THE CONSTRUCTION OF SOCIAL PROBLEMS AND THE
EXPERIENCE OF HUMAN SERVICE PROGRAMS:
Contradictory Relations in a Support Group
for Adolescent Mothers

by

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ABSTRACT

The patterned interactions in a support group for adolescent mothers are analyzed in the context of the specific construction(s) of adolescent pregnancy and motherhood that legitimate the program's existence. Particular attention is paid to the way in which staff and clients are positioned vis a vis one another through the typification of the program's mission and goals. Data analyzed include field notes recorded during ten months of participant observation with the group, program documents describing the history, mission, and goals of the program, and an in-depth interview with the Program Director. Changes in funding patterns led to an increased emphasis on the prevention of child abuse as a goal of the program. The resulting expectations of program staff and assumptions about adolescent mothers cast these two groups of women into social identities containing inherent contradictions. Differences of social class further complicate the
relationship between the groups. Varying strategies of self-presentation are employed by clients and staff as they struggle with these contradictions. The young mothers present themselves in ways that maintain distance between themselves and staff. While the staff are never completely successful and breaking down the barriers between themselves and the young mothers, one style of self-presentation has the potential to bridge the gap. The findings have practical implications for the design and implementation of human service programs, particularly those which address stigmatized categories of women. The findings also have theoretical implications relevant to ongoing discussions of feminist epistemology, and the intersection of gender and social class.
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TABLE OF CONTENTS

ABSTRACT .................................................. ii
ACKNOWLEDGMENTS ....................................... iv

CHAPTER ONE
STATEMENT OF THE PROBLEM AND BACKGROUND FOR THE STUDY 1
   Statement of the Problem ............................ 1
   Background for the Study ............................ 4
   Teen Pregnancy as a Social Problem .............. 4
   Motherhood as Ideology ............................... 7
   Social Service Programs as Research Sites .......... 12
   Interpretive Sociology ................................ 15

CHAPTER TWO
EPistemology, METHODOLOGY, AND RESEARCH METHOD ........ 17
   Epistemological Issues ............................... 17
   Gender as an Organizing Principle of Society .... 18
   Asking Questions from Women's Experience ...... 20
   Women's Experience in Political Struggle ....... 22
   Knowledge for Women .................................. 25
   Location of the Researcher ........................... 26
   Methodological Issues ................................. 31
   Interpretive Methodology ............................. 31
   Feminist Methodology ................................ 33
   Research Method ................................. 35
   Selection of Research Site ........................... 35
   Gaining Entry .......................................... 37
   Support Group Meetings ............................... 39

CHAPTER THREE
THE POLITICS OF TEEN PREGNANCY ....................... 44
   Adolescents Versus Teenagers ....................... 46
   Pregnancy and Parenting ............................. 48
   Unmarried Adolescent Mothers ....................... 50

vi
CHAPTER ONE

STATEMENT OF THE PROBLEM AND BACKGROUND FOR THE STUDY

Statement of the Problem

The purpose of this study is to explore how the meaning of motherhood is being constructed through the discourse and practices of a social service organization. It stems from a more general interest in the ways that women accept, resist, modify and create images of womanhood, and in the ways that these images both shape and are shaped by social practices. I see such negotiations over the meaning of womanhood as inherently political phenomena, struggles for the power to create authoritative definitions of social situations (Fraser, 1989).

Motherhood is a social identity that has historically been central to cultural prescriptions and proscriptions for women (Bernard, 1974; Rich, 1976; Oakley, 1981; Schur, 1984). Unfortunately, those discourses which have had the most power to shape the practice of motherhood typically exclude understandings of motherhood rooted in the everyday experiences of mothers, particularly mothers who are not married, white, middle-class, heterosexual, or post-adolescent (Ehrenreich & English, 1978; Phoenix, Woollett, and Lloyd, 1991; Collins, 1990). Works that do start from women's
experience have exposed the mythological nature of cultural ideals of motherhood, analyzing the role of such myths in perpetuating women's oppression in society -- motherhood is sanctified by the culture but devalued in terms of access to valuable social resources (Bernard, 1974; Rich, 1977; Oakley, 1981; Phoenix, et. al., 1991; Bassin, Honey & Kaplan, 1994). When the real life experience of mothering doesn't mesh with the cultural ideal of motherhood, women are encouraged to blame themselves for failing to achieve the ideal, rather than to question the ideal itself (Pope, Quinn & Wyer, 1990; Bassin, Honey & Kaplan, 1994).

Because cultural ideals surrounding motherhood are implicit rather than explicit, they are often more clearly revealed by examining the circumstances under which motherhood and mothers receive negative or controversial public attention (Phoenix, Woollett, and Lloyd, 1991). Many contemporary issues such as teen pregnancy and adolescent motherhood, single motherhood, lesbian motherhood, surrogate motherhood, abortion, day care, new reproductive technologies and so on reflect a concern with defining the boundary between appropriate and inappropriate motherhood. Debates over these issue reflect negotiations over the meaning of motherhood and

1 Of course debate surrounding these issues also reflects and constructs assumptions about the family, fatherhood, sexuality, the social value of children, race relations, the relation between the family and the State, and so on.

2
by implication, the role of women in contemporary Western society. In this sense they fit into an historical pattern of externally defined images of normative motherhood.

In recent years teen pregnancy and adolescent motherhood have received increasing attention as social problems. The media and scholarly literature paint a disturbing picture of the life chances of adolescent mothers -- lowered educational and occupational achievement, welfare dependence, abuse and neglect, poor physical and emotional health -- and builds a case for the need to prevent teenage pregnancy. At the same time, support for adolescent mothers, especially financial support, has come under increasing attack. Given the current mood toward adolescent mothers, human service agencies which target adolescent mothers are important sites where multiple meanings of motherhood come together and new meanings are negotiated (Ward, 1990).

Based on one year of participant observation in a support group for adolescent mothers, I provide a descriptive analysis of the dynamics of the interactions among participants -- both adolescent mothers and staff -- in the group. My analysis is guided by a perspective that is both feminist and interpretive. Data include field notes recorded after each meeting of the support group, official documents from the group (e.g., mission statement, publicity materials), handouts provided by staff for particular topics discussed during group
meetings, and an interview with the support group's Program Director.

Chapters Four, Five, and Six contain the major trends which emerged from analysis of data. Chapter Four considers the Teen Parent Support Program as an organization, discussing its history, governance structure, and funding. In particular I describe how the prevention of child abuse became a significant part of the rationale for the program's existence. In Chapters Five and Six I analyze the interactional dynamics of both staff and clients of the program. Chapter Five considers the ways in which the mission and goals of the organization cast staff and young mothers into complicated social identities and constrained the kinds of relationships that can develop across these two groups of women. Chapter Six examines the patterns of identity negotiation observed during support group meetings, in the context of situational constraints.

Background for the Study

Teen Pregnancy as a Social Problem

Although mothering during adolescence is not a new phenomenon in the United States, its status as a social problem requiring response by the State is relatively recent. It was not until 1978 under the Carter Administration that the first federal policy specifically addressing adolescent
pregnancy, the Adolescent Health, Services, and Pregnancy Prevention Act, was enacted. Since that time, adolescent pregnancy and parenting have received a great deal of attention from various interest groups, policy makers, social scientists, educators, and the media. In addition, adolescent parenting is an integral part of welfare reforms proposed by the Clinton Administration and the Republican "Contract with America."

While there is widespread agreement in the U.S. that adolescent parenthood is a social problem, there is little agreement about any other aspect of the issue. Policy makers label the adolescent birth rate "epidemic", while historians argue that the rate reached its peak in the mid 1950s and has been declining since (Vinovskis, 1988). The media portrays adolescent motherhood as a sure ticket to life-long poverty (Jonsberg, 1992; Pearce, 1993), while others argue that adolescent childbearing is a symptom rather than a cause of living in poverty (Geronimus & Korenman, 1990). Economists debate the cost to taxpayers when adolescent mothers become increasingly dependent on an already overburdened welfare system, while human service professionals and educators stress the need for more extensive services for adolescent families.

Academic research and articles in the popular press attempting to disentangle some of these issues have proliferated in the past three decades. The image of
adolescent mothers that emerges from these publications is largely a negative one (Phoenix, 1991; Pearce, 1993). Much of the research literature tries to identify psychological (e.g., lack of self-esteem, poor role models, an external locus of control) or sociological factors (e.g., low-income, a culture of poverty, sexism in education) that "cause" teen pregnancy. Although these factors are important, they tend to downplay or deny that young women actively interpret and make decisions about their own lives and the world around them.

Phoenix (1991:28) maintains that even researchers who do not see young motherhood as inherently problematic have difficulty avoiding the negative construction of adolescent mothers as a starting point for research. Nathanson (1991) demonstrates that adolescent female sexuality has historically been the subject of intense social control and locates the attention to adolescent pregnancy and parenting within this historical context. The pregnant teenager represents an undeniable challenge to traditional normative expectations about female sexuality. Therefore she provides a symbolic and literal representation within the larger culture of a specifically female form of deviance. This image of the young woman as a passive or irrational decision-maker makes the social identity "adolescent mother" problematic (Phoenix, 1991).

The negative image of the adolescent mother also provides
a cultural backdrop for the goals and practices of social policy and programs directed at adolescent mothers, and ultimately upon the kind of help they can offer to young women. Based on a comparative study of six developed countries, Jones, et. al. (1985) conclude that the high teenage fertility rate of the U.S. relative to the other industrialized countries, is due in part to the conceptualization of the problem of adolescent pregnancy and motherhood. Those policies and programs that prove most effective in reducing adolescent fertility (e.g., comprehensive sex education in schools linked with free and confidential family planning services) target the prevention of adolescent pregnancy, rather than adolescent sexuality. Such solutions have so far proven too controversial for implementation in the U.S. because they imply tolerance of adolescent sexuality.

Motherhood as Ideology

My general interest as a feminist sociologist is in the social processes through which gender is constructed and reconstructed. Feminist scholars have provided thorough analyses of the relationship between socially constructed gender and male domination. Briefly stated, cultural ideals of femininity and masculinity are constructed by patriarchal elites, rather than by women and men based in their everyday experiences. Therefore, such images are shaped by relations
of power, and are created in the interest of legitimating hierarchical social relationships. I am interested in the critique of such images and the ways in which women accommodate, resist and re-create these definitions in their everyday experiences.

The relationship between ideologies of motherhood and the material oppression of women has been a consistent theme in feminist theorizing (Friedan, 1963; Firestone, 1970; Bernard, 1974; Mitchell, 1974; Gordon, 1976; Rich, 1976; Chodorow, 1978; Oakley, 1980; O'Brien, 1981; Allen, 1986; Ruddick, 1989; Collins, 1990; Bassin, Honey, and Kaplan, 1994). In general these theorists agree that dominant images of "appropriate" and "inappropriate" motherhood are constructed by, and therefore in the interests of, patriarchal elites rather than by and in the interests of mothers.

Much effort has been directed at identifying the dominant construction(s) of "appropriate" motherhood. In the following I specify what I have in mind when I refer to these constructions. My thinking about this is most influenced by Thompson and Walker's (1990) review of the literature.

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2Ann Snitow (1992) provides a comprehensive review of feminist writings on motherhood. Interestingly, Snitow identifies a shift in these writings from an antinatalist to a pronatalist stance occurring during the 1980s. She criticizes contemporary feminist theorists of motherhood for failing to reflexively attend to their own pronatalist assumptions about motherhood.
describing the "enduring" images of motherhood, and Phoenix and Woollett's (1991) discussion of the "fit" between dominant constructions of motherhood and political ideologies about the family.

Thompson and Walker (1990) identify the following assumptions as central to the "enduring image" of motherhood. First, motherhood is constructed as inevitable. That is, all women have children, and "mother" is the identity from which women derive the greatest meaning and fulfillment (Glenn, 1987; Ussher, 1990). Second, women enjoy and intuitively know how to care for children. Third, motherhood should be the constant and exclusive activity for women. That is, women with children should devote their time and energy to the nurturing and care of their children to the exclusion of other activities. Finally, good mothers are "all-giving and all-powerful." Mothers are capable and responsible for meeting all the needs of their children, and the child's "fate" is the mother's responsibility. These kinds of expectations are not only unrealistic, but also clearly incompatible with women's sexuality and wage work (Thompson and Walker, 1990).

Phoenix and Woollett (1991) uncover implicit assumptions about the "good mother" by examining the circumstances under which mothers receive "public censure." For example, the negative construction of the "welfare mother" suggests that a mother should be able to provide materially for her child
without assistance from the State. Related concerns about female-headed families suggest that the best way for mothers to meet children's material needs is through the formation of families based on the heterosexual couple. Infertility among women is constructed as a devastating experience, and much time and money is spent on reproductive technology to help women conceive. For Phoenix and Woollett (1991) this is evidence of the imperative for women to have children. Finally, there are age norms associated with the good/bad mother divided. Although mother is constructed as a desirable social status for all women, it must not occur when a woman is either too young or too old. Thus, adolescent mothers find themselves in the contradictory position of assuming a valuable social status, but during a period of life when it is defined as inappropriate.

Initially, feminist theorists focused on exposing the ways in which cultural ideals of motherhood contributed to and reinforced the secondary status of women in society. For example, the patriarchal construction of motherhood implies responsibilities and moral obligations of mothers, yet important economic and legal reforms which would help women meet these responsibilities are denied by a patriarchal state (O'Barr, 1990). The construction of the individual mother as responsible for the "fate" of her children diverts attention from the responsibilities of the State to provide for
dependent citizens. Women's primary responsibility for childcare often becomes a barrier to their full participation in the labor force on equal footing with men (Calasanti and Bailey, 1991).

Despite such analyses, many women, writing from their own experiences, have maintained that motherhood is a valuable and even empowering experience for women (Ruddick, 1980, 1989; Collins, 1994; Lazarre, 1994). The wholesale rejection of motherhood by early feminist theorists (e.g., Firestone, 1971) has been criticized because it is grounded in the theoretical standpoint of white, middle-class, highly-educated, heterosexual women. Thus, contemporary feminists advocate analyses of motherhood that start from the everyday experiences of mothers in order to capture the full range of the mothering experience. The power relations embedded in the cultural construction of "Mother" can be made visible in the form of contradictions between the cultural image of motherhood and the real-life experience of mothers (O'Barr, 1990).

Motherhood is not conceptualized as inherently oppressive, rather the social and cultural contexts in which motherhood occurs makes the experience more or less oppressive (Bernard, 1974). Women who become mothers during adolescence find themselves in particularly oppressive circumstances. They have become mothers within a socio-historical context
that defines their motherhood as inappropriate. A twenty-seven year old woman who became a mother at seventeen told me:

I think I'm lucky because I look older than I am. Even now I don't like to tell people how old I am because they know I have a ten-year old daughter and it doesn't take long to do the math. Then I get the raised eyebrows and the "Oh, I see's."

The problem for most adolescent mothers is that someone else defines what they are doing as wrong or deviant (Jonsberg, 1992).

The existence of numerous instances of specifically "female" deviance reflect the operation of a gender system (Schur, 1984). These definitions of deviance operate as a form of social control, legitimating the secondary status of women in society. Thus, the debates, interest in and status of teen pregnancy/adolescent motherhood as a social problem can be conceptualized as a site where the boundary between normative and deviant motherhood is being negotiated, and social control must be accepted, accommodated or resisted by individual young mothers.

Social Service Programs as Research Sites

Despite the decline of resources, social service programs for pregnant and parenting teens are available in many communities across the United States. These programs represent an "official" response to the perceived social
problems of teen pregnancy and parenting. Therefore, the assumptions that inform the operation, practices, and services provided by such organizations reflect a particular understanding or definition of adolescent motherhood. The staff of these programs also embody varying definitions of adolescent motherhood. Finally, the adolescent mothers served by such programs embody an understanding of motherhood grounded in their own experiences.

In this sense, social service programs for adolescent mothers are sites where a number of potentially conflicting definitions of appropriate and inappropriate mothering come together. In such locations, adolescent mothers are confronted with the working assumption that motherhood during adolescence is problematic. It is here where their accommodation, modification and resistance to such meanings may be visible. This makes a social service program for adolescent mothers an appropriate site to look for answers to the research questions posed in this study.

Social service programs are also becoming increasingly important research sites for feminist scholars. The gender system in late capitalist society has been described as becoming more "public" in character (Brown, 1981). That is, the maintenance of systemic male dominance is increasingly being accomplished by institutions of the state rather than by individual men. A full explanation of this trend is beyond
the scope of the present study, however, analyses of the operation of social-welfare programs can contribute to our understanding of the forms that male dominance takes in late-capitalist societies:

...social-welfare programs provide...a tacit but powerful interpretive map of normative, differentially valued gender roles and gendered needs (Fraser, 1989:9).

Therefore, these programs often fall short of providing real help to women because they are based in and contribute to sexist and androcentric interpretations of women's needs.

Finally, the human services are a particularly important research site given the contemporary debate over welfare reform. Detailed accounts of what actually happens in social service programs help us understand the outcomes and potentials of human service organizations, and inform decisions about needed changes (Joffe, 1979; Horowitz, 1995). Much writing on the human services stops short of analyzing what happens in human service organizations. Traditional approaches focus on three areas: 1) tracing the natural history of social service organizations back to the discourses of competing interest groups, 2) the complex nature of funding the human services, and 3) the sociological "function" of human services as either an integrative mechanism, or a means of regulating troublesome populations (Joffe, 1979).
Casting an ethnographic eye on the human services can provide a richer theoretical understanding of the significance of the human services. It can also help us to evaluate the successes and/or failures of specific social service programs. That is, it can help us to see if the goals and aims of specific programs are being achieved.

**Interpretive Sociology**

In my analysis of data, I rely upon conceptual categories derived from the tradition of Interpretive Sociology. Based in the works of George Herbert Mead, this perspective takes as a guiding premise the idea that mind, self, and society emerge simultaneously in ongoing human interaction. From this perspective, patterns of social organization are constructed and re-constructed through the negotiations of situational definitions, identities, and selves that occur in human social interaction. Thus, it is human social interaction that becomes the focal point for analysis.

The interpretive approach differs from traditional sociological theory in its conceptualization of social structure as fluid rather than stable. In fact, the relative fluidity or stability of social structure is one point of debate among those who adopt this approach. There is agreement however, that human social interaction is characterized by both freedom and constraint. Goffman (1961) for example illustrates that even in total institutions
characterized by powerful constraints on interaction, people find ways to exercise creativity and freedom.

In my analysis I pay attention to the constraints on interaction present in the setting. In particular, I argue that a contradictory relationship is created between staff and clients in the Teen Parent Support Program, which creates barriers to effective communication between the two groups. I conceptualize both staff and mothers as performers attempting to negotiate acceptable social identities within the context. I examine strategies of self presentation as a means of describing these identities, and I focus on recurrent themes in conversation to identify important social objects in the situation.
CHAPTER TWO

EPISTEMOLOGY, METHODOLOGY, AND RESEARCH METHOD

While epistemology, methodology and research method are connected, I have chosen to discuss the three separately to avoid confusion among them. Harding (1987) argues that one of the difficulties in determining whether a unique feminist method exists is the confusion of issues of epistemology, methodology, and research method. I agree with Harding (1987:2) that there is not really a distinct feminist method, but that new epistemologies and methodologies are requiring new uses of traditional methods.

Epistemological Issues

This research employs a feminist, standpoint epistemology as will be demonstrated through a brief explanation of how I have resolved several epistemological issues. I understand an epistemology to answer questions about who can be a knower, and what counts as legitimate knowledge. A feminist epistemology is one which legitimates women and women's experiences as sources of knowledge with the goal of providing more accurate explanations of the social world than that produced by traditional, androcentric epistemologies (Cook & Fonow, 1986; Harding, 1987; Hartsock, 1987). Issues pertinent
to a feminist standpoint epistemology include viewing gender as an organizing principle of society, positioning women as agents of knowledge, producing knowledge for women, and locating the researcher in relation to the research project (Hartsock, 1984; Harding, 1987; Morrissey, 1992). I will discuss each of these as they relate to my project. **Gender as an Organizing Principle of Society**

Feminist revisions of knowledge in academic disciplines have proceeded from adding studies of women grounded in traditional theory and research (i.e., the "add women and stir" approach) to transforming the very foundations of traditional theory and research. This shift results in part from the recognition that a lack of information about women in our disciplines is only one form taken by androcentric bias. This bias also takes the form of distortions in the body of knowledge produced by theory and research methods founded on sexist, racist and classist assumptions (Harding, 1987; Ladner, 1973; Rothenberg, 1992). Attempts at revising bodies of knowledge in various academic disciplines have met with resistance, and therefore feminist theory has yet to achieve its full transformative potential. Sociology is no exception to this rule. Stacey and Thorne (1985) argue that one of the problems in sociology is the conceptualization of gender as a variable in research rather than as a principle of social organization. In order to produce knowledge about women and
men as gendered social actors, it is necessary to attend to the ways in which gender as a social category forms the basis of decisions regarding the allocation of resources, privileges and freedom, and also shapes the experiences and perspectives of women and men.

Ladner's (1973) study of Black adolescent women provides an example of this principle. Ladner discusses the tension between her perspective as a trained sociologist and her perspective as a Black woman. Although her sociological training encouraged her to see the young women she was studying as deviant, she found herself focusing on the courage of the young women trying to survive in a social environment colored by institutional racism. Rather than seeing these young women's behavior as an illustration of deviant behavior, female variety, she saw their behavior as an adaptation to being poor, black and female in a racist, sexist, classist society. In other words, Ladner shifted from seeing the women's behavior as problematic to seeing their location in society as problematic. In so doing, she also moves from seeing gender as a characteristic around which deviance takes varying forms to a principle of social organization shaping life chances, experiences and perspectives.

In this study gender is conceptualized as a principle of social organization. In addition, gender is conceptualized as further classifiable by race/ethnicity and class. That is,
the distribution of resources and life chance varies among women along the dimensions of race/ethnicity and class. I attend to the influence of gendered assumptions on the construction of adolescent motherhood as a social problem. I do not approach the issue as an example of deviant behavior; instead I explore how gender affects the ways adolescent motherhood is understood and experienced.

**Asking Questions from Women's Experience**

A second and closely related issue is asking questions based on the experience of women. Thinking about gender as a principle of social organization and feeling a connection based on race and with the women she studied allowed Ladner (1973) to reformulate her research question so that it provided more accurate information about the social worlds of these women. Similarly, I entered the field with an eye toward understanding why young women choose to become mothers, and how the Teen Parent Support Group was (or was not) empowering them. In the beginnings of this project, my notion of empowerment was akin to replacing "false consciousness" with "feminist consciousness." That is, I was hoping to see these young women come to view their situation in relation to inequalities of gender, class and race.

The problem with focusing my attention on these issues was that it led me to view these women as passive victims, rather than as active people. They did not see their status
as mothers as particularly unusual or problematic. Rather, motherhood was something to be proud of. As a woman in my late twenties without children, I was perceived as deviant. The young women frequently asked when I was going to "have one," and teasingly pointed out that I had to study them (the young mothers) since I was not yet a mother. It was apparent that aside from the common problems of getting the baby to sleep through the night and figuring out when to start them to on solid foods, these young women did not see adolescent motherhood as problematic.

My sociological training then encouraged me to see these women as unconscious or "falsely conscious" of their situation. This came from seeing myself as a more legitimate agent of knowledge about adolescent motherhood than adolescent mothers themselves. In other words, to conceptualize these women as falsely consciousness was to silence them and contribute to their marginalization as social actors. I began to realize that explaining the "deviant" behavior of these young women was not what I was interested in. I was interested in how gender informs the process by which a social phenomenon attains the status "social problem," and how this designation affects the people touched by the phenomenon. That is, I wanted to understand how the social construction of adolescent motherhood as a social problem reflects gendered assumptions and shapes these women's understanding and
experience of motherhood.

