when viewed as dynamic and fluid. Policy that views teenage pregnancy as a one off event which occurs within women's lives (often also seen as setting in train a procession of poor outcomes) miss valuable insight into processes that lead to particular outcomes related to social exclusion and inclusion. For instance, the impact of support groups and individual key workers could prove integral for some women in the study. In Sophie's case history, her key worker was in a powerful position to help her move out of unsuitable accommodation that was contributing to her isolation and depression. The impact of this was profound. And whilst a multiple range of factors came into play that improved Sophie's situation (employment, informal networks of support), her housing situation (and how this was resolved) was significant in regards to her overall well-being. The important role key

workers can play through the implementation of local policy frameworks should therefore not be underestimated. Case histories also demonstrated how the young women were active agents, negotiating their trajectories, and making critical decisions at different points in time that had profound consequences. This was especially drawn out in chapter three through personal accounts of negotiating intimate relations with kin and partners.

Becoming and Being a Teen Mother – Motherhood and its key stages

QLR allows us to capture temporal processes in an individual's life. As demonstrated through detailed case histories in chapter five, the identification of three key stages in relation to the women's maternal careers was identified. These were described as the (i) '*fragile self*', (ii) the '*growing self*', (iii) and the '*reflective self*' stage. The '*reflective self*' stage was identified through analysis of cohort ones data which involved a third individual semi-structured interview. This typology concentrated on the transition to motherhood and the development of the maternal identity through time. Key characteristics associated with each stage are outlined below:

The 'Fragile Self':

Making the transition into a highly stigmatised identity conjured up vulnerability and a 'fragile' self-identity. Feelings of uncertainty were a key characteristic associated with this stage. Uncertainty often surrounded their housing situation as the majority of the sample were placed in temporary accommodation at this point of their career. Relationships were also 'fragile' and 'fraught', especially with kinship that tended to disapprove of the pregnancy. This stage in the maternal career was focused upon the 'initial event' (making the transition into motherhood) and therefore encapsulated how the women suddenly negotiated the absolute dependence of caring for a young baby. At this stage in their

maternal careers the women often displayed a real lack of confidence in their mothering skills. This was often compounded by the societal stigma of teenage pregnancy and wider expectations of failure from those around them.

The 'Growing Self':

Key themes such as stability and security had begun to emerge through the narratives of the women. This was accompanied by an awareness of 'change'. Change in their 'subjective sense of self' (through becoming mothers), and change in their material surroundings (most women had been placed in permanent accommodation). Becoming a mother provided the women with a role and often a new found purpose. This was significant, considering the adversity, uncertainty, and 'lack of direction' that was frequently symptomatic of their biographies prior to pregnancy. The lapse of time allowed the women to become more practised in their mothering skills. A shifting sense of self was evident, new responsibilities and identities were being made sense of across the sample. The 'growing self' is best represented as a transitional stage. This reflects the process of a growing self- confidence and a growth of resilience through experiencing early successes (such as finally feeling 'settled' in a family home and returning to education or employment). Chapter three focused upon the changing shape of kinship and intimate relationships, and highlighted how this process involved a series of ebbs and flows, with the women gradually building resilience and confidence, but also being subject to set-backs (for instance, through relationship breakdown).

The 'Reflective Self':

The 'reflective self' was identified mainly through analysis of the third interview with cohort one. Key characteristics associated with this stage included the increasing significance of 'maturity', but more importantly, an increased sense of a self-confident subjectivity and self-reflection. Understanding the past from the present was employed as a narrative

tool across the sample. The women displayed an appreciation of the mothers they 'were' (the fragile self-stage), to the mothers they developed into (the 'growing self'), and finally the mothers they had 'become' (reflective self-stage). Understanding this process requires an appreciation of how the transition to motherhood is a period of heightened reflexivity. Self-reflexivity may be a key term for understanding the 'reflective self' stage; how the women made sense of their changing self. Whilst the sample demonstrated increasing agency and self-confidence during the 'reflective self', it is important not to underplay the structural components that provide the backdrop to the women's lives. Despite an increasing sense of agency, material and structural concerns continued to shape the experiences and opportunities open to the women.

The implications for practice in being able to understand movement through these key stages are significant. Targeted intervention is often short term, which means that practitioners are (in the most part) unable to witness these journeys. Understanding life trajectories and how practice impacted upon those to whom it was directed is a real strength of QLR. Practitioners are crucial actors in helping us better understand such case histories and the implications they have for both policy and practice. So whilst sharing the findings from longitudinal research can provide valuable insights for practitioners, practitioners can also help illuminate the case histories in more detail and depth.

The changes that occurred across the sample also reinforce the need to understand process, and that the 'self' has to be developed. The development of the maternal career involved key stages that were identified across the sample.

The tables below adds further clarification of this process by mapping key characteristics across each of the key stages for one (illustrative) research participant named Lauren (further details of which were discussed in chapter five). At the heart of longitudinal research is movement and fluidity. Ideally, we would be able to represent our data in such a way, but we are constrained within a static 2D framework.

Nevertheless, the table below helps filter key aspects of the research participant's life, in line with the stages outlined above. It also helps identify the domains within young mother's lives that seem particularly significant and how these domains overlap and interlink with each other over time. What contextual and intervening conditions appear to influence or affect a participant's change through time can be drawn out. For instance, the identification of critical moments, how they played a fundamental role in steering their lives in different directions, and how such moments can alter a subjective sense of the self.

Table 1.7: Illustrative Case History (Lauren) – Motherhood and its key stages

Lauren	Maternal	Economic/Material Domain	Social Domain	Self-Concept
<p><i>The 'Fragile Self'</i> Interview One – age 17</p>	<ul style="list-style-type: none"> * Previous abortion, complex emotions and desire for motherhood. *Anxious of impending independence (moving out of family home and coping on her own). *Single parent – poor relationship with father of her child. *Finding motherhood hard - <i>“everything getting her down”</i> - possible post- natal depression. *Difficulties adapting to motherhood. Feels restrained 	<ul style="list-style-type: none"> *Lives with mother- cramped conditions. *Waiting to be allocated social housing. *At college full-time studying business administration. *Poor financial circumstances – reliance upon welfare benefits. 	<ul style="list-style-type: none"> *Highly sociable – dislikes being on her own. *Renegotiating “party girl” reputation. *Attends ‘baby space’ – project to support young mothers. *Relationship with mother tense – feels she is critical of her parenting style. *Describes herself as having a good social circle of friends. 	<ul style="list-style-type: none"> *Tensions – wants more independence and control but afraid of ‘coping on her own’. *Stigma – feels ‘different’ at college. *Felt stigma – contradictory accounts: aware of the stigmatized identity (doctor’s surgery) but claims it rarely affects her. *Reflects on poor relationship with her own father growing up.

