THE GOVERNMENTALITY OF
TEENAGE PREGNANCY: SCIENTIFIC
LITERATURE AND PROFESSIONAL
PRACTICE IN SOUTH AFRICA

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Abstract

Teenage pregnancy is seen, on the whole, by researchers and service providers as a social problem. Various theoretical approaches have been utilised in the attempt to explain teenage pregnancy, and to find ‘solutions’ to the problem. What is common to these approaches is the assumption of the reality of teenage pregnancy, and the legitimation of the intervention of the expert. This thesis is concerned with these fundamental premises of the scientific literature and professional practice with regard to young women, their sexuality and reproductive behaviour. A feminist post-structuralist approach, which draws on the insights of Derrida concerning the absent trace and Foucault’s analytics of power and governmentality, is taken. The tensions and commonalities between feminism and a Foucauldian approach are explored, and a radically plural post-structural feminism is explicated. The data used in this study consisted of South African scientific literature on teenage pregnancy (the technologies of representation), and transcriptions of interviews with service providers at a regional hospital (the technologies of intervention). The bulk of the thesis is taken up with analysis of the first of these. The aims of these chapters are to analyse how: (1) a range of taken-for-granted assumptions or absent traces regarding, inter alia, the nature of adolescence, adolescent sexuality, mothering, and family formation and function underlie the scientific statements regarding the causes and consequences of teenage pregnancy; (2) the governmental tactics of medicalisation, psychologisation and pedagogisation are invoked in the literature with regard to teenage pregnancy; and (3) broader governmental tactics (the familialisation of alliance, the conjugalisation of reproduction, racialisation, the economisation of activity) are deployed in the literature to achieve particular gendering, racialising and class-based effects. The section on the technologies of intervention analyses how the governmental tactics described above are installed in the everyday lives of teenagers and their families through the deployment of the mechanisms of security at the interface between the service provider and the teenager or her parents. Finally, the undermining of the assumption of the reality of teenage pregnancy, the link between expertise and government, and the efficacy of the feminist post-structural approach are reviewed.
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CHAPTER 1
SETTING THE SCENE

The tragedy of teenage pregnancy is fast gaining catastrophic proportions - prevention and proper care are the corner-stones of management. ... Adolescent pregnancy, or teenage pregnancy as it is more commonly called, is the premier social evil of the Third World (Van Coeverden de Groot, 1991, p. 1379).

The need for an investigation into some of the factors associated with unplanned and often unwanted pregnancies among urban Zulu schoolgirls arose from the concern expressed by a number of medical, educational and community authorities. The problem was seen to be self-defeating to the youngsters involved, medically contraindicated and socially disruptive (Craig & Richter-Strydom, 1983, p. 452).

May the international trends not suggest that we are looking at the situation [of black teenage pregnancy] from the wrong perspective - a perspective based on a Western (and in this country, an essentially white) middle-class morality which, at bottom, judges the births to be the result of lax sexual morals and which fails to see that other standards may be admissible in running one’s life (Preston-Whyte, 1991, p.37).

The above quotes are from the literature on teenage pregnancy in South Africa, the corpus which forms a large part of the problematic of this thesis. Each of the extracts represents a particular political perspective with regard to the issue of teenage pregnancy. The first epitomises a ‘conservative’ stance, where teenage pregnancy is relegated to the status of ‘evil’ or ‘catastrophic’, implying the need for control in order to avert imminent disaster. The authors of the second passage take a humanitarian stance. They are responding to the ‘concern’ expressed by experts in the field (‘medical, educational and community authorities’) with respect to the welfare of teenagers, and, therefore, are investigating the matter further in order to assist the pregnant teenager better. The qualifiers, ‘unplanned’ and ‘unwanted’, are softer than ‘evil’ or ‘catastrophic’, indicating an understanding rather than a moral perspective on the subject. The third excerpt is progressive in nature and is an example of what is termed the ‘revisionist’ literature on teenage pregnancy. It challenges the problematisation of teenage pregnancy by calling into question the underlying values that pathologise it. It suggests that other values that do not see teenage pregnancy as a problem are equally valid.
Despite coming from different perspectives, the three quotes share two basic commonalities. The first is an assumption of the reality of teenage pregnancy, the second, the legitimation of intervention on the part of experts, in the form either of preventive and curative programmes or of research studies aimed at getting to the root of the problem (Preston-Whyte’s (1991) statement above does not seem to lend itself to the second of these, but her report contains recommendations for, inter alia, the establishment of teenage counselling centres, abortion services and further research). This thesis concerns itself with these fundamental premises of the psycho-medical research and service provider practices in South Africa with regard to teenage pregnancy. A ‘feminist poststructuralist’ approach, which draws on the Foucauldian analytics of power and governmentality as well as the Derridian concept of the absent trace, is utilised. This framework allows the researcher to step outside mainstream psychological theorising; a different set of questions are posed, and a different set of ‘conclusions’ drawn. Two forms of expertise are analysed: (1) the researcher and his/her practices of knowledge production, or what Miller and Rose (1993) call the technologies of representation; (2) the psycho-medical service provider and his/her practices of health and welfare production, or what Miller and Rose (1993) call the technologies of intervention. The bulk of the thesis is taken up with the first of these. In the chapters on the technologies of representation I set out to achieve three things, viz. to illustrate how: (1) what is said, demonstrated, proved, hypothesised or illustrated about teenage pregnancy relies on a range of taken-for-granted assumptions or absent traces (see discussion in Chapter 2 of Derrida’s notion of the absent trace); (2) the literature on teenage pregnancy reproduces the governmental tactics (see Chapter 2 for discussion on Foucault’s analysis of governmentality) of medicalisation, psychologisation and pedagogisation with regard to teenage pregnancy; and (3) broader governmental tactics (the familialisation of alliance, racialisation, and the economisation of activity) are deployed within the literature in order to achieve particular gendering, racialising and class-based effects. In the chapter on service provider practices, I explore how the governmental tactics described in previous chapters are installed in the everyday lives of teenagers through the mechanisms of security deployed at the interface between the teenager and the expert (see discussion of Foucault’s theorising of the method of security in Chapter 2).
The invention of teenage pregnancy

To talk of ‘teenage pregnancy’ is to invoke underlying assumptions concerning the nature of adolescence, adolescent (hetero)sexuality, family formation and function, and motherhood. Political issues, such as gender relations, education, population control and welfare, undergird discussions on teenage pregnancy, although this is mostly not explicitly acknowledged. The tagging together of the words ‘teenage’ and ‘pregnancy’ has important effects. It implies that these young women are engaging in age-inappropriate behaviour (e.g. having sex, mothering), while reducing their chances of age appropriate activities (e.g. continuing with education). In doing so, they (the pregnant teenagers) are portrayed as posing a threat not only to themselves and their children, but also to others, as they contribute to welfare dependency (a problem most often cited in American literature) or to the population explosion (an issue that crops up in South African research).

Historical analyses, however, indicate that teenage pregnancy is a topic of rather recent interest. It emerged as a social problem within the media and social policy debates in the United States in the 1970s (Vinovskis, 1988, 1992), when phrases such as an ‘epidemic’ of adolescent childbearing, and ‘children having children’ became common parlance. Various negative consequences were associated with teenage pregnancy, and programmes to prevent or ameliorate these were introduced (see Chapter 3 for a full discussion of British- and American-based research on the consequences of teenage pregnancy). Since the 1970s, there has been a plethora of written words on the pregnant teenager, although interest in the topic in South Africa really only began in the early 1980s. Presently, however, there is a substantial amount of work being undertaken in the area in this country.

If teenage pregnancy was not viewed as a major social problem prior to the 1970s, why the sudden rise in interest and concern? Various hypotheses have emerged in answer to this question. The first is that the age of menarche has decreased owing to better nutrition, thereby putting adolescents more ‘at risk’ (Harari & Vinovkis, 1993). In other words, because more adolescents can conceive, more are, and therefore the increase in concern is related to an increase in incidence of adolescent pregnancy. This tack is disputed, however, by Vinovskis (1988), who
indicates that the rates of teenage pregnancy have been decreasing in the United States from a peak in 1957, while at the same time, concern has been increasing. There has been no systematic study on the historical pattern of teenage birth-rates in South Africa, and reported current rates differ widely (Macleod, 1997) - however, the increase in voiced concern among researchers and practitioners reflects that of the United States. A second hypothesis concerning the increase in interest in teenage pregnancy states that previously births to teenage women in the United States occurred chiefly within the context of marriage (if the couple were not married at the time of conception, a quick wedding was organised) (Davis, 1989; Miller, 1993). Perceptions around births to young women changed, it is stated, not because the numbers of births were increasing, but because they were occurring, relatively more than before, among those who were younger, white and unmarried.

While these historical explanations highlight the historically variant nature of teenage pregnancy, they continue to treat teenage pregnancy itself as an unproblematically real phenomenon. Teenage pregnancy is seen to have increased, decreased, occurred more or less amongst white or black, married or unmarried teenagers, but is still viewed as a real occurrence, in the past and presently. Arney and Bergen (1984) contest this assumption in their paper entitled ‘Power and visibility: The invention of teenage pregnancy’ (my emphasis). They take a Foucauldian approach, indicating how the morally loaded concepts of ‘unwed mother’ and ‘illegitimate child’ dissolved into a single new scientifically neutralised concept of ‘teenage pregnancy’ in the late 1960s, early 1970s. This shift did not take place, they state, because our understanding of the phenomenon was becoming more accurate, or because the problem demanded more humane treatment, but rather because it allowed for the deployment of the scientific discourse. Pregnant teenagers became technical problems requiring endless scrutiny and measurement, and an in-depth knowledge of their structure. This shift in power (see discussion in Chapter 2 on the meaning of power from a Foucauldian perspective) meant that women who became pregnant in their teenage years were no longer disciplined by moral exclusion, but rather by scientific inclusion. Technologies of rehabilitation, which first appeared in the 1960s, ‘began to break down the barriers of exclusion and, for the first time, pregnant adolescents became publicly visible’ (Arney & Bergen, 1984, p. 13 - see Chapter 5 for a discussion of the Foucauldian notion of visibility).
One of the aims of this thesis is to deconstruct the notion of teenage pregnancy, and to indicate that its reliance on taken-for-granted assumptions concerning age, mothering, (hetero)sexuality, the family, and gendered relations is what allows for the construction of a positive knowledge concerning the pregnant teenager. My project is not to join the debate of whether teenage pregnancy is indeed a problem or not (see Chapter 3 for a discussion of the dispute between the ‘mainstream’ and ‘revisionist’ writers concerning the nature of the problem of teenage pregnancy). I wish rather to examine how teenage pregnancy is constructed as a contemporary social problem; my aim is, inter alia, to explore the discourses that surround teenage pregnancy, and how these are related to, constrain and are constrained by discourses underpinning the notions of age, gender, (hetero)sexuality, motherhood, the family, population control, and welfare.

Throughout the thesis I use the term ‘teenage pregnancy’ because it denotes a broad field of regulatory practice. I am aware that I may often be referring (simultaneously) to parenting teens, pregnant teenagers, teenagers engaging in the termination of pregnancy etc. My goal is not to try to distinguish wanted from unwanted or intentional from unintentional pregnancies, teens currently pregnant from those currently parenting, or those who choose to abort from those who do not. Rather I wish to analyse what makes it possible for us to talk about teenage pregnancy as a real thing. My goal is to investigate the scientific and professional regulatory practices that surround the very notion of teenage pregnancy.

**Governmentality and expertise**

In this thesis I explore the interconnection of the ‘governmentality’ (a term borrowed from Foucault, 1991a) of teenage pregnancy and the research and service provider expertise concerned with adolescent (hetero)sexuality and reproduction. Various authors (Gane & Johnson, 1993; Miller & Rose, 1993; Rose, 1989a, 1989b, 1992, 1993) have traced the link between expertise and the operation of government. The emergence of the art of government was associated with the crystallisation of new forms of expertise like the psy-sciences. The implication of expertise in governmentality has meant that the professions have become ‘as much a condition for the exercise of political power as [a]re the formal bureaucratic instruments of government’ (Gane
Authority is ascribed to those claiming to possess not only particular positive truths concerning an object of government, but also the means of obtaining those truths (via, for example, counselling sessions, interviews, surveys, questionnaires, medical examinations). This allows for what Miller and Rose (1993) call ‘action at a distance’ (p. 76), in that the self-regulating capacities of subjects become shaped and normalised through the power of expertise.

Foucault explored what he called ‘governmentality’ in a series of lectures at the Collège de France (see Foucault, 1991a; Gordon, 1991). He did not use the concept to refer to the state, nor to the relations between politicians, civil servants, pressure groups etc.. He explains that what he means by the word governmentality is:

1. The ensemble formed by the institutions, procedures, analyses and reflections, the calculations and tactics that allow the exercise of this very specific albeit complex form of power, which has as its target population, as its principal form of knowledge political economy, and as its essential technical means apparatuses of security.

2. The tendency which, over a long period and throughout the West, has steadily led towards the pre-eminence over all other forms (sovereignty, discipline, etc.) of this type of power which may be termed government, resulting, on the one hand, in the formation of a whole series of governmental apparatuses, and, on the other, in the development of a whole complex of savoirs (Foucault, 1991a, pp. 102 - 103, my emphasis).

The ‘instruments of government’, Foucault states, are no longer laws but have ‘now come to be a range of multiform tactics’ (Foucault, 1991a, p. 95). A more in-depth discussion of governmentality appears in Chapter 2. However, in this context, I wish to highlight the words ‘tactics’, ‘essential technical means’, ‘security’ and ‘savoirs’ in the above quote, as the problematic of this thesis centres around, firstly, the governmental ‘tactics’ deployed in the ‘savoirs’ or technologies of representation of teenage pregnancy, and, secondly, the ‘essential technical means’, viz. the mechanisms of ‘security’ deployed in service provider practices, by which these governmental tactics are installed in the lives of teenagers and their families.

In examining the two interlocking forms of research and service provider expertise in this thesis, I wish to indicate how the representation of the expert as engaging either in the neutral enquiry of an objective reality or in the benevolent activity of health and welfare assistance masks the
operation of power inherent in these practices. I aim to explore how the discourses generated through the practices of knowledge, and health and welfare production, rather than being the reflection of a ‘real’ phenomenon, are, in the first place, implicated in the construction and governmentality of teenage pregnancy, and, in the second place, participate in broader governmental tactics regarding the family, race and the economy. As stated earlier, the use of a post-structuralist or Foucauldian framework undermines the depiction of the neutral, objective, benign expert and the power associated with this portrayal. We have seen, for example, how Arney and Bergen (1984) have traced the emergence of the pregnant teenager as the object of a positive science. As such she has become the target of governmentality, as she is no longer punished and cast out but is rather incited to be ‘true’ to her ‘nature’, a nature known in detail by the experts.

It is, in large part, to the savoir surrounding teenage pregnancy that I turn in this thesis. Government requires ways of knowing the population, of thinking about it and rendering it the object of dissection and analysis. It necessitates the institution of an enterprise of enquiry into the population’s state and condition: ‘The constitution of a savoir of government is absolutely inseparable from that of a knowledge of the processes related to population in its larger sense’ (Foucault, 1991a, p. 100). This savoir is distinct from, although related to, everyday knowledge. It represents a ‘regime of truth ... the mechanisms and instances which enable one to distinguish true and false statements’ (Foucault, 1984, p. 73). The practices of research (investigation, observation, evaluation, analysis, calculation, codification, representation, etc.), scientific discourse, and the institutions which produce these, or what Rose (1994) calls ‘intellectual technologies’ (p. 62), constitute such a regime. They produce a positive knowledge of the pregnant teenager, generating the language needed to describe her as the object of government, and providing the grids of visibility required to bring her into the plane of sight. The pregnant teenager does not enter the field of knowledge through a process of abstraction from the concrete, but rather through the mundane operation of documentation which ‘makes the individual stable through constructing a perceptual system, a way of rendering the mobile and confusing manifold of the sensible into a cognizable field’ (Rose, 1989b, p. 124). The world of events - pregnancies, births, sexual activity, marriage etc. - is translated into material traces - reports, graphs, statistics - which render the pregnant teenagercalculable, codifiable, and open to the normalising gaze.
Following on the analysis of the *savoir* of teenage pregnancy, I examine the practices of health and welfare production with regard to teenage pregnancy. These practices, the actions carried out upon the lives and conduct of teenagers and their families by those vested with the authority to do so, are intricately connected to the truths generated by intellectual technologies regarding the nature of pregnant teenagers. This is not to say that the knowledge generated by research ‘influences’ the behaviour of service providers in a directly linear fashion, but rather that the practices of health production and those of knowledge production are intimately tied up with one another, each simultaneously producing and constraining the other. The service provider practices represent, in part, the technical means by which the discursive constructions and governmental tactics circulating in the scientific literature, lecture halls, text-books, etc. take effect in the lives of teenagers and their families.

The text used to analyse the interconnection of the *savoir* and governmentality of teenage pregnancy consists of published and unpublished scientific literature on teenage pregnancy in South Africa from the 1970s to 1997. The second (more minor) part of the thesis consists of an analysis of the practices of service providers at a regional hospital. Interviews were conducted with people working the Youth Health Centre, the School Health Services, the Ante-Natal Clinic and the Termination of Pregnancy Clinic, and these interviews were transcribed verbatim (see Chapter 4 for in-depth discussion of the methodology).

**Overview of chapters**

The aim of Chapters 2 and 3 is to provide a backdrop for the main problematic of the thesis. Thus, the theoretical framework of the thesis and the (con)textual background, within which the technologies of representation and intervention with regard to teenage pregnancy in South Africa are situated, are elucidated. In Chapter 2, the radically plural feminist post-structural approach utilised in the analysis of the material is outlined. The post-structural aspect relies on the insights of Foucault (in particular his work on governmentality) and Derrida (in particular his work on the absent trace). The chapter begins with a brief overview of the tenets of structuralism to which post-structuralism is *post*. This leads to a discussion of Derrida’s conceptualisation of deconstruction, the absent trace and *différance*. These analytical tools allow the taken-for-
granted assumptions underlying the scientific investigation of teenage pregnancy to be brought to the surface and examined. Foucault’s analytics of power, viz. disciplinary technology, bio-power, the confession and the association of truth, knowledge and power, represent his focus on micro-power, i.e. how power installs itself in capillary ways in people’s lives. These insights were extended in his work on governmentality (which he saw as taking the multiform of sovereignty, discipline and government). Foucault’s analytics of power and governmentality give form to my analysis of the governmental tactics deployed in the scientific literature and professional practice in South Africa with regard to young women, their sexuality and reproduction. I frame this analysis as a feminist project. Thus, in a section on Foucault and feminism, I explore the commonalities and tensions between these two broad fields of enquiry. Challenges and concerns posed by feminists opposed to the Foucauldian approach are discussed together with the replies of those feminists taking the Foucauldian stance. The form of a Foucauldian post-structuralist feminism is summed up with Sawicki’s (1991) outline of a radically pluralist feminism.

In Chapter 3, the broader South African political practices and laws, and the international anglophone research literature are discussed as the (con)textual (see Chapter 4 concerning the dissolution of the text/context dichotomy) backdrop against which the technologies of representation and intervention surrounding teenage pregnancy in South Africa are etched. The aim is not to give an exhaustive review of the literature or a consummate picture of South African political life, but rather to highlight points of pertinence. The chapter begins with an overview of the diversity of approaches utilised in the maintenance of Apartheid, the era in which a large part of the research studied in this thesis was conducted. A couple of illustrations of the utilisation of expertise (the problematic around which this thesis centres) by politicians in key issues surrounding teenage pregnancy follows. A parliamentary debate on ‘Combatting population growth’ and the treatment of adolescent sexuality in an official government publication, viz. the President’s Council’s Report on the Committee for Social Affairs on the Youth of South Africa, are described and commented upon. Finally, in terms of the South African political background, I summarise some official definitions pertinent to the issue of teenage pregnancy - definitions of race, the child, the family, and the conditions under which a termination of pregnancy may proceed. In the second section of Chapter 3, I overview the
research on teenage pregnancy emanating chiefly from the United States and Britain. This research can roughly be divided into two categories, viz. research on the consequences of early child-bearing and research on the causes of teenage pregnancy. In terms of consequences, the following issues of concern raised in the literature are briefly reviewed: the disruption of schooling and the associated socio-economic disadvantage; obstetric outcomes; inadequate mothering and poor child outcomes; social support; welfare and demographic concerns. The following ‘causes’ of teenage pregnancy, as identified in the literature, are discussed: reproductive ignorance and risk-taking behaviour; biological considerations; psychological problems; dysfunctional family patterns; and socio-economic status.

In Chapter 4, issues concerning the methodology employed in my research are explicated. As there is no definitive method of discourse analysis, this chapter is about joining the academic debate concerning the nature of discourse analysis. I outline the deconstructive discourse analysis utilised in my analysis. The chapter is divided into three sections. In the first, issues underlying discourse analytic work, viz. conceptualisations around the notions of discourse, text, context, the extra-discursive, and discursive and social practices, are discussed. In the second, I explore what it is that discourse analysis does, and the role of reflexivity in the process. In the third section, the research procedures undertaken in this particular study are explored. The theoretically informed questions which guided the analysis of the material are explicated as well as the method of text collection. The research practices undertaken in the analysis of the data (consisting of 74 articles, theses and research reports, and the transcription of 12 interviews with service providers) are then reflected upon.