Women's Experience in Political Struggle

This is a political question, involving the power to define situations and social realities. Questions of power in the reality construction process have been addressed most convincingly within symbolic interactionism from the perspective of labeling theory (Huber, 1978). The labeling theory of deviance focuses on the way in which behavior is classified as "deviant" or "normal" by those in positions of power, or "moral entrepreneurs" (Becker, 1973). Typically behavior is labeled deviant when it in some way challenges social relations that perpetuate the position of elites, thus labeling a person or group as deviant can function as a mechanism of social control (Erikson, 1962). In this study I explore the interests served by the construction of adolescent motherhood as a social problem.

Despite the fact that these women did not seem to define their motherhood as problematic, the cultural image of adolescent motherhood as a social problem persists. While these individual young women would be relatively powerless to change the cultural image of adolescent motherhood, they do have the power to shape the meaning of this status within the support group. Thus, I view the support group as a specific location where the political struggle over the definitions of adolescent motherhood is played out, particularly in the
interactions between adolescent mothers and staff.

In these interactions, young mothers have an opportunity to differentiate themselves from those adolescent mothers who cause the social problem. That is, the young women are motivated to present themselves as acceptable because they are interacting with agents of social control. The staff are representative of the social reality in which the young mothers and their behavior are defined as problematic and in need of change. Staff members have the power to help and hurt these young women. On one hand, the staff can provide access to desired resources. These include material resources such as diapers, baby formula and food, furniture, and clothing, and intangible resources such as referrals to other social service agencies, job connections and social support. On the other hand, the staff has the power to sanction behavior perceived as inappropriate through reporting suspicions of child abuse or neglect, drug use, and withholding the resources mentioned above. Thus, the support group is a location in which women experience political struggle.

The political struggle extends beyond the meaning of adolescent motherhood to the meaning of gender. Designating adolescent motherhood a social problem enters it into the public discourse where it shares the stage with other "problematic" forms of motherhood. I began to wonder about images of women at the root of the construction of adolescent
motherhood as a social problem. I was interested in the contradiction between the perception of motherhood as a central activity definitive of womanhood, and the increasing images of "deviant" mothers in the popular culture.

Of course images of deviant mothers in the culture may not be increasing so much as I was becoming increasingly attuned to these images. Nonetheless, adolescent mothers share a similar image in the culture with lesbian mothers, welfare mothers, abusive mothers, surrogate mothers, mothers with Munchausen Biproxy disease, and mothers who dump their babies in garbage cans. Such women are constructed as "defective" mothers. Because motherhood and womanhood have traditionally been equated in the popular culture (O'Barr, et al., 1990), I began to see these cases of defective mothers as examples of defective women.

These images act as powerful symbols constructing the conditions under which motherhood is appropriate and inappropriate and of the potential for defective women to behave in ways considered "inhuman." Coming to conceptualize a category of people as less-than-human is a frequent first step in legitimizing the treatment of them as less-than-human. This process was illustrated recently in the hostile reaction of the public to Susan Smith, the South Carolina woman who admitted to deliberately drowning her two young sons. I suspect that the proliferation of these images in the media
and popular culture is related to what Faludi (1991) has called the backlash against women in American culture. Thus struggles over how to conceptualize adolescent motherhood are part of the struggle over the meaning of "woman" in the culture.

Knowledge for Women

With the recognition that all knowledge has political implications, feminist and critical scholars have become concerned that the knowledge we produce can be used in the transformation rather than the reproduction of oppressive social relations (Cook and Fonow, 1986; Harding, 1987). Thus, it was important to me that the findings of this research have some practical application. However, the goal of the research also changed as I became more involved in the field. Originally, I thought my findings could be used primarily by the Support Group (and others like it) to evaluate its effectiveness and suggest ideas for improvement. Shifting the focus of my research question, however, made the very existence of programs like the Teen Parent Support Group problematic.

I came to see such groups as the response of a capitalist-patriarchal state to what it has designated as a problem. The implications of this study bear on more than just the operation of a particular social service agency. If the social welfare system is to effectively serve people in a
humane fashion, the assumptions that inform their operation must be critically analyzed. If social service agencies are founded on faulty assumptions about the intended recipients or the problem being addressed they are not likely to be effective.

Fraser (1989) has identified the contradictory relationship of feminist theory to the social welfare system. There are problems inherent with both praising and criticizing social welfare. While social welfare programs and policies have been grounded in sexist, classist and racist assumptions, they have provided women with increased, though limited power. For example, the existence of these programs, through the provision of living subsidies and social support does allow women to be less dependent on individual men. However some argue that women's use of social welfare programs represent only a change in the form of women's oppression -- from private to public patriarchy for example (Brown, 1981; Pearce, 1979). As I analyze and draw conclusions from the data, I have been careful to attend to the consequences of my findings for both the oppressive and empowering features of the social welfare system.

**Location of the Researcher**

A final epistemological issue of concern is locating the researcher in relation to the research project. This strategy is advocated to make it clear how my cultural beliefs have
shaped the data collection process and the interpretations and analyses I offer. One source of the androcentric bias in social science knowledge is the way in which the researcher assumes a sort of "archimedean" viewpoint (Jehlen, 1982), standing outside and above the subjects of research. The anonymity of the researcher lends the findings an authoritative tone encouraging us to overlook ways in which the researcher as an historical, concrete social actor, may have influenced the findings. In other words, traditional research methods gives researchers the power to define the reality of the researched. Thus, locating the researcher in relation to the research project represents an attempt to deal with issues of power inequality between researcher and researched.

In the remainder of this section I will briefly trace the development of my interest in adolescent motherhood, and how my perspective on it has been shaped by my experiences as a white, working-class woman. The mid 1980s attack on women's reproductive rights coincided with the period in graduate school during which I began learning about feminist theory and the study of gender. I became interested in making sense of how control over women's reproductivity was related to women's oppression. In researching the social history of abortion, I learned that reproductive control was related to racial/ethnic and class stratification as well as gender stratification.
(Mohr, 1978; Eisenstein, 1981; Petchesky, 1984; Moen, 1987). As a society, we only become concerned about reproductive issues when it appears that middle and upper class white women are bearing fewer children than women of other races, ethnicities and classes.

Defining the circumstances under which motherhood is deviant and acceptable is related to sexism in that these definitions are created in the interests of capitalist patriarchy instead of in the interests of women and children (Phoenix, 1991; Fraser, 1989). In addition, sexism, racism and classism frequently provide the motivation for making distinctions between good and bad mothers.

The case of "deviant" motherhood that I was most familiar with was adolescent motherhood. I had known a number of young women in high school who experienced unplanned pregnancies. Some married, many had abortions. I remembered that getting pregnant was one of my biggest fears as both a high school student and an undergraduate. I knew that a pregnancy for me would have meant marrying my high school sweetheart, getting a job and settling down in the small, rural working-class town where I was raised.

Looking back, it seemed significant to me that at a young age and with relatively little feminist consciousness, I was able to make the connection between getting pregnant and giving up my dreams. Most of my friends thought of the
situation I described above, with the exception of the premarital pregnancy, as ideal. However, I had always wanted to go to college, have a career and move away from my hometown. The people who lived in that town had been there for generations. If people couldn't remember you're grandparents, you were still considered a newcomer. While I understood and shared their hometown pride, I couldn't quite understand how people could be content to stay in one place for so long. I was always curious about what else was out there.

When my friends began to get pregnant, my mother told me stories of her friends in high school getting pregnant. I began to see this as a cycle, something not talked about openly, but shared among the women. It had happened to my friends's mothers, to the high school science teacher, even the principal and one of my friends' mothers had conceived a child out of wedlock which was later given up for adoption. One case in particular stood out in my memory. A sixteen year old friend had become pregnant. Her boyfriend told her she couldn't get pregnant the first time. On the drive to the abortion clinic in Baltimore (90 minutes away), her mother told her that she had also gotten pregnant as a teenager. She had gone away to stay with a relative before her pregnancy became obvious. When the baby was born she gave it up for adoption and returned home.
I attribute my ability to connect early pregnancy and limitation of life chances to my perspective as a white, working-class woman. Obviously, the consequences of adolescent pregnancy are much different for women than men. One of the distinctions around which social status revolved in this community was between acceptable white, working class families on one hand and "white trash" and Blacks on the other. The way in which teen pregnancy was responded to varied along this dimension.

"Respectable" families were horrified and ashamed when this happened to their daughters. They dealt with the situation discreetly, either through helping the daughter gain access to abortion services or arranging a "quickie" wedding between the daughter and the baby's father, before her pregnancy became obvious. I remember worrying about the pain and embarrassment an unplanned pregnancy would cause for my parents. Despite the fact that respectable white working-class families viewed teen pregnancy as a disappointment, they were also not terribly surprised when it happened. These families generally helped the pregnant daughter in whatever way they could, and rarely turned their back on her.

Black families and poorer white families, on the other hand were seen as unable to control their fertility or attempting to sponge off the welfare system. Thus, the families of pregnant teens from this background weren't
particularly surprised or upset when this occurred. It should be emphasized that this was the *perception* of how these groups responded to teen pregnancy, I doubt its accuracy. In sum, I believe my interest in and perspective on adolescent pregnancy and motherhood have been significantly shaped by my experiences as a white, working-class woman.

**Methodological Issues**

I understand issues of methodology to be those which deal with how a theory should be applied to the study of a substantive area (Harding, 1989). In this study I examine a specific location where gender politics are worked out, in a specific interactional setting created to address the problematic nature of adolescent motherhood. Epistemology and methodology are connected in that theory must be applied so that it makes sense of the social worlds of adolescent women, and legitimates them as agents of knowledge. Given this requirement, I have chosen to use elements of interpretive and feminist methodology.

**Interpretive Methodology**

In this section I discuss the specific questions which emerge from the application of interpretive methodological principles to the general research question. As I analyze the emergent reality of the support group, specific interactions
between participants become the unit of analysis. I seek to identify and explain the meaning of adolescent motherhood that emerges, the meaning of self and relevant social objects, the sources of these meanings, and the general patterns of interaction.

In determining the meaning of adolescent motherhood in the context of the support group, I am looking for attitudes of the participants toward adolescent motherhood. I identify differing definitions of adolescent motherhood which form the basis of interaction. I also identify the definitions of related social objects. Related social objects are identified from the recurring themes around which interaction is focused. The definitions of adolescent motherhood are assumed to be demonstrated in interaction, thereby connecting symbols and interaction (Denzin, 1989).

Because adolescent motherhood is a social identity as well as a social object for the group participants, it becomes important to identify the kinds of selves presented in the meetings. To understand meanings of self emerging in the group, I identify self-presentation strategies of participants. In particular I look at how the mothers construct their social identity as "adolescent mother" and how the staff construct their social identity as "staff" in interactions among them.

Once the meanings of these social objects have been
identified, I move on to explore the sources of these meanings, paying particular attention to those which seem to be contradictory. In order to identify the sources of meaning I describe and interpret the dynamics of the setting (Denzin, 1989). This includes describing the behavioral expectations which develop in the group meetings as well as detailed descriptions of how the group came into existence, and the explicit mission and goals of the group. After identifying the specific components comprising the meaning(s) of adolescent motherhood used in the group, I move back out to describe general patterns of meaning and interaction that emerge in the group. Finally, I offer interpretations of these patterns and discuss their implications for theoretical concepts.

**Feminist Methodology**

For a methodology to be considered feminist it must involve the application of theory to research such that previously invisible forms of male dominance are made visible (Cook and Fonow, 1986; Dill, 1987; Hartsock, 1987). In this case then, my research goal involves exposing forms of male dominance involved in the identification, definition of adolescent motherhood as a social problem and the consequent response of the State.

To do this, it is necessary to first place the development of adolescent motherhood as a social problem into
socio-historical context. Thus, in another chapter, based on a review of critiques of the adolescent pregnancy and parenthood literature, I provide an analysis of the assumptions that informed the development of this phenomenon into a social problem necessitating state intervention. I seek to clarify the political nature of the process of identification and definition of this phenomenon as a social problem (Ruddick, 1991; Fraser, 1989).

Second, I look for discrepancies between the definition of the problem constructed by the Teen Parent Support Program (TPSP) and the lived experience of adolescent motherhood. The TPSP construction of adolescent parenting can be ascertained through an analysis of the programs' official documents, such as mission statement, by-laws, and publicity documents. The experiential definition of adolescent motherhood will be based upon data gathered through participation observation in the Teen Parent Support Group. I am particularly interested in how the group constructs the nature of the problem. It is necessary to understand how a particular problem is conceptualized because this is what informs social policies and programs designed by the state to respond to the social problem (Fraser, 1989).

Finally, I analyze the framework of meaning produced by interactants in the Teen Parent Support Program. I am especially interested in the interactions between the
adolescent mothers and the staff of the program. It is in these interactions that contrasting definitions of the situations (State/expert definition v. experiential definition) collide. The way in which the state responds to adolescent motherhood constructs normative, differentially valued gendered roles and relations (Fraser, 1989).

Research Method

The research question and epistemological and methodological assumptions make participant observation the most suitable research method for this study. This research method is appropriate for analysis of complex forms of symbolic interaction (Denzin, 1989). When using this research method, data is gathered as the researcher participates in the activities of a particular group. Participant observation involves description, classification and interpretation of the social reality produced within a group (Becker, 1958; Babbie, 1986; Denzin, 1989). In this section I focus on participant observation as a method of data gathering, but as implied above, it is also a method of data analysis.

Selection of Research Site

In selecting a research site I was looking for a group, created by a social service agency to address the needs of pregnant and parenting adolescent women. I began by compiling a list of agencies that might support such a program through
suggestions from personal contacts and examining the local phone book. I contacted the county social services office, local high schools, the local Planned Parenthood offices and a local Crisis Pregnancy Center. A number of contacts told me about the Teen Parent Support Program (TPSP) offered through the local Community Action group. This was the only organized support group for adolescent mothers in the county. Some of the other agencies I contacted occasionally offered educational services or use of facilities to the group.

This seemed to be the only social service for adolescent mothers in which they were brought together for the explicit purpose of addressing adolescent motherhood. For example, one local high school supported what was called an "alternative school." This was a school on the same grounds as the high school but physically separate, in which students with "special needs" were facilitated. When I asked the guidance counselor to explain "special needs" she informed me that students who get into trouble in school or have truancy problems as well as pregnant and parenting students most often attended this school. She emphasized that pregnant and parenting teens could choose to attend the alternative school or remain in the mainstream high school, they did not force the girls to attend this school.

I was more interested, however, in a group in which most if not all of the members were adolescent mothers. The teen
parent support group was the research site which seemed best able to provide me with the data needed for the research question. It provided me with a setting in which adolescent mothers interact with each other and with staff members and where the main focus of interaction is adolescent motherhood.

**Gaining Entry**

I contacted the director of TPSP, Melissa Dixon\(^3\), by phone to find out more about the group and explain my research project. We arranged a meeting in her office. My first meeting with her occurred August 27, 1992. Melissa's office was one in a group of offices making up the local Community Action Administration office. In the entrance to the office is a lobby where Emergency Assistance applications are processed. As I entered the door an old man with a gray stubbly beard, hooked up to an oxygen tank leaned on a crutch discussing his medical problems and expenses with two middle aged women. I assumed these two women were staff because they listened intently to what he said and made various suggestions about how to handle his problem.

I scooted past them and stood politely in front of a desk bearing the sign "Emergency Assistance: Fill Out Form and Have a Seat." A woman was behind the desk, talking to someone on the telephone and shuffling through paperwork. Behind her

\(^3\)All names of individuals and organizations have been changed to ensure confidentiality
desk were filing cabinets and a photocopy machine. The woman hung up the phone and after a few minutes looked up and asked if she could help me. I explained why I was there, and she got up and walked down the hallway, returning to tell me that Melissa was on the phone. I could hear a woman in the midst of what seemed to be a telephone conversation. I took a seat in the lobby to wait.

The lobby/waiting room area was divided into two sections by the pathway between the door and the Emergency Assistance desk. I sat on the side closest to the hallway down which the woman had gone to Melissa's office. The lobby was sparsely furnished and decorated. There were three to four plastic chairs on each side, a few toys, a rack of informational pamphlets and magazines, and a water fountain. On the wall was a quilted banner which read "Greenview Community Action: Working Together to Make a Difference."

After about ten minutes the woman behind the Emergency Assistance desk buzzed Melissa to tell her that her 11:00 appointment had arrived. Melissa came into the lobby from the hallway to greet me. She was younger than I had expected, and I soon learned that she had just graduated from one of the local universities a year earlier with a Bachelor's Degree in sociology. She was enthusiastic about the prospect of working with a sociologist. She described her frustration at not having anyone else around with a sociological perspective on
the work she did. Our similarity in age and common interest in sociology allowed for a relatively quick and easy establishment of rapport. In addition to discussing the program and my research project, we talked at length about feminism, graduate school and the upcoming presidential election.

Support Group Meetings

I attended the weekly meetings of the Support Group from October 1992 through December 1993 on a regular basis. At the start of the research project, I attended three meetings at the local high school along with Melissa and Teresa. These meetings targeted pregnant and parenting high school students and involved cooperation between TPSP and the high school guidance office. The guidance office provided a room for the meetings to be held in, and permission for students to miss class to attend the meeting. However, on all three occasions I attended, only one student attended these meetings. Melissa and the guidance counselor explained to me that there were only two young women in the high school who were parents at that time.

Aware that I needed to observe a setting involving more than one adolescent mother, Melissa told me about another Support Group that met once a week in the evenings in the clubhouse of a local rent-subsidized apartment complex. She said that this meeting was better attended, with an average of
about 5 to 6 mothers at each meeting. This is the group that I followed through the course of the year. Originally the group met Tuesday evenings, but after about six months they began meeting at two PM on Wednesdays. The group that I began observing turned out to be much different than the group when I concluded my observations. Because the nature and reasons for these changes are an integral part of my analysis, I will describe these changes in the data analysis section.

According to Denzin (1989), in addition to participation in and observations of the activities of a group, participant observation also involves analyses of relevant documents and supplemental interviews with respondents and informants. I have also included these two strategies in my research. The documents I analyze are of four categories, documents designed for staff, informational documents accessible by the public, documents around which specific meetings of the support group were focused, and newspaper articles describing the program. The latter category of documents is self-explanatory but the other three require clarification.

Documents designed for TPSP staff include the statement of "Program Goals and Objectives," the By-Laws governing the advisory board of TPSP, and a budget statement detailing revenues and expenses of the program for fiscal years 1991 and 1992, and the projected budget for 1993. I was not allowed access to files kept on individual clients to avoid violating
the guarantee of confidentiality made to clients by staff.

Informational documents designed for the general public include an informational pamphlet describing TPSP, a booklet describing the programs offered by New River Community Action, Inc., a general booklet about adolescent parenthood titled, "What You Should Know About Teen Parenthood," and an informational pamphlet describing the Parenting Potentials Project of TPSP. Documents related to specific meetings of the support group included handouts and worksheets which were used to support the topic of a particular topic discussed at one of the meetings.

These documents are analyzed as data contributing to the definitions of adolescent motherhood emerging in the context of the group. In addition to the perspective of the group on adolescent motherhood, the definition of adolescent motherhood in the broader culture is also important to the study. Thus, I also review a sampling of newspaper and magazine articles, as well as the scholarly literature to discover other competing definitions of adolescent motherhood.

Finally, I supplement observation and document analysis with a supplemental interview, with Melissa, the Program Director. Originally, I had hoped to conduct a series of interviews with four to five of the adolescent mothers participating in the group, but this goal became increasingly problematic as the study progressed for a number of reasons.
First, the composition of the group was continually shifting. The mothers either attended irregularly over a number of months or attended regularly for two to three months. Ideally, I was looking for someone who was more involved with the group. The shifting composition of the group also made it difficult to establish rapport. I would get to know a mother at one meeting, then not see her again for several weeks.

A related problem involved scheduling interviews. While a number of the mothers expressed willingness to be interviewed, when I attempted to pin down a day and time they became evasive. I think part of the problem was that they were not sure what to expect, what sorts of questions I would ask, and so on. For the most part, the most similar prior experience the young women had with interviewing was talking to social service representatives. Many of them were unclear about my affiliation with TPS and although I explained why I wanted to interview them, I got the feeling were unsure of my motives. Another problem was that the majority of the young women did not have telephones, so I was unable to contact them to arrange appointments. Among the young women with whom I was able to schedule an date and time for an interview, I found they would either not be at home or would tell me they were in the middle of something and could not do the interview at that time.

When I talked to the staff about the problems I was
having, Teresa told me that this was not uncommon. She said that when she makes home visits, the women will frequently just not answer the door. She said that you can hear the television or radio in the apartment, and even the children talking but the mothers refuse to answer the door. I had this experience on several occasions. As the study became more focused, and the interaction patterns in the group became the primary unit of analysis, I realized that I could use the interview I managed to get as supplemental data.
CHAPTER THREE

THE POLITICS OF TEEN PREGNANCY

Interpretive sociologists focus on the processes through which people construct meaning for important social objects in their environment. It is through this process that mind, self, and society are being constructed and re-constructed. Blumer (1969:2) identifies three basic premises of the perspective, all of which revolve around socially constructed meanings. Human beings act toward things on the basis of the meaning things have for them, the meaning of things is derived from social interaction, and meanings are handled in and modified through an interpretive process used by a person in dealing with the things s/he encounters.

If these premises are applied to the problem of adolescent motherhood it would follow that first, individuals act toward adolescent mothers (which for adolescent mothers means acting toward self) according to the meaning adolescent motherhood has for them. Second, the meaning of adolescent motherhood is constructed through social interaction, and finally, the meaning of adolescent motherhood is negotiated through the interpretive process of the individual's experience with adolescent mothers/motherhood. Thus, an analysis of the interactional dynamics in the context of a
support group for adolescent mothers should yield some insights into how the meaning of adolescent motherhood is being constructed.

However, the interactional dynamics of the support group do not, of course, occur in a vacuum. While staff and clients negotiate a working definition of motherhood through their specific interactions, the definition created will be constrained by two important factors. These are the meaning of adolescent motherhood embedded in the larger culture, and the meaning of adolescent motherhood as defined by the Teen Parent Support Program as an organization. I address the former in this chapter through a brief review of literature. In the next chapter I examine the construction of the Teen Parent Support Program.

Given the level of interest in the phenomenon, there is a tendency among academics, laypersons, and policymakers to assume that adolescent pregnancy and parenting have reached "epidemic" proportions in the United States. However, the demographic trends of adolescent pregnancy and parenting do not bear this assumption out. During the twentieth century, the

"Responsibility for this perception is frequently attributed to a pamphlet titled "11 Million Teenagers: What Can Be Done About the Epidemic of Adolescent Pregnancies in the United States" published by the Alan Guttmacher Institute in 1976. This pamphlet was influential in both decision-making under the Carter Administration and media coverage of the issue (Harari & Vinovskis, 1993; Vinovskis, 1988)
birth rate of U.S. women aged 15 to 19 peaked in the mid to late 1950s and has been declining since. This paradox led social historian Maris Vinovskis (1988:28) to comment that if the sense of urgency to create federal policy addressing adolescent pregnancy and parenthood was related to demographic trends, "...the Adolescent, Health, Services and Pregnancy Preventions Act should have been introduced twenty years ago." Although data from the early 1990s suggest that rates of adolescent pregnancy are again on the rise, they are still not near the level of the 1950s rates (Woodman, 1995).