Lauren	Maternal	Economic/Material Domain	Social Domain	Self-Concept
<p><i>The 'Growing Self'</i></p> <p>Interview two – age 20</p>	<ul style="list-style-type: none"> *No longer a single parent – new partner has moved in (been together 8 months). * Grown and matured as a mother. *Motherhood feels easier. *Feels guilty – reflecting on previous maternal identity. *Reflects on previous post-natal depression. *Discusses aspirations of her 'ideal family type'- two-parent household and more children. 	<ul style="list-style-type: none"> *Lives independently – allocated social housing. *Dropped out of previous college course (business admin). *At college full-time studying media publishing. *Aspirations to go onto University. *Between interviews one and two received intensive support through a Connexions PA. *Struggling financially with debt. *Receiving support through a key worker attached to her housing association. 	<ul style="list-style-type: none"> *New relationship – calmed down her socialising/party girl reputation. *Still enjoys a social life. *Still finds it very hard “being alone” at times in the house. *Relationship with mother significantly improved – main system of support and a positive role model. 	<ul style="list-style-type: none"> *Feels settled/secure. *Has started a serious relationship (supportive). *Reflects on her struggles adapting to her independence and “fear of being alone”. *Feels guilty – reflecting on being a mother and going out too much. *Fears her child’s father may have a negative effect on her son. *Fear of family breakdown.

Lauren	Maternal	Economic/Material Domain	Social Domain	Self-Concept
<p><i>The 'Reflective Self'</i></p> <p>Interview three – age 22</p>	<ul style="list-style-type: none"> *Relationship breakdown- Single Parent. *Tensions – aspiring for marriage and more children but afraid of relationship breakdown. *Self-reflection – maternal identity over time. * Motherhood- re-evaluates past interpretations. *Tensions – “destined” for early motherhood but feels she has made sacrifices. 	<ul style="list-style-type: none"> *Finished college - gained qualification in media publishing. * Re-evaluates aspirations for University - apprehensive about accruing debt. Also unsure of what she wants to do in the future. *Full-time employment – administrative role 	<ul style="list-style-type: none"> *Still enjoys a social life but this has “calmed down a lot”. *Peer group – many friends have “settled down”. *Enjoys the social aspect to employment. 	<ul style="list-style-type: none"> *Feels guarded over starting a serious relationship again. *Confusion over the future – how her life will unfold. *Self-efficacy – poor self-image/lack of control over her life. *Critical self-reflection. *Reflects on past defensive strategies to deal with difficult emotions. *No longer has a ‘fear’ of being alone in the house.

Critical Moments

Cross case analysis identified a number of predictable critical moments tied explicitly to the experience of teenage pregnancy and motherhood. Such moments were not necessarily identified at one point in time but rather embedded within a QLR approach to allow for refinement, reflection and re-evaluation over time. The real value of QLR is how it allows us to explore change through time, the holistic interlinking of domains within young mothers lives, and the ways in which longitudinal accounts can offer reflection and reassessment. Focusing upon such processes are key to the identification of critical moments when supportive interventions can best be applied to the key issues associated with teenage pregnancy and motherhood.

Common critical moments, embedded within the 'maternal career', the key domains (economic/material and social) of the women's lives, as well as their changing self-concept were identified. For example, the decision to become a mother, and then making the transition to motherhood opened up doors for many of the women steering their lives in a different direction to the course it was previously taking. For some of the mothers, this was positive, offering them a 'purpose in life' and a desire to better their situation for themselves and their children. Other critical moments, particularly relevant for policy and practice were associated with decisions to enter the labour market or return to some form of education. The accounts of the women highlighted the positive aspects to these experiences such as affirming a good mother identity and building upon their self-confidence and self-worth. However, the complexities of such encounters were also highlighted. This was especially the case with regard to the inappropriate timing of returning to education and the difficulties involved in managing employment and education successfully. For some women, difficulties managing changes to welfare benefits associated with employment/education resulted in their hardship rather than bettering their financial situation. Understanding the timing of critical moments, and importantly if patterns emerge amongst teenage parents

(or amongst certain groups of teenage parents such as looked after young women), allows for effective interventions when young women need support the most.

In chapter three it was suggested that the use of critical moments needs further refinement in order to appreciate the diverse experiences of young people, but also to better reflect what might be deemed 'meaningful' from the perspective of young people themselves. This thesis has placed particular importance upon the ways in which certain aspects of a young person's identity may take prominence (i.e. teen mother identity; having a substance (mis)using identity, being a young offender, the experience of disability), and result in a distinct set of 'shared' critical moments amongst different groups of young people. As argued in chapter three (p.152), it is these very critical moments that are most likely to have repercussions on the 'self-identity'. For example, the findings from this thesis demonstrated that the experience teenage pregnancy and motherhood gave rise to a distinct set of 'shared' critical moments (the realisation of becoming pregnant, the acceptance of pregnancy, relationship breakdown, and being allocated permanent housing). In the words of Giddens's (1991), these moments were "*times when events come together in such a way that an individual stands at a crossroads in their existence or where a person **learns of information with fateful consequences***" (Giddens's, 1991, p.113, emphasis added).

Future research could explore the notion of critical moments with a particular focus on what might be consequential for other groups of young people. For example, the experience of disability, and how this aspect of a young person's identity, may give rise to 'shared' critical moments that impact upon the self and subjectivity. This might involve exploring young people's experience of impairment, the physical environment, discrimination as well as feelings of empowerment or self-advocacy. It is imperative that we do not lose sight of what might be deemed the 'softer' critical moments in young people's lives, and how these moments have important consequences for the young person's life and identity. The proposed model in chapter three (p.152) sought to encapsulate the notion

of 'softer' critical moments by focusing on those instances of apparent low importance or low severity, and reinsert their potential for steering the life course in a different direction. It was suggested that often a degree of latency can be associated with 'softer' critical moments. The true magnitude of these events can sometimes only be seen over extended periods of time as the underlying impact on an individual becomes more apparent. For example, encounters with significant others have the potential to instil in a young person a sense of empowerment, or alternatively reinsert a sense of failure, that can have huge consequences for the future development of the self-identity. These encounters, whilst deemed 'inconsequential' at the time, have the potential over time, to have repercussions on an individual's life course.