Chapters 5 to 10 are the analysis chapters. In Chapter 5, I review how teenage pregnancy is governed through the simultaneous medicalisation, psychologisation and pedagogisation thereof. The medicalisation of teenage pregnancy deploys the tactics of sanitary science (which constructs the anatomical identity of the pregnant teenager), social medicine (which concentrates on the social management of teenage (hetero)sexuality and reproduction) and community health (which co-opt s ‘community’ and ‘culture’ into the production of sexual and reproductive health). Through the processes of pathologisation and normalisation, psychologised discourses participate in the construction, production and regulation of teenage pregnancy by rendering the self, the
body and relationship open to scrutiny. In the pedagogisation of adolescent (hetero)sexuality and reproduction, educators, doctors, nurses, social workers, psychologists, parents and adolescents are incited to talk about sex in order to protect the adolescent from her/his dangerous sexual tendencies. The medicalisation, psychologisation and pedagogisation of teenage pregnancy operate through the positioning of the doctor, nurse, social worker, psychologist, health worker and educator as the expert who knows and understands the ‘true nature’ of the adolescent, who is caring, professional and ethical, and who encourages the teenager to be ‘true’ to her ‘nature’.

In chapter 6, I explore the taken-for-granted, absent trace of ‘normal’ adolescence and adolescent (hetero)sexuality which undergirds the governmental tactics explicated in Chapter 5. The dominant discourses regarding adolescence appearing in the literature are the ‘transitional phase’ and ‘passive recipient of external influences’ discourses. Each is utilised to pathologise the pregnant teenager. I highlight concerns regarding these discourses. For example, the ‘transitional phase’ discourse is located within a developmentalist framework, a framework problematised by various authors (in particular, Burman, 1994, 1996a, 1997), while the ‘passive recipient of external influences’ discourse is strongly gendered. Turning to sexuality, I indicate how adolescent (hetero)sexuality is simultaneously forbidden and demanded. Three discourses concerning (hetero)sexuality emerge in the teenage pregnancy literature, viz. the ‘humanist’, ‘moral decay’ and ‘biological’ discourses. These combine with the discourses of adolescence to render adolescent sexual and reproductive behaviour deviant, and hence in need of expert intervention.

In Chapters 7, 8 and 9, the focus shifts to broader governmental tactics (familialisation of alliance, the conjugalisation of reproduction, racialisation, and the economisation of activity). I indicate how the teenage pregnancy literature simultaneously draws on and contributes to these various governmental tactics. In the familialisation of alliance (which is discussed in Chapter 7), a system of marriage and the development of kinship ties are fixed. The family becomes the point of development of sexuality, and the obligatory locus of affect. Certain family formations and functions are naturalised, allowing experts to make pronouncements concerning beneficial relations of alliance. The functions emphasised are the development of the ‘affectively actualised’, ‘responsible’ citizen, and ‘good’ mothering. Various taken-for-granted assumptions
concerning mothering (mothering as an essentialised dyad, mothering as a skill, and mothering as a pathway to feminised adulthood) underlie the pathologisation of teenage mothering. Pronouncements on family formation centre on the creation and maintenance of a marital dyad as an appropriate relation within which to bear children (the conjugalisation of reproduction), rendering the single parent and ‘broken’ family deviant.

In Chapter 8, I turn to the racialisation of teenage pregnancy. Racialisation refers to a process whereby social significance is attached to certain biological human features. It is a process of what Derrida terms **differance** (see Chapter 2 for a fuller explanation of this term). The signifier, ‘black’, for example, relies on the absent trace, ‘white’, each of which is read in its interrelated deferred (or historical) meaning. Racialised boundaries (although slippery) are re-produced and maintained, with race used as an explanatory tool of social deviance. The construction of racialised boundaries has progressed in South Africa from the less specific ‘white’/‘non-white’ differentiation to the finer gradations of ‘coloured’, ‘African’, ‘black’, ‘Indian’, ‘white’, and, finally, ‘ethnic’ groups such as the ‘Zulu’ and ‘Xhosa’. However, ‘white’ remains the silent signifier, the tacit backdrop against which the differences of the Other are measured. Racialisation relies on more subtle tactics, including the traditionalisation and culturalisation of ‘black’ people. These tactics exoticise the behaviour and actions of ‘black’ people, while at the same time allowing for the deployment of the liberal discourse of understanding and tolerance. They covertly re-produce ‘black’ as the pathologised presence, and legitimate certain racial and gendered relations of power, as well as particular intervention practices.

The economisation of activity (which is explored in Chapter 9) is a governmental tactic which maintains the boundary between what counts as production in an economised sense and what does not. It relies on the underlying assumptions of the rational economic man and the split between the private and the public, with public activities carrying economic worth and private ones not. These assumptions allow women one of four economised positions (the dependent woman, the economic woman, the loose woman, and the poor woman). Each of these carries dangers for the pregnant teenager. The economisation of activity allows for the foregrounding of poverty as the pathologised presence through the portrayal of the poor as fracturing economic security. The poor are depicted as refusing the production of the economised self, and as
contributing to unchecked population growth. This rendition of the poor legitimates the intervention of the expert in the name of the common good. Furthermore, the poor’s bodily, psychologised and familial functioning are monitored and found deficient, necessitating the expert’s care. Throughout the chapter, I indicate how the tactics of racialisation and economisation act as mutually reinforcing strategies of pathologisation.

The reader may find the transformation of various words into the ‘-isation’ form in the above-mentioned chapters somewhat confusing. Certainly, these words (medicalisation, psychologisation, pedagogisation, familialisation, racialisation, conjugalisation, economisation) are stylistically clumsy and can make reading the text quite stilted. Nevertheless, they are necessary for my task. The aim of these words (take, for example, medicalisation) is to indicate that the activities implied in the shorter versions (e.g. medical) are not ahistorical, context-free, or ‘naturally’ occurring activities, but rather that they are bound up with power relations which legitimate certain behaviours, while casting others as deviant. The word ‘racialisation’, for example, indicates a process whereby the signifier ‘race’ takes on significance, and is utilised to achieve particular purposes. Whereas the words ‘race’ and ‘racial’ are usually used as static descriptors, ‘racialisation’ implies an activity, construction, or process (an implication which is necessary for an analytics of power and governmentality).

Finally, in Chapter 10, I analyse the technical means by which the tactics of governmentality elucidated in the preceding chapters are installed in the everyday lives of teenagers through the application of the mechanisms of security at the interface between the teenager and the service provider. I explore the technologies of intervention deployed at a regional hospital in KwaZulu-Natal. The chief mechanism of security utilised by service providers is the management of risk, the collective’s insurance against the ‘disasters’ attendant on early reproduction. The socialisation of the risk that accompanies early child-bearing operates through the collective’s investment in the establishment and maintenance of hospital units dealing with adolescent (hetero)sexual and reproductive health and welfare. Various strategies are utilised by the service providers to justify this investment and their intervention in the lives of adolescents and their families. These include the specification of possible or probable events following uninformed sexual interactions and early reproduction, and the calculation of the comparative costs of
intervention and non-intervention. Foucault (in Gordon, 1991) saw security as a specific principle of political method and practice. It combines with various other political practices (such as pastoral care, liberalism, discipline, etc.) to produce its effects. In a final section of this chapter, I analyse how various governmental techniques (pastoral power and warning and fact-telling, liberal humanism, the incitement to technologies of the self, and sovereign power) are utilised in the production and maintenance of adolescent reproductive health and welfare security.
CHAPTER 2
THEORETICAL FRAMEWORK: FEMINIST POSTSTRUCTURALISM

Post-structuralism has increasingly been used in the psychological domain as a framework from which to view 'traditional' psychological questions from a different angle (see, for example, the work of Burman (1994, 1996a, 1997) on developmental psychology, Levett (1989a, 1989b) on child sexual abuse, Rose (1989a, 1989b, 1990) on the psy-sciences, and Walkerdine (1984, 1988, 1989, 1990) on child-centred pedagogy, and mathematics and education). Apart from the work of Arney and Bergen (1984), post-structuralism has not made its mark in the field of teenage pregnancy. In this chapter, I outline a theoretical framework, feminist poststructuralism, which does not promise to answer the usual questions posed concerning teenage pregnancy (questions like, 'What are the consequences?', 'What are the causes?', 'What can be done about it?') but rather to allow the questions to be asked in a different way. The focus of attention shifts away from the object of teenage pregnancy to the conditions of possibility under which the pregnant teenager comes to pose a social problem, and to the tactics and technologies which render her cognizable and visible, and hence the object of investigation and intervention.

Having named the theoretical approach that I adopt in this thesis 'feminist poststructuralism', I must pause to add two caveats. The first is poststructuralism is a contested concept, in terms of its meaning, the writers who can justifiably be called poststructuralist, and its theoretical content. There are various broad theoretical strands which authors within the psychological field have followed, viz. Lacanian, Derridian, and Foucauldian. In this thesis, I utilise a Foucauldian approach chiefly, although I have found value in elements of Derrida's work. I argue that Foucault's and Derrida's work complement each other and can be used in constructive ways in the application of methodology (see Chapter 4). The second caveat is that the stringing together of the words 'feminist' and 'poststructuralism' is not undisputed. Many feminists see the poststructuralist endeavour as antithetical to feminism. Thus the use of feminist poststructuralism as a theoretical framework must be motivated. This is part of what I set out
to do in this chapter.

The chapter is organised in the following way. A brief introduction to the tenets of structuralism, from which post-structuralism flows, leads to a discussion of Derrida’s conceptualisation of deconstruction and *differance*, and an explication of some of the linkages between Derrida’s and Foucault’s work. This is followed by an examination of Foucault’s work. In his lectures on governmentality, Foucault (1991a) indicated that modern power takes the multiform of sovereignty, discipline and government. Thus, I first discuss Foucault’s analytics of power, viz. the movement from sovereign power to disciplinary technology, bio-power, the confession, and the association of truth, knowledge and power. This is followed by an explication of his work on governmentality which includes insights from his analytics of power. A brief exploration of his thoughts on resistance and techniques of the self completes this section. The commonalities and tensions between Foucault and feminism are considered, and post-structural Foucauldian feminisms explicated.

**Going beyond structuralism**

Post-structuralism does not imply anti-structuralism. Rather, it flows from structuralism, utilising elements thereof, modifying and going beyond the limits set by this tradition. Broadly speaking, structuralism attempts to dispense with both meaning and the subject by finding objective laws which govern all human activity; it is an attempt to isolate the general structures of human activity (Dreyfus & Rabinow, 1982). A structuralist statement bases itself on the distinction between subject and object. It is this distinction which post-structuralist writers (for example Derrida with his concept of *differance*) wish to collapse.

Modern structuralism is commonly associated with names such as Levi-Strauss and Mauss in Anthropology, and de Saussure in linguistics. Post-structuralism is in many respects post-Saussurean (Hollway, 1989). Saussure's equation

\[
\text{SIGN} = \frac{\text{signifier}}{\text{signified}} = \frac{\text{sound or written word}}{\text{meaning}}
\]
examined the relations between the means of expression (sound) and the concept or meaning. Neither the signified nor the signifier pre-exist the other, nor do they have any meaning outside their relation to each other. However, the separation of the signifier and the signified (in their interrelatedness) allowed Saussure to analyse the relations between the signifiers themselves - ‘The signifier cuts out or articulates the signified only by relations entered into with other signifiers’ (Coward & Ellis, 1977, p. 3). Thus Saussure rejected the idea that words gain their meaning through being direct representations of things. His theorising of language goes beyond a simple word/object association, allowing for shifts and slippages in the relationship between signifier and signified. The signified world may be divided up and labelled in various ways by the signifier. There is nothing ‘in nature’ that decrees that a signifier must articulate a certain signified. Instead, the sign is constituted socially by the appearance of equivalence between the signifier and signified. Thus, for Saussure the structure which creates both signifiers and signifieds is a system of difference. It is that which gives signifiers and signifieds signification.

Coward and Ellis (1977) point out that there were two results emanating from Saussure’s equation. Firstly, it produced structuralism as the analysis of structural relations. Secondly, it had more radical potentiality in that the signifier could be seen as having an active function in creating and determining the signified. This radical potential was not exploited, however, as there was a concentration on the first aspect. Structuralism tended to gravitate towards a mechanistic theory of action of the structure. Language was theorised as a pre-given, fixed structure, prior to its realisation in speech or writing (Weedon, 1987, p.23). The signifier and signified became anchored together. Two tendencies resulted from this:

- Either the system was considered to be imposed on the subject who is then only its support: such is the foundation of mechanical materialism. Or else meaning was seen as produced in the structure by the transcendental consciousness which always already intends that meaning. This is the foundation of idealism (Coward & Ellis, 1977, p. 4).

Thus structuralism was unable to account for multiplicity of meaning, nor for the process by which relations and meanings become fixed in or for the subject. Derrida’s and Foucault’s work are attempts to move beyond these strictures. For Derrida, signifiers achieve their meaning only within a specific discursive context (see later discussion on the meaning of discourse), and the
fixing of meaning is only temporary. Foucault’s genealogies, on the other hand, stress the multiple, contradictory nature of language over time (Hollway, 1989).

**Derrida and deconstruction**

Derrida’s (1976, 1978) approach to language is one of ‘deconstruction’. He critiques ‘Western metaphysics’ which has always been structured in terms of dichotomies or polarities: truth versus error; man versus woman; being versus nothingness; alive versus dead. He invokes what he calls ‘undecidables’ to disrupt these binary oppositions. Undecidables slip across both sides of an opposition but do not properly fit either. They undermine the very premise of the binarism. Examples include the virus or the zombie (Collins & Mayblin, 1996), both of which are neither alive nor dead, neither living nor non-living, but which simultaneously cut across both categories. They cannot be decided. In Chapter 6, I analyse how adolescence operates as an undecidable.

Derrida notes that the oppositions created in Western metaphysics do not stand as independent and equal entities. ‘The second term in each pair is considered the negative, corrupt, undesirable version of the first, a fall away from it’ (Johnson, 1972, p. viii). The first term is given priority, creating a sense of being as presence, unity, identity and immediacy, with the second term always subordinated to it. In Derridian terms, language is inherently unstable, but is used to create the illusion of being stable by producing binary oppositions which define each other. The stability depends on privileging the present term, while marginalising the absent one(s). Derrida’s aim is to deconstruct this stability. His concept of ‘différence’ underlies the deconstructive process. ‘Différence’ comes from the French verb ‘différer’, which means both to differ and to defer. ‘To differ’ refers to the notion that all language exists as a system of differences, rather than as something essential or of intrinsic significance. This Derrida retains from Saussure’s work, although he criticises Saussure’s retention of the notion of the ‘sign’ as it cannot avoid confirming idealist traditions (Coward & Ellis, 1977). The sign, Derrida, states, is premised on a binarism and, therefore, allows for the metaphysical belief of an origin of meaning exterior to the process of signification. Nevertheless, Derrida finds Saussure’s theorisation of the structure of language as differential useful. ‘Deferral’, on the other hand, describes the time lag or
distance between the presence and the absence - ‘whatever is consciously perceived (the present) may only be read in the past’ (Sampson, 1989, p. 11). Thus, whatever we perceive as the present is always already absent, different and deferred. This implies that the present and absent terms define, and interpenetrate each other. For example, scientific ‘facts’ rely on the fall away of, *inter alia*, ‘falsity’, ‘myth’, ‘fiction’; they operate as a system of difference, each ‘fact’ giving meaning to others as a system of differentiation; they are read in historical relation to each other, with previously discovered ‘facts’ giving form and meaning to the present ones.

In his deconstruction, Derrida uses the device of *sous rature* (under erasure) in which a term is written, written again and crossed out: A and X. This emphasises the simultaneous necessity and inadequacy of the term. Derrida attempts to discover the opposite or trace within the meaning of a single term. In other words, A is simultaneously A and not-A. Meaning is a function of presence (that which is written or spoken) and absence (the chain of suppressed signifiers upon which the meaning of the present is based). The present is always already inhabited by the absent, and hence is mediated and derivative. Not-A is both added to A and replaces A. Not-A is no longer opposed to A, nor is it equivalent to A. They are not both equivalent to themselves. They are their own *différance* from themselves. The absent trace is never found in its full being.

Applying the method of *sous rature* to ‘teenage’, ‘pregnancy’ and ‘teenage pregnancy’ leaves us with, amongst other possibilities, ‘adult’, ‘child’, ‘sex’, ‘chastity’, ‘virginity’, ‘sterility’, ‘adult sexual relationship’, ‘adult reproduction’, ‘parenting’, ‘mothering’, and ‘family’. Thus, teenage pregnancy as an object of presence is intricately inhabited by taken-for-granted notions concerning adolescence (as a not adult/not child status), adolescent (hetero)sexuality, mothering and family formation, all of which are given meaning in a system of differentiation (e.g. family in relation to friends, acquaintances) and through deferral (e.g. the family versus the feudal system). Phoenix and Woollett (1991) use the concept of ‘normalised absence/ pathologised presence’, a concept I have found useful in this thesis. For example, my use of the parenthesised ‘hetero’ in (hetero)sexuality is in recognition of Kitzinger and Wilkinson’s (1993) critique of feminism’s and psychology’s unproblematised assumption of heterosexuality in the theorising on sexuality - heterosexuality becomes the silent term (like ‘man’ or ‘white’), the normalised absence, assumed unless otherwise stated.
Derrida's most famous deconstruction is of the 'logocentrism' of Western metaphysics. He criticised the privileging of the spoken word over the written word in this tradition. In the spoken word, there is an image of a perfectly self-present meaning, which Derrida gives the name 'logocentrism'. Writing is seen from the logocentric perspective as a representation or substitute of speaking:

\[ \text{Reading and writing, the production or interpretation of signs, the text in general as fabric of signs, allow themselves to be confined within secondariness. They are preceded by a truth, or a meaning already constituted by and within the element of the logos.} \]

(Derrida, 1976, p. 14).

In his science of writing, 'grammatology', Derrida does not reverse the priority by putting writing before speech. Speech, he points out, is always already structured by *différance*, and writing is the structure always already inhabited by the trace. Writing is not the trace itself for 'the trace itself does not exist. (To exist is to be, to be an entity, a being-present)' (Derrida, 1976, p. 167). Writing, for Derrida, is broader than the system of notations on some material substance such as paper:

\[ \text{We must think that writing is at the same time more exterior to speech, not being its 'image' or its 'symbol', and more interior to speech, which is already in itself a writing [or what Derrida later calls arche-writing]. Even before it is linked to incision, engraving, drawing, or the letter, to a signifier referring in general to a signifier signified by it, the concept of the graphie [unit of a possible graphic system (translator)] implies the framework of the instituted trace, as the possibility common to all systems of signification.} \]

(Derrida, 1976, p. 46).

Derrida thus re-conceptualises writing as an undecidable: the play of presence/absence and difference, across speech as well as script (Collins & Mayblin, 1996). Writing becomes a paleonymic - it no longer designates scripting, but is the undecidable play of scripting, speech, and all other signs. Derrida's conceptualisation of writing parallels Freud's use of the metaphor of writing to describe both the content and the workings of the psyche. Indeed, there are strong links between Derrida's work and that of Freud in which consciousness as always already inhabited by the unconscious. Derrida's project, however, is not a psychoanalytic endeavour on a macro scale. In fact, Derrida describes Freud's theorising as caught up in the terminology of binary oppositions (Johnson, 1972).
The material analysed in this thesis consisted of: (1) the scripted documentation of practices engaged in by ‘scientific’ experts; and (2) the spoken word of service providers, which later was transcribed into the scripted word. In each case, the spoken and the scripted do not stand as entities on their own; they are interpenetrated and inhabited by the other, and by the paleonymic of ‘writing’.

There are several linkages between the work of Derrida and Foucault. For example, the notion of deferral means that the grounds of deconstruction (see Methodology section for detailed discussion on the process of deconstruction) are ‘necessarily historically contingent’ (Michael, 1990, p. 173). Foucault’s work was historical but in a deconstructive way. His genealogies deconstruct: history as progress; the Enlightenment view of rational ‘man’; and power as possession, as negative. Furthermore, as noted, Derrida confronts the privileging of the presence that has dominated Western metaphysics. The closure of metaphysics involves attending to two features of presence that concerned Foucault, viz. the centre and the origin (Dant, 1991).

In the next section, I discuss Foucault’s work. I initially give some background to the development of his thought over the years of his writing. This is followed by a discussion of some of the central tenets of his analytics of power, viz. disciplinary technology, bio-power, the confession, and the relation between truth, knowledge and power. His work on governmentality, which subsumes his insights on the analytics of power, is explored. An explication of his later, less well-known writings on resistance and techniques of the self concludes the section.