Curiously, the majority of experts in the field of adolescent pregnancy and parenthood rarely question the problematic nature of the phenomenon. This may contribute to the widespread disagreement over the extent of the problem, the nature of the problem, and what should be done about the problem. This lack of clarity is reflected in the adolescent pregnancy and parenting literature. A comprehensive review of this literature concluded that it is plagued by inconsistent use and confusion of concepts and terminology (Macintyre & Cunningham-Burley, 1993).

**Adolescents versus Teenagers**

In the literature the terms "teenage" and "adolescence" are often used interchangeably to refer to a socio-developmental stage in the life course. Webster's Dictionary
defines a "teenager" as a person between the ages of 13 and 19 inclusively, whereas an "adolescent" is defined as a person in the period of life between puberty and maturity. Although "teenager" appears to be the more precise term, I prefer the term "adolescent" because it does not specify an exact chronological age range. This preference is due to my understanding of periods in the life course as being socially defined. That is, the ages at which a person is assumed to be and expected to behave as an adolescent are socially, culturally and historically bound.

More importantly, though teenagers according to the definition above have always existed, adolescence as a distinct phase in the life course is a relatively recent phenomenon. Its emergence is historically located between the late nineteenth and early twentieth centuries, and associated with changes in patterns of economic production and family life resulting from the Industrial Revolution. Prior to this time, problems experienced by teenagers were interpreted as part of larger social issues and rarely seen as specific to a particular age group (Harari & Vinovskis, 1993: Vinovskis, 1989). Since the emergence of adolescence, the length of time one spends in the transition between puberty and maturity has varied in response to broader social trends and along lines of class, race and ethnicity.
Finally, the confusion surrounding the use of the terms adolescent and teenagers leads to the perception that the experience of motherhood is similar for any young woman between the ages of thirteen and nineteen. However, becoming a mother at 18 or 19 appears to be more similar to becoming a mother in one's early twenties, which is considered "normal", than becoming a mother at 16 or younger (Macintyre & Cunningham-Burley, 1993). The young women who participated in the Teen Parent Support Group were all at least seventeen years of age. Throughout this document, the term adolescence is used because of its ability to demonstrate social, cultural and historical variability in the stages of the life course.

**Pregnancy and Parenting**

Although this study addresses adolescent motherhood, I have been using the broader and somewhat more awkward phrase, "adolescent pregnancy and parenting" for several reasons. First, while pregnant adolescents may not necessarily become adolescent mothers, pregnancy is obviously a necessary antecedent to motherhood. Therefore, to understand the broader context in which a support group like the Teen Parent Support Group is located, both adolescent pregnancy and parenthood must be attended to.

Second, the majority of the literature and programs and policies address the issues together. For example, preventing
more pregnancies during adolescence is an explicit goal of the Teen Parent Support Group. Similarly, one of the most significant debates among policy makers has been whether to give priority to the prevention of adolescent pregnancy or to providing services to adolescent parents (i.e., ameliorative efforts) (Macintyre & Cunningham-Burley, 1993; Rhode & Lawson, 1993; Nathanson, 1991; Vinovskis, 1988).

Finally, another instance of inconsistent use of terminology in the literature involves the confusion of analytically related but distinct concepts related to adolescent motherhood. For example, Cunningham-Burley (1993:67) identifies the tendency for the literature to equate adolescent pregnancy, unintended pregnancy, unwanted pregnancy, and pregnancy in unmarried women. Such confusion overlooks the fact that some pregnant adolescents may be married at the time of conception, or may marry prior to the birth of the child, and that an unintended pregnancy may not necessarily be an unwanted pregnancy. In addition, "teen pregnancy" has become a buzzword labeling the literature on various aspects of the issue. For example, some literature which claims to address teen pregnancy may actually have adolescent sexuality, adolescent contraceptive behavior, or adolescent parenthood as its focus.

I choose to use the phrase adolescent pregnancy and parenting as a broad, all-inclusive label when I am referring
to the issue in its broadest sense. On the other hand, when I am referring to a specific aspect of the issue, such as adolescent sexuality, I will label it as such.

**Unmarried Adolescent Mothers**

As noted earlier, the widespread consensus that "something must be done" about adolescent pregnancy and parenting does not seem to be motivated by the demographic trends in pregnancy and parenting. While the demographic trends of adolescent childbearing may not be able to account for the sense of "moral panic" surrounding the phenomenon, one change in the social and economic context in which adolescent childbearing takes place -- unmarried childbearing -- plays a crucial role in the construction of adolescent motherhood as a social problem (Rhode and Lawson, 1993). Premarital pregnancy was much more likely to be resolved by getting married prior to the 1970s, thus one of the socio-demographic changes making adolescent motherhood more visible is the increase in out-of-wedlock births.

The declining level of adolescent childbearing is not due to decreased sexual activity or pregnancy among adolescent women. On the contrary, increases in adolescent sexual activity combined with a trend toward later marriage contributed to a rise in premarital adolescent pregnancy during the 1970s (Petersen & Crockett, 1992; Furstenburg &
Brooks-Gunn, 1986). However, increased adolescent sexual activity was also accompanied by increased use of contraception during this period, so that the adolescent pregnancy rate is not as high as it could have been given the level of sexual activity (Petersen & Crockett, 1992).

In the early 1980s more than half of all births to adolescents were out-of-wedlock, increasing from about one-third in 1970 (Phoenix, 1993; Hayes, 1987). Births to single adolescents comprised 30% of all adolescent births in 1970, 48% in 1980, 61% in 1986 and 64% in 1987 (Miller & Moore, 1990). However, the birth rate among unmarried women age 20-24 also increased dramatically between 1975 and 1990, so that unmarried adolescent mothers now account for a smaller proportion of all out-of-wedlock births (Nathanson, 1991; Hayes, 1987). Thus, the pattern of unmarried childbearing among adolescents mirrors a similar pattern among women in their early to mid twenties and may not be a phenomenon specific to adolescence.

There is a significant interaction between race and marital status among adolescent mothers. The nonmarital birth rate among adolescents has historically been higher for Black than white women. However, since 1970 the birth rate of unmarried white women between the ages of 15 and 17 has doubled, while remaining fairly stable for unmarried Black women of the same age (Nathanson, 1991). It is estimated that
between 1970 and 1979 the chances of having a nonmarital birth increased four time faster for white as compared to Black adolescents (Zelnick and Kantner, 1978). Thus, the circumstances under which white adolescents give birth are becoming increasingly similar to that of Black adolescents.

Single adolescent motherhood contributes to the moral panic over adolescent pregnancy and parenthood in three ways. First, single motherhood and female-headed households challenge the dominant cultural ideology surrounding the traditional family, gender roles, and female sexuality. Second, female-headed households have been associated with other social conditions labeled as problematic, such as poverty and dependence on public assistance. Finally, there are implicit (and sometimes quite explicit) racist and classist undertones in the construction of single adolescent pregnancy and parenthood as evidence of the "pathological" family form characteristic of African Americans and low income whites (Davis, 1989).

Debates over the extent, causes, consequences and solutions to adolescent pregnancy and parenting reflect a political struggle. Competing groups of "moral entrepreneurs" struggle for the authority to define the reality of women's sexual and reproductive behavior in line with their own interests (Nathanson, 1991; Ward, 1990; Woodman, 1995).

The ultimate controversies are over political
control, access to whatever money is available, which groups get the credit from their constituencies, which groups receive the blame, and, when the dust settles on occasion, what is the problem anyway? (Ward, 1990:161).

In other words, groups and organizations seek to define adolescent pregnancy and parenthood such that its solution necessitates their own expertise.

Few attempts have been made to categorize the competing constructions of adolescent pregnancy and parenthood. The most comprehensive of these is found in the work of Nathanson (1991), a social historian. Nathanson combines sociology of knowledge, political economy and social movements to theorize about late capitalist forms of social control over young women's sexuality. She locates the contemporary concern over adolescent pregnancy and parenthood within the larger history of social control over women's (particularly adolescents) sexuality and reproductivity. She identifies three primary constructions of adolescent pregnancy and parenting: 1) preventive medicine/public health, 2) moral/economic, and 3) Neo-Moynihan.

Nathanson bases her categorization on the political interests of the specific individuals and organizations involved in the adolescent pregnancy and parenthood debate. Thus, the "preventive medicine" construction appeals to
medical authority in seeking to control this definition, the "moral/economic" constructs adolescent pregnancy and parenting as an issue of too much government funding allowing for a deterioration of morals, and the "Neo-Moynihan" construction appeals to racist interpretations of the presumed connection between "family breakdown" and race.

The typification of the problem influences the construction of adolescent motherhood as a social identity (Nathanson, 1991). Adolescent women who bear children assume a problematic or stigmatized social identity because adolescent motherhood is defined in the United States and other industrialized countries as a social problem. Cloaked in humanitarian concern much of the literature on the phenomenon borders on blaming the victim, locating the source of the problem in individual and cultural deficiencies of young women (Meyer, 1991; Plotnick, 1992).

While there are undeniably negative consequences for the life chances of adolescent women who become mothers, there is nothing inherently problematic about adolescent motherhood. Rather, the political, social, and economic arrangements of society create almost unsurmountable obstacles for young mothers (Ruddick, 1991). Despite this, the predominant discourse frames adolescent motherhood as a deviant behavior, an irresponsible or at least detrimental life choice, and something to be prevented. This construction of adolescent
motherhood has important implications for the self-concepts developed and self-presentation strategies chosen by adolescent mothers.

Goffman (1063) maintains that a stigma is a social identity that is discredited or discreditable. He further contends that a "stigma theory" is created by which the inferiority of the stigmatized individual and the danger s/he represents is explained. The common focus on individual women as the source of the problems of adolescent motherhood represents such a stigma theory. This stigma theory may be used, at least initially, as a guide for others who interact with the adolescent mother. It may also be used by the adolescent mother when viewing herself as an object. Thus, she may feel pressure to present herself in a positive light when interacting with others, thereby resisting her stigmatized identity.

The typification of adolescent motherhood also informs the responses to the problem perceived as legitimate. When the perspective of adolescent mothers -- shaped by the realities of their lives -- are excluded from the struggles over meaning and identity, it is unlikely that authoritative responses to adolescent motherhood will help them in any significant way. Indeed, there is a well-established body of literature which demonstrates the role of social welfare programs in reinforcing systematic gender inequality (Gordon,
1990; Nelson, 1990; Abramovitz, 1988; Brown, 1981). Thus, the way in which the State responds to adolescent motherhood constructs normative, differentially valued relations of gender, class, race and ethnicity (Fraser, 1989).
CHAPTER FOUR

A HAND UP NOT A HAND OUT: CONSTRUCTING THE GREENVIEW TEEN PARENT SUPPORT PROGRAM

In this section, I analyze the Teen Parent Support Program as a specific human service organization with its own history and culture. Elements of the program's real culture, derived from official statements of mission, goals, and operation, are juxtaposed with elements of its real culture, represented by the way staff describe their experience of the program as a work site. In this way, I describe the factors contributing to the construction of the Greenview Teen Parent Support Program as a specific human service organization and as a context for interaction between staff and clients. I draw on various documents produced by the group to describe its mission, goals and activities, as well as newspaper articles describing the group and personal interviews and interactions with staff members.

Influences on the Construction of TPSP

Defining Teen Pregnancy

In order to justify its existence, the Teen Parent Support Program must define the "problem" teen pregnancy in a way that fits with historical trends in federal policy, and
that encourages support from the local community. In other words, local social service programs must have a mission that meshes in some way with the current construction of the problem, one that is palatable to the many groups who have a role in determining the fate of a program like TPSP. This is not such an easy task. As described earlier, the public discourse surrounding teen pregnancy has been characterized by an array of competing definitions of the "true problem" represented by teen pregnancy and parenthood. The competition among varying interest groups for the right to create the legitimate construction of teen pregnancy has grown so intense that one journalist has been prompted to label the issue a "political football" (Woodman, 1995).

As perceptions of the nature of the problem shift, so do perceptions of the proper response. Since the 1970s when teen pregnancy first became a focus for government policy, policymakers have debated whether priority should be given to reducing the rates of teen pregnancy (preventive strategies) or reducing the link between early childbearing and poverty (ameliorative strategies).

During the early 1980s, federal government policies shifted focus away from the provision of contraceptives for sexually active teenagers and toward the postponement of early sexual activity and helping pregnant teenagers and young mothers to raise their children (Vinovskis, 1988).
Ameliorative strategies were favored over preventive strategies because of the increasing popularity of the argument that preventive strategies (except encouraging abstinence) condone and encourage adolescent sexuality (Vinovskis, 1988).

During the early 1990s, in the context of the worsening fiscal crisis of the state, the priorities appear to have changed again. While the focus on discouraging early sexual activity has continued, programs offering material (particularly financial) support for adolescent parents are increasingly threatened because of the fear that they encourage and condone adolescent childbearing, and therefore facilitate long-term dependency on public assistance. Thus, the teen mother is increasingly constructed as irresponsible, bearing children in order to ensure a life of ease on public assistance for an indefinite period.

The Greenview Teen Parent Support Program was created in 1985, in the midst of these changing definitions of the problem of teen pregnancy at the level of federal policy. As if the continual flux in constructions of teen pregnancy didn't pose enough problems, the increasingly moralistic tone of the response to teen pregnancy and parenting during this period presented special challenges for those seeking to justify the existence of programs providing services for teen parents. The problem of teen parenthood must be defined in a
way that convinces the community, local funding agencies, and governing bodies that adolescent parents need help, without appearing to condone teen pregnancy, teen parenthood, or teen sexuality.

The Teen Parent Support Program accomplishes this by broadening the issue, focusing not only on the consequences of early pregnancy for young parents but also on consequences for the children of adolescent parents, and the community. In addition, TPSP is heavily influenced by the philosophy of its parent agency, the Greenview Community Action Program (GCAP), which strives for community empowerment and self-sufficiency. The GCAP philosophy is captured in its motto: "A Hand Up, Not A Hand Out."

The public awareness pamphlet created by the staff of TPSP introduces the problem of teen pregnancy in this way: Children having children - that's how many people view teenaged parenting. The truth is that teens who are raising families face special challenges and special needs. But, with support and encouragement, teen families can be successful, happy, and healthy.

Although phrased in gender neutral language, this introduction begins by referring to a stereotypical image of adolescent mothers. Abramovitz (1988:95) argues that the "children-having-children" framing of adolescent pregnancy is not
useful, and has become, "...a paradigm for moralistic scapegoating..." This image is then countered by defining teen parents as a population with 'special needs' that can be met with support and encouragement.

The pamphlet goes on to describe the problem of teen pregnancy in a broader context:

Nationally, the annual cost of teen pregnancy is several billion dollars, the cost of Aid to Dependent Children, juvenile delinquency, school dropout, and medical costs. Teenaged parents and their children are most often poor, undereducated, and underemployed. The difficulty of teen parenting has serious consequences for both the families and the community.

Focusing on the potential costs to the community represented by the children of adolescent parents transforms adolescent parenthood into a community problem, and implies that the Teen Parent Support Program serves the interests of the entire community.

In detailing the specific challenges of adolescent parenthood, the publicity pamphlet presents the following list of consequences of pregnancy for teenagers, again without specifying gender:

- Disruption of education
- Lack of job skills to support family
- dependence on public assistance
- inability to continue in school because of lack of affordable daycare

At the heading of this list is the statement, "The effects of a pregnancy on a teenager can be severe." The heading of the list describing the consequences for the children of adolescent parents reads, "The effects on the children of teen parents can be even worse." The consequences for the children are listed as follows:

- little or no prenatal care results in low birth weight, premature birth, and with health problems
- chronic health and mental problems
- higher infant mortality rate
- rate of child abuse and neglect is extremely high
- prediction for future of more hunger, poverty, illiteracy, and early teenage pregnancy -- repeat cycle

Thus, in describing the problem of teen pregnancy the children of teen parents are constructed as the primary victims.

This construction of the problem also parallels the link between adolescent parenthood and child abuse which was being suggested in the research literature during the early 1980s (Miller and Moore, 1990). However, by the late 1980s the literature documenting the consequences of teen parenting was coming under increasing attack because of methodological flaws belying the bias against teen mothers held by many
researchers. Much of the research of the early 1980s appears to have overstated the negative consequences of adolescent childbearing because they failed to control for socioeconomic variables. When socioeconomic background is controlled, the association between age of parent and child abuse disappears (Phoenix, 1991). Reviews of the literature reveal no conclusive evidence of a relationship between early parenthood and problems of social and emotional development of children (Miller, 1984; Trussell, 1988; Miller and Moore, 1990). Within socioeconomic status, health problems suffered by the children of teen parents are primarily attributable to lack of prenatal care (Trussell, 1988). Although the children of teen parents do experience negative outcomes, this seems to be related more closely to socioeconomic background that early childbearing.

This critique of earlier research on adolescent parenting has had little impact on policymakers or the public discourse however. This is likely the case because the focus on protecting the children of teen parents fits in with a larger cultural pattern of response to deviant motherhood. When women become mothers under circumstances that violate cultural prescriptions for motherhood, public disapproval is often expressed in terms of the problems their children are likely to create for the community and society (Phoenix and Woollett, 1991:15).
Defining the problem in this way lays the groundwork for constructing the Teen Parent Support Program as a protector of the children of teen parents and avoids the appearance of condoning or rewarding teen parenthood. Because it falls under the auspices of a Community Action Program, TPSP must frame adolescent parenthood as a community problem in need of a community response, as will be explained more fully in the next section. Focusing on the children is a good strategy for stimulating community involvement with the program, since the children of teen parents can be easily conceptualized as "innocent victims." This also allows the program to avoid the difficult task of having to construct adolescent mothers as a population with legitimate needs who are deserving of the community's help.

Community Action Programs

The Teen Parent Support Program is an activity of Greenview Community Action, Inc. (GCA) and is supported by other human service agencies, the United Way, and local government (TPSP informational pamphlet, 1992). Community Action Programs (CAPs) were created as part of President Lyndon Johnson's Economic Opportunity Act, the legislation that began the War on Poverty (The Civil Rights Project, 1995). In 1964, the Office of Economic Opportunity -- charged with carrying out the provisions of the Economic Opportunity Act -- provided $300 million dollars for CAPs, and 415 CAPs
had been formed by 1965 (The Civil Rights Project, 1995). According to a 1992 publication by New River Community Action, there are at least 1000 CAPs currently in the United States.

Community Action Programs were required by the Office of Economic Opportunity to ensure, "maximum feasible participation" of the poor in designing and implementing federally funded anti-poverty programs (The Civil Rights Project, 1995). They were conceived, therefore, as coordinated agencies that would give the poor an integral role in creating programs to meet the specific needs of the community. Thus, the philosophy embodied by CAPs was/is community empowerment and self-sufficiency through community definition of needs and services.

Greenview Community Action was established in 1965 as a private non-profit organization and serves four counties and one city in the area, with offices in each of these locations. The primary funding for GCA comes from the federal and state Community Service Block Grant. Another major source of funding for some programs, including TPSP, is provided by the United Way.

Community Action Programs act as umbrella agencies, administering a variety of programs designed to meet specific needs of the local community. Following is a list of the
other programs that are administered by the GCA:

1) Head Start
2) Share (Self-Help and Resource Exchange)
3) Weatherization
4) Retired Senior Volunteer Program
5) Emergency Assistance/Food and Clothing Banks
6) Project Home Repair
7) Summer Youth Camps
8) Thanksgiving and Christmas Assistance Activities
9) Gardening Project
10) Volunteer Income Tax Assistance
11) Life Skills Education

In addition to these programs directly administered by GCA, the organization has been involved in the development of local independent agencies, such as the Free Medical Clinic of Greenview, the Women's Resource Center, and Southern Mountain Housing. The indirect involvement of GCA with these agencies continues through staffing, board memberships, or contributions of space, clerical and telephone service (GCA, Inc., 1992).

Greenview Community Action is governed by a Board of Directors. According to GCA's descriptive publication, its Board of Directors includes:

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For a description of these programs provided by GRCA see Appendix B.
volunteers representing local governments, low income communities, and the private sector. It is a cross section of people from different age groups and ethnic backgrounds cemented together by a common desire to offer a hand up to their fellow neighbors in need (Greenvew Community Action, Inc., 1992)

In addition, each county and the city served by GCA has a Local Advisory Board, and many programs, including TPSP, have a program-specific Advisory Board.

The Teen Parent Support Group's official documents reflect Community Action's emphasis on community involvement and increasing self-sufficiency. The mission of the Teen Parent Support Program as stated in the by-laws of its advisory board is:

- to enhance family development that encourages optimal growth of physically and emotionally healthy teen parents and their children. The Teen Parent Support Program will serve pregnant teens and teen parents and will advocate for new models to address their unmet needs.

Five goals are derived from this mission statement and specific objectives have been created to reach these goals.
The goals are as follows:

1) Attempt to empower teen parents with increased self-sufficiency and self-reliance by establishing links with educational and employment opportunities.
2) Attempt to prevent child abuse and neglect among children of teen parents in the service region.
3) Engage in a program to increase public awareness of teen pregnancy issues.
4) Seek to increase program effectiveness through interagency collaboration.
5) Attempt to reduce the incidence of further pregnancies among teen parents.

The mission and goals of the program are translated into the following four specific focuses of the Teen Parent Support Program described in the pamphlet as follows:

1) A Weekly Parent Support Group is open to all teen parents, mothers and fathers, to discuss issues, gain some knowledge, and meet others for coping.
2) Material support is provided in the form of maternity clothes, baby clothes, diapers, formula, baby equipment, furniture and toys. Assistance

See Appendix ? for the complete statement of goals and objectives for TPSP
finding medical, economic, and child care funds is also provided

3) **Community education** programs are conducted to raise awareness of problems, solicit volunteers and assistance for the program.

4) **A mentor program** provides a one to one match between a volunteer and a teen parent.

The purpose of the pamphlet is to solicit help from the community. The last page describes ways community members can "make a difference" which include volunteering, and donating money or material goods such as baby clothes, diapers, toys, etc. Thus, the problem is defined as affecting the community, and the children of adolescent parents in addition to adolescent parents themselves.

**Child Abuse**

The Teen Parent Support Program was originally funded as a child abuse prevention program, and according to its literature and comments made by staff, this continues to be a primary focus. Teresa Jones', coordinator of the Parenting Potentials Project of TPSP explains the link between adolescent parenting and child abuse in this quote from a local newspaper article about the program:

Teen parents endure poverty, depression, isolation,

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7All names of individuals involved with the group have been changed.
stress and lack of adequate parenting skills. The inability of teen parents to deal with these problems, as well as the absence of a support system, can contribute to the high probability of child abuse or neglect (Local News, 1992).

The Parenting Potentials Project (PPP) was a new component of TPSP when I began my observation. The project was funded by a Family Violence Prevention grant, awarded for fiscal year 1992 (July 1, 1992-June 30 1993) from the state Department of Social Services.

Its goal was to decrease the risk of child abuse and neglect in teen families, however in the PPP public awareness pamphlet, the project's focus is framed in terms of the needs of adolescent parents.

The Parenting Potentials Project is a component of the Teen Parent Support Program of Greenvie Community Action. The project is funded by a Family Violence Prevention grant from the [state] Department of Social Services. The Project is aimed at teen parents and their special needs in childrearing. Because the teenage years can be stressful the Parenting Potentials Project works with these parents to develop them as capable nurturers of their children.

This goal was to be accomplished by:
decreasing stressors in the family environment, increasing positive interactions between parents and children, and addressing the effects of social and emotional isolation.