It was when considering the significance of critical moments in relation to the construction and development of a young person's self-identity that existing theoretical constructs were shown to have limitations. It was argued that whilst a spectrum does indeed have value in highlighting the continuum of 'agentic' and 'fatalistic' 'critical moments' (based on the choice/fate continuum developed by Holland and Thomson), existing constructs often ran the risk of underplaying those 'critical moments' deemed significant and meaningful to the young person (often in relation to their self-identity), whilst placing prime importance on 'critical moments' deemed as 'fatalistic' or of great 'magnitude' (such as death/illness). It was suggested in chapter three (p.152) that a much more fluid notion of 'critical moments' was needed that allowed for better recognition of the subtleties and nuances of 'critical moments' as a narrative device.

Felt Stigma

Chapter four demonstrated how the discourse surrounding the stigma attached to teenage pregnancy and motherhood is powerful and that young mothers are acutely aware of this. The accounts of stigma provided by the young mothers highlighted how impacts through time could be profound and complex. Effectively counteracting the

stigmatisation of teenage parenthood would entail dealing with wider notions of motherhood, language and importantly societal shifts in attitudes and behaviour. As the literature highlighted, notions of what it means to be a 'good' mother are bound up with social class. For instance, chapter four highlighted how mothering associated with white, middle-class women is marked as 'normal', with any deviation from this 'norm' constructed as pathological (Woollett and Phoenix in Phoenix et al 1991).

At the heart of the TPS was the notion that all sections of society had to get behind the ethos of this strategy and how we had to witness a societal change in behaviour and attitudes with regards to teenage pregnancy and motherhood. I would also argue this is important, if we really are to improve the well-being of young parents, then it is societal attitudes to teenage pregnancy that indeed also need to change. Society needs to question the assumptions and misconceptions surrounding teenage pregnancy and be more accepting and supportive of young parents. To achieve such a goal, a lot more work needs to be done in order to dispel common myths surrounding teenage pregnancy and motherhood. For instance, despite having a continuous flow of social research demonstrating young mothers are far from feckless and promiscuous (Duncan et al 2010; Arai 2009; Mitchell and Green 2006), these ideas still hold strong and are common place within and across a whole range of social sites (and prominent in spaces young mothers navigate in their daily lives). The media plays a crucial role in reinforcing such misconceptions but can also play a role in dispelling these myths through representing young parents in a better light and raising awareness of alternative models of motherhood (in this case teenage pregnancy and motherhood).

Policy and practitioners need to be sensitive and responsive to the stigma young mother's face, but more importantly, the ways in which many professional workers also can actively contribute to this stigma. Practitioners who work with young parents can only go so far supporting them within a policy framework that problematizes their status as young parents. Policy recognising the complexities of teenage pregnancy needs

to respond to how young parents are stigmatised and how the very formation of policy can in itself be highly stigmatising. As stated earlier, this involves wider societal shifts surrounding how we construct teenage pregnancy as “a problem”. This two way relationship; the social construction of teenage pregnancy determining the policy approach and vice a versa needs greater critically exploration if we are to gain a greater understanding of contemporary notions of teenage pregnancy and motherhood and how best to support young parents. QLR illuminates for policy how people make sense of their lives, what is meaningful to them, and how their lives change over time. Policy makers seem unable to recognise what actually works for people unless they understand what is *meaningful to the young people* concerned.

Informal Support Networks – Kinship and Intimate Relationships

Chapter three reinforced the role of informal support networks and how these networks could play a consistent and supportive role through time for the young mothers. Such findings reinforce the need to foster supportive relationships and help families deal with the news of a teenage pregnancy. For example, the chapter on stigma highlighted how families do not operate in a vacuum and how (at certain points in time) can be as damning of teenage pregnancy as wider society. This reminds and demonstrates to us that family members, who are close to young mothers and mothers-to-be, are embedded within a society that stigmatises young parents, and therefore can also hold and help amplify stigmatising attitudes. The young women’s mothers coming round and accepting their daughters’ pregnancy proved to be critical moments for the sample. This acceptance together with mothers becoming more supportive proved very important. However, this was not always the case and some young mothers did not have a supportive family. This poses important questions about how, in such circumstances, the experience of teenage pregnancy and motherhood may be distinctly different and require more formal supportive systems in place. The research findings highlighted how it is imperative that such provision is non-judgemental and provides a space

where young women gain recognition and respect for who they are and what they can and do achieve.

The changing shape of kinship and relationships with partners also proved to be significant. Whilst transformations did take place for many of the women in the study, their relationships with their mothers (whilst difficult at times) were often the only consistent form of support through time. This support also proved instrumental at critical moments within the women's lives. This is important to understanding the real life experiences of teenage pregnancy and parenthood and are of great importance to policy makers and academics.

Chapter three also highlighted how a significant number of women encountered harmful relationships. In a small but significant number of cases this could involve domestic violence. Little specific research is known to explore this with young mothers but it clearly warrants further exploration. These harmful relationships were difficult for the young mothers, especially as a sense of dependency on their partners had already developed. This was made ever more difficult due to the women's desires and aspirations for their 'ideal' family, and the disappointment that arises when they realised the necessity of relationship break up.

Chapter three also highlighted how kinship support is varied and the women's reliance upon such support is subject to change over time. It was shown, especially at the beginning of the research, that family could provide instrumental support, including emotional, practical and financial support. How the women handled difficult or challenging events was in great measure to do with how they access such resources (whether this be formal/informal support) but also how they displayed personal resilience. Such findings only reinforce the potential for QLR to offer detailed richness into the personal and meaningful dimensions of people's lives. The love the women felt for their children and significant others, and ultimately the interdependence and connectedness that signified such relationships were drawn out with a greater degree of

precision over time. 'Time' allows for a deeper exploration into what was really meaningful to the young women.

Qualitative Longitudinal Research - Value of Taking the Long View

The research questions were explored within a distinct methodological approach that allowed for an original contribution to our understanding of contemporary experiences of teenage pregnancy and motherhood. This thesis has aimed to highlight the value of this methodological approach throughout, especially with regard to teenage motherhood being viewed as fluid and dynamic, and what we can learn from exploring the processes attached to such experiences.