**Foucault’s work**

**Some background**

Foucault’s writing spreads over a period of several years. Within this period, his thinking and analyses developed and deepened. His early works, for example *Madness and Civilisation* (Foucault, 1965), centred on the analysis of historically situated systems of institutions and discursive practices. In his methodological treatise, the *Archaeology of Knowledge*, Foucault
(1972) outlined his analysis of discourse. He attempted to divorce discourse from its social setting and to discover the rules of its self-regulation, its autonomy and discontinuous transformations. He treated the discourses of human sciences archaeologically, avoiding, as did Derrida, becoming involved in arguments concerning truth statements or trying to discover an ultimate, original meaning. He later moved beyond the attempt to work out a theory of rule-governed systems of discursive practices (which, in many respects, came close to structuralism), and utilised the genealogical method which allowed him to 'thematize the relationship between truth, theory, and values and the social institutions and practices in which they emerge' (Dreyfus & Rabinow, 1982, p. xxv). In the genealogical process (seen, for example, in *Discipline and Punish* and *The History of Sexuality: Vol. 1*), he isolated components of present-day political technologies and traced them back in time. He concentrated on the relations of power, knowledge and the body in modern society. However, the archaeological method was not abandoned; it was used as a technique to serve genealogy, and to allow certain genealogical questions to be asked (Dreyfus & Rabinow, 1982).

Foucault’s genealogical studies tended to focus on the micro-physics of power, on the techniques and practices conducted between individual human subjects within localised institutions. An objection was raised by the Marxist left that his attentiveness to the specifics of power left more globalised issues in politics untheorised (Gordon, 1991). Partially in response to this, Foucault introduced his lectures on governmentality. He argued that the same style of analysis which he used to study the installation of power at the extremities could be applied to techniques and practices of governing populations of subjects. He put forward a triangle of sovereignty, discipline and government which acts on the population to increase security. In his last works, Foucault turned his attention to the formation of subjectivity, and what he called the 'techniques of the self'. In Chapter 4, I outline in more detail Foucault’s archaeological method. The rest of this section is devoted to discussing Foucault’s analytics of power and governmentality as evidenced in his genealogies, interviews and lectures.
In *Discipline and Punish*, Foucault (1977) traces the workings of power/knowledge in contemporary society through the emergence of what he calls disciplinary technology. Prior to the 18th century, the sovereign’s power was displayed through public torture. The law represented the will of the king, and torture was the political ritual through which this was demonstrated. Any breach of the law was a direct attack on the person of the king, and the response was an activation of the king’s power on the body of the criminal. However, this procedure was not straightforward, as the site of the application of power could easily become the site of social disturbance or revolt:

> In these executions, which ought to show only the terrorising power of the prince, there was a whole aspect of the carnival, in which rules were inverted, authority mocked and criminals transformed into heroes (Foucault, 1977, p. 61).

During the 18th century, a group of humanist reformers proposed a new style of punishment. They attacked the excess of violence evidenced in public torture, as well as the notion of revenge. The underlying justification for the punishment they proposed was that of social contract. Crime became not an attack on the sovereign but a breach of contract in which society as a whole was the victim. Thus, punishment would mean redressing the wrong done and assisting the transgressor in resuming his/her rightful place in society. Foucault analyses the humanist shift in the following way:

> What was emerging no doubt was not so much a new respect for the humanity of the condemned ... as a tendency towards a more finely tuned justice, towards a closer penal mapping of the social body (Foucault, 1977, p. 78).

The torture meted out as punishment in sovereignty meant that only most heinous of crimes were checked. Less significant transgressions were allowed to flourish. Humanist reform introduced, as stated above, a ‘more finely tuned justice’ in which ‘lesser’ crimes and misdemeanours could be identified and dealt with accordingly. For their system to work, in order for the authorities to assist in the reformation and rehabilitation of the criminal, an intimate knowledge of the individual was required. A ‘closer ... mapping of the social body’ was needed. This was an important step in the growth of the human sciences of society.
The reformers proposed a diversity of penalties, including public works and detention. However, this diversity was essentially reduced to one 'grey, uniform penalty' (Foucault, 1977, p. 117). And thus begins the period of confinement. The punishment of a crime was now carried out behind prison walls. The right to punish and correct was entrusted to suitable authorities, who would transform and rehabilitate every aspect of the prisoner's life. The body was no longer tortured and dismembered, but trained, exercised and supervised. The power of the sovereign was replaced by disciplinary technology. While Foucault concentrates on practices of confinement, he points out that prisons were merely the clearly articulated expression of more generalised practices, found in schooling, hospitals and other settings, of disciplining individuals and populations.

Disciplinary technology has as its aim the regulation and normalisation of subjects. Although the individual ostensibly has more formal rights than previously, there is less room for deviance and disorder. Disciplinary technology operates through hierarchical observation and normalising judgement. Measurement and observation produce a knowledge in which it is possible to classify each subject in a system of gradated, hierarchical intervals. The effect of the normalising judgement is complex. There is an initial promise of equality between individuals. The norm defines things in homogeneous terms of conformity. However, differentiation and individualisation occur on an increasingly finer scale once the apparatus is put into practice and individuals are 'objectively' ranked and separated. Disciplinary technology ensnares subjects through a simple play of awards: one may attain a higher place in the ranking; on the other hand, one may be punished through a reversal of the process.

Surveillance is an integral part of this production and control. Foucault illustrates the operation of surveillance and disciplinary technology in his description of the Panopticon. In the 18th century, Bentham proposed a model prison, called the Panopticon. In it, the prisoners could be put under constant surveillance as a strategically placed light and tower would allow a warder to watch the prisoners without their being aware of his (or her?) doing so. The Panopticon was never actually built. However, it represents the technologies of production and control utilised at the time; it was referred to several times in documents as the ideal form for institutional arrangements. The authority exercises the normalising gaze over the inmates of the institution.
Disciplinary technology, while originating in institutions, has essentially become de-institutionalised. The technologies have ‘emerge[d] from the closed fortress in which they once functioned and circulate in a ‘free’ state’ (Foucault, 1977, p. 211). They are transferred and adapted to operate in everyday life, and mundane situations. Thus, for example, normalising judgements may be made by a group of friends gossiping about a neighbour’s daughter becoming pregnant. Parents no longer have to beat their children for transgressions; instead, they can exercise a normalising gaze, disciplining by the play of awards and the encouragement of self-surveillance on the part of the child.

Self-surveillance, or subjectification, is essential for the operation of disciplinary technology. Panopticism extends itself to self-reflection and self-consciousness:

There is no need for arms, physical violence, material constraints. Just a gaze. An inspecting gaze, a gaze which each individual under its weight will end up interiorising to the point that he (sic) is his own overseer, each individual thus exercising surveillance over, and against himself (Foucault, 1980a, p. 155).

As the individual invests in the tenets of a normalising judgement, so s/he begins to exercise vigilance with regard to his/her own behaviour, monitoring whether what s/he does fits the norm. Regulation thus becomes self-regulation as the person subjects him/herself to an internalised surveillance.

This thesis is about the research and health service provider practices which form part of the disciplinary technology and surveillance brought to bear on the pregnant teenager as well as her non-pregnant counterpart. Teenagers and their sexual conduct, their gendered and familial relationships, their individual habits, their feelings, their knowledge, their mothering skills, etc. are observed, measured, monitored, and calibrated through the technologies of interviews, questionnaires, surveys, observations, counselling sessions, medical examinations, etc.
Particular readings of the nature of adolescence and adolescent sexuality, ‘proper’ familial functioning and formation, ‘correct’ mothering, racial and cultural habits, and economised activities are normalised, while others are pathologised. The researcher and health service provider are not, however, imposing power from the exterior. In exercising the normalising gaze, they, in turn, are subject to a disciplinary technology which positions them as experts and caregivers, as ethical and responsible (see Chapter 5). Although dominant in the power relation with the teenager, they are also caught up in the web of surveillance, discipline and self-regulation.

**Bio-power**

Bio-power is the word which Foucault coined for the operation of disciplinary power on the body. It has two aspects. The first is the control of the human species in the form of the population; the second is control of the body. In the first, bio-power represents ‘the endeavour ... to rationalize problems presented by the phenomena characteristic of a group of living human beings constituted as a population: health, sanitation, birth rate, longevity, race’ (Foucault, 1997, cited in Dean, 1999, p. 99). In the second, bio-power divides the body into units which are taken up separately and subjected to precise, calculated and repetitive training. The aim is control and efficiency of operation both for the part and the whole. ‘Discipline increases the forces of the body (in economic terms of utility) and diminishes these same forces (in political terms of obedience)’ (Foucault, 1977, p. 138). Foucault calls the latter the docile body.

Bio-power emerged as a political technology in the seventeenth century when control of the population became a central concern of the state, and population became a scientific rather than a juridical object. This new technology was connected with the nascent social sciences. The two poles of bio-power were brought together in the nineteenth century preoccupation with sex. ‘Sex became the construction through which power linked the vitality of the body together with that of the species. Sexuality and the significance invested in it was now the principal medium through which bio-power spread.’ (Dreyfus & Rabinow, 1982, p. 137).

Foucault argues against the notion of sexuality as an underlying, transhistorical, cross-cultural essence. In his *History of Sexuality, Vol.1*, he traces the historical development of sexuality.
Sexuality, as discourse and practice, emerged with a separation of sex from alliance. Now sex is an activity, while sexuality is an individual matter. Foucault (1978) delineates some of the strategies deployed in power relations around sexuality. These include the:

1. Hysterization of women’s bodies: the body of the woman was analysed as being ‘thoroughly saturated with sexuality’ (Foucault, 1978, p. 104) through the ‘advance’ in medical science;

2. Pedagogisation of children’s sex: teachers, families and medical practitioners were employed in the fight against children’s sexuality, which was defined simultaneously as natural and unnatural;

3. Socialisation of procreative sex: the conjugal couple was given economic, medical and social responsibilities in the regulation of procreation; and

4. Psychiatrisation of perverse pleasures: sex was constructed as an instinctual drive, which operates both on the biological and psychic level. As such, it could be perverted. These perversions had to be analysed and corrected.

The introduction of the notion of bio-power represented Foucault’s first foray into the links between the microphysics and macrophysics of power (Gordon, 1991). He reintroduced the theme of bio-power or bio-politics in his 1978 lectures on governmentality, indicating that modern bio-politics generates a new kind of counter-politics. Bio-politics represents an example of what Foucault calls the ‘strategic reversibility’ (cited in Gordon, 1991, p. 5) of power relations - the ways in which governmental practices can be turned into loci of resistance. Foucault’s treatment of governmentality and the techniques of resistance are dealt with more fully later in this chapter.

The field of teenage pregnancy is immanently conducive to the exercise of bio-power. Firstly, the teenager’s body is divided into reproductive organs (which need to be monitored and treated both in a state of pregnancy and non-pregnancy), and sexual organs (which go through certain ‘physical growth’ stages, and to which access must be patrolled) (see Chapters 5 and 6). Secondly, the concern with the rate of teenage pregnancy leading to the possibility of welfare dependency and the creation of an ‘underclass’ or, alternatively, demographic problems is bound up with control of the ‘population’ (see Chapter 9). Thirdly, teenage pregnancy is about sex -
sex at too young an age, sex without contraception, sex leading to procreation. The teenage woman’s sexuality is hystericised through the emphasis on her ‘deviant’ sexual conduct (as opposed to that of her male counterpart), pedagogised through sexual education and family planning programmes (see Chapters 5 and 10), and, to a certain extent, psychiatrised through the representation of sex in teenage years as an anomaly (see Chapter 6). She is, furthermore, portrayed as disrupting the socialisation of procreative sex through her (assumed) non-marital status (see Chapter 7). Lastly, the concern with teenagers’ reported school drop-out and consequent lower socio-economic status represents an attempt at the production of the docile body which is economically useful and politically obedient (see Chapter 9).

**The confession**

Foucault outlines the confession as one of the central components of technologies of discipline over bodies, individuals and society. It was a practice developed in European Christianity in the thirteenth century. It accompanied a change in doctrine from one where an intercessor was needed between God and people, to one in which people were seen as being able to communicate directly with God, as being their own priest (Rose, 1989a). But crucially it involved a practice in which one was obliged to render oneself truthfully to another in authority, who would hear, evaluate and prescribe the appropriate form of conduct. Initially the confession was tied to ritualistic settings within the church. But it has gradually lost its location within these settings, and has spread to a whole series of relationships, e.g. children and parents, students and teachers, patients and healers. ‘The obligation to confess is now relayed through so many different points, is so deeply ingrained in us, that we no longer perceive it as the effect of a power that constrains us’ (Foucault, 1978, p. 60). The confession promises the individual that through self-reflection or in confession to another (usually an expert) he/she can discover his/her ‘true’ but hidden nature. It renders the person audible to herself or another, allowing for the pronouncement of normalising judgements, and the incitement of self-surveillance of actions, self-regulation of personalised habits, and the training of the body. It is manifested in a whole range of new technologies of the self, examples of which are the diary (self-inspection), and agony columns (confession to an expert - see Wilbraham, 1996a, 1996b).
The confessional operates in the field of teenage pregnancy chiefly, although not exclusively, through the counselling session, the medical history-taking interview, and the research interview. The teenager is counselled when having questions concerning sexual matters, when trying to access contraception, when attending ante-natal classes, when requesting termination of pregnancy, after the birth of her child or her abortion (see Chapter 10). She is asked questions regarding her personal habits, her physical well-being, her diet, her feelings, her relationships, etc. in the research and medical history-taking interviews. She is also incited by experts to render herself ‘true’ to her ‘nature’ through confession (commonly put as ‘communication’) to her parents and teachers (see Chapters 5, 7 and 10).

Truth, knowledge and power

Throughout his work, Foucault insisted that he was not propounding a theory of power. According to Foucault, power is only intelligible when set against particular historical and cultural practices. Foucault presented what he called an analytics of power - ‘a systematic analysis of technologies of power for which he claims a certain significance and generality’ (Dreyfus & Rabinow, 1982, p. 201).

Foucault dismissed the unidimensional juridico-discursive notion of power, which sees power as repressive. The repressive hypothesis posits, for example, that in European history there has been a move from relative openness about our bodies and sex to repression and hypocrisy, culminating in Victorian Europe and gradually diminishing in the latter half of this century. Foucault does not dispute that in the 18th and 19th centuries a controlled, guarded approach to sexuality followed one in which sex was largely an undifferentiated part of daily life. He argues, however, that these controls, with their various strategies and tactics, led to a dramatic, unprecedented rise in discussing, writing, and thinking about sex. There was ‘a regulated, and polymorphous incitement to discourse’ (Foucault, 1978, p. 34). As Foucault (1978) puts it, ‘What is peculiar to modern societies, in fact, is not that they consigned sex to a shadow existence, but that they dedicated themselves to speaking ad infinitum, while exploiting it as the secret’ (p. 35).
The repressive hypothesis views truth as fundamentally opposed to power. In other words, the truth about sexuality is hidden or repressed by power. This notion of power, which Foucault calls ‘juridico-discursive’, has various elements. It sees power as: possessed by an individual, class or group; centralised in the law, economy or the state; coercive and negative. Truth, thus, is liberating while power is repressive. Foucault counters this, saying that power ‘would be a fragile thing if ... it worked only through the mode of censorship, exclusion, blockage and repression’ (Foucault, 1980b, p. 59). He argues that, rather than repressing some metaphysical essential sexuality, the proliferation of discourse (‘an explosion of distinct discursivities which took form in demography, biology, medicine, psychiatry, psychology, ethics, pedagogy, and political criticism’ (Foucault, 1978, p. 33)) produces sexuality. The productive or constructive nature of discourse is an important aspect of Foucault’s work. Thus, for example, a Foucauldian would not ask ‘What is the true nature of the pregnant teenager?’, but rather ‘How has discourse constructed her as a subject?’.

Through his analysis of power, Foucault illustrates how power is not a possession which one group holds and another does not. His theorising turns around what is known as the power/knowledge nexus:

These power/knowledge relations are to be analyzed, therefore, not on the basis of a subject of knowledge who is or is not free in relation to the power system, but, on the contrary, the subject who knows, the objects to be known and the modalities of knowledge must be regarded as so many effects of these fundamental implications of power/knowledge and their historical formations (Foucault, 1977, p. 27/28).

Knowledge is not either ‘objective’ or ‘subjective’, ‘true’ or ‘false’. Instead, it is linked to power, with certain forms of knowledge, such as scientific ‘facts’, gaining precedence over others, such as teenagers’ ‘gossip’. While knowledge and power are not external to one another, they are also not reducible to one another. Instead, they operate in history in a mutually generative fashion.

Foucault emphasises that discourse links knowledge and power, and as such, power is not merely repressive, but actually productive of knowledge and subjectivity. Discourse has a dual character in that it is the mode through which the world of ‘reality’ emerges, but at the same time it restricts what can be known, said or experienced at any socio-historical moment. It is this duality
‘through which action and understanding are simultaneously enabled and constrained, that links knowledge to power’ (Young, 1987, p. 114). In this linking of power and knowledge, power becomes productive of subjectivity through the will to truth found in the confessional. As Parker (1989) puts it, the confessional ‘binds’ subjects into discourse.

Power, according to Foucault, is not exercised from the exterior, but rather is immanent to relationships such as economic processes, knowledge relationships, sexual relations, etc. Power is ‘exercised from innumerable points, in the interplay of non-egalitarian and mobile relations’ (Foucault, 1978, p. 94). However, power is ‘masked’ by the modern discourse which locates responsibility for action and intention within the individual. It is this masking that makes modern power tolerable. It is exercised ‘through its invisibility; at the same time it imposes on those whom it subjects a principle of compulsory visibility’ (Foucault, 1977, p. 187).

Foucault does not use the word power to mean disciplinary or repressive power only, but also liberatory power. He points out that power coexists with resistances to it. Resistance is both an element of the functioning of power and a source of its perpetual disorder (Dreyfus & Rabinow, 1982). Reverse or subjugated discourse seeks to subvert hegemonic discourses. Foucault (1980b) puts it as follows:

a whole set of knowledges ... have been disqualified as inadequate to their task or insufficiently elaborated: naive knowledges, located low down on the hierarchy, beneath the required level of cognition or scientificity. ... It is through the re-appearance of this knowledge, of these local popular knowledges, these disqualified knowledges, that criticism performs its work (p. 82).

These subjugated knowledges include those of the psychiatric patient, the hysterical, the midwife, the housewife, the teenage mother etc. Foucault does not see resistance as radical rupture or overt revolution. There is ‘no single locus of great Refusal, no soul of revolt’ (Foucault 1978, p. 96) but rather shifting points of resistance that ‘inflame certain parts of the body, certain moments in life’ (Foucault, 1978, p. 96). Importantly, Foucault does not define power as the overcoming of resistances. When resistances are overcome, power relations collapse into force relations and the limits of power have been reached.
Foucault does not see discourses as existing in simple bipolar positions of power and powerlessness. Power does not function as a chain; it is not localised in a particular institution or person; it cannot be appropriated as a commodity (Foucault, 1980b). Rather power is a ‘multiplicity of force relations’ (Foucault, 1978, p. 92) of which the discourses/knowledges are elements or blocks; it is ‘employed and exercised through a net-like organisation’ (Foucault, 1980b, p. 98). Power is thus never stable nor unitary, but rather in a constant state of flux and redefinition as discourses/knowledges compete for hegemony. Although Foucault states that we are all enmeshed in power relations, he is not suggesting that there is no domination. Power relations may be unequal and hierarchical, but no group controls these in any simple sense. Power is exercised on the dominant (e.g. the expert) as well as on the dominated (e.g. the pregnant teenager) (Dreyfus & Rabinow, 1982).

Foucault sees power as ‘both intentional and nonsubjective’ (Foucault, 1977, p. 99). Power has a series of aims and objectives and employs certain strategies, technologies and techniques to accomplish these. However, this does not mean that this is the result of a choice or decision on the part of an individual or group.

In his intermediary works, Foucault stressed the importance of formulating and studying the question of power relations in terms of ‘power at its extremities ... where it becomes capillary’ (Foucault, 1980b, p. 96), i.e. in the everyday lives, actions and processes of people. It is at this level that power ‘installs itself and produces real effects’ (Foucault, 1980b, p. 97). He gives an example of the process by which the bourgeoisie became the dominant political class in the eighteenth century:

The general juridical form that guaranteed a system of rights that were egalitarian in principle was supported by these tiny, everyday, physical mechanisms, by all those systems of micro-power that are essentially non-egalitarian and asymmetrical that we call the disciplines. (Foucault, 1977, p. 222).

Thus, the bourgeoisie were able to become the dominant class through the processes of micro-power operating in the everyday lives of people while at the same time the operation of power was masked by the juridical establishment of equality.
**Governmentality**

As mentioned earlier, Foucault introduced his lectures on governmentality partially as a result of the criticism that his work concentrated too closely on micro-power. In these lectures, Foucault attempts to ‘cut the Gordian knot of the relation between micro- and macro-levels of power’ (Dean, 1994a, p. 179) by applying the same type of analytic on the macro-level that he had earlier applied to the micropowers - one which emphasises practices of government. His earlier focus on disciplinary practices is subsumed under a more general concern for governmental practices.

Foucault used the terms government and governmentality in inter-related ways. He defined government as the ‘conduct of conduct’ (Gordon, 1991, p. 2) or, in other words, as an activity which aims to shape, guide or affect the behaviour, actions, comportment of people. This could concern the relation of the self with the self, private interpersonal relations which involve some sort of control or guidance, relations within social institutions, and relations concerned with the exercise of political sovereignty (Gordon, 1991). As Dean (1999) points out, the ‘conduct of conduct’ is ‘invariably evaluative and normative, i.e. [it] presume[s] a set of standards or norms of conduct by which actual behaviour can be judged, and which act as a kind of ideal towards which individuals and groups could strive’ (p. 10).