Only in describing the specific components of PPP is the issue of child abuse specifically cited. Research has documented that two characteristics of abusive and neglectful parents are social isolation from supportive friends and relatives and impaired parenting skills. The Parenting Potentials Project will address these issues with the following components: 1) in-home parenting support, 2) family-to-family mentoring. The Teen Parent Support Program will continue to offer material support and support groups for teens in the Parenting Potentials Project.

With the inclusion of PPP, the Teen Parent Support Program's focus shifted even more toward preventing child abuse, but this goal continued to be framed in terms of meeting the needs of teen parents and promoting self-sufficiency. The program mission goals and components imply that what teen parents need most is parenting skills. The program seeks to provide these skills through education and role modeling.

The relationship between TPSP and PPP often seemed ambiguous. Melissa Dixon, Program Director of TPSP explained
it to me this way:

PPP is Parenting Potentials Project, the grant that came through last July, [so] we have developed this new program. Teresa is the project's case manager, which falls under TPSP, and then I am her supervisor and I am the one that writes the reports, monthly reports and quarterly reports to that grant. Part of PPP is they receive more intense case management where Teresa sees them at least twice a month, does parenting education and anything else that falls under case management which is (laughs) usually a variety of things...

Melissa acknowledges that the young mothers served by the program are also frequently confused about the differences between the position of TPSP Director and PPP Coordinator:

...sometimes they're very unclear about the difference between Teresa and I, and I think there are definitely gray areas about what our role is, what we're supposed to do, what we're there for. But we don't worry about it too much. It's just that if you're in PPP you're usually younger and you're targeted for high risk of neglect and abuse, but then anyone who's young anymore could fall in that category. You're seen twice a month by Teresa so that's just the only difference. We encourage
support group attendance and they have access to all the material support and that type of thing.

Here Melissa makes clear the assumed connection between youthfulness and abusive parenting that informs PPP. Her statement also reveals that the young mothers may not be sure whether they are participating in the program because they are young mothers or because they are considered potential abusers.

**Funding and the Focus on Child Abuse**

One possible reason for TPSPs emphasis on child abuse prevention is the availability of funding for social service programs. Prior to receiving the Family Violence Prevention Grant, TPSPS funding came from the United Way, Greenview Community Action, the county Department of Social Services and charitable contributions. During fiscal year 1991, Greenview Community Action provided the majority (38%) of TPSPs funds. However, funding for Greenview Community Action had been declining. In 1992, GCAs contribution to the TPSP budget was 21% less than its contribution in 1991. By 1993 the projected contribution from GCA was 42% less than its 1991 contribution and 26% less than its 1992 contribution.

This negatively affected the Teen Parent Support Program. When the program was originally created the Director's position was considered a full-time, forty hours per week, salaried position, but by the time Melissa took the job, the
position had been cut back to thirty hours per week.

...the biggest grant I think that funds Community Action...is the CSBG, it's the Community Services Block Grant. That has been decreasing over the last couple years, and that's why they had to take the position back to thirty hours, because the agency was hurting as a whole.

For the first five months of Melissa's tenure as TPSP Program Director, her position was split. For ten hours a week she worked in the lobby processing requests for Emergency Assistance. She found this situation to be frustrating:

...they were never quite sure if I was a salaried employee or an hourly employee because I was being paid out of two different pots of money, and was basically doing a salaried job and an hourly job, so they didn't quite know how to handle that. And they said you absolutely cannot work more than forty hours a week because we don't have the money to pay you the overtime. See that was very difficult because it may have been two hours in the morning [at Emergency Assistance], but I wouldn't start Teen Parent till noon sometimes and...if you worked over you had to take it off in the same week and, especially with different crises and that, I mean you can't count on taking that time off, so it
was really kind of difficult there.

Despite the fact that she was able to work full time at GCA, Melissa also found it necessary to work in the evenings as a waitress in a local Chinese restaurant to make ends meet.

The decreased availability of funding for GCA directly affected TPSP by decreasing the amount of time and energy available to the Program Director for administrating the program. As might be expected under such circumstances, the turnover rate for Program Directors at TPSP was high. In fact Melissa, had only started the position a few weeks before I made my initial contact with the program. According to Melissa:

In a little over a year there's been three directors, but when you're paying someone $11,800 (pause) and I was at the top, because I had a degree, and you know I think it could have been less than that, like five something an hour, it's very difficult to keep people in the position...My number one goal was to do something I loved, but the strain was, and still is you know, (pause) when you don't know how you're going to pay the bills and you can't eat, you can love your job all you want. You're dealing with low-income people everyday, but you're right there with them...They lose good people, because you can...eat and pay

75
your bills in another job.

The last director had kept the job for seven months, and the director before that had been there a few years. The current and previous two directors of the program were women.

The grant awarded to develop the Parenting Potentials Project was more than three times as much as the contribution from Greenview Community Action and therefore allowed the Teen Parent Support Program to be much less dependent upon funding from GCA.⁸ According to the program's budget projections for fiscal year 1993, this grant would account for the majority (38%) of TPSPs funding, whereas the amount contributed by GCA would account for only 11% of the program's budget.

In addition, the new grant allowed for the hiring of a second staff person. One reason for the lack of clarity between the roles of Melissa and Teresa is that Teresa often served in an assistant capacity to Melissa in administering components of TPSP other than the PPP. For example, Teresa usually accompanied Melissa to the meetings of the support group both in the Old Home Village apartment complex and in the local high schools. So the grant which funded PPP benefitted TPSP by increasing human as well as economic resources for the program as a whole.

Another reason for the lack of clarity between TPSP and

⁸See Tables 1 and 2 in Appendix A
PPP is that neither Melissa nor Teresa were involved with writing the grant application. It had been developed by the previous Program Director and a member of TPSPs Advisory Board, but left to Melissa and Teresa to implement. Although it brought money and staffing to the program, Melissa was critical of the grant proposal:

The grant was done at the last minute and put on the Executive Director's [of GCA] desk a couple hours before it needed to be Fed Ex'd out so it could not be changed and she was not pleased with the way it went out. But it was awarded anyway. They stated [in the grant proposal], if you award us this grant and we develop this program, we will use these four evaluation tools... in the program. They did not bother to research that all of [the evaluation tools] needed to be purchased and administered by a licensed professional. So [when] I [came] in, I mean it was the worst timing for a new director, and Teresa was totally new to the position, she hadn't worked with Teen Parent, she was in a totally different job. But they had given the grant, and so we had to run around and find all that [information] ... and we were left with "what are we gonna do?" to develop this program.

According to a newspaper article describing the program, and
the program's publicity pamphlet thirty local teens would be served through the project. However, I learned from the staff that at most one or two teens were matched with a mentor at any one time. The staff defined the problem with this program as stemming from a lack of community volunteers to participate as mentors.

Increased funding from the United Way also allowed TPSP to become less dependent upon GCA. During fiscal year 1991 United Way funding accounted for 34% of TPSPs budget, a close second to the 38% provided by GCA for that year. In 1992 the United Way contribution increased by 7%, but for 1993 the United Way contribution almost doubled. The projected contribution from United Way for 1993 represented a 90% increase over its 1991 contribution and a 77% increase over its 1992 contribution to the program. Despite the increase, United Way funding still accounted for roughly the same proportion of TPSPs total budget in 1993 (33%) as it did in 1991 (34%). This is primarily because the grant which funded PPP now accounted for the majority (38%) of TPSPs total budget. The Family Violence Prevention Grant and the increased funding from the United Way increased the total budget of TPSP for fiscal year 1993 by 92% over the 1991 budget and by 95% over the 1992 budget.

The United Way funding process relies heavily upon community members who volunteer to represent a particular
human service program. Melissa explains:

...they get a volunteer from the community and put them through somewhat of a training. That volunteer will then come to the agency or program and visit for a while and ask questions. They go back to United Way and they advocate for you for your funding which could be really great or really not so great.

Melissa went on to explain that a number of agencies and programs in the local area were unhappy with this process of representation for funding:

...they had trouble with the different agencies and programs in the area not getting along and not liking what the executive director at United Way was doing at all, so they decided that...we should all meet every month as a group to discuss these concerns. Some of the representatives spent fifteen minutes at the agency, and you can never learn the ins and outs of what you do and your program or agency in that amount of time so there was a lot of concern there.

Despite these difficulties, the Teen Parent Support Program benefitted from the funding process:

I'm real pleased with United Way right now. The representative from last year...ask[ed] for
[increased] funding for the director's position from $11,800 to $16,000, and...to take the director's position back up to 40 hours a week rather than the 30. So we received word that we got that so...I start next Monday, back up to 40 hours doing this at sixteen thousand (laughs).

The increased funding from the United Way allowed for the Program Director to devote full time to the Teen Parent Support Program. The increased salary also allowed Melissa to quit her part-time job as a waitress.

Governing the Teen Parent Support Program

While the GCA Board of Directors maintains sole legal responsibility for the management of the Teen Parent Support Program and the use of funding and other resources, the specific details of TPSPs operation are worked out by the TPSP Advisory Board. As stated in its by-laws, the mission of the Advisory Board is

to support the staff in all phases of the Program and advise in planning, implementation and evaluation of the Program activities.

Specific responsibilities of the Advisory Board are listed as follows:

1) Evaluate the program on a quarterly basis
2) Ensure that Board decisions and recommendations are forwarded to the GCA Board of Directors
3) Work in cooperation with Program staff to coordinate successful fundraisers.

4) Provide speakers to the community on teen pregnancy issues and how the TPSP is addressing these issues.

5) Provide feedback as needed to Program Director on all aspects of the Program.

6) Provide for education related to boardsmanship and teen pregnancy issues.

The purpose of the TPSP Advisory Board then seems to be one of general support, evaluation and coordination with the main governing body. However, Melissa identified the TPSP Advisory Board as a significant source of frustration in her job. It's an annoyance to me to have to attend the meetings because when I'm feeling overwhelmed -- I'm convinced this job needs to be done by at least three people (laughs) -- it's time out that I feel like I don't have. You've got people on the [TPSP Advisory] Board from social services, Head Start, Even Start, and other programs, and these people are all extremely busy so they really...cannot take on anymore. They are supposed to be there to help me with publicity and fund-raising...but the reality is it falls back on the staff. I understand the philosophy behind [the Advisory Board]...but in reality I don't see it working that
well.

Membership on the TPSP Advisory Board is limited to fifteen voting members. The by-laws recommend that membership be drawn from local agencies that address issues related to teen pregnancy, and from the general community. Following is a list of "suggested categories of representation" for Advisory Board membership:

- local Department of Social Services
- local Health Department
- local public schools
- staff member from GCA
- teen parents
- private medical practitioner
- Project STEP of Greenvieu Community Services Board
- legal professional
- business, industry, or civic leader
- housing industry representative
- clergy
- Mental Health Services of GCCSB
- local Office on Youth

Terms for membership on the Advisory Board are set at two years with a maximum of three consecutive terms.

Offices of the Advisory Board are Chairperson, Vice Chairperson, Secretary, and Advisory Board Liaison. The Liaison is responsible for attending the Local Advisory Board
meetings of the county in which TPSP is located and the nearby city. The Liaison is to act as an advocate for pregnant and parenting teens within the community and agency at these meetings. Officers of the Advisory Board are elected on an annual basis. In addition to these offices, the TPSP Advisory Board is composed of five committees:

1) Executive Committee
2) Nominating Committee
3) Resource Development Committee
4) Evaluation Committee
5) Public Awareness Committee

The structure of the Advisory Board again illustrates an attempt to involve diverse segments of the local community including teen parents. Unfortunately, the Board had never been successful in finding a teen parent willing to serve.

TPSP and the local schools

In addition to the weekly support group meetings, TPSP would form weekly groups in the local high schools for pregnant or parenting students on an as-needed basis. I attended the last two meetings at the only high school in which TPSP was active during my participation in the program. In attendance at both of those meetings were myself, Melissa, Teresa and one mother. Melissa explains the suspension of

'See Appendix A for a complete description of the duties of these committees

83
this group:

We are no longer doing the group in the school there. There were only two girls that could attend, remember that? And the second one only attended once, she moved out of the area. Beth (the remaining mother) we are encouraging to please come to the one outside the school. I have let them know that when there are more girls in the school that become pregnant -- because to me that's just a reality, I hope they don't but you know...I told them that I'd be more than willing to come back out and start a group up there. I just felt that it was alienating Beth from the program altogether. She was extremely uncomfortable, nothing was done, constructive there.

The belief that "something constructive" must happen during support group meetings is a theme that becomes an important context for the operation of the support group component of the program. This will be described more fully in the next chapter. However, in terms of the local schools, it appears that school administrators and guidance counselors have the ultimate authority to decide whether TPSP sponsored support groups are worthwhile.

Melissa was concerned that the administrators at the high school mentioned above were not convinced that a TPSP
support group was useful:

I think that maybe something might have happened before I got here, in the school...I had a couple comments made about, "you have to watch the noise level." I...was told that in the past it had gotten rowdy. They also said that I needed to be sure that I was doing something constructive in the school and that it wasn't play time. So I think that maybe they were concerned about what was going on in the group in the past. I kind of find that hard to believe, because I know that Tina, [the director] before me, took the program very seriously and worked very hard. She had a very outgoing and bubbly personality. And just from the girls, I think overall she was received very well, and she worked hard...So she, I know, wouldn't have gone in there and done play time, so I don't know what happened but I just have a real strong sense that something wasn't right there.

One local high school did have a good relationship with TPSP:

Adams High School has been wonderful. A counselor there called me with two girls and I went out and spoke to...them. [The guidance counselor] was wonderful and supported the program and had our brochure up on the wall, and was very good to work
with. Her concern...was with the individual and just getting them everything they can and not making judgements. I was so impressed.

Melissa attributes the successful relationship with this high school to the personality and non-judgmental attitude of the guidance counselor.

I asked about whether the group had ever been active in another local high school, and in answering, Melissa expressed her desire for a group facilitator:

For some reason it didn't go in [that high school] and to be quite honest, I haven't taken that on. It's something I should do is call them and at least extend the invitation and see if they have anyone there, but as far as trying to find a group facilitator for the two groups I had at the time and taking on another, there was no way.

Melissa expressed her desire for a group facilitator on a number of occasions during my time with the group. She was looking for a social worker or someone with professional training or experience in counseling adolescents. She did not perceive herself to have such skills, nor did she feel she had enough time to do an adequate job of developing the skills. Although a professionally trained group facilitator would certainly help reduce the amount of tasks for which Melissa was responsible, such a person could also help persuade school
officials and other community members that "something constructive" was occurring during support group meetings.

Summary

The specified tasks, functions, funding patterns, mission, and governance of Greenview Community Action and the Teen Parent Support Program constitute a frame of meaning within which individuals involved in the organization act. The Teen Parent Support Program has adopted a definition of adolescent pregnancy and parenting which generally parallels that of the larger culture. Adolescent parenting is a potentially dangerous occupation -- not for the parent, but for the child. Hence the emphasis on preventing abuse and neglect.

The program has identified the problem as one of protecting "at-risk" children from their adolescent parents. The children are labeled "at risk" because of the age and socio-economic status of their parents, not because of any known history of abuse on the part of the parent. This protection is accomplished by providing "support" to the parent. Thus, the services provided to adolescent mothers are a "means to an end." That is, adolescent parents are not seen as deserving help for themselves, but only because they are responsible for children.

This concern for protecting "at risk" children is
translated into the language that fits with the more general
goals and philosophy of Community Action Programs. The
support group is created to provide social support and help
young parents work towards self-sufficiency. The mentoring
program is conceived as a way to promote community
involvement, or community self-sufficiency.
CHAPTER FIVE

AN ANALYSIS OF THE SITUATIONAL CONSTRAINTS ON PROCESSES OF IDENTITY NEGOTIATION IN TPSP SUPPORT GROUP MEETINGS

General Description of Support Group Meetings

Field researchers are presented with two general choices of organizational structure when writing their narrative account of the goings-on in the field. The piece can be organized chronologically, weaving interpretation of important events within this structure, or the piece can be organized to emphasize important patterns or relationships (Bailey, 1996). I have chosen the latter strategy. I have chosen the substantive organizational scheme primarily because it seems more interesting to me, and secondarily because the chronological changes, although important, did not seem to significantly alter the general patterns of interaction. Thus, I describe and interpret these patterns of interaction, embedding excerpts from field notes within the narrative to illustrate and support my interpretations.

However, I feel a brief descriptive overview of the support group meetings at this point will provide the reader with a fuller context for evaluating the appropriateness of my interpretations and conclusions, and constructing his or her
own interpretations. In the following section I describe the
general structure, typical activities, and attendance
patterns, of support group meetings, as well as the changes
that occurred in these during the ten months that I attended.

**Structure of group meetings**

Upon entering the field, it was my expectation that a
focused discussion, led by the director, would occur each week
on some aspect of parenting. For the first eight months that
I observed the group, this was not at all the case. Some
attempts were made to discuss certain issues but for the most
part the meetings seemed to provide a social occasion for the
mothers to get together, talk about their own and each other's
children, and visit. There was rarely one discussion going on
at any one time. Instead, the mothers would gather in groups
of two or three and talk, while the director, assistant
director, student interns and myself would mingle with them.

As noted earlier, however, the Program Director expressed
concern that something concrete happen during meetings of the
support group, and that it shouldn't just be "play time." During
the course of my initial five months of participation
with the support group, it was suggested several times by
staff that someone watch the children while the mothers meet
at an apartment for group discussion. This suggestion met
with resistance from the mothers on every occasion, usually
framed in terms of concern for their children. One mother
said, "...she [her daughter] gets real fussy when I'm not with her. She would probably be a handful for someone else."

These kinds of comments may represent a genuine concern over the well-being of the children, a reluctance to discuss parenting issues with staff members, or some combination of these and other factors.

On three occasions during this same period of time an informal survey was given to the mothers by TPSP staff asking what topics they would most like to discuss. The topic choices listed on the survey included relationships, discipline, managing stress, child health care, contraception, and an open category marked "other." The categories which received the most interest from the mothers were child health care and stress management. Few suggested topics in the "other" category except for one young mother who wrote in, "Let's talk about movies." After one of the surveys was administered a young mother said, "Why do we have to talk about anything in particular? I just like to come and visit with everyone."

During the last two months of my involvement with TPSP, the support group meetings were led by a facilitator. The group meetings became more educational in tone and structure. Each meeting focused on a specific topic, with discussion being directed by the facilitator. The introduction of a group facilitator provided an opportunity for me to observe
and compare two different types of staff identity and two different ways of defining the social situation represented by support group meetings.

Attendance

Attendance at support group meetings was minimal during the entire time I participated in the program. The average number of young mothers attending meetings during this time was 4 (3.8). The meeting which had the highest attendance by young mothers numbered seven. Another highly attended meeting was the TPSP Christmas Party. Six mothers were in attendance at this event, and they brought with them children, parents, husbands and boyfriends. Attendance dropped noticeably after the facilitator joined the group and its structure changed. For the first time during my affiliation with the group, a meeting was canceled because no mothers attended.

For those women who did not live in the apartment complex where the meetings were held, transportation to and from the meetings was often cited as a problem. Seventeen year old Jenny's mother would drive her and infant Nina the 20 miles back and forth to the meeting. However this case was atypical, evidenced by Melissa's comment to me that Jenny's mother was much more involved than the parents of most of these young women. Whenever possible, Melissa, Teresa or the student interns would drive to the homes of those young women

92
needing transportation and bring them to the support group. Despite this, those young women who lived in the apartment complex where the meetings were held had the most regular attendance.

Even those who lived in the Mountain Village complex seemed to need "encouragement" to attend. It was not unusual for Melissa, Teresa, or one of the mothers to have to spend the first ten to fifteen minutes of group meeting time going to the apartments of those women who lived at Mountain Village and "rounding them up" for the meeting.

The composition of the group was continually shifting. Twenty young women attended the support group meeting at least one time during the ten month observation period. Of these twenty women, fifteen had only minimal attendance. I defined minimal attendance as attending fewer than five of the support group meetings. Eight young women attended only once. Five of the seven women present at the most highly attended meeting were present for the first time and never attended again between April 13th and September first. One young mother attended two meetings, four women attended three times, and another woman attended four times.

The remaining five women I designated as the "regulars." All five of these women lived in the Mountain Village apartment complex. These women attended between eight and twelve support group meetings during the observation period.
Individual mothers would typically attend during consecutive weeks, therefore the attendance of these five women was not necessarily overlapping. For example, although both Stacey and Susan were regular attenders, they were never both present during the same support group meeting, because Stacey had stopped attending the meetings before Susan began.

The "Regulars"

The following is a list of the regulars including demographic characteristics and their pattern of attendance:

1) **Stacey**, a 19 year old white, married, mother of two attended all eight of the meetings between November 9, 1992 and February 4, 1993.

2) **Janine**, a twenty-one year old, African-American, single mother of three attended seven of the eleven meetings between November 9, 1992 and March 2, 1993.


4) **Mandy**, a 20 year old, white, married mother of two attended twelve of the fifteen meetings between December 14, 1992 and August 4, 1993.

5) Mandy's 21 year old sister **Susan**, a married mother of three, attended eight of the nine meetings between April 6, 1993 and August 11, 1993.

This sample lacks diversity in two important ways. First, the
majority of the young women (17 of 20) were white. Two African-American women in the sample were among the regular attenders, therefore, I have more observations of their interactions to draw upon than for the "irregular" attenders. However, these two women were also sisters, which means that any similarity in their interactional strategies may be founded on this connection rather than shared racial background. Thus, drawing comparisons in terms of race is problematic with the current sample.

Second, all the young mothers in this sample were older adolescents (age 17-22). The adolescent motherhood literature has paid little attention to the ways in which the experience of early motherhood varies for older and younger (age 13-16) adolescents. Thus, it is important to keep in mind that these findings are specific to older adolescents.

Finally, many of the young mothers who attended the support group meetings were married. Only two of the five regulars were single.\textsuperscript{10} This is a somewhat surprising finding given that "teen mothers" are often equated with "single mothers" in both the literature and the popular press.

In short, the meetings of the support group contradicted my expectations in many ways. The young mothers seemed to prefer the less structured meetings, while the staff sought to

\textsuperscript{10} Interestingly, these two single women were the two African-American sisters.
create structure and focus. The young mothers did not seem particularly committed to the support group as evidenced by their attendance patterns, and as will be described later, the staff appeared less than committed to the group at times as well. As I reflected upon my experiences in the field, and through conversation with my dissertation advisors, I came to recognize these contradictions, both felt and observed, as important analytical tools for organizing and making sense of my observations. I use the term "contradiction" to refer to incongruities, between expectations and reality, between statements and behavior, and especially in the relationship between staff and clients. The identification and analysis of contradictions can contribute to our understanding of the differences among various groups of women. In this way, my analysis shares a similar concern with the work of feminist standpoint theorists seeking to uncover the multiple standpoints of women located at different points in the social structure.

**Feminist Standpoint Theories and Contradiction**

Issues of epistemology are central to feminist theorizing, emerging from the critique of the implicit androcentrism which characterizes traditional models of research and theorizing. The general argument of the feminist critique is that traditional models of research and
theorizing, based on inherently androcentric assumptions, produce knowledge which constructs the experiences of women in a partial and distorted manner. Through this process, traditional academic knowledge contributes to the secondary status of women in society. Academic feminists set about creating a model of research and theorizing which illuminates the experiences of women, as women, and points to strategies for transforming the situation of women.

One such model is represented in what has come to be called "feminist standpoint theory." This label comes from the writings of feminist philosopher Sandra Harding (1986, 1987), but the basic epistemological assumptions also characterize the writings of sociologists Liz Stanley and Sue Wise (1983, 1984, 1990) and Dorothy Smith (1987). Rather than using women's experience to build abstract theories, feminist standpoint theory advocates a more grounded approach. This project seeks to illuminate and understand how women make sense of "everyday experiences" of oppression. Women are assumed to be actively engaged in interpreting their everyday experiences and accommodating and resisting oppressive social relations. The task for researchers is to clarify the standpoints of women.