This research study followed a sample group of young women from the latter stages of pregnancy to the initial transition of motherhood and then subsequent progression as a mother. Drawing the research study to a close and reflecting upon the biographies of the women involved, led to questions being raised about what lay ahead for them in the future. Clearly it is impossible to say with any accuracy. Many more experiences and challenges will be encountered. But what would seem to be certain is the women have displayed a sense of resistance and resilience to the 'failure' that was often preconceived for them at the start of the research. Such skills and temperaments should also hold them in good stead when dealing with what lies around the corner. Considering avenues for furthering the longitudinal scope of the research, hopefully I will be given the opportunity to revisit and adapt their life stories through research in the future.

Lessons learnt for Social Policy?

Teenage pregnancy and parenthood has received a huge amount of policy interest, most notably through the last governments TPS that spanned over a ten year period. When considering the impact of this policy, real tensions became apparent. On the one hand, it is based upon and contributes towards the 'pathologisation' of teenage parents,

(accompanying the felt stigma mothers experience and have to negotiate). On the other hand, if delivered in the right way (non-judgemental and respectful), targeted provision can provide critical support at times of need. Ironically, as chapter five illustrated, in some cases, professionals played an integral role by reassuring the women they were indeed 'good' mothers. This entailed working in ways that went against the grain of viewing the women they worked with as problems which were in direct opposition to the wider policy framework of which they were embedded. Tensions lie here, in the ways in which policy can be empowering or disempowering. As a researcher, actively trying to dispel myths surrounding teenage pregnancy, this is by far the real bone of contention with which I have attempted to grapple. Policy is formed and resourced as a consequence of dealing with a social problem, and whilst I have argued this discourse is stigmatising and harmful, the policy which has developed from it can at times be positive. This is mainly based on the relationships professionals and other workers form with the young women. I would also argue that policy needs to be delivered in a much more respectful way. We can learn from policy implementation that has successfully supported young parents and recognises by their very nature (stigmatised) they are set apart and can require support. Such discussions raise important questions about the role of the practitioner in the lives of marginalised groups of young people. Increasingly we are witnessing the surveillance and regulation of young people (Davies, 2010; Coburn 2011) and 'problem' parents (Klett-Davies, 2010; Gillies, 2007). Consequently practitioners increasingly have to work within a professional capacity that is at its best restrictive, and at its worst oppressive. This ultimately leads to the proposition; are those who find themselves working with marginalised young mother's agents of *change*, or agents of the *state*?

Future Research

The experience on conducting QLR has been a valuable learning curve as a researcher, both in terms of the skills developed but also the real

insight it can provide into social life. It is with this acquired knowledge that I believe QLR should be performed on a larger scale to explore social phenomenon across a whole range of social sites. It is encouraging that such work is indeed already under way reinforcing its value and highlighting its relevance to inform policy. At the forefront of such developments is 'Timescapes', the first major qualitative study to be funded in the UK by the ESRC comprising of several projects that span the life course. A recent collaborative conference (Timescapes 2011) brought together academics, policy makers and practitioners to explore the dynamics of family care and support, and to discuss how policy can be more receptive to the needs of families and respond to the challenges that lie ahead.

This thesis has employed QLR with a small sample of young mothers and recognises the limitations to this. Larger studies are really needed in order to delve deeper into the heterogeneous nature of this experience. Different cultural contexts, the experience of ethnicity and social class, as well as the experiences of certain groups overrepresented as teenage parents such as 'looked after' young women, are all avenues for further exploration using QLR. The research questions adopted for this thesis could therefore be refined to reflect such notions of difference. For instance, the meaning of motherhood and transitions to motherhood may be very different depending on the group under study and therefore require distinctly different research questions from the outset. The advantages to this are clear, but would require a commitment to fund and sustain such research over a long period of time from research institutions.

Whilst being able to follow the young mothers through a longer time frame does have advantages it does also involve distinct ethical issues which must be confronted. The need to collaborate on the use of QLR as a methodology is key here. In comparison to other qualitative methods, QLR is in its infancy, and requires sharing of knowledge to work through the unique challenges. Such dilemmas include the ethics of sustaining contact with research participants through time, especially if research

involves vulnerable research participants. Listening to the young mother's accounts of domestic violence entailed critical reflection upon the information that is often shared between researcher and those researched. The sharing of such information makes it imperative that we have mechanisms in place to share our concerns and deal with potential welfare issues that might arise. Longitudinal research only intensifies such ethical considerations. For instance, what if something is 'missed' that potentially could have been picked up on by the researcher? An example here, could involve a participant discussing her relationship problems with her partner (lots of arguing and tension in the home) at the start of the research project. But later interviews reveal that this was in fact a case of domestic violence whereby the mother and child had been harmed. The researcher would inevitably consider if any indications of this had been 'missed' from earlier interviews and whether or not a possible intervention could have been put in place to safeguard the family. Longitudinal research paves the way for such eventualities to occur which could have profound consequences on both the researcher and the research participant. The methodological literature has yet to deal with this appropriately but it is an issue that will only become more pronounced as the value of qualitative longitudinal methods gain momentum, especially with vulnerable groups of young people. It is with this in mind that researchers, practitioners and ethical governance committees need to work together in order to safeguard all those involved in research.

One of the issues this thesis sought to bring to the fore was the impact of felt stigma on the lives of young women. This proved to be of such importance that it is an area worthy of future research in its own right. Little work has specifically explored this, especially from the vantage point of such an experience being viewed as a process which the women negotiate and manage through time. Research questions that seek to uncover the subtleties of stigmatisation are required in order to respond to the difficulties young mothers encounter when attempting to express its hurtful and painful impacts. This was found to be most evident through

the coping strategies the mothers employed, most notably the discourse of 'not allowing what others thought bother them'. The research study found stigmatisation a difficult concept to explore; it did not jump out at the researcher but was rather embedded in what seemed at first to be contradictory accounts. However it did emerge as a powerful, yet subtle, dimension to the women's lives.

Future waves of individual semi-structured interviews could also offer greater insight into the developments of motherhood over a longer time frame. The possibilities are endless here, with research not only having the potential to follow individuals over time but also to explore generations within the same family unit. Interviewing cohort two through further waves of semi-structured interviews would be particularly useful as a means to validate or challenge the findings from cohort one. The accumulation of data in longitudinal research are in essence a form of capital. As you collect information over and over again you are gaining data that is greater in detail and richness. Conducting QLR has the potential to be a highly rewarding and productive experience albeit with its own set of challenges and ethical considerations.