Foucault defined the term ‘governmentality’ as the rationality or art of government, which he explained as a way or system of knowing and thinking about the nature of the practice of government. As we saw in Chapter 1, Foucault (1991a) indicated that governmentality marks the emergence of a new form of thinking about and exercising power. He interconnected the development of the science of government with the re-centring of the economy on a different plane from that of the family, and the emergence of the problem of the population. Statistics revealed, firstly, that population has its own regularities (‘its own rate of deaths and diseases, its cycles of scarcity, etc.’ (Foucault, 1991a, p. 99)), secondly, that its effects (‘epidemics, endemic levels of mortality, ascending spirals of labour and wealth’ (Foucault, 1991a, p. 99)) are irreducible to the family, and, lastly, that population has specific economic effects. Statistics provided the means of quantifying these phenomena. In the words of Hacking (1991), ‘almost
no domain of human enquiry is left untouched by the events that I call the avalanche of numbers, the erosion of determinism and the taming of chance’ (p. 189). The family thus disappeared as a model of government, although it emerges as ‘an element internal to population, and as a fundamental instrument in its government’ (Foucault, 1991a, p. 99 - in Chapter 7, I explore how the familialisation of alliance is deployed as a tactic of governmentality). Population, its welfare, the improvement of its wealth and health, its capacity to wage war and engage in labour, etc. becomes the goal of government:

The population now represents more the end of government than the power of the sovereign; the population is the subject of needs, of aspiration, but it is also the object in the hands of the government, aware, vis-à-vis the government, of what it wants, but ignorant of what is being done to it ... [T]his is the new target and the fundamental instrument of the government of population: the birth of a new art, or at any rate of a range of absolutely new tactics and techniques (Foucault, 1991a, p. 100).

Governmentality is exercised through an ensemble formed by institutions, procedures, analyses, reflections, calculations and tactics, and has ‘as its essential technical means apparatuses of security’ (Foucault, 1991a, p. 102). Thus, it is a complex system, employing a variety of modes (institutions and calculations, analyses and tactics) to achieve particular ends. It is installed in the everyday lives of people through the apparatuses of security which Dean (1999) explains as ‘those institutions and practices concerned to defend, maintain and secure a national population and those that secure the economic, demographic and social processes that are found to exist within that population’ (p. 20).

Present forms of government have, according to Foucault, their roots in the disciplinary problems of utility and docility (discussed above), ancient Christian notions of pastorship, a reason of the state, the science of police and the advent of liberalism (Gordon, 1991), all of which will be briefly discussed below. The mechanisms of power in modern governmentality form a complex and irreducible ensemble of the rationality and techniques of sovereignty, security, discipline and government.

Pastoral power is a form of power which has Hebraic roots but which only reached its full elaboration in the early Christian writings (Dean, 1994a). On the one hand, the politician or
leader is represented as a shepherd who is accountable for all members of the pastorate; s/he gathers and guides the flock, ensures their salvation through his/her kindness, and is devoted to knowing the flock as a whole and in detail. On the other hand, obedience, self-control, personal submission, mortification and a renunciation of the self and the world by the flock are encouraged. It was through institutional Christianity that the notions of pastorship, the care of others, and a dynamics of self-decipherment and self-renunciation were fully developed. In Chapter 10, we see how pastoral techniques are deployed by service providers as a mechanism of security.

The science of police (Polizeiwissenschaft - the word ‘police’ is used in its archaic sense in the English language, as the condition of order of the community) was a set of theory, pedagogy and codification that developed in German territories after the 30 Years War (Gordon, 1991). It is attached to the mercantilist economic policy in that the aim was to maximise prosperity, which is equated with the happiness of the individual subject. It emphasises that the basis of the state’s wealth lies in its population, and thus police ‘sees to everything pertaining to man’s happiness’ (Foucault, cited in Gordon, 1991). Police is a science of endless lists and classifications: there is a police of religion, customs, health, food, highways, public order, sciences, commerce, servants, poverty, etc.. The science of police is a practical form of a political pastorate, a government for all people and each individual for the purposes of security and prosperity. Its attempts at order extended into people’s everyday lives, regulating manners, morals and the minutiae of existence (Dean, 1999). In Chapter 9, I explore how the depiction of pregnant teenagers as fracturing economised security and prosperity, firstly, allows for the close monitoring of their personal and familial functioning, and, secondly, positions the expert as the protector of the common good.

The emergence of the reason of the state during the classical period represented a break with the concept of government as directed by God’s law or the will of the prince. Government became a science, a techne, which was bound up with reinforcing the state as a natural object (Dean, 1999). It required a ‘knowledge, a political arithmetic or statistics of the forces of the state’ (Dean, 1994a, p. 184). It entailed a knowledge of detailed and continuous control deemed appropriate for an infinity of unforeseeable and contingent circumstances. Humans are of
interest to the extent that they contribute either positively or negatively to the state.

The advent of liberalism saw a transformation in the relationship between knowledge and government. Foucault characterises it as a critique of the reason of state, as 'a doctrine of limitation and wise restraint, designed to mature and educate state reason by displaying to it the intrinsic bounds of its power to know' (Gordon, 1991, p. 15). Society is seen as generating its own order and prosperity, as constituting a quasi-nature, in accordance to which the affairs of humans must be governed. Spheres such as 'civil society' or 'the economy' are construed as outside direct political authority, having natural forces and relations intrinsic to them that must be respected by the authorities (Dean, 1999). Furthermore, state action is limited with regard to political subjects, whose individual rights, desires and needs cannot be dictated to by governments. These rights and liberties are simultaneously external to liberal political authority and necessary for its operation. Liberal modes of government act on 'the governed as a locus of action and freedom' (Dean, 1999, p. 15). Freedom becomes a technical means of securing the ends of government through action, or the 'conduct or conduct', at a distance, and through the incitement to governmental self-formation.

Foucault contrasts the science of police and liberalism in terms of security, which he sees as a specific principle of political method and practice, distinct from law, sovereignty and discipline (although it is able to combine in various modes with these other practices). In the science of police, security is interwoven with a state of prosperity. For the science of police, prosperity and security ensure liberty. However, for liberalism, the converse is also true: liberty is a condition of security. The liberal task of setting into place forms of regulation that allow and facilitate natural regulation comprises 'the setting in place of mechanisms of security ... mechanisms or modes of state intervention whose function is to assure the security of those natural phenomena, economic processes and the intrinsic processes of population' (Gordon, 1991, p. 17). In Chapter 10, I explore how liberal humanistic techniques are utilised by service providers in the maintenance of reproductive health and welfare.

Foucault ascribes three general traits to the method of security. Firstly, it deals with series of possible and probable events; secondly, it evaluates through the calculation of comparative cost;
and thirdly, it prescribes ‘not by absolute binary demarcation between the permitted and the forbidden, but by the specification of an optimal mean within a tolerable bandwidth of variation’ (Gordon, 1991, p. 20). Sovereignty takes as it object territory, discipline the body of the individual, and security the ‘ensemble of the population’ (Gordon, 1991, p. 20). In Chapters 9 and 10, I analyse how these traits of security are deployed in the installment of the governmental tactics of familialisation, racialisation and the economisation of activities (discussed in Chapters 7, 8 and 9, respectively) in the everyday lives of teenagers and their families.

Foucault (1991a) contrasts sovereignty with government. The principle of sovereignty was to reinforce, strengthen, and protect the principality, and hence rule concentrated on territory. There was a singularity in the rule of the prince, and the purpose was circular: ‘the end of sovereignty is the exercise of sovereignty. The “good is obedience to the law, hence the good for sovereignty is that people should obey’ (Foucault, 1991a, p. 95). With government, on the other hand, it is a ‘complex composed of men [sic] and things’ (Foucault, 1991a, p. 93) that is governed (in our case, pregnant teenagers - as well as their non-pregnant counterparts - their bodies, their actions, their relationships, as well as the experts overseeing their health and welfare). The aim is to ‘dispose’ of things ‘to an end which is “convenient” for each of the things that are to be governed’ (Foucault, 1991a, p. 95). There are a multitude of specific aims, including wealth production, population growth or control, ensuring sufficient sustenance, etc.. Thus,

[W]ith government it is a question not of imposing law on men [sic], but of disposing things: that is to say, of employing tactics rather than laws, and even of using laws themselves as tactics - to arrange things in such a way that, through a certain number of means, such and such ends may be achieved (Foucault, 1991a, p. 95).

In ‘disposing of things’, regimes of government ‘elicit, promote, facilitate, foster and attribute various capacities, qualities and statuses to particular agents’ (Dean, 1999, p. 32). Governmental self-formation and self-regulation is invoked. This is not to say that government determines forms of subjectivity, but rather that government is successful to the extent that individuals come to experience themselves through the capacities, qualities and statuses attributed to them.

Sovereignty and disciplinary technology are not eliminated by the emergence of the science of government. Foucault puts forward a triad, sovereignty-discipline-government, which has as its primary target the population and as its essential mechanism the apparatuses of security. The
governmental tactics discussed in this thesis include the medicalisation, psychologisation, and pedagogisation of teenage pregnancy, the familisation of alliance, the conjugalisation of reproduction, racialisation, and the economisation of activity. The essential technical mechanisms of these governmental tactics are the technologies of security (pastoral techniques, liberal humanist techniques, and the incitement to governmental self-formation) deployed by health and welfare service providers.

Foucault sees modern governmental rationality as simultaneously individualising and totalising. It seeks to answer questions concerning the governability of the individual as well as society or the population of individuals. He calls this process the “daemonic” coupling of “city-game” [citizenship] and “shepherd-game” [pastorate]: the invention of a form of secular political pastorate which couples “individualization” and “totalization” (Gordon, 1991, p. 8).

Foucault’s work on governmentality is an answer, according to Gordon (1991), to those who sense in Discipline and Punish an elision of the question of the state. Governmentality is simultaneously internal and external to the state because it is the tactics of government which makes the continual redefinition of what is within the scope of the state and what is not (the public versus private) possible. A problematic of government asks how the state comes to act as a centre of other forms of government and how it enrols local relations and networks of power in its strategies (Dean, 1994a). Although it is in vain to look for the hand of the state everywhere pulling the strings of micro-disciplinary power, these largely privatized micro-power practices participate in a coherence of government. Foucault, in fact, talks of the ‘disciplinarization of the state’ (Gordon, 1991).

Rose (1989a; 1989b; 1990; 1992; 1996a) traces the links between governmentality and the discipline of psychology (the discipline which, together with medicine, accounts for most of the investigation and intervention strategies deployed with respect to teenage pregnancy). The science of police, with its three aspects of minimisation of lawbreaking, augmentation of prosperity, and the maximisation of public tranquillity and the qualities of individuals, allowed the space for the emergence of a discipline whose task was to collect information on the individuals to be governed (Rose, 1990). A positive knowledge was needed to analyse, evaluate,
diagnose and remedy those who were the object of government. It is through this that the apparently ‘public’ issue of rationalities of government is linked to the ‘private’ question of how one should behave, how one ‘conducts’ one’s own conduct. Rose (1992) links the psycho-sciences with liberalism’s rationality of government which sought ethical techniques which would simultaneously allow humans to conduct themselves as subjects of freedom and subjects of society. The psycho-sciences ‘have made it possible for us to dream that we can order our individual and collective existence according to a knowledge/technique that fuses truth and humanity, wisdom and practicality’ (Rose, 1992, p. 367). Durrheim and Foster (1999), for example, analyse how the expertise of the psy-sciences has been invoked in the political problematic of crowd management in the new liberal democracy of South Africa. Repressive practices of crowd control have been replaced by strategies which aim to ‘intensify the self-regulatory processes of crowds’ (Durrheim & Foster, 1999, p. 57). Rose (1992) indicates that there are three principle forms of connection between psychological expertise and liberal democratic government. These are: rationality (truthful knowledge and efficacious technique), private space (outside the formal scope of public powers), and autonomy (the construction of a regulated autonomy). Issues of security are installed at an individual level in the incentive to protect against risk, including not only contracting into insurance, but also lifestyle management (e.g. choices concerning what to eat and drink, stress management, exercise, foetal monitoring, etc.) (Rose, 1996a). The psych-sciences have outlined a range of people ‘at risk’ for various complaints, disorders and distresses. These are people who are potentially ‘incapable of exercising responsible self-government’ (Rose, 1996a, p. 347 - see Chapter 10 in which the management of ‘risk’ with respect to teenagers is discussed). The preventive programmes which are instituted in the name of decreasing risk form part of the strategies of security. Yet there is a paradox here, as normality, the inclusion in society is not defined by scientific knowledge of the ‘normal’, but of the ‘abnormal’. As Rose (1989a) points out with respect to children, ‘It is around pathological children - the troublesome, the recalcitrant, the delinquent - that conceptions of normality have taken shape’ (p. 131).

In a lecture entitled ‘Technologies of the self’, Foucault (1988) states:

This contact between the technologies of domination of others and those of the self I call governmentality. Perhaps I’ve insisted too much on the technology of domination and power. I am more and more interested in the interaction between oneself and others and
in the technologies of individual domination, the history of how an individual acts upon himself, in the technology of self (p. 17).

Thus, the relation of government and the governed depends on the manner in which governed individuals are willing to exist as subjects. On the one hand, the self-regulating capacities of subjects have become vital resources for governmentality, especially with regard to the notions of autonomy and self-fulfilment. On the other hand, the very practices of government may be subverted into technologies of resistance. It is to Foucault’s writings on the techniques of the self and resistance that I now turn.

**Resistance and techniques of the self**

In the first volume of *The History of Sexuality*, Foucault’s emphasis is on the normalising effects of bio-power and disciplinary domination. In his work subsequent to this, ‘The Subject and Power’ and volumes 2 and 3 of *The History of Sexuality* (*The Use of Pleasure* and *The Care of the Self*) he explores forms of resistance to dominant power relations, and what he call the ‘arts of existence’ or ‘techniques of the self’.

In ‘The Subject and Power’, Foucault (1982) proposes a ‘new economy of power relations’ in which the starting point is the forms of resistance to various forms of power. These forms of resistance have features in common, viz.: they are transversal, not being limited to particular countries, parties or economic forms; they struggle against power effects; they are ‘immediate’ struggles in that they focus on issues closest to hand; they question the status of the individual whether by asserting the right to be different or by criticising the separation of the individual from the community; they oppose the effects of power which are linked to knowledge; they are a refusal of abstractions which determine who one is. Foucault advocates this type of resistance as an antidote to our modern forms of power:

> Maybe the target nowadays is not to discover what we are but to refuse what we are. We have to imagine and to build up what we could be to get rid of this kind of political ‘double bind’, which is the simultaneous individualisation and totalisation of modern power structures. ... We have to promote new forms of subjectivity through the refusal of this kind of individuality which has been imposed on us for several centuries (Foucault, 1982, p. 785).
Foucault (1985, 1986) turns his attention to subjectivity in volumes 2 and 3 of *The History of Sexuality*. Although this thesis is not essentially about subjectivity, I include a brief section on Foucault's later writings on this topic for two reasons. The first is that in order to understand the interchange between feminists sympathetic to Foucault and those not, a working knowledge of Foucault's thoughts on subjectivity and its connection to resistance is necessary. The second reason is that while this thesis is about the governmentality of teenage pregnancy, I do not wish to suggest that the government of pregnant teenagers is without its resistances from either the teenager or the expert. An example of resistance on the part of teenagers is their refusal to return to the hospital for post-termination counselling.

Foucault (1985, 1986) writes about the 'arts of existence' or 'techniques of the self' employed in ancient Greek and Greco-Roman culture. By these phrases, he means:

> Those intentional and voluntary actions by which men [sic] not only set themselves rules of conduct, but also seek to transform themselves in their singular being, to make their life into an *oeuvre* that carries certain aesthetic values and meets certain stylistic criteria (Foucault, 1986, p. 10/11).

Foucault reviews the constitution of the practices of sexuality within a moral and ethical domain in antiquity. He traces the relationship of the self with the self, the formation of the self as a subject. He delineates the models proposed within ancient Greece for such a relationship, 'for self-reflection, self-knowledge, self-examination, for the decipherment of the self by oneself.' (Foucault, 1986, p. 29). He states that the group of practices of which he writes 'have been of unquestionable importance in our societies' (Foucault, 1986, p. 10). He regards his work as 'a chapter - one of the first chapters - of that general history of the "techniques of the self"' (Foucault, 1986, p. 11).

Foucault distinguishes the aesthetics of the self from the confessional elaborated upon in his earlier work:

> It was a factor constituting the mode of being of the moderate subject; it was not equivalent to an obligation for the subject to speak truthfully concerning himself. ... The relation to truth was a structural, instrumental, and ontological condition for establishing the individual as a moderate subject leading a life of moderation (Foucault, 1986, p. 89).
The aesthetics of the self led to a ‘stylisation of attitudes’ (Foucault, 1986, p. 92), and it was on the basis of these attitudes, rather than on acts of desire, that one was morally judged.

Foucault saw Greek ethics as free from normalising pressures. Although certain moral imperatives were laid out, there was ‘practice of liberty’ in the individual’s stylisation of his existence. It is these aesthetics of the self (an attitude of self critique and the exploration of new modes of subjectivity), he states, that should be adopted to overcome and resist the normalising tendencies of modern society.

Up to this point, I have explored Derrida’s and Foucault’s work as post-structuralism. The following issues have been examined: Derrida’s notions of difference and the absent trace, as well as his method of sous rature; Foucault’s writings on disciplinary technology, surveillance, bio-power, the confessional, truth, knowledge and power; his lectures on governmentality in which the insights on the working of micro-power were extended to power on the macro-level; his exploration of governmentality as the ‘employment of tactics rather than laws’ (Foucault, 1991a, p. 95), and as the complex and irreducible ensemble of the rationality and techniques of sovereignty, pastorship, discipline, liberalism, security, and the science of police; and his thoughts on techniques of the self and resistance. In the following section, I turn to the intersection of the Foucauldian and feminist discourses, indicating tensions and commonalities, and, finally, explicating the tenets of a post-structural feminism.

Foucault and feminism

Foucault himself never explored the relationship his work had with that of feminist writers, nor did he examine the implications of his work in gendered terms. When he commented on the women’s movement, it was in passing, as in this interview: ‘The real strength of the women’s movement is not that of having laid claim to the specificity of their sexuality and the rights pertaining to it, but that they have actually departed from the discourse conducted with the apparatuses of sexuality’ (Foucault, 1980c, p. 219). Some authors have criticised Foucault for his gender blindness and ‘covert androcentricity’ (Soper, 1993, p. 29). For example, he does not consider how the treatment of male and female prisoners differed and how these differences
related to dominant constructions of masculinity and femininity. While this may be true, what we should concentrate on, I believe, is the implications of Foucauldian discourse for feminism, rather than criticising Foucault for not embarking on a gendered project.

Foucauldian discourse has been received with varying degrees of enthusiasm within feminist circles. Some authors (e.g. Balbus, 1988; Di Leonardo, 1991; Hartsock, 1990) see a Foucauldian stance as incompatible with feminist theory, while others (e.g. Grimshaw, 1993; Hoy, 1988; McNay, 1992; Sawicki, 1988) advocate a positive relationship between Foucauldian discourse and feminism. And then there are those theorists (e.g. Burman, 1990) who stand between these two positions, stating that while post-structuralism offers useful insights and methods to feminists, it can also be dangerous. Some of the differences in response have to do with particular readings of Foucault, or with which period of his writing is focussed upon (Deveaux, 1994). As indicated earlier, Foucault’s thought developed and changed over the course of his career. Furthermore, his interviews, which he viewed very much as part of his work, focussed more specifically on the political nature of his work than did his books, which he saw as historical treatises. It appears, however, that until very recently, Foucault’s thoughts on governmentality have largely passed feminists by (see, for example, Ruhl, 1999). There is a concentration on his intermediary works on disciplinary technology and bio-power, his later works on resistance and techniques of the self, and his interviews. This is possibly because his lectures on governmentality were unpublished, and are available largely from secondary sources (Gordon, 1991, Dean, 1994a, 1994b, 1999). Further differences in response to Foucault have to do with the feminist position taken by the author concerned. There is, of course, a great diversity within the feminist tradition itself, with feminist writers engaging in healthy appraisal and criticism of each other’s work.

There are, however, some striking similarities between the broad fields of post-structuralism and feminism. Sawicki (1988, 1991) delineates the following points of convergence:

* a focus on sexuality as a key area of political struggle;
* an expansion of the political to include social domination;
* a critique of biological determinism, humanism, and the search for a scientific ‘truth’;
* a critical stance concerning human sciences insofar as they have participated in modern
forms of domination;
* an analysis of the politics of personal relations and everyday life.

McNay (1992) points to Foucauldian discourse’s ability to account for women’s participation in reproducing systems of domination despite conscious protests against specific forms of it, a concern that has been prevalent in feminist theorising for some time. Furthermore, the poststructuralist critique of the rational subject resonates with the feminist critique of rationality as an essentially masculine construct.

Criticisms and responses

There are two main charges against Foucauldian discourse, that of nihilism and that of relativism. Emerging from these epistemological concerns are two political arguments: (1) there is no space within Foucauldian discourse for emancipatory practice (Burman, 1990; Di Leonardo, 1991); and (2) the focus on micro-politics leaves overall structures of domination unanalysed (Alcoff, cited in Sawicki, 1991; Ramazanoglu & Holland, 1993). The latter concern indicates a lack of familiarity with Foucault’s work on governmentality (possibly unavailable to the authors at the time of writing, as the summary and comment on his lectures was published by Gordon only in 1991). These charges and concerns will be discussed below.