This epistemological position has led to the recognition that the category "woman" is itself problematic, and must be constantly deconstructed. There are important differences
among women, such as class, race/ethnicity, sexual orientation, which create differences in the ways women experience and understand oppression. Stanley and Wise (1990:22) make this point nicely when they argue that the category "woman" is "ontologically fractured and complex". Because all women do not experience the same material reality, they are unlikely to share a similar perspective. Some feminist sociologists have set about identifying the unique contours of the standpoints of varying categories of women. Patricia Hill Collins (1990), for example, identifies the characteristics of Black women's standpoint.

In this research I do not seek to illuminate the standpoint of adolescent mothers. Rather, I focus on the similarities and especially the differences in standpoint between the young women and the staff involved in the Teen Parent Support Group (as well as similarities and differences between my own point of view and those of mothers and staff). I argue that the contradictions which emerged in my analysis of the setting point to differences of perspective between staff and mothers grounded in the different material realities within which they live.

Three important contradictions shape the relations between the young mothers and TPSP staff. First, the young women must create an identity for themselves within the confines of a social identity, "adolescent mother," which is
inherently contradictory. Second, the TPSP objectives assign the staff a double-sided task that positions them contradictorily in relation to the young mothers. Finally, differences in material realities between the staff and young mothers complicate the relationship between them. My own class position is more similar to that of the staff than the young mothers, therefore, I draw upon some of my own reactions in the third section as a resource for making class visible.

In this chapter I am focusing on the contradictions given by the situation. In Chapter Six I focus on the self presentation strategies of staff and mothers as they struggle with these contradictions. In this way I attempt to portray the women as actively constructing identities for themselves in light of the contradictions given by the situation.

**The Contradictory Role of TFSP Staff**

As is the case with many human service organizations, women are the primary providers and recipients of services associated with the Teen Parent Support Program. Within the setting of the support group meetings however, the participants interact with each other not just as women. They must also negotiate the boundary between "staff" and "client." In other words, their roles are structured by the assumptions embedded in the mission of the organization. The observation and analysis of these interactions can contribute to our
understanding of how different categories of women make sense of their experiences as women.

I find Goffman's (1959) Dramaturgical perspective particularly helpful because it focuses attention on the influence of structural arrangements on human interaction. Goffman maintains that the dramaturgical approach is concerned with:

the structure of social encounters - the structure of those entities that come into play whenever people enter one another's presence (1959:254).

In other words, the dramaturgical perspective views the dynamics of human interaction as being powerfully influenced by the constraints and possibilities of the situational context in which the interaction occurs.

Situational constraints and possibilities are given by the organization of the particular social institutions in which they are located. From the dramaturgical perspective, social structure is conceptualized as a network of highly routinized social situations. When situations are repeatedly enacted, they become institutionalized as part of an historically specific social structure. The interactions that occur in these situations become patterned or "scripted." Thus, the identities of staff and client within the Teen Parent Support Program are scripted independently of the particular personalities involved.
The routine features of institutionalized situations both construct and are constructed by interpretive frameworks. These interpretive frameworks create the meanings which human actors use to define situations, negotiate identities, and guide behavior. Like Dorothy Smith (1987:221), I am interested in the ways that interpretive frameworks "colonize" material realities for the women involved in the program.

Dramaturgical analysis casts participants in an interaction event into three general roles: those who perform, those performed to (the audience), and outsiders who neither perform in the show nor observe it (Goffman, 1959:144). When the adolescent mothers are conceptualized as performers, the staff as audience, and agencies of social control (e.g., Child Protective Services) as outsiders, it seems likely that adolescent mothers would feel especially pressured to present themselves as exemplars of "good" motherhood.

This pressure becomes even more understandable if we examine further unique kind of audience represented by the staff in this context. They appear to be located in what Goffman (1959:14) called a "discrepant role." On one hand, the staff of TPSP were expected to act as advocates for the young women in the program, but on the other hand, the staff were expected to keep a watchful eye out for signs of child abuse, neglect, partner abuse, drug or alcohol abuse, and other illegal or immoral behaviors on the part of their
clients.

These contradictory expectations cast the staff of TPSP into the role of "informer" or "imposter" (Goffman, 1959:145). The informer is someone who pretends to the performers to be a member of their team, is allowed to come backstage and to acquire destructive information, and then openly or secretly sells out the show to the audience.

In the case of TPSP, selling out the show to outsiders is a greater threat than selling out the show to the audience. Some imposters, according to Goffman, are:

...hired to check up on the standards that performers maintain in order to ensure that... fostered appearances will not be too far from reality. [This imposter] acts, officially or unofficially, as a protective agent for the unsuspecting public, playing the role of audience with more perception and ethical strictness than ordinary observers are likely to employ (1959:147).

In this case, TPSP staff have the authority to stop providing services already being received by young mothers, or worse, to report them to other social service agencies (outsiders) which may result in criminal punishment, the loss of their children, or the disruption of other social ties.

This idea can be illustrated by describing an incident
where I was cast into the uncomfortable position of choosing whether to be an advocate for a young woman or an agent of social control.

In the early part of my field work I was attempting to arrange interviews with some of the young women. Teresa had introduced me to Cathy, because she thought Cathy might be willing to participate in an interview. Like most of the young women, Cathy seemed interested in participating in my research but was unwilling to commit to a date and time for an interview. She suggested I just "stop by some afternoon." On the afternoon that I chose to visit, I found Cathy in an agitated state. Her two year old daughter Kayla had cut her forehead, and a female neighbor was trying to comfort her. Cathy explained that she was standing near the coffee table and didn't realize that Kayla was standing closely behind her. When Cathy turned around, she knocked Kayla down causing her daughter to hit her head on the corner of the coffee table. Cathy was upset because she wanted to take Kayla to the emergency room but didn't have transportation. She was trying to get in touch with Kayla's father at work, but he was "out on a job" and couldn't be reached by phone. Cathy immediately

\[11\] Cathy was involved with TPSP and PPP, and although she lived in Mountain Village, never attended a meeting of the support group. Because the context for interaction provided by the support group meetings became a central focus of the research, I did not continue my attempts to interview Cathy.
took me up on my offer to drive her and Kayla to the emergency room, and expressed several times how grateful she was that I had arrived when I did. I stayed with Cathy and Kayla at the hospital until Kayla's father arrived.

The next morning I called Teresa to let her know about the incident. I was somewhat worried that I had overstepped the boundaries of my involvement with the program. However, Teresa reassured me that I had done the right thing. Her main concern was whether or not Kayla's accident had truly been an accident. I felt extremely uncomfortable when Teresa asked for my opinion on this issue. This was only the second time I had interacted with Cathy and I arrived after Kayla had been injured. I really had no evidence for suspecting Cathy of intentionally causing Kayla's fall. I wanted to believe that Cathy would not intentionally harm her daughter. At the same time, I felt I had a responsibility to carefully analyze Cathy's behavior and story for any hint of abuse, because the well-being of her daughter was at stake. This was a terribly uncomfortable position. I simply tried to recount the scene as I encountered it, and Cathy's explanation of the accident to the best of my ability. This experience allowed me to more fully understand the perspective of TPSP staff, and the difficulties of being both advocates for these young women and agents of social control.

The staff must maintain both "insider" and "outsider"
perspectives on the young women's statements and behaviors. They have the opportunity to seek an empathic understanding of the young women's lives which is denied more remote agents of social control. An example of this comes from a discussion I had with Melissa about the Teen Parent Support Program's Advisory Board. As noted in Chapter Four, the Advisory Board By-Laws recommend that one or more teen parents serve as Board members, but TPSP had been unable to recruit anyone to serve in this capacity. In explaining this difficulty, Melissa first takes an outsider perspective on the young mothers:

They have never been successful with [having a teen parent on the Advisory Board] because they're teenagers. this issue comes up every month. We've even tried going to pick them up in the past, and they're just unreliable. We haven't found one that would work yet.

Here she draws upon the construction of adolescent mothers as irresponsible, mainly because of their age. After reflecting for a moment, however, she amends her explanation with an account that shows her ability to empathize with the young mothers:

Plus you have child care problems and...also you're dealing with low-income girls and a lot of them didn't finish high school, and I think it's an intimidating situation to come into. I'm
intimidated buy it. I am still trying to learn the ins and outs of this job and the agency as a whole and it's frustrating and overwhelming. A lot of it makes sense now, but I can only imagine what it's like to come in and feel like you don't know anything. So I think there's definitely some intimidation there.

By generalizing from her own experience with the advisory board and attempting to take the perspective of the adolescent women, Melissa now offers an explanation that is less condemnatory toward the young women.

I think this contradictory relationship can be used as a strength if staff become more conscious of it. Because they have the opportunity to interact with these young women on a long-term basis, they are able to develop an empathic understanding of their experiences. This understanding can become an important resource in making difficult evaluations like the one described above.

Another unique aspect of social service programs as settings for interaction is that the clients are aware that staff occupy this discrepant role. This knowledge for young mothers involved in TPSP combined with the stereotypical image of adolescent motherhood found in the larger culture creates powerful constraints on the kinds of interaction that are likely to occur within the context of support group meetings.
Horowitz (1995) describes this situation as a "context of suspicion" for young mothers.

Thus it seems likely that the adolescent mothers will be motivated to present themselves to best of their ability in line with the normative expectations for motherhood embedded in the larger social and cultural context. Similarly, it seems likely that the young women will attempt to distance themselves from the negative social identity represented by adolescent motherhood.

"Adolescent Mother" As A Contradictory Social Identity

The status adolescent mother is itself a contradictory one. On one hand, motherhood is an expected occupation for women, but on the other hand, mothering too early or too late in one's life course is considered deviant. In Chapter Three I discussed the political nature of the construction of "teen pregnancy" as a social problem. I argue that teen pregnancy and adolescent motherhood are "framed" in a way that focuses on the individual deficiencies (e.g., morality, self-esteem, work ethic) of young women. Such an understanding of early motherhood does not challenge social relationships hierarchically structured by gender, social class, race, or ethnicity. On the contrary, individualizing the problems of early pregnancy and motherhood works to construct a socially stigmatized group of women.
I see this stigma, embedded in the larger culture, as one source of the constraints that shape the interactional dynamics of the support group meetings. It is likely that all participants in the program, staff as well as mothers, are aware of individualized framing of teen pregnancy and adolescent motherhood. When "blame the victim" ideology is popularly accepted as the explanatory framework for a social problem, serious implications for the identities of those directly affected by the problem result. In other words, for adolescent mothers, accepting that early motherhood is problematic is tantamount to "admitting" or defining oneself as being at fault or lacking in some way.

Pheonix's (1991) in-depth interviews with adolescent mothers provides evidence of this. The defense of early motherhood was a consistent theme in the conversations among the women in her sample. She argues that young mothers use this as strategy for distancing themselves from the stigma attached to adolescent motherhood. Constructing a positive frame of meaning for early motherhood challenges the validity of the stigma constructed by "teen pregnancy," and allows young women to claim a more valued identity for themselves. I also found the defense of early motherhood to be a consistent theme in the conversations of the young mothers who participated in this research.

Defending Early Motherhood
For the most part, the young women who attended support group meetings talked about themselves as mothers in general rather than "teen" or "adolescent" mothers. When they did call attention to their youthfulness, it was usually to defend early mothering. The topic arose once out of a conversation in which the mothers were sharing and comparing their experiences with local hospitals and doctors. April, a white, married, twenty-two year old mother of four, recounted a negative incident with a doctor she went to see for prenatal care. She was fifteen and pregnant with her first child at the time:

He started giving me this long lecture about how wrong it is to have sex before you're married and have babies while you're a teenager. It made me mad because it wasn't any of his business. I mean Randy and I had already decided to get married and I was already pregnant so it just seemed stupid to me. I changed doctors after that!

Through this story April emphasizes her power to resist this doctor's framing of her pregnancy as something wrong or shameful. She simply changes doctors so that she is no longer confronted by this definition of her identity.

Eighteen year old Karen, a white mother of a six month old daughter responded to April's story:

I don't see anything wrong with teenagers having
babies. My boyfriend and I love each other and we love the baby even though we aren't married.\textsuperscript{12}

Stacey joined in the conversation:

Everyone told me I was going to have problems being such a young mother but I think it's better to have kids while you're young than while you're older. I was only seventeen when I got married and I dropped out of school then too because I couldn't stand my teachers. But I was so happy when I found out I was pregnant because then I knew I'd have someone to keep me company!

"Yea, but being pregnant is such a pain!" laughed Mandy. The others nodded their heads in agreement. Stacey, who was six months pregnant with her second child replied:

I kinda like it, I got a lot of extra attention when I was pregnant with Amanda and now I'm getting that again with this one! [points to her stomach].

April replied:

Yea, that's true. I like how everybody tells you to sit down and take it easy, and they take care of you.

\textsuperscript{12} This was Karen's first and only appearance at a support group meeting. I later learned that she was a part of the Parent Potentials Project which focuses on parents at high risk for abuse. According to Melissa, Karen "...comes from a pretty dysfunctional home, to say the least. I know her mother was abusive."
In this conversation, the young women show their awareness of the negative perception of teen pregnancy and adolescent motherhood, yet conclude based on their experiences that it is not disadvantageous, and focus on the positive consequences of being pregnant.

This finding is not surprising given that the young women were brought together under the auspices of the "Teen Parent Support Program." Not only its mission and goals, but the very existence of the program is testimony that the community views "teen parenthood" as a problem. Thus, defining what kind of problem it is becomes an important task to be worked out in the interactions of the participants. Although the young women do not have the necessary power to re-frame the problem of adolescent pregnancy and parenthood in the larger culture, they do have the power to re-frame it in this setting.

Motherhood as Doing Gender

Although adolescent motherhood may be stigmatized, motherhood remains a normative identity for women in patriarchal societies. Thus, gender provides another powerful influence on the interactional dynamics of the support group. My use of the term gender here is most influenced by West and Zimmerman (1987:126) who argue that gender is, "...both an outcome of and a rationale for various social arrangements."

Not only did they interpret pregnancy and early
childbearing in a positive light, but many of the young women spoke of their desire to have more children. As part of the conversation described above, Karen asked April how she managed with four children. April replied:

It's not that bad. When a new one comes along it just kind of falls into place. Mine are spaced two year apart and I like that. I get one out of diapers before another one comes along. I had a friend who was pregnant and had a six year old. I thought that would be hard after having a break for that long to have another baby and have to deal with diapers and all that stuff again.

Karen replied that she would like to space her children two years apart too.

Many of the young mothers who attended support group meetings had more than one child, including all five of the regulars. Janine had three children, Rachel two, Stacey two, Mandy two, and Susan had three children. As noted in an earlier chapter, one of the explicit goals of TPSP was to prevent further pregnancies during adolescence. However, Rachel, Stacey and Mandy gave birth to their second children, and Susan gave birth to her third child during the period of time that I worked with the support group. Despite this, discussions of contraception or the benefits of waiting before having another child were never initiated by the staff in any
formal way, although such discussions may have occurred in one-on-one interactions between staff and mothers.

Mandy had her newborn son (her second child) with her at the first meeting of the support group after its summer hiatus. Stacey was sitting with Mandy and was holding her second child, a five month old baby boy. As people began filtering in for the meeting, everyone gravitated toward the pair in order to see Mandy's new baby. Several people commented about how tiny Mandy's son was and how much bigger Stacey's son had gotten since the last time we'd seen him. These comments prompted Stacey to say, "I want another one now as small as Mandy's."

At another meeting, Susan walked in with her two sons and her three month old daughter. She was having a difficult time juggling the three of them. Two young teenaged girls (14-15 years old) had accompanied Lynda to this meeting to help with childcare and they rushed over and asked if they could hold with the baby. They took the baby and sat with her on a couch in the corner of the clubhouse where they cooed and doted on the infant. Meanwhile Lynda set up her easel and began introducing the discussion topic. After about twenty minutes the younger teens suddenly began shrieking:

Oh my God! That stinks! She just messed her britches, Susan she needs her diaper changed! Everyone began laughing at the reaction of the younger girls.
As Susan retrieved the infant she joked, "Just wait till they get married and have kids, they'll get over [the smell]!"

Based on these interactions it seems unlikely that TPSP will be successful at discouraging the young women from further childbearing. The young women seem to perceive having children as simply a given, a taken-for-granted expectation for all women. In addition, the young women seemed to enjoy the extra attention and kind manner in which they were treated while pregnant and after the birth of a new baby. They view motherhood as a way of establishing a relationship with someone in which they can be assured of unconditional love. Not surprisingly, these perceptions of the benefits of motherhood parallel the research which focuses on the perceived value of childrearing for non-adolescent mothers (Fawcett and Arnold, 1973). If young women do not perceive an alternative to childbearing as a way to create adult status and social identity, affectionate relationships, and a sense of self-worth and competency, it is unlikely that attempts to persuade them to delay childbearing will be effective.

Differences of Social Class

Although the Teen Parent Support Program was targeted at low-income adolescents, issues of social class were rarely discussed explicitly in the support group meetings. This is not to say, however, that social class did not enter into the
dynamics of support group meetings. I did not use any precise indicators of social class in this research, however, there were important differences between the lifestyles of staff and clients that were fairly easily observed, and I believe, further complicated the relationship between staff and young mothers. The differences in the material circumstances of staff and young mothers are most visible in the relationship of each group to paid employment, and in their living environments.

Paid Employment

The staff described their experiences with material struggle primarily in terms of low-paying nature of their job. Melissa, for example, maintained a part-time job as a waitress during her initial involvement with the program in order to make ends meet. She once mentioned to me her frustration with phone calls from credit agencies that she was receiving because she had been having trouble paying credit card bills. As noted in an earlier chapter, Melissa described her job as, "....working with low-income people everyday, but [I'm] right there with them."

Teresa, the Director of the Parenting Potentials Project, had frequent problems with her car and was dismayed that she could not afford anything more reliable. Teresa also found it necessary to move to a cheaper apartment, during the time I was affiliated with the group, because it was becoming to
difficult too difficult to pay rent. She once told me, "...you don't do this kind of work to get rich, you do it because you like it." I could relate easily to these problems. During the period of data collection, I also found it necessary to move to a place with lower rent, and I was also receiving phone calls from credit agencies. Thus, as I compare the material circumstances of staff and young mothers, I include some of my own experiences and understandings of social class as illustrative of the staff's economic position.

Although the economic constraints experienced by the staff and myself were quite real, there were important differences between our material circumstances and those of the young mothers who entered the Teen Parent Support Program as clients. First, the staff had occupations, that while low-paying, did offer them some measure of self-efficacy, prestige, and economic stability not available to the young mothers. Many of the young mothers had not graduated from high school and were, therefore, unqualified for any but the lowest tier jobs. Only Stacey and Janine were engaged in paid employment during the time I worked with the group. Both women worked intermittently as custodians at a local motel. Even this would not have been possible, however, if they hadn't been able to rely on co-workers for transportation, and female relatives for unpaid childcare services. Thus, lack of education, difficulty in finding affordable child care, and
lack of transportation created significant barriers to paid employment for the young mothers that did not exist for the staff.

Although the staff may have been unable to shop at prestigious clothing stores, they were consistently well-dressed and groomed. The young mothers, however, frequently relied upon donated clothing for themselves and their children, and they could not afford regular visits to the hairdresser. While the staff had difficulties with their cars, the young mothers did not own cars. One young woman, Stacey, was unable to drive, having quit school before she was scheduled for driver's education. Thus, they had to depend upon others for transportation.

The lifestyle difference between staff and mothers was particularly visible in terms of living environment. Although staff struggled to pay the rent, they had more choice and control over their housing than did the young mothers. This can best be illustrated by a description of the rent-subsidized apartment complex, Mountain Village, in which the support group meetings took place.

**Mountain Village**

If a young woman qualified for subsidized housing, there was a waiting list to obtain an apartment in Mountain Village. Part of the mission of TPSP is to play the role of broker for the young women in order to get them access to other services.
Melissa explained this as follows:

We give priority letters which will take you to the top of the list, but the list used to be two years. Then for some reason beginning in December there was no waiting list at all. Now it's a thirty to sixty day waiting list. We provide the girls with the information, and help them [make contact with the apartment manager] sometimes, because a lot of them don't have transportation. But we try to make them do it for themselves.

Several of the mothers expressed gratitude for the help TPSP helped providing in getting their apartment in Mountain Village. For many it provided escape from the homes of parents or in-laws, or from substandard housing.

However, the young women's reactions to Mountain Village were not entirely positive. One young mother told me that she and her daughter, had recently moved into Mountain Village with the help of TPSP. She noted that she was glad to move out of her mother's home because they did not get along. When I asked how she liked living there she replied:

I don't like it at all that much. There are a lot of drugs here and I'm hoping to get a job and get out of here in a few years.

I never felt comfortable visiting Mountain Village either. When I lived in the area I almost never locked my car doors,
but the first day I arrived at Mountain Village I did locke
them and continued to do so each time I was there. A few
times I arrived for the meetings early only to find no one
from TPSP around and the clubhouse door locked. On these
occasions I felt uneasy being by myself at the apartment
complex and would usually wait inside my car until someone I
knew arrived.

Part of my un-ease came from my own impressions of the
complex. The buildings were not particularly run-down, but
most of the automobiles in the parking lot were. In addition,
during the warm months there were usually young people hanging
around the steps of the buildings yelling and teasing each
other. I felt most uncomfortable around the young men I saw
there. They fit the image I had -- which is admittedly shaped
by classism and racism -- of "trouble-makers." I found myself
displaying my nylon briefcase prominently and trying to carry
myself as a professional. I hoped they would mistake me for
a social worker and not bother me.

A few months after I started my field work at Mountain
Village, the apartment complex came up in a conversation I was
having with a personal friend. My friend had grown up and
lived his entire life in the town where Mountain Village was
located. He was telling me about a great duplex that had
opened up for rent. He asked if I knew where Mountain Village
was and when I answered, "yes" he explained that the duplex

119
was near the apartment complex. I asked if he thought he'd move in and he replied that although he liked the duplex because it was so much bigger than the apartment his family currently lived in, he didn't want to raise his kids so near Mountain Village. When I asked why not he responded that there were too many drugs and other "bad things" going on there. This information confirmed the uneasy feelings I had around the complex.

Not only was the living environment less than desirable, but Mountain Village also conducted routine cleanliness inspections of residents' apartments. During one meeting of the support group the mothers discussed these inspections. Again, their reactions were mixed. Stacey said:

I don't like [the inspections]. They even look through your cupboards. I think they're just being nosy.

Tina, a white, unmarried mother of a two year old, disagreed:

I think it's a good idea to make sure people are taking care of their apartments and things aren't falling apart. The last time they came to my apartment they said I was doing a good job and to keep up the good work.

While Stacey views the inspections as an intrusion, Tina viewed them as an opportunity for receiving positive
reinforcement and transforms them into a source of self-esteem.

Regardless of how the young women respond to inspections, or Mountain Village as a desirable living space, the important point is that they were forced to deal with these issues while the staff, and I, were not. As a struggling graduate student, I could identify more readily with the staff in terms of trying to make ends meet. While it is a humbling experience to try to explain to the landlord why the rent is late again, when I tried to imagine living at Mountain Village, it seemed far worse. I realized that I was fortunate to have more choice about my living environment, and that my good fortune was a form of class privilege not extended to the young mothers who lived at Mountain Village.