Limitations – What the Research Findings are Unable to Tell Us

Data Collection

The research methodology produced a substantial amount of data which could not be all encompassed within the thesis as was first envisaged. As stated in the chapter two, a mixed methods approach was employed that utilised individual semi-structured interviews, visual methods and ethnography. However, the data produced through the ethnographical and visual methods could not be included in this thesis as I first anticipated. Despite triangulating data analysis, the findings produced through analysis of the semi-structured interviews took centre stage. Difficult decisions had to be made and it was decided that to give an

overview of all data analysis would fail to do justice to the depth and detail of each piece in its own right. It is hoped that the thesis does not stop here however and the data that could not be included because of space constraints can be disseminated at a later date through a range of mechanisms. It is also worth noting that the research methods did both stand alone, but rather act in concert through their combination with the overall effect of producing data that is rich in detail and depth. For instance, through ethnography I was able to build relationships with research participants and it was a successful means through which I could recruit young mothers who may never have considered their involvement in the individual semi-structured interviews. Without the time invested in ethnography, and the building of rapport that this method involved, many of the young women may not have considered individual semi-structured interviews. Having the time to build relationships through time, alongside longstanding ethnographical fieldwork, undoubtedly benefited the recruitment and retention of research participants involved in the study.

Issues of Representativeness – External Validity

Whilst qualitative research does not aim to be representative, ideally the sample size should allow for the exploration of differing experiences across a sample range and reach what some writers have referred to as “theoretical saturation” (Glaser and Strauss, 1967). Whilst a sample range of 25 is often deemed to be adequate for this (Charmaz, 2006), the generation of multiple interviews through longitudinal research made this sample size impractical for this study due to the huge amount of data that would have been generated. As the methodology chapter outlined, for this thesis research, the sample size was 18. And whilst issues of attrition did arise, the study generated a total of 40 individual semi-structured Interviews. Taking into account the accumulation of data that QLR produces, the sample size was therefore judged to be sufficient for the task in hand. As stated earlier the demographics of the sample, and common themes to develop from the women’s accounts, do not apply

across the board to all teenage parents and issues of external validity do arise. It has been acknowledged that aspects of difference (such as social class, ethnicity and sexuality) are worthy of investigation in their own right (as are the experiences of other vulnerable groups such as 'looked after' young women), but could only be touched upon within the findings of this thesis. Despite these limitations, it is worth reinforcing the difficulties of recruiting vulnerable and stigmatised groups across the board. The most vulnerable and needy young mothers may not choose to be involved in social research regardless of sampling strategies employed and therefore it is likely that social research may be missing the voices of those who are particularly 'hard to reach'. Ethnography and getting to know potential research participants before approaching them to be involved in semi-structured interviews tackled this to some degree (as did use of snowballing techniques). However, recruitment primarily took place with women who chose to engage with targeted provision. This raises the question as to how we reach and recruit those mothers who are not members of support groups, not visible, and because of this, may be particularly vulnerable?

Research Locality

The research locality was primarily chosen as a matter of convenience due to the practicalities and resources available for conducting research. A number of other localities could have been chosen and for good reasons. For example, rural, urban, or localities with high teenage pregnancy rates and distinct demographic features such as areas with a high concentration of ethnic minorities who are over represented as young parents. Despite this, the locality in which the research took place was valuable and insightful for a number of reasons. In relation to the NTPS the area in which the research was conducted has been highlighted as an area with an above average national teenage pregnancy rate. Interest at the local level was therefore heightened and it was an interesting environment to undertake research as local

partnership boards were also trying to understand the demographics and experiences of pregnant young women.

Working across Cohorts - Cohort One and Cohort Two

The differences between both cohort one and two were significant and deserve further comment. If given the opportunity to revise the research study, the ideal situation would have been to recruit a wider sample at the initial stage of recruitment (cohort one) without the need to recruit further participants at a later stage (cohort two). Cohort one allowed for a greater awareness and understanding of teenage motherhood over a longer time period compared to cohort two. Indeed, interview three with cohort one allowed the women the time to reflect upon their journeys into and through motherhood. By the final stage of fieldwork with cohort two, however, the participants were still “getting used to” motherhood during the very early stages. Despite this, having two cohort groups that spanned different time periods allowed for an appreciation of what can be gained by following participants for a longer period of time, and was also particularly valuable as a means to compare and contrast the two cohorts.

Attrition is a difficult issue longitudinal research has to grapple with, and it is common that cohorts are added at different phases of the research project to deal with this. Whilst cohort two failed to offer the same level of longitudinal depth and detail in regards to progression of motherhood, they added weight to the cross case thematic analysis especially with regard to the experience of stigma and other key issues such as kinship and negotiations with employment, education and housing.

Policy Implications and the New Coalition Government

During the final stages of writing up and preparing for submission, the social policy landscape for young people has altered considerably following a change of government. Since the Conservative-led coalition government came to power a vast array of far reaching reforms have

been introduced indicating a number of challenges that lie ahead in relation to young people and young mothers in particular. Of particular importance is the economic uncertainty which is bringing substantial spending cuts and tax increases between 2010 and 2015. Such developments are also taking place at a time when we are witnessing a record high number of young people unemployed (the youth unemployment rate hit 20.3 per cent, following a 32,000 increase to 951,000, the highest figures since records began in 1992) (Guardian, 2011). For young people as a whole, cut backs to public services are going to affect avenues of social support, whether this is through the closure of youth clubs, Connexions support for young people or the ending of 'The Future Jobs Fund' to take a few examples. The ending of the Educational Maintenance Allowance (EMA) has also been heavily criticised for impacting upon the most vulnerable youth people in society (Coles in Yeates et al, 2011, p. 23-25). With one of the greatest risk factors correlated with teenage pregnancy and parenthood being poverty and deprivation, young parents, and future young parents, are likely to be particularly vulnerable to a number of the changes outlined. The intergenerational transmission of poverty amongst teenage parents also make it likely that future generations may witness the impacts of these cuts for many years to come.

Many of the projects that the women within this study drew upon are also likely to either be terminated or be significantly reduced under local authority cut backs to public services – cut backs that will really start to take hold as budgets for the 2011-2012 financial year come into force. Whilst local government is expected to reduce its spending by 27 per cent between 2010-11 and 2014-2015 the variation of this reduction across different local authorities is going to be considerable. For example, in unitary urban areas councils spend roughly 40 per cent of their budget on the most vulnerable groups through adult social care and children services, and in county areas this figure can rise to 60 per cent (Taylor-Gooby, 2011, p.8).