Foucauldian theory is seen as providing no morally evaluative or politically committed stance (Alcoff, cited in Sawicki, 1991; Balbus, 1988; Deveaux, 1994; Di Leonardo, 1991; Harding, 1990, 1992; Hartsock, 1990; Hawkesworth, 1989). Foucault is accused of being nihilistic as he does not provide criteria by which to judge either one regime of truth as superior to another, or societies or relations as better or worse than each other. This means that there is no standpoint from which to engage in emancipatory politics and nothing to strive for. Since power, in Foucauldian terms, is everywhere, it is ultimately nowhere, making it impossible to distinguish between malign and benign forms of power. Short of abolishing modern society altogether, social improvement is impossible, as successful resistance means simply changing one discursive identity for another, thus creating new oppressions. Foucauldian discourse risks sliding into depoliticised relativism where every viewpoint becomes equally valid and true. Although Foucault’s critiques and insights into dominant patriarchal forms are seen as valuable, critics
point out that there is no indication of what action follows from the analysis. There is no normative or theoretical basis for making political judgements or statements. Hawkesworth (1989) puts it in this way:

At the moment when the preponderance of rational and moral argument sustains prescriptions for women’s equality, it is a bit too cruel a conclusion and too reactionary a political agenda to accept that reason is impotent, that equality is impossible. ... In a world of radical inequality, relativist resignation reinforces the status quo (p. 557).

Defenders of Foucauldian discourse respond to the above criticisms in a number of ways. It is true that Foucault was reluctant to delineate a clear-cut political agenda because of his sense of the dangers of programmes based on grand theory. However, his writings were clearly political, and he did make certain value judgements (Grimshaw, 1993; Hoy, 1988). For example, he suggests that we would be better off without the modern obsession of classifying people according to their sexual preferences and using distinctions such as that between normal and deviant. The claim to be ‘better off’ need not entail, however, an appeal to a sexual utopia (Hoy, 1988). In Foucauldian discourse, determining the liberatory status of any discourse is a matter of historical inquiry, not theoretical or political pronouncement (Sawicki, 1988). For example, Foucault observes that psychoanalysis played a liberating role in relation to psychiatry, but as a global theory it has contributed to forms of social control and normalisation. Grimshaw (1993) further notes that the criticism that Foucault does not outline a political project depends on the view that it is possible to clearly distinguish the ‘deconstructive’ from the ‘reconstructive’ project.

Foucault’s most political statements are those centring on resistance. He insists on the multiplicity of the sources of resistance and refuses to privilege any one as more revolutionary or universal than another (Balbus, 1988). Liberation, thus, is not seen as transcendence or global transformation, but rather as a freeing from the assumption that prevailing ways of understanding ourselves and others are necessary and self-evident (see above discussion on Foucault’s article ‘The subject and power’). Through the retrieval of subjugated knowledge one establishes a knowledge of resistance and struggle. Foucault is committed to the possibility that these resistances might eventually combine to create a new (non-disciplinary) form of power and thus a ‘new politics of Truth’ (Balbus, 1988, p.145). This form of politics will be subject to changing
interests and fragmented and partial identities.

Political analysis and criticism have in a large measure still to be invented - so too have the strategies which will make it possible to modify the relations of force, to co-ordinate them in such a way that such a modification is possible and can be inscribed in reality. That is to say, the problem is not so much that of defining a political 'position' (which is to choose from a pre-existing set of possibilities) but to imagine and to bring into being new schemas of politicisation (Foucault, 1980a, p.160).

Foucault's writings contain within them the seeds of subversion, as evidenced in his illustration of the relationship between knowledge and power:

I believe too much in truth not to suppose that there are different truths and different ways of speaking the truth ... we can demand of those who govern us a certain truth as to their ultimate aims, the general choices of their tactics, and a number of particular points in their programs: this is parrhesia (free speech) of the governed, who can and must question those who govern them in the name of the knowledge, the experience they have, of what those who govern do (Foucault, 1988, cited in Cain, 1993, p. 73).

Foucault thus recognises that for oppositional discourse to be effective, it can strategically deploy the notion of truth in order to break down the dominance of official or received truths; this creates a fluid space within which alternative truths can be articulated (McNay, 1992).

McNay (1992) feels that, despite Foucault's assertions about resistance, his idea remains theoretically undeveloped in his earlier works; his historical studies give the impression that the docile body presents no actual material resistance to the operations of power. Sawicki (1991) and Hartsock (1990) see the notion of resistance as inadequate for another reason: refusal may be enough for a white male like Foucault, but subjugated peoples have to build and create discourses and practices which are not yet there.

McNay (1992) believes that Foucault's elucidation of practices of the self in his final works (which, she believes, should be seen as a modification of his previous intellectual concerns rather than a refutation thereof) goes some way to overcoming this problem. He complements his earlier analysis of technologies of domination with an analysis of technologies of subjectification. Some feminists, however, find Foucault's conception of the care and ethics of the self disappointing for feminism (Grimshaw, 1993; Soper, 1993). Greek morality, they argue, was elitist; it could only be engaged in by a privileged few who did not have to face political and material constraints. Foucault sees liberation too much in terms of how individuals can create
themselves, thus encouraging an identity politics as a privilege for a minority. However, Foucault was clear that he was not intending the model of morality in antiquity to be taken as an exemplar for ourselves. His last works were rather a ‘genealogy of the desiring subject’ (Ramazanoglu, 1993, p. 62), in which he explored the practices by which individuals were led to acknowledge themselves as subjects and to focus attention on relations of the self. In these works Foucault allows more scope for self-mastery, self-transformation and individual agency.

Turning to Foucault’s normative stand, Fraser (1989) provides us with various possibilities. It could be possible that he is attempting a value-neutral account of modern power. However, given the politically engaged nature of his writing (not to mention his living), this seems unlikely. Thus, either he has educed some normative framework other than the suspended one, or he has disposed with the need for a normative framework by which to guide political practice. It is unclear from his writing which one of these options is most likely. At times he appears to have suspended all liberal norms, at times only some of them, and at others, to actually be presupposing them.

Fraser (1989) and Sawicki (1988) believe that Foucault’s work does not bracket off all normative frameworks, only the liberal one. If there were no normative framework, what would be the point of the resistance which Foucault advocates? Why would struggle be preferable to submission? Fraser (1981, cited in Hekman, 1990) posits that Foucault’s work is compatible with values of autonomy, reciprocity, mutual recognition and human dignity. Ramazanoglu (1993) believes that Foucault did not free himself from all Enlightenment assumptions, while McNay (1992) posits that his retention of some notion of the ‘autonomous self’ and ‘self determination’ shows his intention to rework, rather than reject, central Enlightenment values. Foucault’s idea of the ethics of the self, they argue, contains a utopian moment as he envisages a way of resisting the government of individualisation and a way of working towards new forms of self-expression. Fraser (1989) and McNay (1992) indicate that, while Foucault accuses humanism of complicity with disciplinary techniques of power, his argument assumes familiarity on the part of the reader with humanist values.
Hekman (1990) takes issue with the above interpretations of Foucault's work. She believes that the attempt to fit Foucault's work into epistemological categories that he rejects is backward-looking, and undermines the radical nature of Foucault's work. It also denies two Foucauldian principles, that: (1) resistance can be formulated without a meta-critique of power (although, as we have seen, Foucault did go on to analyse power at the macro-level, but in a manner that linked the macro-strategies of power with the micro-strategies); and (2) subjectivity and agency can be discussed without reference to a Cartesian constituting subject.

Turning to the issue of relativism, those writers who accuse Foucault of relativism do so from its modernist definition (Hekman, 1990; Lather, 1992). Poststructuralism and structuralism do not share the same definition of relativism. For the structuralist, relativism is an evil to be avoided at all costs, as this means giving up all notions of truth/falsity and rationality. The notion of relativity assumes a foundational structure or Archimedean standpoint (Lather, 1992). From a poststructuralist perspective, the definition of knowledge as absolute or relative is misconceived. While a Foucauldian would reject a search for absolute grounding, s/he would not do so by reversing the binary opposition and advocating relativity. Instead, knowledge is seen as contextual and historical; the absolute/relative opposition is collapsed.

Turning to the concern that the focus on micro-politics leaves overall structures of domination unanalysed, it is true that Foucault initially concentrated on micro-strategies and power at its capillary points. However, he did not deny that these are taken up in ‘global or macrostrategies of domination’ (Foucault, 1980a, p. 158), and he later extended his analysis of micro-power to the level of macro-power in his lectures on governmentality. The implication of his work is that the fact that power is not held by anyone does not mean that people and groups are positioned equally within it. While men cease to be constructed as ‘the enemy’ and their enmeshment in patriarchal culture can be acknowledged by a Foucauldian model, this does not mitigate the fact that they often may have a higher stake in maintaining institutions within which they have historically occupied dominant positions (Bordo, 1993). A Foucauldian feminist would not resist the empirical claim that male domination has appeared in almost all societies; s/he would not desist from the naming of patriarchy. What s/he would object to is the attempt to deduce this from a general theory and to privilege one site of resistance. S/he would stress the variety of
ways in which effects of male domination are produced and gendered identities are constituted.

**Post-structural Foucauldian feminism**

Feminist authors amenable to Foucauldian discourse have examined the implications of his insights in terms of practice and theory. Bailey (1993) argues that the Foucauldian project has self-proclaimed boundaries, and that genealogical work should be accepted within these boundaries. Grimshaw (1993) stresses that Foucault sometimes saw his own writing as a ‘tool box’ from which the tools might be bent and distorted in ways not envisaged by their creator. Whether the tools are useful or not depends on the job for which one wishes to use them. This allows feminists to utilise Foucauldian discourse in particularly feminist ways. Di Leonardo (1991) sees poststructuralism as a research stance; the intellectual frame within which the research is oriented will derive from outside poststructuralism. Mann (1994) talks of postfeminism, the postmodern offspring of feminism; postfeminism concentrates on micro-politics with the aim of altering the fabric of relationships between men and women and achieving a redistribution of dimensions of sexual (and other) agency.

Fraser & Nicholson (1990) discuss the requirements of the development of poststructuralist feminism. Firstly, there must be a recognition that poststructural critique need forswear neither large historical narratives nor analyses of societal macrostructures (e.g. sexism). However, theory must be historical and attuned to the ‘cultural’ and group specificity (Foucault’s work on governmentality, which is not referred to by Fraser and Nicholson, fits this requirement most aptly). Secondly, poststructuralist feminist theory would be non-universalist. Cross-cultural studies become comparativist rather than universalising. Thirdly, it would do away with the notion of a subject of history. Unitary notions of gender identity are replaced with plural and complexly constructed conceptions of social identity.

The implication of this in terms of feminist political practice is that such practice becomes a matter of alliances rather than one of unity around a universally shared interest (Allen & Baber, 1992). We would more rightly talk of the practice of feminisms. Within this politics of difference, the aim is not to overcome differences in order to achieve a political unity, but rather
to use difference as a resource around which to establish multiple points of resistance to the myriad of relations of inequality and domination (McNay, 1992). Foucauldian feminism would take ‘strategically located strikes at power’s most vulnerable places’ (Grosz, 1990, p. 92). Sawicki (1991) sees this as an effort to develop what she calls a radically pluralist feminism. This is distinct from liberal pluralism as it: (1) operates with a dynamic, plural, relational model of identity formed in a context of power relations; (2) utilises an expanded sense of the political, to include personal and social relations as well as theory; and (3) challenges hegemonic power structures based on a form of incrementalism in which the distinction between reform and revolution is collapsed. It is radical because it introduces radically new questions and problems concerning prevailing ways of understanding ourselves which continue to dominate our thinking.

Sawicki (1991) insists that pluralism need not collapse into something in which anything goes. On the basis of specific theoretical analyses of particular struggles one can make generalisations, identify patterns in power relations and the effectiveness of various strategies. Theory and moral judgements are geared to specific contexts.

A post-structural approach has been utilised by South African feminist writers (e.g. most notably Levett, 1989a, 1989b on child sexual abuse and Wilbraham, 1996a, 1996b on advice columns) with incisive effect. I argue, as with other writers (McNay, 1992; Sawicki, 1991) that the radically plural feminisms outlined above resonate with calls from African, other ‘third world’ and ‘minority’ feminists for an overhaul of ‘Western’ feminism. Authors criticise ‘Western’ feminism for its privileging of middle class, ‘white’, urban concerns (Brydon & Chant, 1989; Roberts, 1984). Differences among women are ignored, and the differential impact on women of classism, racism and heterosexism is overlooked. Women are viewed as a single oppressed class across space and time. To some extent this has to do with the methodological legacies which feminist scholars inadvertently took over from their teachers, viz. attempts, which have their origin in the Enlightenment, to reveal general, all-encompassing principles which can lay bare the basic features of natural and social reality (Nicholson, 1990).

Unlike Western (mostly ‘white’, middle-class) feminisms, which have been explored in great detail over the last few decades, documents of African and South African women’s engagement with feminism are in short supply. There is a large body of work on ‘women in developing
countries', but this does not necessarily engage feminist issues (Mohanty, 1991) [while I acknowledge that the term feminism has been questioned by many ‘non-Western’ women on the grounds of cultural imperialism, I follow Mohanty (1991) in retaining the term, as South African women have always engaged with feminism, even if the label has been rejected in a number of instances]. I believe that the above-outlined radically plural feminisms counters the concern of some authors (e.g. Hartsock, 1990) that a Foucauldian approach overshadows the efforts of ‘third world’ and minority cultures to establish their own identities and literatures as oppositional to the hegemonic influences of patriarchal and imperialist capitalism. Ultimately, of course, the radical nature of the Foucauldian endeavour must be judged on the basis of the effects it produces.

In this thesis I have employed a radically plural feminist post-structuralist approach which combines the insights of Foucault (in particular on governmentality) and Derrida (in particular on the absent trace). It is radical in that I have attempted to undermine the dominant ways of understanding and thinking about teenage pregnancy and its effects. The questions asked and the problems posed are new to the field of teenage pregnancy (with the exception of Arney and Bergen’s (1984) work). The focus on South African research, literature and service provider practices brings a certain amount of contextual specificity and hence pluralism to my feminist analysis of the material. However, readers familiar with the international literature on teenage pregnancy will be able to identify points of convergence between my analysis of the South African literature and professional practice and what is happening in other regions of the world (see, for example, Chapter 8 in which the generalisability and specificity of the process of racialisation in the South African literature is discussed - for readers unfamiliar with the ‘international’ literature on teenage pregnancy a short preview is provided in the following chapter). My utilisation of the insights of Foucault and Derrida is constantly infused with a feminist project in which gendered relations and gendered power effects are illuminated and dissected.
**Conclusion**

Research conducted on teenage pregnancy has essentially proceeded from modernist or structuralist assumptions. This is evident in mainstream writings which view teenage pregnancy as deleterious in various ways as well as in the revisionist literature which attempts to counter these accepted views. The individual is seen as bounded, essentialised and unitary; society and its effects are treated as historically and culturally isolated; rational discourse and correct scientific method are believed to increase knowledge of the pregnant teenager, leading us to the discovery of universal properties, principles and laws; this empirically grounded knowledge is viewed as providing the basis for prediction and recommendations concerning 'solutions'. The post-structuralist feminist approach allows for a different set of questions to be asked concerning teenage pregnancy, and for different set of 'conclusions' to be drawn.

In this chapter, I have broadly outlined a post-structuralist Foucauldian feminist theoretical approach. Language is of pivotal importance in this framework as it is seen as maintaining, modifying and constructing shared meaning. Derrida’s conceptualisation of *différance*, in which the present is always already absent, different and deferred, allows for deconstruction of the binary oppositions created in structuralist language.

I have traced Foucault’s work from his early archaeologies through to his genealogies and final emphasis on the ‘aesthetics of the self’. Two of Foucault’s major contributions are his account of the power/knowledge nexus and his analysis of the technologies and tactics of governmentality. He offers the interconnected concepts of disciplinary technology, bio-power, the confession and the repressive hypothesis as an analytics of power. While Foucault sees power as productive of knowledge and subjectivity, he also speaks of liberatory power and resistances to dominant hegemonic discursive formations. This aspect is developed further in his last works on the subject and power, and the practices of care of the self. Foucault initially emphasised studying power in its capillary form, in the everyday lives and actions of people. This did not mean, however, that he did not acknowledge macro-strategies of domination such as patriarchy. In his work on governmentality, he applied his analytics of power on macro-level, dissecting the practices of government.
Foucault used the terms government and governmentality as the ‘conduct of conduct’ (Gordon, 1991, p. 2), and as the rationality or art of government (the system of knowing and thinking about the nature of the practice of government) respectively. Present forms of government have their roots in disciplinary technology, pastorship, reason of the state, the science of police and the advent of liberalism. Governmentality is a ‘complex composed of men [sic] and things’ (Foucault, 1991a, p. 93), and is about ‘employing tactics rather than laws’ (Foucault, 1991a, p. 95). In this thesis, I trace the deployment of governmental tactics (medicalisation, psychologisation, pedagogisation, familialisation of alliance, conjugalisation of reproduction, racialisation, and the economisation of activity) and the technologies of security with regard to teenagers, their reproductive capacities and their sexuality.

Despite there being commonalities between Foucauldian discourse and feminism, Foucault’s work has been received with varying degrees of enthusiasm in feminist circles. He is accused by critics of nihilism and relativism, allowing no space for emancipatory practice, and leaving overall structures of domination untheorised. Defenders of a Foucauldian stance point out that Foucault’s writings were clearly political and that the liberatory status of any discourse is a matter of historical enquiry, not theoretical or political pronouncement. Foucault’s writings on resistance, the retrieval of subjugated knowledge, and the relationship between knowledge and power and governmentality contain within them the seeds of subversion of prevailing ways of understanding ourselves. His final work allows more space for self-transformation and individual agency, thus moving beyond the docile body on which dominant discourses are inscribed. The accusation of relativity is made from a modernist definition thereof, whereas within Foucauldian discourse the absolute/relative opposition is collapsed.

Foucauldian feminism offers up what Sawicki (1988, 1991) calls radically plural feminisms. This approach provides an intellectual framework and a ‘tool box’ from which to understand the constitution of gendered subjects, power/knowledge relations and governmentality. It is non-universalising, comparativist, historically and culturally attuned; it replaces unitary notions of gender with complex, plural conceptions of social identity. Political practice becomes a matter of alliances in which multiple points of resistance are established. This framework, I argue, contrary to Hartsock (1990), resonates with emerging concerns expressed by ‘third world’ and
minority women concerning ‘Western’ feminism; it allows for specific localised resistances which do not appeal to some essentialised, universal notion of gendered subjectivity while at the same time forecoming atomised political action. My aim in this thesis is to utilise a radically plural post-structuralist feminism in order to cleave open the somewhat bounded field of expert thought and practice concerning teenage pregnancy, indicating how: (1) what is said regarding the pregnant teenager is systematically related to what is not said; (2) the discourses of scientific endeavour and professional practice are implicated in governing the teenager, her sexuality and reproduction; and (3) the governmental tactics deployed have specified gendered, racial and class effects.

In the following chapter, I continue to provide the reader with the backdrop against which this thesis is etched. In the present chapter, the theoretical framework which grounded the analysis was explicated, while in the following one the (con)textual background is discussed. Two broad discursive fields (South African political practices and laws, and the international literature on teenage pregnancy) are briefly explored so as to orientate the reader to the major (con)texts within which the practices of scientific investigation and service provision take place.
CHAPTER 3
THE (CON)TEXTUAL BACKDROP: SOUTH AFRICAN POLITICS AND THE INTERNATIONAL LITERATURE

The research and service provider practices surrounding teenage pregnancy in South Africa are intricately interwoven with broader discourses and practices. This chapter is about highlighting two of these discursive fields, viz. (1) the broader political practices and laws, and (2) the international anglophone research literature emanating chiefly from the United States and Britain. The purpose of this is to situate the research conducted within its (con)textual (see chapter 4 for a discussion on the collapsing of the distinction between context and text) backdrop. I do not intend to suggest that there is a one-to-one correspondence between the South African political climate or the international literature and the South African research and service provider practices, or even that one ‘influenced’ the other. Rather, I submit that local political and international research practices and discourses provide some of the conditions of possibility for the emergence of practices of knowledge and health and welfare production and governmental tactics regarding teenage pregnancy found in South Africa. Burman, Kottler, Levett & Parker (1997) point out, for instance, with regard to social science research, that ‘systems of invisible imperialism are ... played out in academic and intellectual life. Certain ways of understanding and approaching things have been established through global hegemonies of knowledge’ (p. 6).