Support Group Meetings as a Space for Women

I see the three contradictions described above as having a primarily negative impact on the relationship between staff and clients, especially because they were rarely explicitly acknowledged. The contradictions inherent in the identities "adolescent mother" and "TPSP staff" create a "context of suspicion" within which these women interact, creating barriers to open communication. Similarly, the class privilege afforded the staff creates a barrier to the development of an empathic understanding of the experiences of
the young mothers.

Despite such barriers, there was another type of contradiction characterizing the support group meetings that was seemingly created and maintained through the cooperation of staff and mothers. Although the program was called "Teen Parent," and the literature described the program and support group meetings as open to teen parents of both sexes, the meetings were attended only by women. Interactions and discourse also constructed the support group meetings as a space for women.

This is perhaps most obvious in the lack of discussion concerning relationships with men. Despite the fact that many of the young mothers were married, they actually did not discuss their husbands or boyfriends at any length. Most of the informal conversations were centered around the children. At one group meeting Melissa asked everyone to introduce themselves. Most of the mothers gave their names, and the names and ages of their children. Although three of the four women attending the meeting were married, only Stacey mentioned that she was married in her introduction.

The staff cooperated in defining the support group as a women's group primarily through their lack of effort to include men or discuss the role of fathers and male partners. Melissa, although she may not have been aware of it, more explicitly discouraged attendance by men. Twice during
support group meetings Melissa laughingly told the story about the time Stacey's husband Ricky had attended the meeting with her:

Ricky was so embarrassed to be the only man among all these women, that he got scared and never came back again.

Ricky showed up during a meeting several weeks after I'd first heard this story. He was standing shyly outside the door of the clubhouse when Melissa saw him. She opened the door and said teasingly, "Don't be afraid Ricky, you can come in!" He came in, walked over to Stacey and handed her some keys, then quickly left.

When male partners were discussed this teasing tone was usually present. Occasionally the young women would make flip comments in a humorous tone about husband and boyfriends. For example, at the meeting which focused on fostering children's language development, the staff passed out children's books which had been donated to TPSP through a literacy campaign organized by the local libraries. Mandy picked up a book titled "Me and My Dad," and said:

I wish they had a book called "Me and My Mom." [My daughter] already has the "Me and My Dad" book and a lot of that stuff Daddy don't do.

On another occasion the discussion focused on nutrition. The young women were asked to describe what the typical supper
consisted of at their house, and then we analyzed the nutritional content of these meals. Lynda asked sisters Mandy and Susan what their husbands liked to eat. Susan replied, "They like anything we put on the table for them." By constructing the support group meetings as an activity for women, a space is created in which it is "safe" for these young women to "talk back" to husbands, boyfriends, and parents.

Another consequence of the woman-centered nature of the group is the reinforcement of the assumption that parenting and maintaining the home is "women's work." Initially I was appalled that such assumptions were not deconstructed within support group meetings. Middle class feminist scholars have identified the unpaid nature of women's work as a factor contributing to the oppression of women in society. The working-class woman who finds this type of work rewarding has been characterized as "traditional," or more willing to accept patriarchal authority by many middle class scholars (Ferree, 1987). I felt the staff should use the kinds of flip comments about men made by the young women as an opening to make the young women aware of how they were being oppressed within in their families. However, again I realized that I was imposing a middle class perspective on these women's lives.

Research that explores the perspective of working-class women has demonstrated that domestic labor provides certain
intrinsic rewards for working-class women that are unavailable from the kinds of paid labor to which they have access (or do not have access as in the case of these young mothers). Domestic labor is less alienating than many working class jobs in that the worker controls the pace and timing of her work, and can perceive it as an expression of love and caring for family members (Ferree, 1987). As noted in the earlier section, one young woman even found the routine cleanliness inspections performed by the apartment complex as an opportunity to receive praise and feel good about her work. By maintaining the assumption of domestic labor as women's work, the staff acknowledge the reality of these young women's lives.
CHAPTER SIX

PATTERNS OF IDENTITY NEGOTIATION
IN SUPPORT GROUP MEETINGS

Self, Impression Management, and Identity Negotiation

My understanding of the self is influenced by Symbolic Interactionism. I see the self as a dynamic process rather than a stable and enduring construct. The self one experiences and presents to others varies according to the situation s/he is in. Discrete interactions are guided and given form through the processes of role-taking, defining situations, and interpreting the actions and objects which occur in a specific, concrete location (Blumer, 1969). All of these processes require the ability to view oneself as an object, and then to define oneself in relation to the others and the objects found in a particular situation. In viewing self as an object, the individual assumes the perspective of the other(s) in the situation and imagines how the other(s) view him or her (Mead, 1934; Cooley, 1970).

The individual is not a passive recipient of this information but rather, uses this information to manipulate and manage the impression of self others form of him or her. When an individual appears before others he knowingly...projects a definition of the situation,
of which a conception of himself is an important part (Goffman, 1959:242).

Through this process of impression management, the actor is able to accomplish two goals necessary for the maintenance of ongoing social life.

First, through "dramatic realization", one actor conveys information about him or herself to others which may not be immediately accessible. The actor conveys only that information which fits her or his motives in the situation. This information can then be used by other actors to help define the emerging situation and guide their own activity in the situation. Second, through "idealization," an actor attempts to bring his or her actions in line with social expectations and conventions.

These two goals may seem to over-emphasize the maintenance of social order, but this would require the assumption that one's attempts at managing an impression are always successful. Through strategies of impression management an actor claims an identity. In claiming an identity the actor tacitly asserts the right to be treated as a person with such an identity, and the obligation to behave in the manner of a person with such an identity. Other actor(s) in the situation, however, may refuse to treat the actor in accordance with the claimed identity. Further, the actor may be unable or unwilling to fulfill the obligations of
the claimed identity. In either case, the actor's attempt at claiming an identity will be unsuccessful. This process in interaction is called identity negotiation.

The situation created by the meetings of the support group is unique and places the staff and young mothers in a very complicated relationship with one another. As discussed in Chapter Five, the staff are both advocates and agents of social control in relation to the young women. Both roles require staff dramatize their expertise on parenting issues. The young women are not exactly required to attend meetings but there is some coercion by the staff to do so. Attending a "teen parent" support group may imply that one has difficulty managing parental responsibilities, and the young women in this group are aware that they are being monitored for signs of abuse in their relationship with their children. Therefore, they are motivated to call attention to, and even idealize, their identities as mothers.

It is with these unique contours of the situation in mind that I identified strategies of self-presentation and dynamics of identity negotiation that occur within the support group. In the next section I describe two strategies of self-presentation used by the young mothers: "model motherhood" and "playing house". I then describe two types of strategies of self-presentation employed by staff: "arbiters" and "mediators," borrowing these labels from Horowitz's (1994)
observations of staff working in a GED preparation program for adolescent mothers. Again I use contradictions as an analytical tool, and uncover an important interactional dynamic related to who or what is a legitimate source of knowledge about parenting. In the final section I consider the implications of the young women's challenges to the "expert" knowledge about parenting represented by staff.

Managing Self as Adolescent Mother

The strategies for managing self discussed here have emerged through the identification of patterns in field notes. I have labeled these strategies "Model Motherhood" and "Playing House." It is important to note that these strategies exist as ideal types. They are not based on the behaviors of any one young woman, but rather, reflect general self-presentation strategies exhibited by the various young women participating in the support group. Any one young woman might use all of these strategies during one or more interactional events.

Although I did not attend to specific differences between married and unmarried adolescent mothers, it seems likely that married and cohabitating mothers may find managing impressions of themselves as "model mothers" or "playing house" easier than single mothers because of the presence of a male parenting partner. I make this assumption because despite the
increased numbers of female-headed households in recent decades, the two-parent family remains as the normative family model.

Principal Motherhood

Perhaps the most common strategy of self-presentation employed by the adolescent mothers was one of displaying attentiveness and concern toward their children. Both formal and informal discussions were continuously interrupted to reprimand a child, tell a child to say "thank you," take a child to the bathroom, give a baby a bottle, laugh at something funny a child said or did, and so forth.

Frequently the young women shared stories of "cute" things their children had done or accomplishments made. During the first few months that I was involved with the group, seven year old LaTisha would burst into the clubhouse during our meetings to see if Rashad would come play with her. LaTisha was the daughter of a young woman who lived in the apartment complex but did not attend the support group meetings. One evening after Rashad and LaTisha had gone outside to play, Rashad's mother Janine told a story about her son.

Hey ya'll, LaTisha is Rashad's girlfriend! She comes over to the house to play and they're always real good. I tell them to clean up their mess when they're through and they do! When it's time for
LaTisha to go, Rashad walks her home, and he even looks both ways before they cross the street!

Janine told the story with pride and laughter. Both staff and mothers laughed at her story and exclaimed, "That's so cute!"

Stacey talked frequently about how much she loved her eleven month old daughter Amanda.

It's just the greatest thing when she hugs my neck and gives me kisses and says, "Mommy I love you"!

The first night I met Stacey, she had left her daughter at home with her husband. However, she quickly pulled a locket that she was wearing from under her collar to show me a picture of Amanda. She excitedly told everyone that she had taken Amanda to have some new photographs made and she should have them back in time to bring them next week.

This strategy seemed to have several purposes. First, it displayed to the staff that these women were good mothers and were conforming to the normative ideal of motherhood. Because needed material and social resources were available from the staff of the program, it would make sense that the young mothers would want to present such an image of themselves. The mothers in the group would proudly and gratefully display baby clothes, blankets and maternity clothes they had gotten from TPSP. They also spoke of furniture, strollers, high chairs, and the like that they had received, and how TPSP had helped them obtain an apartment in the complex.
Another possible reason for the model motherhood strategy is the desire to avoid being labeled a "crisis case" by the staff. Staff members frequently mentioned having to deal with a "crisis" with one of the mothers. This generic term allowed the staff to protect the confidentiality of both the specific mother and of the nature of staff intervention. As I became more integrated into the program, "crisis case" came to function as a signal to me from the staff. It came to mean, "I can't talk about it here or now, but I will tell you about it later." Therefore, specific details of crisis cases were confined to backstage regions, away from the interactional setting provided by the support group meetings.

During my affiliation with the group, the term "crisis case" was used to cover four different types of problems which the staff either knew about or suspected. These were abuse of a young woman by her male partner, abuse of a child by a parent or other adult, drug use, and emotional problems. The potential consequences for a young woman earning the label "crisis case" ranged from increased home visits by staff to the involvement of other human service agencies in the young woman's life.

Of course in the kinds of situations mentioned above, intervention by a human service agency is appropriate and often provides real help for clients struggling with such issues. However, most perceive the intervention of human
service agents in one's life as an interference rather than a help, at least initially. In addition, the privacy typically accorded "family matters" has historically encouraged individuals to keep problems such as family violence, alcohol or other drug abuse, and mental illness hidden from public view.

Therefore, it seems likely that the mothers participating in the support group would be motivated to present themselves as "model mothers" not only to secure continued access to material and social resources, but also to avoid the negative consequences of being labeled a "crisis case." This interpretation is supported by Horowitz' recent ethnographic study of a GED program for adolescent mothers.

Interacting with the young women as mothers who need some "corrective" action heightens the possibility of and sensitivity to their seeing others' actions as criticizing their ability to mother. They saw the situation as risking more than identity; they perceived a risk of state interference in their lives (1995:164). The Model Motherhood strategy allows the young women to distance themselves from the image of adolescent mothers as lacking parenting skills.

Another important function of focusing attention primarily on the children is that it allowed the young mothers
to have some control over the flow of interaction. The problems of providing child care made it difficult to create formal, focused group meetings. Because there were always infants and young children present at the meetings, the staff were forced to settle for less than full attention from the young mothers.

For example, near the end of Lynda's presentation on nutrition, sisters Mandy and Susan began whispering and giggling. When other group members noticed their behavior, Mandy exclaimed, "Look at those boys!" Mandy and Susan's sons were outside pressing their noses and mouths into the large window at the front of the clubhouse, trying to make their mothers laugh. Everyone shifted their attention to the two boys and began laughing at their antics. The boys then ran into the clubhouse and flung themselves into their mothers' arms collapsing with laughter. By this point, Lynda had lost control of the discussion.

Numerous incidents such as this one occurred on a regular basis. The staff could not ask the mothers to ignore their children. Thus, the demands of their children gave the young women a legitimate reason for interrupting conversations with staff and preventing the group from becoming formally organized and educational in tone. In this way the mothers resisted being cast into the role of passive audience, and the children become a valuable resource for controlling the
definition of the situation.

**Playing House**

I designate this strategy "playing house" because of the fantasy-like imagery used by the mothers to describe their lives. It often seemed as if they were little girls playing house. In fact, Melissa once expressed her frustration with one of the young mothers in private to me by saying that the young woman, "...seems to be living in a fantasy world." This finding is supported by the literature which reports that adolescent mothers tend to romanticize motherhood (Phoenix, et. al., 1991).

This strategy of impression management seemed more difficult to maintain than the first. The mothers themselves frequently disrupted their own performance. The fantasy world was contradicted by the reality of the young women's situations. For example, at one meeting Stacey was wearing a fringed black suede jacket that looked to be about three sizes too large. When I mentioned that I had a similar jacket she talked very animatedly about how her husband had given it to her and how much she loved it even though it was too big for her.

I saw one just like this in Wal-Mart and fell in love with it. My husband said he'd get it for me so I tried it on and found the right size and he put it on layaway. But he never did finish paying
for it because he lost the ticket. So we were at a yard sale one day and we saw this one for only $25.00. Todd felt so bad about not getting me the other one that he bought me this one!

Although she spoke of how much she loved the jacket, especially since her husband had given it to her, her story implies her disappointment. She wanted and had been promised the brand new jacket from the department store -- the one that fit. Instead she got a previously worn jacket from a yard sale that was much too big.

Another story from Stacey provides further illustration of a young mother attempting to create the impression of living in a fantasy world. Stacey describes the morning routine at her house to Melissa and myself:

In the morning I like to put Amanda in bed with me and Todd. Amanda "play smacks" her daddy, then rubs his face and kisses him! Amanda wakes Todd up that way almost everyday!

Here Stacey has created the image of the perfect nuclear family.

Many of the mothers treat their children, especially infants, as if they were dolls. This fantasy is quickly challenged by the reality of the often frustrating nature of child care. While looking through a bag of donated infant clothing, a seventeen year old mother of a six month old
daughter said with delight:

Look at all the pretty dresses. I always wanted to have a little girl so I could dress her up in these kinds of things.

As an afterthought she added, "Although she'll probably have it dirty five minutes after I get her in it."

During one of the more focused meetings of the group, the mothers were each given an index card and asked to write what they thought motherhood would be like while they were pregnant. Next they were instructed to turn the card over and on the other side write what motherhood was like now that they had experienced it. On the before side, a seventeen year old mother wrote, "I thought motherhood would be easy and wonderful." On the after side the same young woman wrote:

Afterwards I found out it was very time consuming, hard but most of all I found out it was wonderful just like I thought before I had her.

Another mother wrote on the before side:

I thought motherhood would be easy. I thought [my daughter] would be there for me to play with her a lot, but she slept and still sleeps most of the time.

On the after side the same mother wrote, "It's still rewarding to see the things she does and the things she comes up with to say."
Although it has been described in terms of fantasy, it seems to me that this strategy is one that most accurately describes their experiences of motherhood. The same contradictions that make this image of self difficult to manage and maintain also ground it in lived experience. As explained in an earlier chapter, feminist theories of motherhood begin with a critique of the socially constructed, cultural image of motherhood. Motherhood and family life have historically been presented to women as a kind of fantasy. Children are always sweet, clean and well-behaved, husbands are always loving and supportive, the house is always well-furnished and clean and so on. The reality of motherhood for almost all women contradicts this cultural image. Further, it is precisely at these points of contradiction between the ideal and the experience of motherhood that the power relations inherent in the cultural construction of motherhood are revealed (O'Barr, Pope and Wyer, 1990; Smith, 1989; Rossiter, 1988).

The experience of motherhood is complex and contradictory for women at any age -- it is frustrating and overwhelming, but also pleasing and fulfilling (Chodorow and Contratto, 1982). Based on interviews with fifty married mothers of small children, Boulton (1983) suggests a useful way of conceptualizing and understanding this contradiction. She argues that motherhood encompasses two different modes of
experience. Their is an immediate response to the day-to-day activities of looking after children and a larger sense of purpose or meaning in raising children.

Thus the experience of motherhood for any woman is derived from her interpretation of the meaning or value of children (Fawcett and Arnold, 1973), and her interpretation of the meaning of childcare. Through "playing house", the young women manage the impression that the positive value of children and motherhood as an identity compensates for the difficulties of child care as a day-to-day activity. The value of children and the importance of motherhood as identity for the young women is a theme that also runs throughout the young women's interactions with each other.

Managing Self as Staff: Arbiters and Mediators

The frame of meaning created by the official mission and goals of New River Community Action and the Teen Parent Support Program must be interpreted by individual staff members, negotiated in their interactions with each other, and communicated to the clients served by the program. If the staff are to meet the program objectives of promoting self-sufficiency among the young women, reducing the possibility of child abuse and neglect, and discouraging further pregnancy, they need to present themselves to the young women as legitimate sources of information about parenting. Goffman
maintains that

...if one individual attempts to direct the activity of others by means of example, enlightenment, persuasion, exchange, manipulation, authority, threat, punishment, or coercion, it will be necessary, regardless of his power position, to convey effectively what he wants done, what he is prepared to do to get it done and what he will do if it is not done. Power of any kind must be clothed in effective means of displaying it, and will have different effects depending upon how it is dramatized (1959:241).

Teresa and Lynda, the woman who became the group facilitator, chose two quite different strategies of dramatizing their identity as staff. However, they both faced a similar problem in presenting themselves as having the legitimate authority to define the practices of motherhood.

Based on her observation of a GED program for adolescent mothers, Horowitz (1995) identifies two ideal types of social service providers that are useful in describing the different strategies of impression management used by Melissa and Lynda. The "arbiters":

develop the program as though it were a formal job site by constructing a hierarchical relationship with the clients and trying to establish
unquestionable authority based on their success... (1995:vii).

On the other hand, the "mediators":

worked to create a community of women who could talk about issues important to them. Their authority was embedded in experience and through the provision of information that was presented to the young women as choices they could either use or discard... (1995:vii).

I feel that the different interactional styles of Melissa and Lynda roughly fit with this conceptualization. Lynda was working to create an identity in the group meetings similar to Horowitz' description of the arbiters. The "classroom" tone of the meetings under her direction coupled with her constant lateness can be interpreted as her attempt to negotiate her identity as a social service professional with authority over the young female clients. However, Lynda seemed to have difficulty remaining "in character" as the social service professional, particularly when the limits of her knowledge about parenting were revealed by the young mothers.

Melissa, on the other hand, had more of the characteristics of Horowitz' mediator. She knew quite a bit about the day to day activities and concerns of the regular attenders. She paid attention and tried to help them with any concern or issue expressed during group meeting. The
unstructured nature of the group meetings during her leadership allowed this flexibility and greater sensitivity to the individual concerns of the young women. For example, After the mothers had expressed several times their desire to watch a "fun" movie during our meeting, Melissa consented. She brought popcorn and rented the latest "thriller" and we watched the movie. During meetings like this, distinctions between staff and client were greatly minimized. We were more like a group of women friends watching a movie together.

**Melissa as Mediator**

Melissa seemed to be more comfortable in the role of mediator rather than arbiter. One way this can be seen is through her perception that she could not be an adequate facilitator for the support group meetings.

Melissa, the program director, expressed a desire for a group facilitator on a number of occasions during my early time in the group. She was looking for a social worker, or someone with professional training or experience in counseling adolescents. She did not perceive herself to have such skills, nor did she feel she had enough time to do an adequate job of developing the skills. The sheer number of responsibilities that made up the program director's job, the low pay, and Melissa's perception that she was not qualified to be a group facilitator framed her decision to look for an outside facilitator for the weekly support group meeting.
At one point during my first month in the field, a social worker attended one of the meetings. Melissa told me that she was to attend meetings occasionally and act as the facilitator. However, she did not attend any meetings after her initial introduction to the group. When I asked Melissa what happened to this person she replied:

She never showed up. She was supposed to show up that one week with the survey, remember? And she didn't show up. And three days later she showed up in my office and said, "Oh I forgot was I supposed to be there?"

I was unable to contact the social worker to find out her account of the incident, but the important point here is that she failed to take on the role in the group that Melissa had hoped she would.

Despite her perception that she could not be an adequate group facilitator, Melissa's rapport with the mothers and their children became obvious the first time I attended the evening support group. She frequently complimented the children on their clothes and hair cuts, or asked them about activities or events in their lives. The children competed for the opportunity to sit on her lap during group meetings. When Melissa introduced me to individual mothers, she talked mostly about their children. The ability of staff to relate well to the children, and to voluntarily help take care of
them seemed to be very important to the mothers. It seemed that you were more trustworthy if you related well with the children.

One child in particular, five year old Rashad, seemed to have a special bond with Melissa. During the meetings he would show off, dancing, playing hide and seek and so forth, and got a lot of attention, especially from Melissa. She was frequently holding him during the meetings. Near the end of one meeting, while she was holding Rashad, she whispered to me, "He's my favorite."

Rashad's mother, Janine was a 21 year old black woman. She was tall and thin, and usually had a serious, no-nonsense expression on her face that could quickly turn into a somewhat devilish smile. The relationship between her son and Melissa seemed to please her. At the start of one meeting, when Melissa entered the door, Rashad ran to her and jumped into her arms, exclaiming, "Melissa!" Janine shook her head and with a smile said to me, "I keep telling her that's her son."

Melissa also volunteered help with child care when needed, providing the mothers with a break. Janine had two other children, younger than Rashad. Tiffany was three and Tia eleven months. At one meeting, Melissa was trying to get a VCR set up, and she allowed Rashad and Tiffany to "help" her. Janine sat at a table and played patty-cake with Tia.
She smiled and laughed and seemed to enjoy the time spent one-on-one with her youngest child. When Tiffany said she had to go to the bathroom, Janine started to get up, but Melissa said, "Sit still, I'll take her."

On another occasion, April, a 22 year old mother of four children ranging in age from 6 to four months had allowed her four and six year old boys to go play outside the clubhouse. She asked them to stay nearby where she could keep an eye on them outside the window. While holding the infant and occupying her two year old daughter, she noticed the boys running toward the road. "I knew that wouldn't last long," she muttered as she got up to run after them. Melissa said, "I'll go get them" and went out the door to track down the boys.

The first time I met Stacey, she was a 19 year old married, white mother of a two year old daughter and was seven months pregnant with her second child. She came in with a Christmas card (this was November 9th) and a hand-made invitation for Melissa and Teresa to her daughter's first birthday party. She was very excited because the party was going to be held at the Golden Corral. Stacey told me that her husband had accompanied her to the first few meetings of the support group that she attended, because

I don't like being around people I don't know.

That was before Melissa and Teresa came too. I was
really glad when they came in, I like them better, and now I don't mind coming by myself anymore.

Based on her actions and comments, Melissa seemed to feel that the support group meetings should provide the mothers with a break from childcare responsibilities, a chance to get out and make contact with other young mothers. When I asked her how Stacey was doing after the birth of her second child, Melissa gave evidence of her perception of these young women's lives:

...they stay at home with their kids all day long and usually they have, they look forward to having something to do. [Stacey] had her baby Thursday evening and was on the phone with me Friday...morning...asking me about the support group and when it was.