The Local Government Association (LGA), surveyed finance directors from 40 per cent of local authorities and revealed that cuts will disproportionately target young people (Local Government Association, 2011). This survey highlighted how youth clubs, play services and Sure Start centres are likely to be areas that are severely impacted by cuts to public spending. Already, concerns are being voiced about the likely impact such cuts will have upon teenage conception rates. For instance, Anne Longfield, chief executive of the youth charity '4Children' states that such cuts: "will store up trouble. We're going to see troubling rises in crime (and) more early parenthood."

Much of the debate about the impact of austerity in public spending is speculative making it difficult to be precise with regards to what patterns might emerge. Despite this, preliminary investigations are again indicating concerns that vital services for the most vulnerable are under threat. A study produced by families charity '4Children' and 'The Daycare Trust' (4Children, 2011) was based on a survey to almost 1000 Sure Start centre managers across England and claimed that government cuts could see 60,000 families lose their local centre. Results suggested that hundreds of Sure Start centres face closure this year and thousands of others are cutting the services they offer and have indicated job losses amongst support staff. Young parents have been a target group under the Sure Start Plus initiative. This initiative aimed to reduce the risk of long-term social exclusion associated with teenage pregnancy by providing intensive co-ordinated support to pregnant teenagers under 18 years and teenage parents (Wiggins et al, 2005).

In response to the Comprehensive Spending Review, in 2010 the SPA produced a report titled 'In Defence of Welfare' (Yeates et al, 2011). This report warned of the repercussions to many of the planned reforms and spending cuts with a particular focus on the implications for specific groups. This report highlighted how we are witnessing the biggest single set of spending cuts since the Second World War, £81 billion in total. Through this report, collaborative analysis of the Spending Review

highlighted how cuts in benefits and services are likely to bear most on those on low incomes and on women and children.

A central dimension to many of the changes taking place is the government's localism agenda which will fundamentally restructure state services and attempt a fundamental reform involving a new relationship between the state and citizen. The emerging Government vision of localism will profoundly alter local policy frameworks in particular. The Localism Bill was introduced to Parliament on 13 December 2010 with the primary aim of shifting power from central government into the hands of individuals, communities and councils. At the heart of this bill is a commitment to decentralisation:

'Instead of taking more power for the Government, this Bill will give power away. The Localism Bill... marks the beginning of a power shift away from central government to the people, families and communities of Britain. ...Radical decentralisation means stripping away much of the top-down bureaucracy that previous governments have put in the way of frontline public services and civil society. It means giving local people the powers and funding to deliver what they want for their communities – with a particular determination to help those who need it most'. (Foreword by Nick Clegg, DCLG, 2010)

However, concerns have been raised that restructuring public services, alongside the wide variation in local authority cutbacks, will lead to the fragmentation of services, with piecemeal provision being provided by a wide variety of service providers with the private sector playing a more prominent role. The reforms outlined under the localism agenda are likely to generate variations in scope, range and standards in provision in different areas (Taylor-Gooby, 2011, p.10). Of particular concern for the localism agenda is the fact that the voluntary sector is heavily dependent on grants from local government and other sources, currently subject to cuts. Also much voluntary and third sector provision is directed towards specific groups so that barriers of exclusion and inclusion may become

more serious in the future (Taylor-Gooby, 2011, p.10). Such observations only reinforce the likelihood of variations in the quality and scope of provision to result from the changes discussed above. Such concerns indicate that provision for young parents is likely to be varied and dependent upon geographic locality.

Whether we have a government set on an ideological vision of shrinking the state or a government concerned more with balancing the budget—the substantial cut backs alongside the vision of ‘localism’ indicates a distinctive framework that will have profound consequences. Of particular concern for young mothers, is the unequal distribution of the planned cut backs. Many of the changes outlined disproportionately impact upon young mothers. This will occur both through the changing youth policy landscape discussed earlier but also the distinctive gendered dimension to the impacts. Figures produced by Taylor-Gooby suggest that women will bear 72 per cent of the cut backs through tax and benefit changes. Cuts to child benefit, lone parents’ benefits, Sure Start maternity benefit, Tax Credit, housing benefits and pension credit are borne disproportionately by women (Taylor-Gooby, 2011, p.8). The abolition of the ‘Health in Pregnancy Grant’, the baby element of the Child Tax Credit (which doubled a family’s income in the first year), and ‘Community Care Grants (as well as most aspects of crisis loans), are likely to profoundly impact upon young parents in particular.

The Women’s Budget Group state that by 2014-15, service cuts are estimated to be equivalent to an 18.5 per cent cut in the income of lone parents (90 per cent of whom are women) and 12 per cent cut for the poorest group of pensioners who are single women. Overall, single women lose services worth 60 per cent more than those lost by single men. Cutting public services will increase unemployment for women who form the majority of public service employees. (Women’s Budget Group, 2010) Young mothers, through their status as ‘adult’s’ within their parental role, and ‘young’ people through their age, receive a double blow in effect. Considering the often stated correlation between teenage

pregnancy and deprivation, such impacts are likely to only entrench such poverty and disadvantage. This only serves to draw attention to young parents occupying a dual status as both young people and parents (adulthood). A focus upon only one area results in a partial account of how reforms to social policy are likely to impact upon teenage mothers.

The likelihood that cut backs to provision for young parents will be detrimental is reinforced through a recent report for the Audit Commission (Coles et al, 2010). This report employed a cost analysis methodology to estimate the overall lifetime cost of different groups of young people who are NEET. Focusing upon the impacts of service provision over a substantial period of time highlighted the savings to the public purse if we do indeed provide targeted provision for vulnerable groups of young people during childhood and adolescence. One case study of a young mother (drawn from the empirical findings of this thesis) indicated that relatively modest public investment can make substantial savings over the life course. Such findings were developed through constructing case studies with 'type A' and 'type B' scenarios. Scenario A is based on the construction of an individual biography through a sequence of events and circumstances described to a researcher, and scenario B is based on how these biographies are likely to have developed if an alternative set of sequences of events occurred or a policy intervention had not taken place. The young mother who received modest amounts of policy intervention costing in total only £4,000, eventually accumulated life time welfare costs of £97,135. Under 'scenario B', a young mother receiving no public investment through intervention programmes was calculated to have life time welfare costs of £858,362, substantially more than the case of 'scenario A'. Such research points to the importance of understanding the trajectory of these cutbacks through time. The example given above relates to public finance costs only, mainly composed of increases in benefit payments and also tax losses when people are not in employment. But the same research also make mention of the importance of "resource costs" by which it means losses to individuals and families. It demonstrates that whilst overall public finance costs have

increased mainly in pro-rata terms since 2002, resource costs have risen in a much more alarming way. This is also to suggest that the brunt of the cuts will be felt by losses to family income young workers and families. One avenue through which longitudinal research, both quantitative and qualitative holds great potential value lies in its capacity to provide an evidence-base for such policy-focused evaluations.