The aim of this chapter is not to provide an exhaustive review of the international research nor to give a consummate picture of South African political life, both of which are impossible tasks given the space constraints. Rather, I wish, firstly, to highlight some pertinent points in the political landscape (these being the implication of expertise in the ‘reform’ process of the 1980s, the treatment of adolescent sexuality by the Committee on Youth Affairs of the President’s Council, and some official definitions around race, the child and the family) and, secondly, to
illustrate the major trends appearing in the literature (these being research that centres on (1) the consequences and (2) the causes of teenage pregnancy). I am not engaging at this point in the serious business of post-structural analysis. The literature review, for example, is somewhat ‘traditional’ with the goal of orientating the reader to, and situating the South African literature (which forms the data upon which the post-structuralist analysis will be performed) within, the general field of teenage pregnancy. I do use the opportunity, however, to signpost linkages between the local political scene and international literature and the analysis which proceeds in later chapters.

The political (con)text

South African interest and research in teenage pregnancy surfaced in the late 1970s, early 1980s. There has been a steady increase in interest, with a plethora of research projects being undertaken in the late 1980s, early 1990s. This section is about outlining, in brief, some of the major political practices of the 1980s and early 1990s, which is the period in which the majority of studies used as data in this thesis were undertaken.

Apartheid saw its official demise in the 1994 elections. But as Burman et al. (1997) note ‘the pervasive notions of self, Other and legitimacy that saturate racist ideas and behaviour will long outlive the dismantling of apartheid’ (p. 5). Apartheid practice, although evolving out of the structures of segregation established during the course of colonial settlement and conquest, introduced new features which were unique to South Africa. It changed over time, and employed multiple modes of rule, the aim of which was to avert fundamental change. Incremental modifications in the status quo were introduced as a defensive strategy, and repressive measures were balanced by shows of humanitarian care (see, for example, Ashforth’s (1990) analysis of Commissions of Inquiry regarding the ‘Native Question’ from 1903 to 1981).

In viewing the practices employed to ensure the continuance of Apartheid, one is struck by the diversity of approaches devised and implemented. In the forced removals, detention without trial, police torture, the banning of liberation organisations, the imposition of states of emergency during times of unrest, influx control, etc., one sees the operation of a sovereign-type power,
where any opposition to the ‘king’, in the form of the Apartheid regime, was met with the activation of the ‘king’s’ power on the bodies of the perpetrators. Pastoral power was evidenced in the embodiment of Christian National Education, a practice of education based on the philosophy of Fundamental Pedagogy which defines education as the process of the child being accompanied into adulthood by the adult as educator (see Macleod, 1995). The method of security was deployed through, for example, the concern with the population growth and the influence of this on economic prosperity, and the implementation of a population development programme. Disciplinary technology, in which people were monitored, surveyed, normalised, and, in the final instance, incited to be true to their natures, was deployed through, for example, the burgeoning social and educational research programmes, the introduction of the subject Guidance into ‘black’ schools in 1981, the continued establishment of counselling centres and health clinics, etc.. A quasi-liberalism, in the form of humanitarian concern, was evidenced in the operation of the development corporations established in the various homelands, the aim of which was community upliftment and development.

An example of Apartheid policy is evidenced in the field of health. In addition to the various ‘homeland’ health authorities, five separate bodies were responsible for health during the tricameral parliament era - the ‘white’, ‘coloured’, and ‘Asian’ Houses of Parliament, ‘African’ local authorities and, under General Affairs, the ‘white’ House of Assembly in Parliament (Molteno, Kibel & Roberts, 1986). Services were fragmented with the Department of National Health and Population Development providing community services, provincial authorities providing curative services, and local authorities, where they existed, providing preventive and promotive services. Although various levels of service were envisaged, from the provision of safe water, adequate sanitation, housing and nutrition for all people through to specialist curative services, the health structure was geared to meet the needs of the urban, middle-class, predominantly ‘white’ population (Abels, 1991). In post-’94 South Africa, the health authorities are struggling with the integration of the various former departments, and with shifting the emphasis of care from urban-based curative services to a district health systems model, with an integration of functions, and a greater emphasis on community health centres and the provision of basic services.
In Chapter 10, I analyse the discourses of service providers at a regional hospital in South Africa. This hospital is based in a town in the province of Kwa-Zulu-Natal. Previously, it was administered by the Natal Provincial Administration (NPA), and hence was reserved for use by ‘white’ patients. In the nearby township, there is another hospital which, during Apartheid, was reserved for ‘black’ patients. ‘Coloured’ and ‘Indian’ people had no Group Areas zoning in the region, and therefore there were no health facilities specifically allocated to them, although they were admitted on occasion to the township hospital. Presently, both hospitals are ‘racially’ integrated, although the majority of patients at both are ‘black’. Middle-class people of all ‘races’ tend to make use of the burgeoning private health system (two private hospitals have been built in the area over the last 10 years). Health care functions are split between the two hospitals, with sexuality and reproductive services being based at the first hospital mentioned (which is still called the NPA hospital by most people in the area). This hospital is termed a regional hospital, servicing an area stretching from the Mozambique border in the North, the Thukela River in the South, the Indian Ocean in the East and the Umfolozi River and Melmoth in the West. Six local hospitals refer patients to it for specialist services.

The dominant official political discourse in the post-'94 South Africa is one of transformation and reconciliation, while in the 1980s it was reform. During the rule of P W Botha, a programme of ‘reform from above’ (Stadler, 1987, p. 2) was instituted. These reforms were partially intended to replace racial criteria with market principles in determining access to resources and opportunities in a capitalist social order. This allowed for the creation of a stratum of urban middle-class ‘black’ people, who were subtly co-opted into the fundamental functioning of the Apartheid system. The object of the reform movement was not to eliminate Apartheid, but rather to modify and liberalise it, through, for example, the replacement of influx control with ‘controlled urbanisation’ (Stadler, 1987, p. 5). The ‘reform from above’ went through various phases culminating in the establishment of the tricameral parliament.

The reform movement utilised various technologies at its disposal, of which commissions of inquiry, particularly those headed by experts, was a favourite (Ashforth, 1990; Stadler, 1987). There was a shift in control by coercion to the ‘scientific’ management of problems. This coincided with the restructuring of the Human Sciences Research Council (HSRC - the body
which controlled most government funding for social science research both within and outside universities in South Africa) in the late 1970s, early 1980s as an instrument of reform. Prior to this, research from the HSRC was largely commissioned by the government or the National Party (N.P.), and it (the HSRC) was seen as being accountable to them only. The year 1979 saw the formulation of the South African Plan for Social Science Research. The trend in the HSRC shifted from ‘political’ to ‘academic’ work with the introduction of peer review of grant applications and research report submissions (Cloete & Muller, 1991), but the HSRC struggled to shake off its image as the source N.P. expertise.

In the reform process, the expert became important in two respects (Cloete & Muller, 1991). The first was to provide experimental or scientific evidence that the programme being espoused by the politicians was better than any other put forward. It allowed authorities to ‘speak properly of the name [of a problem], accurately of the cause (or of the collated causes) and responsibly of the solution’ (Ashforth, 1990, p. 4). This relied, to some extent, on the selection of certain evidence, and the suppression of contrary evidence (Cloete & Muller, 1991). The second function played by experts was to provide political leadership with the opportunity of demonstrating their interest in reform, in that research would need to be commissioned in order to get to the ‘truth’ of the matter. This, furthermore, allowed for a waiting period in which political decisions could be delayed and opposition worn out. The following section illustrates how expertise was invoked as a legitimating strategy in political debate.

**Population growth and expertise in a parliamentary debate**

Teenage pregnancy is problematised in South Africa for, amongst other things, its contribution to population growth. An attempt at population control was a strong feature of the previous government, and the euphemistically named ‘population development programme’ was established with the aim of reducing the number of births, in particular to ‘black’ women.

The following quotes from the parliamentary debate (House of Assembly) on ‘Combatting of population growth’ on 24 March 1992 illustrate some of the issues connected with population growth, as well as the implication of expertise in political discourse. Research, studies, science,
or medical expertise are elicited in support of an argument no less than 6 times in this one debate. The mention of Dr Pohl de Villiers (quote 3) is significant as he has conducted research on teenage pregnancy and written rather forthrightly on the issue (for example, referring to it as ‘this teenage catastrophe’ (De Villiers, 1991, p. 231)):

1. \textit{Research} has demonstrated that the pressure of the population has brought South Africa face to face with serious realities in various spheres of life, such as education, infrastructure, housing, employment matters and the provision of food (T. Gunning, National Party, Hansard, 1992, col 2783, my emphasis).

2. If the population development programme were to achieve its programme objectives in comparison with the natural trend in terms of the fertility rates, literacy, teenage pregnancies and the use of contraceptives, according to a study undertaken by the department, over the next 20 years, at an amount of R1 500 per child per year for education alone, it will be possible to effect a saving of R85 000 million in present monetary values over a period of seven years (G.J. Malherbe, National Party, Hansard 1992, col 2787, my emphasis).

3. I want to talk about a man who is working towards the promotion of a higher quality of life for people with inspiration and dedication, namely Dr Pohl de Villiers of Paarl. As a result of this enthusiastic group, Paarl is in the forefront with regard to sterilisation. More sterilisations are carried out here annually than in our largest hospitals. [Interjections]. Over a period of 20 years a total of 12 000 sterilisations have been carried out in Paarl alone. ... If we were to calculate this in monetary terms, Paarl alone has saved our country R6 billion (G.J. Malherbe, National Party, Hansard, 1992, col 2787, my emphasis).

4. [T]hey [the Rural Foundation] promote balanced community life in rural areas with the greatest degree of community involvement, self-sufficiency ... [Interjections] ... and utilisation of resources. ... \textit{Studies} in the Eastern Cape carried out by the [Rural] Foundation show that teenage pregnancies remained the same between 1986 and 1990 but that in contrast contraception fortunately increased from 46% to 70% (G.J. Malherbe, National Party, Hansard, 1992, col 2789, my emphasis).

5. I am going to quote a source to hon members, the \textit{SA Medical Journal}, which appeared in January. Dr B D Schau, of the National Institute for Virology in Johannesburg, said in the journal of 18 January that the projected figure for HIV-infected persons was 446 000 by the beginning of 1992. ... [O]ne thing is obvious, and that is that the population growth in this country is also going to decline until it reaches a plateau, as has already happened in countries to the north of us (W.J. Snyman, Conservative Party, Hansard, 1992, col 2801).

6. \textit{Scientifically}, however, it has been demonstrated that where there is higher development, when people are therefore economically better off, they have fewer children (S.J. Schoeman, Deputy Minister of National Health, Hansard, 1992, col 2806, my
The connection of population growth with economised security is made repeatedly in this debate. The population development programme and sterilisations are portrayed as saving the country millions of rands, while the increase in population brings with it problems of unemployment, difficulties with the provision of food, etc. Teenage pregnancy is seen as a natural but unacceptable trend which must be combatted by means of the population development programme. Experts (in some cases the very ones who are vociferous in terms of teenage pregnancy), who are lauded as inspired, dedicated, or involving the community, are invoked to legitimate arguments concerning the disaster of population growth (or, contrarily, that there is no disaster given the AIDS ‘epidemic’), the need for technologies such as sterilisation to curb the increase in the population, and the importance of economic development. These excerpts illustrate how scientific investigation and expertise are utilised to support or refute particular political positions, and how dominant discourses regarding issues such as population growth circulate in different discursive environments (in this case scientific and professional forums, and political debate) in a mutually generative fashion. In the following section, one of these dominant discourses, viz. the nature of adolescent sexuality, is highlighted with respect to its treatment in an official government document.

Adolescent sexuality and the President’s Council

The President’s Council was a body established in 1981 to formulate a new constitutional dispensation. Although dominated by Nationalists, it also included commercial, industrial and professional persons outside of party and parliamentary life, as well as ‘Indian’ and ‘coloured’ members. De Villiers (1985) - the same Dr Pohl de Villiers mentioned above - bemoans the fact that the science committee of the President’s Council which studied the demographic tendencies in South Africa did not consider teenage pregnancy. He suggests that ‘Die demografiese gevolge van hulle ongehinderde voortplanting regverdig miskien ‘n verdere ondersoek deur ons Presidentsraad [The demographic consequences of their unchecked breeding probably justifies a further investigation by our President’s Council]’ (p. 302).
Where the President’s Council does, to a certain extent, examine the issue of teenage (hetero)sexuality and reproduction is in its *Report of the Committee for Social Affairs on the Youth of South Africa*. The report starts with a description of youth and ‘an orderly society based on moral standards’ (p. 35). ‘Social deviations’ of the youth (for example, juvenile delinquency, drug abuse, and lack of discipline) are explicated as well as the institutions that ‘influence’ the youth (for example, family, church and school). Recommendations are made on the basis of the findings.

Extra-marital sexual intercourse is listed as one of the social deviations. This section of the report is introduced with the following words:

> The Committee received evidence that a study of coital deviations before marriage can promote a better understanding of other deviant behaviour such as prostitution, illegitimacy and abortion because premarital intercourse often precedes these behavioural deviations. The decline of sociosexual norms in fact mean [sic] the decline of moral norms (President’s Council, 1987, p. 45).

The report suggests that the problem lies with the ‘insistence of “freedom” in nearly all spheres of life ... [including] “free love”’ (President’s Council, 1987, p. 46). It points out that ‘extra-marital sexual intercourse is not regarded as wrong and immoral by all population groups’ (President’s Council, 1987, p. 46). The resultant ‘illegitimacy’ and abortion are problematised as ‘illegitimacy’ leads to ‘serious problems for the illegitimate children ... [and] often causes parental rejection’, and ‘illegal abortion contains elements of crime, sin, shame, conflict and tragedy’ (President’s Council, 1987, p. 46). The solution suggested is sex education at an early age. However, this contains a caveat in that ‘poor or incorrect education can be more harmful than no education at all’ (President’s Council, 1987, p. 46). Abortion on demand is rejected out of hand as this is ‘essentially endorsing the modern-day permissive attitude to life which tends to discard and reject fundamental values’ (President’s Council, 1987, p. 46).

We see here how a strongly moralistic language (extra-marital sex is ‘wrong’ and ‘immoral’; abortion is a ‘crime’, ‘sin’, ‘shame’, and indicates a rejection of ‘fundamental values’) is mixed with a rhetoric of pastoral care (illegitimacy leads to ‘serious problems’; abortion causes ‘conflict’ and ‘tragedy’). Either way, ‘permissiveness’ or ‘freedom’ are portrayed as fomenting improper living. This moralising, pastoral discourse allows for the inclusion of only a select few
(those who accept certain ‘fundamental values’, and teach only ‘correct’ sex education), and the exclusion of others (for example, certain ‘population groups’ who feel that extra-marital sexual intercourse is acceptable).

There are various points of overlap between the discourses invoked in this report and those in evidence in the scientific literature on teenage pregnancy, although the language of presentation differs. The report’s overt, moralising references to extra-marital sexual intercourse are largely absent in the literature. However, the scientific focus of ‘teenage pregnancy’, rather than extra-marital sex, masks the underlying theme of marriage as the correct relationship within which coitus and reproduction should take place - see Chapter 7 for a discussion of the conjugalisation of reproduction in the teenage pregnancy literature. Other points of convergence are adolescent sexuality as moral decay (see Chapter 5), the process of racialisation where people are divided into various ‘population groups’ (see Chapter 8), an emphasis on proper pedagogisation (see Chapter 5), and the inducement to the family to produce the responsible citizen (see Chapter 7).

**Some official definitions**

In this section I highlight some official definitions pertinent to the discussion of teenage pregnancy in South Africa, these being definitions regarding race, the child, the family, and the conditions under which termination of pregnancy may occur. The most pervasive, insidious official definition of the Apartheid era was that surrounding race. The Population Registration Act (Act No. 30 of 1950), together with Proclamation 123 of 1967, introduced nine categories into which people in the country had to classified. The main divisions were ‘White’, ‘Black’, ‘Coloured’, ‘Asians’ (who were further subdivided into ‘Chinese’ and ‘Indians’) were the main subdivision of ‘Coloured’. In terms of the Group Areas Act (Act No. 41 of 1950, as amended), each group was to live in separately allocated areas. Although these definitions no longer have the same entrenched official currency, they are still invoked, firstly, socially and, secondly, in a semi-official manner to evaluate the progress of redress of past injustices through, for example, processes of affirmative action. In Chapter 8, I trace the process of racialisation in the teenage pregnancy literature in South Africa. I indicate how racialised boundaries are maintained and patrolled through, for example, culturalisation and the traditionalisation of ‘black’ people.
Teenage pregnancy is problematised partially because the pregnant teenager disrupts the dominant view of the chronology of age specific events. In South African civil law, age defines who is and is not a child. The assumption underlying this is that people under a certain age are either incapable or only partially capable of responsible judgement, and must therefore be protected by society. Sandra Burman (1986) indicates a contradiction contained in the law concerning children. Until the age of 21 a person is unable to take on contractual obligations without the assistance of a guardian. However, teenagers are deemed fit to vote at the age of 18 and, in the previous dispensation, ‘white’ male teenagers were conscripted into military service. ‘The implication is that at eighteen people are responsible enough to help decide the fate of their country and to kill, but not to order their own affairs unassisted. And are these voters and killers to be regarded as adults or children?’ (S. Burman, 1986, p. 9). A further, racialised contradiction in the definition of the closure of childhood during the Apartheid era was contained in the state welfare system providing state maintenance for ‘white’ and ‘coloured’ children until the age of eighteen years, and for ‘black’ children until the age of sixteen. These contradictions point to the constructed nature of adolescence. The construction of adolescence in the teenage pregnancy literature is taken up in Chapter 5.

The family appears in the teenage pregnancy literature in one of two forms, viz. the family of origin, and the family which the teenage forms by having a child (see Chapter 7 for further discussion). South African family law regulates the legal relationship between spouses and between parents (or designated guardians) and children (Visser & Potgieter, 1994), implying that this structure (husband, wife and children) is what constitutes a family. There is a racialised element in terms of legal marriages. Only marriage performed by a marriage officer appointed by the state is recognised. The law of marriage allows only monogamous marriage. However, ‘black’ people may enter into a polygamous marriage under customary law, an avenue not open to ‘whites’, ‘Asians’, or ‘coloureds’. Until 1985, inter-racial marriages were prohibited in terms of the Immorality and Prohibition of Mixed Marriages Act (see Chapter 7 regarding the conjugalisation of reproduction, and Chapter 8 regarding racialisation). In terms of South African family law, the definition of parenting is contained in the clauses concerning parental power, which is described as the ‘sum of rights, responsibilities and duties of parents with regard to their minor children on account of their parenthood, and which rights, responsibilities and
obligations must be exercised in the interests of such children’ (Visser & Potgieter, 1994, p. 179). Parents, it is stated, must maintain their children educationally and financially, care for and protect them, and control their estate. Parental power comes into existence in four ways, through: (1) the birth of a ‘legitimate’ child; (2) the birth of an extra-marital child (mother only); (3) legitimation of an extra-marital child; and (4) adoption. In Chapter 7, I explore the construction and regulation of mothering and the incitement of parents to create the affectively mature, responsible citizen in their children.

The Abortion and Sterilisation Act (Act No. 2 of 1975) rendered it illegal to obtain an abortion except under very specific circumstances, viz. in cases of rape, foetal abnormality, or agreement by a medical panel that having a child will irreparably damage the woman physically or mentally. Thus, teenagers who had unwanted pregnancies were forced either to take the pregnancy to full term or to seek abortions illegally or in other countries (the latter option being open to very few for financial reasons). Most of the research used as data in this thesis was conducted before the legalisation of abortion, and hence the issue of abortion (even illegal abortion) does not feature to any significant degree. However, the interviews conducted with service providers took place post-legalisation. In fact, two of the service providers interviewed work in the Termination of Pregnancy clinic. A woman may now request an abortion up to the 12th week of pregnancy. After this, up to the 20th week, abortions may be performed if, in the opinion of a medical practitioner, the conditions mentioned above (rape, threat to mother’s health, or possibility of foetal abnormality) stand.

In this section, I have briefly touched on the political (con)text within which the research and service provider practices featured in this thesis are framed. I have attempted to illustrate a number of issues: the deployment of multiple modes of rule in the maintenance of Apartheid; the fragmentation of services in the Apartheid era; the implication of expertise in political argumentation; the resonance of dominant discourses regarding issues such as population growth, adolescent sexuality, marriage, the family, illegitimacy, etc. in political legislation, debate and reports, and the scientific literature and service provider practices. I have discussed some official definitions pertinent to the issue of teenage pregnancy as featured in the literature. These include definitions regarding race, the child, the family, and the termination of pregnancy. In the
following section, I turn to the other major discursive field which frames the research and service provider practices in South Africa, viz. the international literature on teenage pregnancy.

The international literature

Research on teenage pregnancy can roughly be divided into two categories, viz. research which (1) investigates the consequences of early child-bearing, and (2) explores the causes of teenage pregnancy. There are various points of tension in the literature, which is by no means a seamless body of knowledge. For example, criticisms concerning methodology and approach abound. The main point of tension in the literature is between what I have, for convenience sake, called the ‘traditionalist’ and ‘revisionist’ approaches (see, for example, the exchange between Furstenberg (1991), Geronimus (1991) and Furstenberg (1992)). The revisionists take the traditionalists to task for concentrating on the weaknesses and failings of teenage mothers rather than on their emotional and cognitive strengths (Oz, Tari & Fine, 1992). They (the revisionists) talk of teenage pregnancy as an ‘alternative life course’ which is functional for certain adolescents in a variety of ways, e.g. greater access to familial child care (Testa, 1992). They revise the commonly accepted view of teenage pregnancy as being wholly deleterious. The South African research, which forms the chief body of data for this thesis, mainly follows the traditionalist approach, although there are instances of revisionist arguments, principally in the work of Preston-Whyte and colleagues (Preston-Whyte, 1991; Preston-Whyte & Allen, 1992; Preston-Whyte & Louw, 1986; Preston-Whyte & Zondi, 1989, 1991, 1992).