Having a good rapport with the children seemed to be the first step in establishing rapport with the mothers. As noted above, Janine was not jealous of the relationship between Melissa and her son Rashad, on the contrary, she seemed to take pride in it. I found that asking questions about a young woman's child(ren) was a very effective ice-breaker, as they were quite willing to share stories about the "cute" things their children had done, or how they coped with a child's illness. When Rachel, a 19 year old mother of a three year old and an infant (and also the younger sister of Janine),
asked me to watch the baby while she went back to the apartment, that I felt like she finally felt comfortable with me. She was very shy and guarded, and responded to most of my attempts to initiate conversations with one word answers.

Despite the fact that the young women seemed to respond better to Melissa's style than to Lynda's style, Melissa never felt adequate as the group facilitator. It is likely that this is because Melissa was constantly aware that the continued funding of the TPSF depended upon outside evaluations that something concrete was happening during the support group meetings. She had to avoid giving the impression to outside evaluators\(^\text{13}\) that support group meetings were just "play time," even if play time was what these young mothers wanted and needed.

**Enter the Facilitator**

After the May 4th meeting, the support group took a "summer hiatus" and did not meet again until July 7th. On July 12th, Melissa called to tell me that the meetings at Mountain Village had resumed the previous week. I was somewhat upset that she had waited until after the fact to tell me. She explained that she had just gotten back from vacation and that things were very hectic. She said that "very few" girls had attended the July 7th meeting but that

\(^{13}\)I feel certain that, at least initially, Melissa saw me as an "outside evaluator"
they were working with some new mothers and hoped to get them involved in the support group meeting. Melissa also informed me that she had recruited a member of the TPSF Advisory Board to come in and lead the sessions. This woman worked for the Office on Youth Services and was also going to recruit some of the young adolescents she worked with in that capacity as interns who would be responsible for child care during support group meetings.

I arrived at the next (July 14th) meeting anxious to see how the facilitator would organize the group. Teresa and Melissa were already at the clubhouse with three young women that I had never met before. Rashad was also there. His mother Janine had moved to Pulaski and would no longer be attending the meetings, but Rashad was at Mountain Village staying with Rachel. Another regular, Mandy was also present with her daughter Chasity and baby son. Mandy had just had the baby around the time of the last set of meetings, so we spent some time talking about how much bigger he'd gotten, and playing with the other children. Melissa grew increasingly concerned about where the woman from Office on Youth was. She said if she'd called to tell her she wasn't going to make it, Melissa could have planned an activity for the meeting, but now she had nothing planned. Melissa said this woman had "done stuff like this" to her several times and she was really beginning to get "pissed off." The meeting was supposed to
have begun at 2:00PM, we waited in the clubhouse until 2:25, at which time Melissa suggested we all take the children outside to the playground behind the clubhouse. We played with the kids for 15 or 20 minutes and then the meeting broke up.

At the meeting described above there were three new mothers to the group, two regulars, and one mom who attended three meetings. The three new mothers never attended another meeting of the support group after their initial one.

The following week, Lynda did show up to lead the support group meeting. She was with the group from July 21st until my last meeting with the group, September 1st. During this period, Lynda led five group meetings, one of which I was unable to attend. The August 25th group was canceled because no mothers showed up. When I arrived at the clubhouse for what was to be my last time with the group, I found a piece of cardboard taped to the clubhouse door with the words "Teen Parent Support Group Canceled Today" written on it in black magic marker. I ruefully thought that was an appropriate end to my time with the group.

Lynda as Arbiter

During the two months that she led meetings, Lynda was consistently late. Everyone, including myself, seemed to adjust to the lateness, instead of arriving at the clubhouse at 2PM or a few minutes before, we began to arrive later and
later. At the August 11th meeting, Lynda was about 10 minutes late for the meeting, then slowly got her supplies together while "chitchatting" with her interns. Melissa and Teresa also attended this meeting. At about 2:25, Melissa walked over to the couch where Teresa and I were sitting and whispered, "Are we ever going to get started?" I wondered how the mothers interpreted this lack of concern for the time boundaries set up for group meetings. Although Lynda started the group meetings late, she would usually run the group session for an hour, except for one occasion when a group of apartment residents had reserved the clubhouse for 3PM for line-dancing lessons. This became increasingly problematic for myself and the other staff because we frequently had other commitments after the group meeting, so we had to chose between being late for other appointments or missing part of the group meeting.

I think an important issue here is the message being communicated to the mothers about the importance of the support group and by implication, themselves. As noted earlier, the young women typically needed encouragement by staff to attend the meetings. Lynda's lateness communicated that the support group meetings were not a priority for her. It seems likely that this reinforced the perception of the young mothers that support group meetings were not very important. In addition, making others wait has been
identified as an interpersonal strategy used to emphasize one's social worth and maintain social distance (Schwartz, 1973). Thus Lynda's lateness can be seen as an example of managing the impression of an arbiter.

The structure of the group sessions led by Lynda were quite different from those led by Melissa. Under Lynda's guidance, meetings had a clearly focused topic and were more educational in tone with Lynda assuming the role of "authority" or "expert." As a result, the mothers had much less control over the interaction and discussion. Prior to Lynda's involvement with the group, the young women would ask questions or discuss whatever was on their minds, or whatever their immediate needs were. For example, when Stacey was eight months pregnant with her second child she could no longer fit into her own clothes very well and had very few maternity clothes. At one meeting she was wearing a pair of her husband's sweatpants and joked about how silly they looked on her. She asked Melissa if she had any donated maternity clothes in the office, especially pants. At another meeting, Melissa brought in a bag of baby clothes for 17 year old Judy to look through and pick out what she'd like for her 6-month old daughter. "Look at all the pretty dresses," she said. "I always wanted to have a little girl I could so I could dress her up in these kinds of things." The group had fun watching Judy look through the clothes, and made comments like, "that
would look so cute on her!" The group at this point time had more the quality of a group of mothers getting together over tea and talking about whatever was on their mind.

When Lynda became a part of the group, these "mother-directed" discussions, questions about immediate needs, whatever was on their minds, etc. got relegated to the margins of the group. These were the things now discussed between a mom and Teresa and/or Melissa either before or after the group meeting "came to order."

Lynda also used props to help create the identity of expert. Each week, she brought with her a large easel with big sheets of paper and magic markers which she would have her interns retrieve from the car and set up against the wall of the clubhouse. She also usually had informational pamphlets and handouts relating to the topic. We would then move our chairs and gather around to face the easel, Lynda would stand next to the easel and lead the discussion. The topics discussed were chosen by Lynda with no input from the mothers or Melissa and Teresa. The topics presented by Lynda were 1) proper nutrition, 2) encouraging children's language development, and 3) achieving goals.

As a single woman without children, Lynda relied heavily on "expert" knowledge about parenting issues. Although she attempted to present herself as an agent of "expert" knowledge, she frequently seemed uncomfortable in that role,
particularly when the young women asked questions about the topic which were derived from the day to day experience of parenting. To illustrate Lynda's difficulties in negotiating her role in the group, I describe a group meeting where nutrition was the topic of discussion.

Lynda began the presentation on nutrition by asking the mothers why good nutrition is important. The mothers volunteered answer such as "to give you energy," "to keep you healthy," and "to lower cholesterol." Lynda replied, "That's good, but you missed one -- mental health." At that point she flipped over a page on the easel that said "Why Nutrition is Important for You and Your Child" and had listed the reasons as follows: "1) energy, 2) growth, 3) health, and 4) functioning." From there she moved into a discussion of how dieting and products like Slim-Fast fail to provide balanced nutrition. She concluded her introduction to this topic by saying, "If you're going to help your kids grow up healthy you need to think about this now, if you don't feed your kids they won't grow." At this point, everyone -- including Lynda -- began to laugh at the obviousness of the statement.

One of the student interns, who was not a mother, asked Lynda what a parent should do it their child is a picky eater. Lynda did not answer but presented the question to the mothers, asking if any of them ever had this problem. Susan laughed and said her son always wanted to eat ice cream. The
other mothers joined in a described their children's favorite foods. As the discussion among the mothers began to drift further away from the topic at hand, Lynda re-claimed everyone's attention. She said that you should never force your child to eat and referred to a handout she had brought which pointed out that babies in particular know when they are full.

Next Lynda passed around a handout titled "Nutrition Chart." It had three columns labeled, "Nutrient," "What it Does," and "Foods That Have A Lot of This Nutrient." Lynda discussed each of the nutrients listed. While discussing protein, Lynda shared that she likes to eat yogurt for lunch because it has lots of protein without the high fat content of meat. At this point, Mandy interjected, "My husband hates [yogurt], he won't even look at it in the grocery store, so I don't eat it." This comment is interesting in terms of what it reveals about the young woman's perspective, but in this context it is also illustrative of a pattern of interaction between Lynda and the young women. When Lynda used the authoritative, "expert" voice, she got little response from the mothers. On the other hand, when she switched to a more personal, familiar voice, the young women would volunteer thoughts and experiences from their own lives which related to Lynda's personal examples.

For example, as she discussed iron, Lynda said this was
a particularly important mineral for women and children, but unfortunately most of the foods that are good sources of iron are "yukky." She mentioned that liver was a great source of iron, but that she really hated liver. At this point, Susan spoke up and said she had to eat lots of liver to get iron when she was pregnant. She said the doctor told her she had low iron with all three of her pregnancies. Here, Susan seems to "tune in" to the discussion when she is able to make a connection with Lynda on a more personal level. Susan knows that iron is important for women, and that liver is a good source of iron because of her experiences with pregnancy. Lynda knows these things through education.

However, Lynda's ability to claim the role of "expert" was constantly being challenged by questions outside her realm of expertise. One young woman asked why was iron so important for women. Lynda responded that she thought it had something to do with "low blood" or maybe with the menstrual cycle. After spending time on the importance of iron for women, Lynda was unable to explain exactly why it was so important.

Later in this meeting, Lynda had the mothers read the labels on jars of baby food. She pointed out that to understand the nutritional information on the labels, one must first determine how many servings are in each jar. Mandy was looking at a jar of baby food which, according to the label, contained one serving. She questioned the accuracy of the
label, "there's no way you could get a baby to eat that much in one sitting." Lynda replied that she didn't really know how much a baby eats, this exercise was just to help them figure out nutritional content.

At the end of this meeting, Lynda gave the jars of baby food and boxes of baby oatmeal she had brought for demonstration purposes to Susan and Mandy who both had babies. Susan laughed and said, "Lynda, my daughter is too young to eat that stuff yet!" Lynda looked at the expiration date, which was a year away, so she told Susan to take it and put it on her shelf for later.

**Motherhood: Expert Knowledge Versus Experience**

Neither Melissa nor Lynda have any children. Only Teresa, the case manager for PPP is a mother, and her child is in her early twenties. Because none of the staff members are currently mothering a young child, there are two types of knowledge about mothering and two sources of authority or legitimacy upon which these bodies of knowledge are based. The staff members possess 'expert knowledge' of parenting, gained primarily through education. Their authority is based on credentials such as college degrees and occupational title. The young mothers possess experiential knowledge of mothering gained through living day to day as the mother of an infant or young child. Their authority is based in "real life"
experience, their own and that recounted by friends and family members. Thus a tension between these two sources of knowledge exists.

Occasionally the adolescent mothers in the group take advantage of their experiential knowledge of mothering to devalue or challenge the expert knowledge of staff members. For example, during one meeting copies of a pamphlet were passed around entitled, "Communication Tips for Parents and Kids." One of the suggestions was to:

Speak in a quiet voice...whisper sometimes so children have to listen - they like this.

Melissa asked if any of the mothers had tried this tactic. Janine placed her hand on her hip, looked squarely at Melissa and said, "Do you have kids?" (Janine already knew the answer to this question). When Melissa answered, "No" Janine replied:

Well if you had kids you would know that whispering does not work. My kids get so loud and crazy that I have to holler at them if I want them to hear me at all!

The other mothers present laughed and nodded in agreement.

One week Melissa arranged to have a guest speaker from the local Planned Parenthood office come to the support group meeting. The speaker led a discussion centered on talking to one's children about their bodies. The speaker encouraged the
young women to avoid using euphemisms when referring to sexual anatomy. She argued that children should be taught to use the words, "penis", "vagina", "vulva", and "breasts," and that parents should not display embarrassment when a child points to his or her genitalia and asks, "What's this?" She maintained that this was important for two reasons. First, by not displaying embarrassment you avoid teaching your child to be ashamed of his or her body. Second, the speaker cited research which suggests that if a child is not embarrassed about his or her body and knows the appropriate terminology, it is much easier for that child to let an adult know if s/he is being sexually abused.

The mothers seemed somewhat uncomfortable during this presentation and did not say very much. In addition, Melissa and Teresa had taken all the children outside to play so they had neither the interruptions from children to diffuse the focus of the discussion, nor the two more familiar staff members to facilitate interaction.

The next week we spent some time discussing the young women's reactions to the speaker. I found myself surprised when I learned that their reaction was generally negative, as I thought that the speaker made a number of good points. Mandy said, "I could never talk to my kids about that stuff." When Melissa asked if Mandy planned to talk to her children about sex some day Mandy replied:
No way! My mom never talked to us about that stuff. I think they should learn it the same way I did -- from their friends.

At this point, Mandy’s sister Susan exclaimed:

Oh God, can you imagine what Mom would say if the kids came over to her house talking about penises and vaginas?!

Mandy replied, "Oh God, she'd KILL us!" and the two began giggling at the thought of their mother's reaction. In the case of Mandy and Susan, accepting expert knowledge on this subject would mean rejecting the knowledge and expectations of their own mother. Thus, when contradictions between the knowledge and authority of family members and the knowledge and authority of experts arises, these young women choose to privilege that of family members.

The general difficulties faced by the staff in managing an impression of themselves as experts derive from two different sets of interpretation concerning what qualifies one to be an expert on parenting issues. For the mothers, experience and advice based in experience is more persuasive than abstract knowledge based in broad, and often androcentric, generalizations about the practice of parenting.
CHAPTER SEVEN

CONCLUSIONS

A Politics of Needs Interpretation

The Teen Parent Support Program was plagued by numerous problems giving it the appearance of being unorganized and ineffective. In many ways, these problems were tied to the organization and funding of the program. For example, the Director's position incorporated too many tasks for one person to accomplish effectively. The low pay associated with the job led to high rates of turnover which made it difficult to create any sort of consistency within the program as a whole and especially within the meetings of the support group. Funding for the program had began to decline, leading staff to seek alternative sources in order to maintain the program.

When the Teen Parent Support Program is viewed in historical perspective, as part of a larger social service system, this problem is not particularly surprising. Social service programs have historically been stratified. Those programs perceived as superior tend to benefit men more than women and children, respect the recipient's privacy rather than subject her to supervision, and confer upon the recipient a sense of entitlement rather than stigma (Gordon, 1994:10). Precisely because some social service programs are perceived
as inferior, they also tend to be more controversial, receive less consistent funding, and are often short-lived and ineffective.

Further, through their practices, these programs contribute to an institutionalized system of meanings that provide the cultural framework for understanding recipients and the type of response they are entitled to by other members of the society (Fraser, 1989). This is a political process in that different meaning systems imply different kinds of response. For example, if adolescent pregnancy is constructed as a problem of defective individual psychology or subculture, then policies which seek to punish and stigmatize adolescent mothers will appear most needed. If, on the other hand, adolescent pregnancy is constructed as an adaptation to a life of disadvantage for young women, and a symptom rather than a cause of poverty, then policies which seek to improve the life chances of young women will appear most needed.

Policy debates, such as those occurring over teen pregnancy, reflect struggles for the power to create an authoritative interpretation of women's needs. Such power is an important resource in that it typically promotes the interest of some groups, at the expense of the interests of competing groups. Feminist scholarship demonstrates that interpretations of women's needs implicit in the practices of the social-welfare system have historically been androcentric.
sexist, racist, classist, and heterosexist (Gordon, 1994; Fraser, 1989). Though unable to effect major transformation in gender relations, the social-welfare system has not had a wholly negative impact on the situation of women. Thus, many feminist scholars advocate further transformation of the system rather than complete dismantling.

While such analyses are based primarily on the operation of federally funded social service programs, the pattern seems to hold true for community based programs such as TPSP. Increased funding was secured for TPSP through a grant from the state, allowing the program to survive but entering it into a politics of needs interpretation. Because the grant money was tied to the prevention of family violence, the emphasis of the program shifted from improving the quality of life of adolescent mothers to preventing child abuse. The children of adolescent mothers were constructed as the "innocent victims," in need of protection from their parents.

Within a political climate that has become increasingly hostile toward adolescent mothers, framing the program in terms of "preventing child abuse" rather than "helping adolescent mothers" reduces the potential for community objection to the program. In addition focusing on the children enabled TPSP to tap into the construction of adolescent pregnancy as a "cycle" of dependence and
delinquency which affects the entire community. Framing the problem in this way implies that the community has a vested interest in solving the problem, and appeals to a sense of community responsibility. Thus, the state grant improved TPSPs chances of survival not only through increased funding, but also through the change in focus.

While this new interpretation of the needs of adolescent mothers may have been less controversial, it was not necessarily in the young women's best interest. The research literature does find evidence of reduced life chances for the children of adolescent mothers, however, these problems are more directly related to the low socio-economic status of adolescent mothers rather than their age at childbearing. It would seem that improving the quality of life of children can best be accomplished by improving the quality of life of their primary caregiver(s) -- in this case adolescent mothers.

Although the need for material support continued to be acknowledged in TPSP documents, parenting skills came to be identified as the primary unmet need of adolescent parents. The provision of such skills became a primary objective of support group meetings, although it was rarely achieved.

The emphasis on the prevention of child abuse leads staff to be more attuned to possible signs of abuse or neglect and therefore more likely to perceive the young mothers as potential abusers.
Women Negotiating Hierarchy and Division

The program's official construction of its mission must always be interpreted and acted upon by individual members of the staff. The staff members' interpretation are further negotiated and modified through their interactions with the adolescent mothers who participate in the program. Thus, the official typification of adolescent motherhood as a high risk situation for child abuse, may be modified or challenged through the interactions among staff and clients.

I maintain that the increased focus on child abuse prevention further complicated an already complex relationship between the women on staff and the women who participated in the program as adolescent mothers. There were three overlapping hierarchical dimensions of the relationship creating a clearly defined boundary between staff and clients. I chose to conceptualize these hierarchical dimensions as a series of contradictions built into the situation which then play into the interactional dynamics of the support group meetings. Staff and clients use varying strategies of self presentation in negotiating these contradictions, some more successful than others.

The first hierarchical dimension of the relationship between staff and clients is implied in the use of the terms "staff" and "client." This is inevitably a relationship of unequal power. The staff have more power than clients to
define the situation represented by support group meetings, to define the meaning of motherhood, and more significantly to either reward or punish the ability of the young women to conform to these definitions. This power difference sets up a contradictory identity for both staff and clients.

The role of staff became increasingly contradictory, as they were expected to function as both advocates for the young women and as agents of social control. As advocates, the staff are charged with promoting the best interests of the young women. To accomplish this, they need to develop empathy, concern, and respect for the young women, building a relationship of trust. In contrast, as agents of social control, staff must be ever suspicious of the young women in order to identify signs of abusive and/or neglectful parenting, thereby protecting the children. Sadly, this situation makes it difficult for staff to act as advocates for both the young mothers and their children. Thus staff must constantly walk the fault line between "insider" and "outsider" perspectives on their clients.

A second important contradiction is embedded in the identity adolescent mother. Although motherhood itself can be seen as the ultimate normative activity for women, important age norms surrounding motherhood have been violated by these mothers. Thus, while they are engaged in an activity, and assuming an identity that is normative for women, they are
doing this at a point in the life course perceived as inappropriate. The ethnomethodological approach to understanding gender, as represented by the work of West and Zimmerman (1987), is helpful in making sense of this contradiction.

The ethnomethodological approach conceptualizes gender as an important accomplishment of human interaction, as something one does rather than something one is. This is also a political process in that

...the "doing" of gender is undertaken by women and men whose competence as members of society is hostage to its production (West and Zimmerman, 1987:126).

As might be expected the young women attempt to distance themselves from the stigma associated with their age and claim instead the privileges associated with being a mother. In other words, the young women enter the group with the sense of needing to defend themselves against the perception that they are somehow deviant. They accomplish this by dramatizing the importance of their children, and of their identity as mothers, emphasizing the normative rather than the non-normative aspects of their gendered activities.

A third important contradiction stems from the class-based difference in lifestyle between staff and clients. This difference also contributes to the social distance between the
two groups of women, particularly when it remains unacknowledged. Discussions of nutrition, for example, did not take into account the greater expense of healthier foods, such as meats with low fat content. Failing to acknowledge the ways in which the young women's lives are constrained by social class leads to the framing of parenting issues in individualized terms. Failing to provide one's child with proper nutrition, for example, becomes an indication of irresponsible parenting rather than a consequence of being located near the bottom of the economic hierarchy in a stratified social system.

Three strategies of self presentation were identified for the young mothers. Through their interactions in support group meetings they dramatize the mother-child bond. They are unwilling to leave their children with staff, and the children rather than staff are the primary focus of their attention during meetings of the support group. The young women also romanticize motherhood, using fantasy-like imagery to describe their relationships with their children. However, the young women frequently contradict their own performance when using this strategy. Finally, the young mothers sometimes openly challenge expert knowledge about parenting as presented by the staff.

I see all three of these strategies used by the young mothers as maintaining distance between themselves and staff.
By dramatizing the importance of the mother-child bond, and through romanticizing motherhood, they are displaying their conformity to social norms surrounding motherhood. The children also become a resource, through this strategy, to allow the mothers to maintain some measure of control over the flow of interaction within the meetings. In this way the women are able to preempt criticism of their parenting skills by staff. In challenging the expert knowledge as presented by staff the young women are again distancing themselves from staff.

Two strategies of self presentation were identified for staff. The mediator, who privileges "insider" perspectives on the young women and the arbiter, who privileges "outsider" perspectives. Melissa and Teresa more consistently used the mediator strategy of self presentation. They got to know the young mothers and their children as individuals and demonstrated interest in and concern for their lives. These two staff members created a loose structure within the support group meetings, allowing the young mothers more control over the activities and discussions. Lynda tended more toward the arbiter strategy of self presentation, positioning herself as teacher with the goal of transmitting expert knowledge about parenting to the young women. The structure of the group under Lynda's direction resembled a classroom with lectures on specific topics, an easel on which important points could be
noted, and handouts summarizing factual information.

While the program did have the potential to serve as a resource for the young women it also exposed them to a certain degree of surveillance and the potential for further intrusion into their lives by the staff. This contributed to a general context of suspicion or distrust between staff and clients, widening the already existing class-based differences between the two group.

I conclude that in creating distance between themselves and the staff the young women are asserting their authority to create their own interpretations of motherhood. This analysis of the interactional dynamics is support group meetings yields two interesting theoretical insights. The interaction patterns can be conceptualized as 1) a process of negotiating the definition of the situation, and 2) conflict over sources of legitimate knowledge about mothering. When viewed as a process of negotiating the definition of the situation, the program staff had the official authority to define the appropriate activities for the support group meetings. However, the young women were quite successful at preventing staff from maintaining control over the flow of interactions with the group.

The mothers struggled to define the meetings as informal settings calling for unfocused conversation and "visiting." Their informal conversation focused primarily on sharing
experiences of pregnancy, childbirth, and motherhood. They wanted to watch movies and plan activities with the children.

Staff struggled to define the meetings as semi-formal occasions with a clearly designated leader of focused discussions and activities. The staff needed to prove to funding sources and coordinating organizations that they were doing "something constructive" in the support group meetings. Melissa accomplished this by displaying characteristics of what Horowitz (1995) calls the mediator. She got to know the woman on an individual basis and attempted to act as a buffer between TPSP and the young women. Lynda attempted to manage the identity of the arbiter. She was more formal, and created an educational tone during the meetings positioning herself as expert.