As examples such as these demonstrate, social policy has recently entered a distinctly different arena. Whilst commentators may describe such developments as “interesting times”, it is also for many people, especially those most likely to be hit the worst by the cuts, worrying times. Social policy is now at a junction, essentially the interface between the policy frameworks from the last government to the emerging policy frameworks under the new coalition government. Whilst such changes are in their early stages and as such the full impact of changes can only be speculative, research evidence indicates a number of challenges are set to become acute.

Despite this, Cameron (just as Blair pronounced when he sought to tackle teenage pregnancy in 1999) makes his feelings very clear on the topic of ‘young girls having children’:

‘When you are paid more not to work than to work, when you are better off leaving your children rather than nurturing them, when our welfare system tells young girls that having children before finding security of work and a loving relationship means home and cash now...is it any wonder that our society is broken?’

(Cameron, 2009, p.6)

This only indicates that the discourse of early childbearing as ‘problematic’ holds strong and young mothers are likely to endure stigmatisation that results from this. The circumstances of young mothers are only likely to really improve if we turn away from the actual act of vilifying teenage mothers towards the discourses that construct and represent young mothers in the negative light described above.

Articulating the lived lives of young parents addresses power imbalances and opens up avenues for alternative perspectives to be heard.

Research as a Process

One crucial component of this thesis has been the argument that longitudinal research methods have much to offer to our understanding of complex social issues. Yet it is also appropriate to comment on how the production of the thesis has been a process in itself and how the experience of this has been enlightening to the researcher. From an initial set of research questions, to the development of a distinct methodological approach, the production of this thesis has been a rewarding and enjoyable journey and one in which I have developed as a researcher. It is hard to summarise in words the appreciation I feel in being offered the opportunity to share the experiences of the mothers involved in the study and feel extremely thankful for their generosity and honesty, especially surrounding what were often extremely sensitive issues and life changing events. It is within this context that I am ever more grateful for the experience of being able to share the journey into motherhood and through time with such women, however small this experience would be perceived from the vantage point of the women themselves. I enjoyed getting to know them and being witness to both their personal development and growing confidence in their mothering. Such a sharing of these experiences could only take place through the employment of a methodological approach that sought to invest in producing knowledge through following individual lives through time. Whilst a set of research questions at one point in time would have been a viable approach to take, QLR allows for reflection, re-investment and refinement both in terms of research participant narratives, and also the role that the researcher takes over time.

Final Thoughts

The social world in which the women find themselves can be cast as an ambivalence. On the one hand it can be construed as a set of social relations that support and share the women's enjoyment of her transition to motherhood. On the other hand it can also be demonstrated as something which seeks to condemn and discredit them as a consequence of deviating from the social norms that surround notions of the 'good' mother. This thesis has sought to engage critically with why we deem teenage parents to be problematic, and how such a profound and influential discourse corresponds to the lived reality of teenage mothers themselves. I hope that the findings from this thesis have at least offered food for thought and provided an alternative way of thinking about teen pregnancy and motherhood.

C Wright Mills was concerned with the need for scholars to turn personal troubles into public issues (Mills, 1967; 1970). Whilst often referred to as providing the impetus for many scholars to delve into social research, understanding the personal is far from an easy task to achieve. What has become evident is that research often misses the more intangible dimensions to social life with a focus on what stands out – what might appear obvious. I have sought to delve into the more personal aspects of the women's lives, and act as witness to their lives as they have unfolded. In doing so I aimed to uncover the complexity of teenage pregnancy and motherhood, and argue for the need to move away from a discourse that pathologises teenage parents. Compartmentalising teenage parents as a homogeneous social group requiring a policy framework to deal with their 'problematic' status has been shown to be very far from the truth. The puzzlement of policy makers being unable to achieve the targets of the NTPS only demonstrates the difficulties 'evidence based policy' encounters when they fail to get close to the very thing they endeavour to understand.

It is very unlikely that, in the immediate future, we will witness any significant changes in policy which closely resonate with the needs of

young parents. The old youth policy framework of New Labour is being dismantled rather than repaired. What is clear however is that the personal relationships young mothers hold will endeavour to support them as they experience the highs and lows associated with life. Hopefully the young women will persist to show the resilience and determination they demonstrated to this research project as their lives further unfold.

Appendices

Appendix 1 – Information Sheet



THE UNIVERSITY *of York*

Young Women's Experiences of Pregnancy and Motherhood

Would you like to discuss and share your experiences of pregnancy and motherhood? If so, you may be interested in taking part in a research project that is interested in listening to your views.

A researcher from the Department of Social Policy and Social Work at the University of York is interested in finding out about the experiences of young women who have become pregnant during their teenage years. Any involvement is highly confidential and voluntary. Aniela Wenham is the researcher. You may have already met Aniela at the local projects 'Baby Space' or 'Bumps'.

Why is the research being done?

Research tells us that young women may find certain aspects of pregnancy and motherhood difficult due to the specific issues they might face. This could involve difficulties with housing, accessing services and support, or just feeling anxious about becoming a Mum! Unfortunately we don't know very much about these experiences because there hasn't been very much research done up to date. Gaining young mothers perspectives are key to helping us better understand the most important issues that might need addressing.

What would taking part involve?

You would be interviewed by Aniela at 'Baby Space' or 'Bumps' project, in a private area, for about an hour and a half. If you prefer, Aniela can visit you at your home. You would be free to stop the interview for a break or withdraw from the research at any time. Although Aniela would like to record the interview to have an accurate record of what you have said, no-one other than Aniela will listen to this. No names will be attributed to any comments or opinions that might be used in reports. Transcripts of all recordings will be anonymised and kept securely. You can have a copy of the transcript if you wish.

The research is also interested in how things might change over time. Say for instance, if you are pregnant, what is it like a year or two down the line when you are a mother? Lots of developments could take place, for example, changes in housing, employment and education. Because we would like to better understand all the changes that might happen, Aniela will ask you if she can contact you again. However, this is purely voluntary, and even if you choose to carry on being involved in the research, you can always change your mind at a later date and withdraw.

Aniela will not share anything you have told her with staff at 'Baby Space' and 'Bumps', or anyone else, without your permission. However, there are obviously very rare circumstances where confidentiality may need to be breached. Such a breach would only occur in the most extreme cases if, for example, information disclosed related to criminal activity or implied that an individual has been, or is, at risk of harm.