My aim in this thesis is not to join the debate over whether teenage pregnancy is in fact deleterious or not. I wish rather to indicate how both the traditionalist and revisionist approaches rely on taken-for-granted assumptions concerning the nature of adolescence, adolescent (hetero)sexuality, mothering, family formation, etc., and, furthermore, how they both participate in the governmental tactics deployed with regard to teenage pregnancy, as well as in the broader tactics of racialisation, familialisation and economisation. All this is dealt with in later chapters. In the following section, I discuss international research on the consequences and causes of teenage pregnancy. This is followed by a brief explication of the methodological criticisms made in the international literature.
Research on the consequences of teenage pregnancy

Teenage pregnancy is framed as a social problem because of its negative consequences with regard to the teenager, her child and the wider society. Issues which are researched centre around: the disruption of schooling and socio-economic disadvantage; obstetric outcomes; inadequate mothering and poor child outcomes; social support; welfare and demographic concerns.

Disruption of schooling and socio-economic disadvantage

The disruption of schooling that potentially accompanies teenage pregnancy is seen as detrimental to the teenage mother, as it limits her future career prospects and, therefore, contributes to a lower socio-economic status for her and her child (Adams, Adams-Taylor & Pittman, 1989). Exactly how disruptive early pregnancy is on schooling is a matter of debate. In a retrospective study (conducted with women born between 1920 and 1960) in the United States, Astone & Upchurch (1994) found that family formation (including marriage) did increase the risk of failure to complete schooling. However, the younger cohort of subjects was more likely to achieve a high school equivalent degree than the older cohorts. Other studies show that many teenagers who become mothers in fact dropped out of school before pregnancy (Brindis, 1993). While child-bearing significantly reduces the completion rates of young women who have already dropped out of school, there is little direct impact on those who are still in school. However, the variety of available life choices, including the option of continuing with post-secondary education, appears to diminish (Brindis, 1993). An oft-cited American study is a 17-year follow-up study conducted by Furstenburg, Brooks-Gunn & Morgan (1987) of the adolescent mothers first studied by Furstenburg in 1976, in which the authors concluded that while the women who had become pregnant during adolescence remained at a lower level of education and income than comparable women who had delayed pregnancy, their education and income levels were far better than would be predicted by a straight deterministic model.

The revisionist argument states that the one-to-one correspondence made between education and future advantage hides a multitude of socially constructed inequalities (Macintyre &
Cunningham-Burley, 1993). It is posited that the belief that ‘if only women forbore from having babies while in their teens they would succeed in the educational and occupational markets and therefore not live in poverty’ (Macintyre & Cunningham-Burley, 1993, p. 65) rings hollow in many societies in which opportunities for emotionally and financially rewarding jobs for women are restricted. Childbearing, they point out, is costly in terms of direct and opportunity costs at any age.

What each of the approaches outlined above have in common is what I have called the economisation of activity, viz. the investment of certain activities with economic value and the relegation of others (for example, child rearing) to the unpaid, private sphere, as well as the assumption of the rational economic man who develops and markets skills in a free, reasoning fashion (although the revisionists state that this mode of being is not open to many women). The disruption of education implies that the teenager is fracturing the production of this rational economic man. Chapter 9 investigates the economisation of activity in the South African literature. In it, I indicate the positionings opened up to women with the assumption of the rational economic man, and the manner in which poverty is foregrounded as a pathologised presence.

**Obstetric outcomes**

It has been commonly assumed that there are increased obstetric risks associated with teenage birth, (e.g. pregnancy-induced hypertension, premature labour, anaemia, and small-for-date babies) (Brindis, 1993). American and British writers (Hamburg & Dixon, 1992; Macintyre & Cunningham-Burley, 1993) have disputed this, however, criticising the methodologies of the studies showing increased obstetric risk in terms of the comparison groups used. These researchers conclude that the teenage mother and her infant are no more medically at risk than older mothers, provided that they received adequate ante- and postnatal care and nutrition. This latter appears to be an issue, however, as in many instances pregnant teenagers attend antenatal clinics late, or irregularly. The teenage birth/obstetric complication link is still a strong feature in the South African literature, however (see Boul & Cunningham, 1993; Cameron, Richter, McIntyre, Dlamini & Garstang, 1996; De Villiers, 1985; Goldberg & Craig, 1983), with
Ncayiyana and Ter Haar (1989) as the only dissenting voices. The medicalisation of teenage pregnancy, of which the research on obstetric complications forms part, is dealt with in Chapter 5. Here I indicate how (following Butchart’s (1995) terminology) sanitary science constructs the anatomical identity of the pregnant teenager, bringing ‘lesions’ into the plane of visibility.

**Inadequate mothering and poor child outcomes**

The nascent developmental status of the adolescent caregiver is seen to increase the probability of a maladaptive relationship between the mother and the child (Ketterlinus, Lamb & Nitz, 1991). It is suggested, *inter alia*, that adolescent mothers: (1) vocalise less often to their young children and provide fewer stimulating experiences than do older mothers, thus contributing to later academic difficulties (Barrat, 1991); (2) do not provide opportunities for affectional exchange, or else share emotions inconsistently, leading to increased risk of psychopathology in the child (Osofsky, Eberhart-Wright, Ware & Hann, 1992); (3) display higher levels of parenting stress and are less responsive and sensitive in interactions with their infants than are adult mothers (Passino, Whitman, Borkowski, Schellenbach, Maxwell, Keogh & Rellinger, 1993). A link has been made between adolescent parenthood and child abuse because the purported patterns of adolescent parenting are akin to those described amongst abusive mothers. Some authors (e.g. Miller & Moore, 1990) argue, however, that infants of adolescent mothers are not at higher immediate risk, but that there may be a delayed effect should there be further births to the mother. Number of children is seen as a chronic stressor that mediates between the mother’s age at first birth and child abuse and neglect.

Various authors dispute the teenage mother/poor child outcome or abuse association, however (Buccholz & Gol, 1986; Buccholz & Korn-Bursztyn, 1993; Klerman, 1993; Trad, 1995). Buccholz & Korn-Bursztyn (1993), for example, argue that a confluence of factors other than maternal age are implicated. Many studies, they say, make comparisons between teenage and older mothers without identifying the sample’s socioeconomic status. They postulate that the parent-child interaction is influenced by a range of factors such as the financial, social, emotional and social support resources available to the mother. Buccholz & Gol (1986) concentrate on the strengths of teenage mothering, positing that in some cases becoming a parent can stimulate
positive changes in the adolescent’s life, thus fostering reciprocal ego development between the mother and child.

Whether arguing that teenagers make bad and abusive or good parents, or, more subtly, that poor, unsupported teenagers make bad and abusive parents while middle-class, supported ones make good parents, this literature relies on what Johnson (1990) has called the “invention of “good mothering”” (p. 2). Mothering is treated as a stable, inviolable category, something which is self-evident, rather than an activity which is informed and reflects the socio-political preoccupation of the particular time and place. In Chapter 7, I examine the construction of mothering in the South African literature, indicating how mothering is presented as a dyadic relationship between the mother and infant, a presentation which splits the private from the public, and renders the power relations within which the dyad is embedded invisible.

Social support

The concern in terms of social support has to do with the fact that many pregnant or parenting teenagers are unmarried, and hence are presumed to be unsupported by their partners. Although some authors have indicated that a 16-year old mother may be more supported by her family network than a geographically mobile middle class older woman (Macintyre & Cunningham-Burley, 1993), others have argued that families can be sources of interference in areas of child rearing and emotional/personal concerns (Richardson, Barbour & Bubenzer, 1991). There has been some attempt to investigate the correlation between adjustment on the part of the teenager or her child and social support. There are contradictory findings in this regard. Some researchers indicate that adolescents who feel supported by their families are better adapted to parenthood (Boyce, Kay & Uitti, 1988; Dunston, Hall, & Thorne-Henderson, 1987), whereas others posit that maternal support is not significantly associated with the teenager’s psychosocial adjustment (Davis & Rhodes, 1994).

What is taken-for-granted in these arguments is the function and formation of the ‘normal’ family. The family is presented as a naturalised unit, as historically and culturally invariant, or at least only marginally variable. In Chapter 7, I explore the familialisation of alliance in the
South African literature on teenage pregnancy. I indicate how certain family functions and constellations (including the formation of a conjugal unit) are normalised through the invocation of a discourse of well-being and child-rearing responsibility.

**Welfare and demographic issues**

There is a clear distinction between the South African and ‘Western’ literature with respect to the societal concerns regarding early childbearing. In places like the United States, the issue of welfare dependency is most often quoted, while in South Africa the concern centres around population growth. However, welfare and the fear of the creation of an underclass does appear in the South African literature (e.g. Nash, 1990) as does the issue of population growth in the United States (e.g. Allen-Meares, 1989). In the United States early childbearing is presented as a ‘potent predictor of long-term welfare dependency’ (Furstenberg, Brooks-Gunn & Chase-Lansdale, 1989, p. 315). This trend is popularly seen as a self-perpetuating culture of poverty (Testa, 1993). In South Africa, the demographic concern of early child-bearing centres around the economic development of the country (Anagnostara, 1988; De Villiers, 1991; Van Regenmortel, 1975). In either case (welfare and demographic concerns) race crops up as an issue, as ‘black’ adolescents tend to use welfare in the United States for longer than do their ‘white’ and ‘Hispanic’ counterparts (Furstenberg et al., 1989), and ‘black’ South Africans lie in the undesirable phase 2 (high birthrate and low death rate) of the demographic transition graph (Anagnostara, 1988).

In Chapter 9, I examine the link between economised security, population control and poverty. I trace how the positioning of the poor as disrupting economised security through, inter alia, their tendency to breed uncontrollably, allows for the deployment of technologies of security around reproduction.

**Research on the causes of teenage pregnancy**

The major ‘causes’ of teenage pregnancy investigated by researchers are: reproductive ignorance and risk-taking behaviour; biological considerations; psychological problems; dysfunctional
family patterns; and socio-economic status. The revisionists counter the negatively-appraised ‘causes’, arguing that early childbearing represents a rational response to situations of poverty, as under these conditions teenage mothers enjoy comparative advantages vis-à-vis older mothers.

Reproductive ignorance and risk-taking behaviour

Ignorance concerning sexuality, contraception, conception and reproductive biology, as well as risk-taking behaviour (which includes the engagement in sexual intercourse, an earlier age at first coitus and the non-use of contraceptives) are posited as major contributing factors in teenage pregnancy; they have been used as strong motivations in the establishment of sexuality education programmes (Boxer, 1992). Some authors have disputed these hypotheses, however. Comparative studies that contrasted pregnant teenagers with never-pregnant teenagers (Peltzer & Likwa, 1992-93) or with older mothers (Mahomed & Masona, 1991) in Africa found negligible differences between the pregnant teenagers and the comparison groups in terms of reproductive knowledge and contraceptive usage. Caldas (1993) states that despite the relatively high rate of teenage pregnancy in the United States (relative to other ‘developed’ countries), there is evidence that American adolescents are well enough informed on reproductive matters to prevent a pregnancy should they have a strong enough desire to do so.

It is commonly assumed that the percentage of teenagers engaging in sex is higher, and that teenagers are engaging in sex at a younger age, than previously, owing to relaxed restrictions on sexual behaviour (Miller & Moore, 1990; Lloyd, 1994). It is posited in the literature that a certain amount of risk-taking is a normal and necessary aspect of adolescence (Trad, 1993), as this helps the adolescent in asserting a sense of personality and an identity separate from the family. However, where this behaviour leads to pregnancy, it is seen as problematic. Various researchers have attempted to isolate the factors that contribute to higher levels of sexual risk-taking. These include weaker 'previewing' skills (the ability to predict upcoming change) (Trad, 1993), difficulty evaluating alternatives, engaging in perspective-taking, and reasoning about chance and probability (Gordon, 1990), holding a personal fable (the belief that the individual is special and not subject to the natural laws that pertain to others) (Farber, 1994). Associations have been made between sexual risk-taking and poor academic performance, low levels of
parental monitoring (Hanson, Myers & Ginsburg, 1987), frequent alcohol consumption, lack of communication about birth control with mothers (Luster & Small, 1994), delinquency (Petersen & Crockett, 1992), legal and illegal drug use (Plant & Plant, 1992), and peer influence (Franklin, 1987).

Evaluations of the efficacy of sexuality education programmes have yielded mixed results. Authors state that while there often appears to be gains in terms of knowledge, there is little change in sexually-related attitudes and behaviour (Boxer, 1992; Hanson et al., 1987; Jorgensen, 1991). Sexuality programmes vary widely but are often brief and crammed with unrelated topics (Caldas, 1993). Feminists have taken up the issue of the ideological implications of sexuality education. Chilman (1985) looks at the implications of sexuality education being directed mainly at girls. Young women, she states, are implicitly given the responsibility for sexuality control, while young men, who generally receive their sex education from the street, tend to pick up sexist attitudes of male dominance and exploitation of females.

Fine (1988) takes a post-structuralist approach in her analysis of sexuality education curricula in the United States. In a paper entitled ‘Sexuality, schooling and adolescent females: The missing discourse of desire’ she outlines the anti-sex rhetoric surrounding sex education, and its intersection with the development of sexual responsibility and subjectivity in adolescents. Her concern is that:

Within today's standard sex education curricula and many public school classrooms, we find: (1) the authorized suppression of a discourse of female sexual desire; (2) the promotion of a discourse of female sexual victimization; and (3) the explicit privileging of married heterosexuality over other practices of sexuality (p. 30).

The reproductive ignorance and risk-taking hypotheses and the consequent mobilisation of pedagogic resources to overcome this state of affairs rely on unexamined assumptions concerning the nature, firstly, of adolescence and, secondly, of adolescent sexuality. In Chapter 6, I trace the construction of adolescence in the South African literature as a period of natural growth and development, with the rational, masculinised adult as the ideal endpoint of this development. I show how the discourses on adolescent (hetero)sexuality and the positioning of the adolescent as unstable, irrational and passively accepting external influences legitimize the intervention of
the expert. In Chapter 5, I trace the governmental tactic of the pedagogisation of adolescent (hetero)sexuality, indicating how doctors, nurses, social workers, psychologists, parents and adolescents are incited to talk about sex in order to protect the adolescent from his/her dangerous sexual tendencies.

Throughout this thesis I utilise the word (hetero)sexuality rather than sexuality. My aim, in this somewhat idiosyncratic presentation, is to highlight that what is spoken about is heterosexual relations. Sexuality is mostly assumed in the scientific literature on teenage pregnancy and other topics to be heterosexuality (Kitzinger & Wilkinson, 1993), with other forms of sexual activity and sexuality forming the absent trace. By adding (hetero) to sexuality I hope to avoid this while at the same time underscoring the point that pregnancy among young women arises from heterosex with its attendant gender relations.

**Biological considerations**

Some authors argue that adolescent sexuality is influenced by biological factors such as precocious pubertal development (Miller & Moore, 1990) and hormonal effects (Miller, 1993). It appears that the age of menarche has decreased both in developed countries such as the United States (Petersen & Crockett, 1992) and South Africa (Du Toit, 1987; Buga, Amoko & Ncayiyana 1996a). This has been associated with increased nutrition in infancy and childhood (Gunston, 1986; Petersen & Crockett, 1992). Petersen and Crockett (1992) postulate that pubertal development affects adolescent sexuality in two ways: (1) directly through hormonal effects on the brain; (2) indirectly through somatic changes that lead to the development of a mature physical appearance, which in turn triggers expectations for more mature behaviour. Most authors do not put forward a straight biological deterministic model, but argue for an interactionist approach between the biological substrate and sociological variables (Miller, 1993; Udry, 1988).

These models employ a combination of (following Butchart’s (1995) terminology) sanitary science and social medicine, which I discuss in detail in Chapter 5. The discourse of sanitary science inserts the medical gaze into the body of the adolescent, either normalising or, mostly,
pathologising her reproductive ability. In social medicine the clinical gaze shifts from the anatomy of the individual adolescent to the social influences thereon.

**Psychological problems**

The contribution of psychological difficulties to teenage pregnancy has been investigated from various angles. These include: conscious and pre-conscious motivations for pregnancy (for example, hopes of achieving adult status) (Adler & Tschann, 1993); early onset of conduct disorder (Kovacs, Krol & Voti, 1994); undetected learning difficulties (Rauch-Elnekave, 1994); unsatisfied preoedipal gratification needs (Oz, Tari & Fine, 1992); an increase in life change events (e.g. death in the family, separation of parents) (Records, 1993); moral development (Jurs, 1984); self-esteem (Keddie, 1992; Morgan, Chapar & Fisher, 1995; Plotnick, 1992; Robinson & Frank, 1994); and sexual abuse (Butler & Burton, 1990; Rainey, Steven-Simon & Kaplan, 1995). Various psychological characteristics have been associated with teenagers who conceive. These include: external locus of control; poor attitude toward school; low educational aspirations; low religiosity (Miller & Moore, 1990; Plotnick, 1992); impulsive personality traits together with low anxiety (Rosenthal, Muram, Tolley, Peeler & Pitts, 1992).

In Chapter 5, I trace the psychologisation of teenage pregnancy in the South African literature. I indicate how the body, the self, and the relationship are rendered visible through psychologised discourses which promise progress and a greater understanding of the human condition. I show how, through the processes of pathologisation and normalisation, psychologised discourses participate in the construction, production and regulation of teenage pregnancy.

**Family structure, relationships and parental style**

The structure, organisation and functioning of a family are seen as contributing, firstly, to early sexual initiation, and, secondly, to teenage pregnancy. The type of structure which is most commonly problematised is the single-parent, female-headed household (Rodriquez & Moore, 1995). Adolescent daughters of single mothers, it is postulated, have poorer relationships with their parents, are less subject to parental control, are more defenceless when confronted with
male sexual advances, are more exposed to the active sex life of their mothers, and are more likely to accept it as a normal condition for women to be independent of a male’s help (Caldas, 1993).

Family dysfunction has been held responsible for teenage pregnancy. Using approaches such as Minuchin’s structural family theory and Haley’s family life cycle, authors illustrate how teenage pregnancy can be ‘[a] powerful way for the adolescent to stabilize the family ... [by] developing some incapacitating problem that demands prolonged dependence on the parents.’ (Romig & Thompson, 1988, p. 136), or, alternatively, the result of inappropriate boundaries or confused hierarchies in family subsystems which have detrimental effects on the adolescent’s development and functioning (Atwood & Kasindorf, 1992). Disciplining styles have also come under the spotlight. Authoritarian, autocratic styles of disciplining or, at the other extreme, permissiveness are seen as problematic as the teenager may develop inadequate decision-making skills (Trad, 1993).

Other family features that have been associated with teenage pregnancy include: family discord (Trad, 1994); the mother having been a teenage parent herself; large family size; alcoholism on the part of one or both parents; family violence; incest; severe conflict in parental marriage; chronic physical or mental illness on the part of a parent or sibling; poor family communication; and neglecting or rejecting parents (Atwood & Kasindorf, 1992).

This work relies on taken-for-granted assumptions concerning the formation and functioning of families, which, as stated previously, are presented as natural and culturally invariant social phenomena. In Chapter 7, I discuss how the single-parent family is presented in the South African literature as socially deviant as it fractures the conjugalised deployment of sexuality and subverts the assumption of the male headship in the family. I indicate how the functionalisation of the family requires that the family takes on certain social responsibilities, including the production of the affectively self-actualised, responsible citizen. These functions are maintained through self-surveillance, emotional labour and the confessional.
Socio-economic status

A clear association has been made between low socio-economic status and teenage pregnancy (Geronimus, 1991). Poverty has been said to contribute to higher rates of teenage pregnancy as it breeds attitudes of fatalism, powerlessness, alienation, hopelessness and a sense of personal incompetence (Franklin, 1987). Researchers have attempted to delineate how socioeconomic status affects the risk of pregnancy via two proximate determinants, viz. exposure to sexual intercourse and contraceptive behaviour (Hayward, Grady & Billy, 1992). They conclude that while these two determinants affect the risk of pregnancy indirectly among ‘black’ teenagers, the effects are independent of socio-economic status among ‘non-blacks’. This racial element to the debate is a fairly common feature, and is evidenced, for example, in the work of Henly (1993) who points out that traditional measures of socioeconomic status do not account for the difference in adolescent childbirth rates by race. He believes that more a meaningful measure of socioeconomic status that provides a richer account of the social context (for example, quality of neighbourhood) of adolescents at risk of early childbearing are needed.

In Chapter 9, I indicate how the dominant teenage pregnancy-poverty association in the South African literature serves as a self-perpetuating reciprocal cycle of pathologisation. The poor become the pathologised presence, a presence which relies on the taken-for-granted backdrop of the normalised rational economic man. They are positioned as fracturing bodily and psychologised harmony, the functionalisation of the family, economised security and the production of their economised selves. This foregrounding of poverty is linked to the tactic of racialisation which is dealt with in detail in Chapter 8.