Neither of the staff were successful at presenting themselves as experts with respect to the practice of mothering. The young mothers openly and subtly challenged the staff's claim to greater authority in identifying the practices of mothering. I think this pattern reflects a fundamental conflict over who or what is perceived as a legitimate source of knowledge about mothering. Staff possess abstract knowledge about the practice of mothering while the young women possess knowledge about this practice grounded in experience (their own and that of others in their social world). When these two bodies of knowledge contradict one
another (e.g., whether or not parents and children should discuss sexual anatomy) the young women privilege knowledge grounded in experience.

The young women also seemed less interested in abstract knowledge than in practical knowledge that could be immediately useful. They were more interested in earache remedies and which store was having a sale on children's shoes than in the importance of encouraging children's language development or learning the nutritional value of different foods. I think it is likely that these different concerns reflect a difference of perspective grounded in social class.

A setting such as the support group meetings, with its inherent contradictions can shed light on how women with different backgrounds can learn to bridge these differences.

Policy Implications

However, staff presenting themselves as mediators seem able to minimize the distance between themselves and the mothers. When contradictions arise they should be acknowledged. The staff should help the young women to deconstruct their belief systems and determine whether these best serve the well-being of themselves and their children. Before this kind of work can begin, however, the context of
suspicion needs to be dispelled or minimized. This can be accomplished by the incorporation of a variety of activities within the support group meetings aimed at building rapport between staff and clients, improving young women's sense of self-efficacy, and allowing the young women to bond with one another. Once relationships of caring and trust are established within the group, the young mothers may be more willing and better able to articulate their needs. Through the development of an empathic understanding of the young women, staff may be better able to understand and thereby assist the young women in meeting their needs.
How you can make a difference

There are many ways you can help the Teen Parent Support Program:

• Volunteer:
  as a mentor/friend counselor
  office/clerical
  fund-raising (one time or on-going)
  facilitator/coordinator
• Contribute money
• Donate:
  maternity clothes
  baby clothes
  toys
  baby equipment
  diapers
  formula
  smoke alarms

For more information, contact New River Community Action at 382-6186 or stop by the office at 50 West Main Street, Christiansburg.

Please consider the tear out supplies as a personal invitation. Fill it out and return it today! Thank you.

______________________________
Name

______________________________
Address

______________________________
Phone

I'm interested in:

☐ contributing in the amount of $__________
☐ volunteer work
☐ more information

______________________________
Signature

All contributions are tax deductible.

Teen Parent Support Program

New River Community Action
P.O. Box 570, 6 Main Street
Christiansburg, VA 24073

The Link to a Better Future

"The Teen Parent Support Program gives some families who might not otherwise have it, an opportunity for a positive and rewarding start." — Joan Munford
Introduction

Children having children — that’s how many people view teenaged parenting. The truth is that teens who are arsing families face special challenges and special needs. But, with support and encouragement, teen families can be successful, happy, and healthy.

Background

Parenting during the teen years is difficult, even with the support of family and friends. Fortunately, in 1985, the New River Valley community responded to this need by establishing the Teen Parent Support Program. Originally funded as a child abuse prevention program, this continues to be a primary focus. Our mission is to strengthen, encourage, nurture, and educate young families.

Teen Parent Support Program, is an activity of New River Community Action Inc., supported by other Human Service Agencies, the United Way, and local government.

Problem

Nationally, the annual cost of teen pregnancy is several billion dollars, the cost of Aid to Dependent Children, Medicaid, Employment Services, juvenile delinquency, school dropout, and medical costs. Teenaged parents and their children are most often poor, undereducated, and underemployed. The difficulty of teen parenting has serious consequences for both the families and the community.

The effects of a pregnancy on a teenager can be severe:
- disruption of education
- lack of job skills to support family
- dependence on public assistance
- inability to continue in school because of lack of affordable daycare.

The effects on the children of teen parents can be even worse:
- little or no prenatal care results in low birth weight, premature birth, and with health problems
- chronic health and mental problems
- higher infant mortality rate
- rate of child abuse and neglect is extremely high
- prediction for future of more hunger, poverty, illiteracy, and early teenage pregnancy — repeat cycle

Program Solution

Through education and continuing support, we strengthen teen families, prevent child abuse and neglect, and intervene before there is a second pregnancy.

Teen Parent Support Program has several focuses:
1. Weekly Parent Support Group — open to all teen parents, both sexes, to discuss issues, gain some knowledge, and meet others for coping.
2. Material support — we can offer maternity clothes, baby clothes, diapers, formula, baby equipment, furniture, and toys. Also, assistance finding medical, economic, and child care funds.
3. Community education programs — to raise awareness of problem, solicit support and assistance for the program.
4. One to one match of a volunteer with each teen parent to provide a mentor, friend, and support network.

"The volunteer is an important part of the program. When you need someone to talk to, you have someone to count on." — a young mother

Our volunteer are community members who are recruited and trained to help teenaged parents and their children get off to a good start. They offer support and help with child care, transportation, nutrition, planning, medical visits, social and educational activities.

The goals of the Support Program include preventing child abuse and neglect, delaying further pregnancies until after the teen years and creating healthy, happy and independent families by encouraging education and employment.
New River Community Action, Inc.
PO Box 570
Christiansburg, Virginia 24073
Focus of the Project

The Parenting Potentials Project is a component of the Teen Parent Support Program of New River Community Action. The project is funded by a Family Violence Prevention grant from the Virginia Department of Social Services.

The Project is aimed at teen parents and their special needs in childrearing. Because the teenage years can be stressful, the Parenting Potentials Project works with these parents to develop them as capable nurturers of their children.

Goals of the Project

- To decrease stressors in the family environment.
- To increase positive interactions between parents and children.
- To ameliorate the effects of social and emotional isolation.

Components of the Project

Research has documented that two characteristics of abusive and neglectful parents are social isolation from supportive friends and relatives and impaired parenting skills. The Parenting Potentials Project will address these issues with the following components.

Components of Parenting Potentials Project:
- In-home parenting support
- Family-to-family mentoring

Family Mentoring

Family mentors will be families who are willing to open their homes and families to a teen family at least once a month to allow the teen family to see other parents relating to their children. This may occur around the dinner table, doing grocery shopping, on a special outing, or any activity that involves both families.

Family matches will be screened and supported by Teen Parent Support Program staff. Volunteers will receive intensive training regarding adolescent pregnancy, parenting skills, child abuse and other topics.

If you would like to volunteer or make a referral to the Project call Terri Kelly or Michelle Bouchard at 382-6196.

In Home Parenting

In-home parenting support is carried out by the Project's Case Manager who will provide thirty families with needs assessment, crisis intervention, problem-solving skills, empathy and information and referrals.

The Teen Parent Support Program will continue to offer material support and support groups for teens in the Parenting Potentials Project.
Program Goals & Objectives
for the
Teen Parent Support Program
of New River Community Action, Inc.

The goals listed below are derived from the Mission Statement of the Teen Parent Support Program as stated in the Advisory Council By-Laws.

GOAL 1
The Program will attempt to empower teen parents with increased self-sufficiency and self-reliance by establishing links with educational and employment opportunities.

Objective 1
The Program will refer all participants in need of continuing education to appropriate services.

Objective 2
The Program will work closely with the schools to ameliorate circumstances which preclude school attendance among teen parents.

Objective 3
The Program will establish day care opportunities for children of teen parents to include new initiatives such as "day care scholarships."

Objective 4
The Program will aid teen parents in finding employment opportunities through referrals to youth employment services such as JTPA.

Objective 5
The Program will provide instruction in a variety of education/employment related subjects to include personal financial management, college enrollment and financial aid, and goal setting as needed.

GOAL 2
The Program will attempt to prevent child abuse and neglect among children of teen parents in the service region.

Objective 1
The Program will identify and provide intervention services for teen parent families at high risk of child abuse or neglect.

Objective 2
The Program will provide participants with a wide spectrum of instruction in parenting skills, life skills, and stress management through case management, group modeling and other methods.

Objective 3
The Program will provide social outlets to participants through group sessions and one-to-one matches in order to eliminate loneliness and isolation among teen parents.

GOAL 3
The Program will engage in a program to increase public awareness of teen pregnancy issues.
Objective 1
Program staff will develop an agenda of speaking engagements with community service organizations, churches, etc. during the program year.

Objective 2
Program staff will utilize media sources to increase public awareness of teen pregnancy issues.

Objective 3
Program staff will utilize fund raising activities as an avenue to educate the public on the problem.

GOAL 4
The Program will seek to increase its effectiveness through interagency collaboration.

Objective 1
Program staff will establish contacts with other youth serving agencies through the members of its Advisory Council.

Objective 2
Program staff will refer participants to other agencies/services whenever appropriate.

Objective 3
Program staff and Advisory Council members will aid in the development of related programs such as the Early Intervention Council, MD Team, and the Project FAR Steering Committee.

Objective 4
Project staff will work with Community Action staff to further develop the TPSP through competition for grant awards.

GOAL 5
The Program will attempt to reduce the incidence of further pregnancies among teen parents.

Objective 1
The Program will attempt to determine the numbers of teen parents in the service region and to inform them of the availability of Program services.

Objective 2
The Program will make available to all participants information and educational programs regarding teen pregnancy issues.

Objective 3
The Program will make available to all participants access to community volunteers who will provide unconditional positive regard for the teen parents and their children.

Objective 4
The Program will make available to all participants programs of life skills education through a variety of sources to include support groups, community volunteer matches, and case management plans.
BY-LAWS
Governing the
ADVISORY BOARD
of the Teen Parent Support Program
of New River Community Action, Inc.

ARTICLE I. NAME

The name of this body will be "Teen Parent Support Program Advisory Board".

ARTICLE II. MISSION

Section A

The mission of the Teen Parent Support Program is to enhance family development that encourages optimal growth of physically and emotionally healthy teen parents and their children. The Teen Parent Support Program will serve pregnant teens and teen parents and will advocate for new models to address their unmet needs.

Section B

The mission of the Teen Parent Support Program Advisory Board is to support the staff in all phases of the Program and advise in planning, implementation and evaluation of the Program activities.

ARTICLE III. PURPOSE AND RESPONSIBILITIES OF THE ADVISORY BOARD

The purposes of the Teen Parent Support Program Advisory Board (hereafter referred to as the "Advisory Board") are as follows:

A. Evaluate the Program on a quarterly basis.

B. Ensure that Board decisions and recommendations are forward to the NRCA Board of Directors.

C. Work in cooperation with Program staff to coordinate successful fundraisers.

D. Provide speakers to the community on teen pregnancy issues and how the TPSP is addressing these issues.
Section A  Standing Committees

1. Executive Committee--The Executive Committee shall be chaired by the Advisory Board Chairperson. The committee shall be comprised of the Vice Chairperson, Secretary, Treasurer, and other Advisory Board members elected by the Board. It is the responsibility of the Executive Committee to have the power to act on behalf of the Advisory Board at such times as the Board is not in session. Such actions shall be subject to ratification by the Board at its next regular meeting. The Executive Committee shall keep minutes of its meetings, a copy of which shall be filed with the Advisory Board at its next meeting. The Executive Committee shall exercise such other powers as may be assigned to it by action of the Advisory Board.

2. Nominating Committee--The Nominating Committee shall be selected immediately following the seating of the first Advisory Board. Subsequent Nominating Committees for new fiscal years shall be selected at the Annual Election Meeting. Duties of the Nominating Committee shall include, but not be limited to: 1. Convening sixty (60) days prior to the Annual Election Meeting for the purpose of selecting a slate of officer nominees; 2. Presenting said slate at the regularly scheduled Advisory Board meeting just prior to the Annual Election Meeting; 3. Screening prospective Advisory Board applicants; 4. Assisting the Advisory Council Chairperson in assigning Board members to committees.

3. Resource Development Committee--Its duties shall include, but not be limited to: 1. Budget planning; 2. Fund raising activities.

4. Evaluation Committee--The Evaluation Committee shall conduct an annual evaluation of the Teen Parent Support Program. The evaluation shall cover, but not be limited to: 1. Number of clients served; 2. Interaction and collaboration with other human service agencies; 3. Program effectiveness measured in terms of client employment, educational advancement, recidivism, reduction of child abuse/neglect, and independence of agency support. Executive Committee and any Advisory Board members desiring to participate will meet with the Director at the beginning of each fiscal year to design a workplan which will be evaluated quarterly with the same body.

5. Public Awareness Committee--Duties shall include the provision of presentations regarding teen pregnancy issues and the role of the Teen Parent Support Program. This committee will also have responsibility for organizing for public awareness opportunities such as information booths, lectures, and other public awareness events scheduled throughout the year.

Section B  Consultants

An Advisory Board committee, by unanimous consent of its members, may select individuals who are not members of the Board to serve as non-paid, non-voting consultants.
E. Provide feedback, as needed, to Program Director on all aspects of the Program.

F. Provide for education related to boardmanship and teen pregnancy issues.

Legal responsibility for program management and fiscal administration is retained by New River Community Action, Inc.

ARTICLE IV. MEMBERSHIP ON ADVISORY BOARD

Section A General Guidelines for Membership

Members shall be recruited from local agencies that address issues related to teen pregnancy, as well as the community. The Board shall be limited to 15 voting members.

Suggested categories of representation:

- Department of Social Services serving the program area
- Health Department serving the program area
- Public schools serving the program area
- Staff member New River Community Action
- Teen parents
- Private medical practitioner
- Project STEP of New River Valley Community Services Board
- Legal professional
- Business, industry, or civic leader
- Housing industry representative
- Clergy
- Mental Health Services of the NRVC SB
- Office on Youth serving the program area

Section B Process for Membership

Prospective member must be nominated by a current member of the Advisory Board. The Nominating Committee and/or the Executive Committee will screen the applicant. Applicants may then be submitted to the Advisory Board for a vote regarding membership. A simple majority during a quorum vote of the Advisory Board shall determine acceptance for membership of the applicant.

Section C Terms of Membership

Terms for membership on the Advisory Board will be for a period of two (2) years. Appointments to the Advisory Board will be made on a rotating basis for each member. In order to begin the rotation process, members of the first Advisory Board will be appointed in equal proportions to either one (1) or two (2) year terms with appointments being renewable at the end of each term. Re-elected members may serve a maximum of three (3) consecutive terms.
Section D Officers

There will be an annual election of officers to the Advisory Board from its membership. The officers of this council shall be a Chairperson, Vice Chairperson, Secretary, and Advisory Board Liaison, each of whom shall be elected for a one (1) year term.

1. Chairperson—Presides at all meetings of the Teen Parent Support Program Advisory Board, appoints standing and special committees, works with other officers to establish agenda, contacts Vice Chairperson when unable to attend a meeting, casts deciding vote in case of a tie or to make a tie vote, becomes familiar with the duties of other officers and the functions of this organization, and performs other leadership roles as the need arises. The Chairperson shall also preside over the Executive Committee.

2. Vice Chairperson—Shall perform the duties of the Chairperson in the event of his absence. In the event of the Chairperson's resignation or inability to perform his duties, the Vice Chairperson shall serve as Chairperson until one is duly elected. The Vice Chairperson assists Chairperson as needed.

3. Secretary—Shall be responsible for the minutes of the meetings, roll call, keeping an up to date mailing list of membership, and notifying delinquent members. Handles correspondence and other duties as needed.

4. Advisory Board Liaison—Shall be responsible for attending the Local Advisory Boards of Radford and Montgomery County for the specific purpose of representing the TPSP Advisory Board and presenting pertinent information as an advocate for pregnant teens within the community and the agency.

Section E Vacancies

Membership vacancies may be filled at any meeting of the Advisory Board. Each officer shall hold office until a successor has been duly elected, or until death, resignation, or removal in the manner herein provided. In such an event, vacancies in officer positions may be filled at any meeting of the Advisory Board.

Section F Removal of Members

1. At any regular or special meeting called, any one or more members may be removed for cause by a majority vote.

2. Members who miss two (2) meetings in a year and are determined unexcused by the secretary, and members who miss four (4) meetings in a year which are determined excused by the secretary will be asked to resign from the Board. The secretary will issue a letter prior to removal soliciting any extenuating circumstances regarding attendance to be answered by the member in question within ten days.
ARTICLE IX. BASIC POLICY

The Advisory Board shall be non-sectarian, and the name of the program, or names of any members in their official capacities shall not be used for any other purposes than the regular work of the Advisory Council. The Advisory Board shall cooperate with other groups having purposes similar to those of this Advisory Board. The Advisory Board shall not be bound by any commitments unless they are approved by the members of the Advisory Board.

ARTICLE X. AMENDMENTS TO BY-LAWS

These by-laws may be amended by a two-thirds (2/3) majority vote, provided that proposed change have been submitted in writing to all members at least thirty (30) days prior to the meeting which calls for the vote. Any Advisory Board member may propose an amendment to these by-laws at any meeting.

Approved: February 13, 1990 TPSP Advisory Council
Amended: July, 1992
Approved as Amended: September 10, 1992 TPSP Advisory Board
Approved as Amended: __________________ NRCA Board of Directors
APPENDIX B

Table 1. **TEEN PARENT SUPPORT GROUP BUDGET FOR FISCAL YEARS 1991-1993**

<table>
<thead>
<tr>
<th></th>
<th>FY 1991</th>
<th>FY 1992</th>
<th>FY 1993</th>
</tr>
</thead>
<tbody>
<tr>
<td>GCA</td>
<td>$7,764</td>
<td>$6,101</td>
<td>$4,500</td>
</tr>
<tr>
<td></td>
<td>(38%)</td>
<td>(30%)</td>
<td>(11%)</td>
</tr>
<tr>
<td>United Way</td>
<td>$7,000</td>
<td>$7,500</td>
<td>$13,270</td>
</tr>
<tr>
<td></td>
<td>(34%)</td>
<td>(37%)</td>
<td>(33%)</td>
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<tr>
<td>County Soc. Serv.</td>
<td>$4,348</td>
<td>$4,348</td>
<td>$4,565</td>
</tr>
<tr>
<td></td>
<td>(21%)</td>
<td>(21%)</td>
<td>(12%)</td>
</tr>
<tr>
<td>Contributions/ Fundraising</td>
<td>$1,607</td>
<td>$2,500</td>
<td>$2,500</td>
</tr>
<tr>
<td></td>
<td>(7%)</td>
<td>(12%)</td>
<td>(6%)</td>
</tr>
<tr>
<td>State grant for PPP</td>
<td>——</td>
<td>——</td>
<td>$15,000</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(38%)</td>
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<tr>
<td>Total Budget</td>
<td>$20,719</td>
<td>$20,449</td>
<td>$39,835</td>
</tr>
<tr>
<td></td>
<td>(100%)</td>
<td>(100%)</td>
<td>(100%)</td>
</tr>
</tbody>
</table>

Table 2. **CHANGE IN CONTRIBUTIONS FROM FUNDING SOURCES FROM FISCAL YEAR 1991 THROUGH FISCAL YEAR 1993**

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td>GCA</td>
<td>-$1,663</td>
<td>-$1601</td>
<td>-$3264</td>
</tr>
<tr>
<td></td>
<td>(-21%)</td>
<td>(-26%)</td>
<td>(-42%)</td>
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<tr>
<td>United Way</td>
<td>+$500</td>
<td>+$5770</td>
<td>+$6270</td>
</tr>
<tr>
<td></td>
<td>(+7%)</td>
<td>(+77%)</td>
<td>(+90%)</td>
</tr>
<tr>
<td>County Social Services</td>
<td>0</td>
<td>+$217</td>
<td>+$217</td>
</tr>
<tr>
<td></td>
<td>(+5%)</td>
<td>(+5%)</td>
<td>(+5%)</td>
</tr>
</tbody>
</table>

The figures for Fiscal Year 1991 are actual figures, while the figures for fiscal years 1992 and 1993 are projected.
REFERENCES


Tracy L. Luff, Ph.D.

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Home Address:  
1619 Market Street  
La Crosse, WI 54601  
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EDUCATION

Ph.D., Sociology, Virginia Polytechnic Institute and State University, May, 1996  
Dissertation: "The Construction of Social Problems and the Experience of Human Service Programs: Contradictory Relations in a Support Group for Adolescent Mothers"  
Co-Directors: Dr. Cornelia B. Flora and Dr. Carol A. Bailey

M.S., Sociology, Virginia Polytechnic Institute and State University, December, 1989  
Thesis: "Dick and Jane Revisited: Gender Stereotypes in Elementary School Reading Textbooks"  
Director: Dr. Carol A. Bailey

B.S., Psychology, Salisbury State University, May, 1987

PROFESSIONAL EXPERIENCE

Teaching:  
1994-present  
Assistant Professor, Department of Sociology  
Viterbo College, La Crosse, Wisconsin

1993-1994  
Instructor, Department of Sociology and Anthropology  
Radford University, Radford, Virginia

1989-1993  
Graduate Instructor, Department of Sociology  
Virginia Polytechnic Institute and State University
1987-1990 Graduate Teaching Assistant, Department of SociologyVirginia Polytechnic Institute and State UniversityBlacksburg, Virginia

Courses Taught:
Viterbo College
   Human Society; Qualitative Research Methods; Sociology of Gender; SocialPsychology; Social Problems; Deviance Process; Human Service DeliverySystem

Radford University
   Introduction to Sociology

Virginia Tech
   Individual in Society; Gender Relations; Social Problems; Dating, Marriage,and Divorce

Research:
1992 Graduate Research Assistant, Center for Survey ResearchVirginia Polytechnic Institute and State UniversityDuties: coding and entering data, editing survey instruments,conducting telephone interviews using Computer Assisted TelephoneInterviewing software

1990 Graduate Research Assistant, Office of the Assistant ProvostVirginia Polytechnic Institute and State UniversityDuties: analyzing data and writing reports based on the Virginia TechAssessment Program and the Annual Virginia Tech Alumni Survey

1987-1990 Graduate Research Assistant, Department of SociologyVirginia Polytechnic Institute and State UniversityDuties: coding and entering data, editing survey instruments, assistingin the design and implementation of various research projects

Service:
1996-present Faculty Development Committee, Viterbo CollegeMembership by Faculty Assembly election

1995-present Women's Studies Committee, Viterbo CollegeMembership open to faculty teaching courses in the Women'sStudies curriculum
1995-present  Committee on Intercultural Education and Study Abroad, Viterbo College, Appointment by the Academic Vice-President

1994-present  Viterbo College Sociology Club, Faculty Advisor

HONORS/AWARDS
           Commonwealth of Virginia Council of Higher Education

1989  Student Feminist Paper Competition Scholarship
      Midwest Sociologists for Women in Society (MSWS)

PRESENTATIONS AND PUBLICATIONS
Luff, Tracy L. "'Contradiction' as an Analytical Tool in Field Research." Paper presented at the joint meeting of the Wisconsin Sociological Association and Sociologists of Minnesota, La Crosse, Wisconsin, October, 1996.

Session Organizer, "Undergraduate and Graduate Student Works in Progress." Joint meeting of the Wisconsin Sociological Association and Sociologists of Minnesota, La Crosse, Wisconsin, October, 1996.


Luff, Tracy L. "Gender Stereotypes in Elementary Reading Textbooks: Dick and Jane Revisited." Alternate media presentation at the Annual Virginia Tech Graduate Student Association Research Symposium, Blacksburg, Virginia, December, 1989.


ORGANIZATIONAL MEMBERSHIPS
American Sociological Association
Midwest Sociological Society
Midwest Sociologists for Women in Society
Wisconsin Sociological Association
Alpha Kappa Delta, International Sociology Honor Society

REFERENCES
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