How will the research be done?

Aniela (the researcher) plans to talk to young mothers both individually and at the projects 'Baby Space' and 'Bumps'. The individual interviews will take place in a private area (either in your home or in the project setting) so that anything discussed is kept confidential. Staff at 'Baby Space' and 'Bumps' are aware of the research and have been asked to inform any women they feel might be suitable to take part. Aniela will ask a number of questions, but you will only discuss things you feel happy with. The questions Aniela will ask involve discussing your experiences of pregnancy, motherhood, support you might be receiving, and media images of teenage pregnancy.

What happens to the information gathered?

All the information collected will be looked at carefully and the main ideas and issues will be written up by Aniela for her research degree. Other reports will be written to raise awareness of issues to do with teenage pregnancy and motherhood.

If you would like more information about the research, with a view to taking part, please contact:

Aniela Wenham, e-mail: amw128@york.ac.uk

Or

Bob Coles (research supervisor), email: rwc1@york.ac.uk,

Tel: 01904 321241

Appendix 3 – Topic Guide

Topic Guide

Introduction

- Information sheet – any questions?
- Consent Form
- Interview process-(*timescale, confidentiality, recording, breaks, what we might discuss*)
- Use of findings.

Background factors:

Name:

Age:

Address (area):

Ethnicity:

Indicator of Social Class (profession of parents):

Age of child/children:

No. of children:

Marital status:

Employment status:

Housing Type:

Pregnancy:

Was this positive/ negative, anxious? Why?

Roughly how many weeks pregnant were you when you found out?

How confident did you feel about disclosing this?

Who did you tell first? Are you glad you did? Would you do it differently if you had your time again?

So how did other people react? Especially people whom you are or were close to?

Mainly Positive? Negative?

When you look back, how much did these positive or negative reactions have an impact say on your feelings towards being pregnant?

Can you think of anyone who had a positive impact on how you felt about your pregnancy and becoming a mother, say someone who stood out as being really supportive, or a positive role model?

Can you think of anyone who had a negative impact on how you felt about your pregnancy and becoming a mother?

Explore feelings and thoughts when approaching the due date

What were professionals like? (Midwives, health visitors) Were they supportive/approachable etc?

Did you feel anxious/nervous/excited when approaching the due date?

If yes, what were you anxious about?

Motherhood

Now you are a mum how different is it (if any) from how you imagined it to be?

How did you initially feel when you discovered you were pregnant?

In what ways do you believe your life has changed?

What would you describe as the most important aspects of being a mum?

What makes a 'good' or 'successful' mother?

How difficult is it to achieve this in reality?

What makes a 'bad' mother?

What are the most difficult aspects of motherhood?

Do you have any aspirations for your children? Is there something in particular that you want them to succeed in?

Do you feel there is conflict sometimes with how you want to be a mother and how other people think you should be (Parents/Professionals etc)?

Do you always enjoy being a mother?

What are the best things?

What are the worst things?

Does being a mum feel quite lonely at times?

Are you regretful about any decisions you've made?

Is there anything in your life you would change?

Do you think being a mother has had an impact on different aspects of your life such as education or work? (probe experience of school)

How about you're social life?

How different do you think things would be if you postponed being a mother?

Media Representations

What do you think of the media coverage on teenage pregnancy? (probe lone parenthood as well)

What images tend to be put across?

How accurate are these?

If Participant describes negative images:

Do you feel people make assumptions, that people may judge you or see you in a bad light due to how young mothers are represented?

How do you cope with this?

How does it make you feel about being a mum?

Do you feel you have to prove yourself?

Looking back can you think of any times when you felt you had to do this?

Overall does this make being a mum harder?

Does it have a negative affect on your confidence to be a 'good' mum?

Look at this case study published in the paper last week (examples of young mum's experiences)

Do you share any similarities with these young mums?

Similarities/Differences between older and younger mothers

What would you describe as the differences (if any) between younger and older mothers?

What would you describe as the similarities (if any) between younger and older mothers?

Public Spaces

Have you joined any mother and toddler groups?

If no, have you considered it?

How do you feel in certain public spaces (probe doctors, mother and toddler groups etc.) Do you feel uncomfortable in certain situations?

Do you feel excluded from certain things because you're a younger mother?

Social Networks/ Support networks

How long have you lived here?

Do you like it here? What images of the area do you have?

Do you know many people around here?

Have you made many friends?

Who do you spend most of your time with?

Is there anyone who has given you a lot of support?

Policy approaches – 'Bumps' project, 'Baby Space' project, Sure Start etc.

Have you been involved in any projects or groups with other young mums?

What do you think of these?

Would you ever consider getting involved in anything like this?

Do you know anybody who has? What do they think?

If you have or are involved do you believe they are a good/bad idea?

What would make them successful?

What do you feel you gain (if anything) from involvement?

Would you recommend them?

If yes, why?

What would you like to see more of?

What would benefit you the most?

Other Issues and Ending the Interview

- Is there anything we haven't discussed that you would like to mention?
- Recap briefly on researcher's understanding of what was said – check anything like to elaborate on
- Remind that can have a copy of transcript if wish
- Thank again for taking part in the project

Appendix 4 – Saldana Matrix

Figure 1 - Longitudinal Qualitative Data Summary Matrix

DATA TIME POOL/POND: FROM ___ / ___ / ___ THROUGH ___ / ___ / ___

STUDY: _____ RESEARCHER(S): _____
 (when possible or if relevant, note specific days, dates, times, periods, etc. below; use appropriate DYNAMIC descriptors)

INCREASE/ EMERGE	CUMULATIVE	SURGE/EPIPH/ TURN POINT	DECREASE/ CEASE	CONSTANT/ CONSISTENT	IDIOSYN- CRATIC	MISSING
DIFFERENCES ABOVE FROM PREVIOUS DATA SUMMARIES						
CONTEXTUAL/INTERVENING CONDITIONS INFLUENCING/AFFECTING CHANGES ABOVE						
INTERRELATIONSHIPS	CHANGES THAT OPPOSE/HARMONIZE WITH HUMAN DEV/SOCIAL PROCESSES			PARTIC/CONCEPT RHYTHMS (phases, stages, cycles, etc. in progress)		
PRELIMINARY ASSERTIONS AS DATA ANALYSIS PROGRESSES (refer to previous matrices)						

THROUGH-LINE
(in progress)

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