Criticisms of the research

Criticisms of teenage pregnancy research generally take the following form:

* There is often a lack of clarity with respect to the various factors studied. Factors seen as the consequences of teenage pregnancy (for example school drop-out) may in fact be the antecedents (Brindis, 1993).

* Sampling is chiefly opportunistic. Most studies are not longitudinal - measures are
frequently taken when the woman is pregnant or soon after birth (Breakwell, 1993).

* Sampling is heterogeneous in terms of gestational progress; this is problematic as there may be variations due to finer distinctions in pregnancy status (Blinn-Pike, Stenberg & Thompson, 1994).

* Because most studies use non-pregnant teenagers for their comparison group rather than pregnant adult women, what is attributed to the age factor of pregnant teenagers may in fact have to do with the vagaries of childbearing (Macintyre & Cunningham-Burley, 1993).

* Self-report data is of questionable psychometric value: pregnant teenagers may display labile moods; they may be going through cognitive-developmental changes due to the experience of being pregnant; and they may provide inaccurate information which tends towards social desirability (Blinn-Pike et al., 1994).

* There is often categorical confusion - unprotected sex, teenage pregnancy, teenage childbearing and teenage mothering are often treated as one and the same thing (Breakwell, 1993); there are slippages between the concepts of pregnancy in teenagers, unplanned or unwanted pregnancies, and pregnancies to unmarried or unsupported women (Macintyre & Cunningham-Burley, 1993).

* Males, in particular white males, have been under-represented as subjects in studies on teenage pregnancy (Meyer, 1991).

* Teen-age is treated as monolithic: pregnancy in the 11-16 year old age range may have a very different meaning to that in the 18-19 age group (Hamburg & Dixon, 1992).

In Chapter 4, I outline the methodology used in this thesis. The aim of the deconstructive discourse analysis which I employ in this project is to step outside of mainstream psychological theorising and method by introducing Foucault’s analytics of power and Derrida’s deconstructive method. Rather than asking whether the factors studied are antecedents or consequences of teenage pregnancy, or whether 11-16 year old pregnant teenagers are different to 18-19 year old pregnant teenagers, the question becomes under what conditions is it possible to speak of teenage pregnancy as a real, unitary category. The notions of statistical sampling, comparison groups and generalisation are abandoned. Instead, sampling is theoretical (in which groups or texts are chosen in terms of their theoretical purpose and relevance), and generalisation is guided by
Conclusion

The technologies of representation (or the intellectual technologies) and the technologies of intervention with regard to teenage pregnancy in South Africa are embedded in the discourses and practices which form their (con)textual backdrop. This chapter has been about highlighting two of these discursive fields. The aim has been to orientate the reader to the political (con)text and the international literature, and to indicate linkages between these and the analysis which takes place in subsequent chapters. I have attempted to highlight the diversity of political approaches devised and implemented in the maintenance of Apartheid, the era in which a great deal of the research on teenage pregnancy in South Africa (the results of which form the major body of data for this thesis) was conducted, and I have indicated how the reform process was interlinked with the invocation of expertise.

The South African literature on teenage pregnancy has chiefly reflected the traditionalist approach in the international literature in that teenage pregnancy is accepted as a negative social and personal problem. South African research has tended to follow the same avenues of investigation as that conducted in Britain and the United States. The poor outcomes (disruption of schooling, socio-economic disadvantage, poor child outcomes, obstetric concerns) are ‘demonstrated’, thus legitimating, firstly, the industry put into ‘discovering’ the causes (reproductive ignorance, risk-taking behaviour, biological considerations, psychological problems, socio-economic status, dysfunctional family patterns) and, secondly, the intervention of the expert. A clear point of divergence between the South African and international literature concerns the emphasis placed on welfare dependency (a concern expressed mostly in the American literature) and demographic issues (a problem noted fairly frequently in South African research).

The analysis chapters of this thesis are partially about dissecting the taken-for-granted assumptions which underlie the South African research literature on teenage pregnancy, some of which have been highlighted in passing in this chapter. In certain ways the South African
literature can be seen as a sub-division of the anglophone psycho-medical discourse on teenage pregnancy, and this thesis can be categorised as a case study of this discursive field. For example, the international literature on the disruption of schooling, socio-economic disadvantage and welfare dependency finds resonances in the chapter on the economisation of activity; research on the mothering capacities of teenagers, their family structure and relationships, and their parents’ parental styles links with the chapter on the familialisation of alliance; hypotheses concerning reproductive ignorance and risk-taking behaviour resonates with the chapter on the construction of adolescence and adolescent sexuality. However, there are also points of divergence between the South African literature and that emanating from Britain and the United States (for example, in the construction and maintenance of particular types of racialised boundaries), thus necessitating a certain localisation of the pertinence of this thesis.

In the following chapter, I outline the methodology employed in the analysis of the South African literature and the service provider practices at a regional hospital. The aims of this analysis are quite different from the literature review above. In the latter I have tried to give a brief descriptive narrative of the anglophone research on teenage pregnancy in order, firstly, to orient the reader unfamiliar with the literature on teenage pregnancy with the main research themes appearing in the journals, and, secondly, to signpost linkages between this literature and the analysis on the South African literature which follows in later chapters. The aims of the discourse analysis performed on the South African literature are fully explicated in the next chapter.
CHAPTER 4
DECONSTRUCTIVE DISCOURSE ANALYSIS

Forms of discourse analytic work range widely, including linguistic and conversational analyses, as well as ethnomethodological, semiotic, Althusserian, Gramscian, social constructionist, psychoanalytic and post-structuralist variations. The forms used most commonly in the psychological field are those advanced by Potter & Wetherell (1987), Parker (1992), Hollway (1989), and Fairclough (1992). The commonalities in these authors’ approaches centre around the significance of language in structuring and constraining meaning, and their employment of interpretive, reflexive styles of analysis (Burman, 1991). However, there are differences in terms of styles of analysis and underlying theoretical orientation. For example, Potter & Wetherell (1987) develop their model from ethnomethodology, speech act theory, analytical philosophy and semiotics. Hollway (1989), while drawing on Foucault, takes a more Lacanian, psychoanalytic approach. Fairclough (1992) sets himself the task of developing a method of analysis which is both ‘theoretically adequate’ and ‘practically usable’, by drawing together social theory (including Foucault) and linguistically-oriented discourse analysis. Parker’s (1989; 1990a; 1992) approach is most closely aligned to the Foucauldian project, although he does differ with ‘fervent foucauldians or derisory derrideans’ (Parker, 1989, p. 4) in his retention of the term ‘ideology’ for political purposes.

The methodologies employed by Foucault are archaeology and genealogy. The archaeological method, as laid out in the Archaeology of Knowledge (Foucault, 1972), involves studying the regularities of discourses. Foucault attempts here to divorce discourse from its social setting and to discover the rules of its self-regulation, its autonomy and discontinuous transformations. His treatment of discourses in this methodological treatise comes close to structuralism (Dreyfus & Rabinow, 1982). He later moved beyond the attempt to work out a theory of rule-governed systems of discourses, and utilised the genealogical method which allowed him to ‘thematise the relationship between truth, theory, and values and the social institutions and practices in which they emerge’ (Dreyfus & Rabinow, 1982, p. xxv). Genealogy is concerned with the operation
of power, of the dynamics that orient regularities. It is a history of the present, in which components of present day political technologies are traced back in time. However, the archaeological method was not abandoned; it was used as a technique to serve genealogy, and to allow certain genealogical questions to be asked. The introduction of power into the analysis of discourse allowed Foucault’s analysis to become transgressive (Dant, 1991), or deconstructive (Parker & Shotter, 1990) as he uncovered particular, local, irregular and discontinuous operations of power relations, thus undermining the abstract principles and universal laws (or theory) of history.

My project in this thesis is not genealogical. Instead I propose using what I have called deconstructive discourse analysis. Just as Foucault used archaeological methods as a basis for his genealogical enquiries, so I have attempted to utilise discourse analysis as a basis for a deconstruction of the discursive practices and power/knowledge nexus surrounding teenage pregnancy. The discourse analysis component relies on elements of Foucault’s archaeological method and Parker’s (1992) seven criteria for distinguishing discourses; the deconstructive component draws on a feminist-oriented Foucauldian analytics of power and governmentality (as outlined in Chapter 2), Derrida’s deconstructive method, and Parker’s (1992) additional criteria. Each of these is discussed in depth in a later section.

As there is no definitive method of discourse analysis, this chapter is about joining the academic conversation surrounding the nature of discourse analysis. It is partly theoretical, as one of the fundamental principles of discourse analysis is the inseparability of theory and method. For example, one of the major traps which faces discourse analysts is the potential dualisms that may (inadvertently) be created between text and context, discourse and the ‘real’, discursive or social practices and discourse. These dualisms are problematic as they easily slip into, at best, a privileging of one side of the dichotomy or, at worst, an attribution of causality or transcendental originality to the dominant aspect.

The chapter is divided into three main sections. The first overviews notions which underlie discourse analytic work, viz. conceptualisations of the meaning of discourse, text, context, the extra-discursive, and discursive and social practices. In the second, I explore what it is that
discourse analysis does and the role of reflexivity in the process. The third section elucidates the research procedures undertaken in this particular study. The theoretically informed questions which guided the analysis of the material on teenage pregnancy are explicated, as well as the method of text collection. The research practices undertaken in the analysis of the data are then reflected upon.

**Conceptualisations of discourse**

Clarifying conceptualisations around the notion of discourse, and the associated terms of text, discursive practices and the extra-discursive, is important as they have implications in terms of how the actual analysis proceeds. I have chosen the word ‘conceptualisations’ advisedly in this context, as ‘definition’ gives the impression of definitive closure. The conceptualisation of ‘discourse’ is linked to theoretical issues, and thus is in a constant state of re-appraisal and re-working.

The following illustrates attempts by various authors to grapple with the nature of discourse. Discourse has variously been described as:

- ‘any regulated system of statements’ (Henriques, Hollway, Urwin, Venn & Walkerdine, 1984, p. 105);
- ‘a system of statements which constructs an object’ (Parker, 1990a, p. 191);
- ‘a particular network of meanings, their heterogeneity and their effects’ (Hollway, 1989, p. 38);
- ‘discernible clusters of terms, descriptions, common-places and figures of speech often clustered around metaphors or vivid images and often using distinct grammatical constructions and styles’ (Potter, Wetherell, Gill & Edwards, 1990, p. 212 [these authors prefer the term interpretive repertoires]);
- ‘a form of social practice, rather than a purely individual activity or a reflex of situational variables’ (Fairclough, 1992, p. 3);
- ‘products and reflections of social, economic and political factors, and power relations’ (Widdicombe, 1995, p. 107);
- a ‘group of statements that belong to a single system of formation’ (Dreyfus & Rabinow, 83
Various features emerge from the above conceptualisations of discourse: (1) an underlying regularity; (2) the constructive effects of discourse; and (3) implications in terms of meanings and practices. Each of these will be elaborated upon below, after which the distinction between text and discourse, as well as that between discourse and the extra-discursive will be elaborated upon.

**Underlying regularity**

Discourse is seen as presenting a coherent system of meanings (Parker, 1990a): it forms a ‘regulated system of statements’ (Henriques *et al.*, p. 105) or a ‘single system of formation’ (Dreyfus & Rabinow, 1982, p. 107). The positive regularity has to do with how ‘truth’ is formulated (Dant, 1991). In other words, the statements in a discourse cluster around culturally available understandings as to what constitutes a topic.

In the *Archaeology of Knowledge*, Foucault (1972) describes the regularity of what he calls discursive formation and the rules of formation as follows:

> Whenever one can describe, between a number of statements ... a system of dispersion, whenever, between objects, types of statement, concepts, or thematic choices, one can define a regularity (an order, correlations, positions and functionings, transformations), we will say, for the sake of convenience, that we are dealing with a *discursive formation*. ... The conditions to which the elements of this division (objects, mode of statement, concepts, thematic choices) are subjected we shall call the *rules of formation*. The rules of formation are conditions of existence (but also of coexistence, maintenance, modification, and disappearance) in a given discursive division (p. 38).
The regularity of discourse is found amid variability. As noted above, it is located between a ‘system of dispersion’ (Foucault, 1972, p. 38); discourses are ‘historically variable’ (Ramazanoglu, 1993, p. 7); they are ‘progressively and dynamically achieved’ (Davies & Harré, 1990, p. 47). There is some debate over the advisability of focussing too closely on the regularity of discourse, however, as evidenced in the exchange between Parker (1990a, 1990b) and Potter et al. (1990). Parker (1990a) believes that Potter & Wetherell’s (1987) use of the word ‘repertoire’ has uncomfortable resonances with behaviourism (especially when one is looking for systems of terms that are used recurrently). Potter et al. (1990) reply that the use of the prefix ‘interpretive’ obviates this association, and continue to find it more useful than the term ‘discourse’. They go on to state that Parker’s (1990a) approach is limited as ‘discourses ... become formed as coherent and carefully systematized wholes which take on the status of causal agents for analytic purposes. ... the processes of interest are seen as those of a (abstract) discourse working on another (abstract) discourse.’ (p. 209). Parker (1992) acknowledges that talking of discourses as though they were things can lead to abstraction and reification, but believes that the risk is worth taking as ‘it is crucial that we hold to some conception of the difference between discourses and show how contests between different structures of meaning operate as part of the architecture of society’ (p. 33). Potter et al. (1990) believe that what is excluded from Parker’s (1990a) version of the analysis of discourse is the working of discourse as a constitutive part of social practices situated in specific context. However, this in turn, risks creating the divides of context/discourse and social practice/language, while attributing transcendental originality to practice and context. The dilemmas surrounding text/context, social and discursive practices are dealt with more fully in a later section.

**Constructive effects**

Discourses are seen as constructive as they do not simply describe the social world, but are the mode through which the world of ‘reality’ emerges. They contain subjects and construct objects (Parker, 1990a) as well as knowledge and truth (Ramazanoglu, 1993). Parker (1990a) points out that a strong form of the argument would be that discourses allow us to focus on things that are not ‘really’ there, but once these have been circumscribed by discourses it is difficult not to refer to them as though they were real. However, this is an untenable linguistic realist position.
which separates discourse from the real, a dichotomy which discourse analysis would attempt to transcend.

Fairclough (1992) distinguishes three aspects of the constructive effects of discourse, viz. the construction of: (1) ‘social identities’, ‘subject positions’, or types of ‘self’; (2) social relationships between people; and (3) systems of knowledge and belief. Fairclough calls these the ‘identity’, ‘relational’ and ‘ideational’ functions of language. While this split may be somewhat artificial as the three levels intersect multiply, it is also heuristic.

Discourse is constructive, but it is also restrictive, as Young (1987) points out. It has a dual character, simultaneously constructing and restricting what can be known, said or experienced at any particular socio-historical moment. It is this duality ‘through which action and understanding are simultaneously enabled and constrained, that links knowledge to power’ (Young, 1987, p. 114). This duality extends further, however, as ‘[D]iscourse transmits and produces power; it reinforces it, but also undermines and exposes it, renders it fragile and makes it possible to thwart it’ (Foucault, 1978, p. 100). Discourse conceived in this way allows for shifts and flexibility, as a tension is constantly created between the constructive and restrictive, productive and undermining aspects of a discourse.

The duality of discourse is also glimpsed in Derrida’s conceptualisation of the absent trace (see Chapter 2 for fuller discussion). Discourse excludes that which is simultaneously exterior and interior to it. ‘A’ relies on ‘not-A’, ‘being’ on ‘non-being’, ‘presence’ on ‘absence’ for their meaning, while at the same time subordinating the second term (not-A, non-being, absence). As Parker (1992) points out, a discourse accounts for other discourses through the contradictions contained within the discourse. Thus, while discourse excludes subordinate or contradictory discourses, it simultaneously refers to them, creating the conditions for modification, for the undermining of its presence.
Implications in terms of meanings and practices

Discourse analysts differ in terms of the emphasis they give to the meaning construction aspect of discourse versus its effects in practice. Hollway (1989), for example, using her conceptualisation of discourse as a particular network of meanings, aims in her discourse analysis to understand the conditions which produce accounts and how meaning is to be produced from them. The emphasis on meaning gives lie to her more Lacanian bent. While a Foucauldian approach also wishes to examine the conditions which make the emergence of certain discourses rather than others possible, and does not deny the meaning aspect of discourse, the focus is on the social and power/knowledge effects. As Dant (1991) puts it, Foucault wishes to restore to discourse its character as an ‘event’. This recognises it as a social practice and not as the revelation of essence. The deconstructive aspect of discourse analysis implies undermining the revelation of essence, of de-stabilising meaning as presence, of disrupting dominant, taken-for-granted notions of a subject.

According to Fairclough (1992), a discursive ‘event’ is simultaneously a piece of text (I shall return to the issue of the text in the next section), an instance of discursive practice, and an instance of social practice. He explains these dimensions as follows: the ‘discursive practice’ dimension concerns the nature of the processes of text production and interpretation (e.g. which discourses are drawn upon and how they are combined); the ‘social practice’ dimension refers to the institutional and organisational circumstances of the discursive event and how that shapes the discursive practice. This conceptualisation is preferable, I believe, to Young’s (1987) argument which states that discourse is a field of statements, while discursive practices are the rules and institutional arrangements through which discourse statements are produced and communicated. This risks dichotomising practice and discourse (which borders on the real/discourse dilemma), allowing mutual (or one-way) causal effects to discourse and practice. Fairclough’s (1992) explanation of the discursive event allows for practice (including the social) to be saturated by discourse and vice versa, while at the same time avoiding the attribution of ontological status to either discourse or practice. It thus escapes setting up an abstract, reified and disembodied notion of discourse, of which various authors have been critical (Potter et al., 1990; Widdicombe, 1995).
The discursive events (following Fairclough’s conceptualisation described above) analysed in this thesis are those contained in: (1) the production of knowledge; and (2) the production of health and welfare with respect to teenagers, their sexuality and their reproductive capacities. In the first instance, the text is the written word contained in the reports, articles and theses examined. This text is the result of, but is also intricately interwoven with, the discursive practices (the theoretical models used, the generation of ‘data’ from the actions and words of people, the reproduction of certain discourses regarding teenagers and pregnancy and the marginalisation of others, the mode of presentation of results - graphs, tables, extracts - etc.) and the social practices (observation, interviewing, the administration of questionnaires, the research team meeting etc.) involved in the research process. Of the three interlocking components (text, discursive practices and social practices) of the discursive events involved in knowledge production, the text is the most visible. In the second form of discursive events analysed (the production of health and welfare), however, the social practices (blood pressure monitoring, urine sampling, the administration of tablets, counselling, sex education, etc.) and certain forms of texts (the spatial arrangement of furniture, the location of offices, waiting rooms and consultation rooms, etc. - see the next section concerning the conceptualisation of text as anything that can be given interpretive gloss) are the most evident. The discursive practices (which discourses are drawn upon in particular circumstances and which are marginalised, the recording of certain details concerning patients and the ignoring of others, etc.) and other forms of text (the written word which forms the absent trace of the spoken word - see Chapter 2) are less visible.

**Discourse and text**

Within linguistics, ‘discourse’ is used to refer to extended samples of either spoken or written language, while ‘text’ is regarded as one dimension of discourse: the written or spoken product (Fairclough, 1992). I follow Parker (1990a) in taking a broader, less bounded approach. He posits that discourse is realised in texts, which are ‘delimited tissues of meaning reproduced in any form that can be given interpretive gloss’ (p. 193). Thus, although the emphasis is on language and linguistic texts, it is appropriate to see discourse as realised in other symbolic forms such as visual images and spatial arrangements. This leads to what Parker (1990a) calls the post-structuralist maxim, which is contained in Derrida’s (1976) statement, ‘There is nothing outside
the text’ (p. 158). However, this does not lead to gross linguistic realism where nothing is seen to exist outside the text, a charge laid by psychologists coming from the experimental camp (Abrams & Hogg, 1990). As Parker (1992) points out, when something can be interpreted (and thus becomes text), it does not lose its object status. Things can ‘both be inside and outside of texts.’ (Parker, 1992, p. 34).

This conceptualisation of text allows for discourse analysts to do away with the distinction between text and context, a distinction which Potter et al. (1990) retain in their work. They see what they call interpretive repertoires as abstractions from practices in context; they state that analysis should be attentive to what they call the local geography of contexts. From a Foucauldian perspective, the emphasis on the localised is not problematic, as Foucault studied power as it installed itself in capillary ways (see Chapter 2). However, the split of context from text creates a dualism from which it is difficult to escape.

**The extra-discursive**

There is some debate over the status of the extra-discursive. Mostly, this has been taken to mean anything outside of discourse (in a general sense), rather than something which is exterior to a particular discourse (although I have seen the term extra-discursive used in this latter sense, i.e. as discourses exterior to a particular discourse). Hollway (1995) argues for a recognition of the extra-discursive. She applies this to her work on heterosexual relationships. She believes that emancipatory heterosexual practice is possible even though an emancipatory discourse of heterosexual sex does not exist (according to her). She states that this may be as a result of: (1) contradictions produced between discourses; (2) meanings achieving unique significance through the workings of the unconscious; and (3) an extra-discursive space concerning heterosexual sex, provided by the private realm within which so-called normal sex is practised. She goes on to formulate this space as social, as it is constituted through practice rather than through discourse as talk. Wilkinson & Kitzinger (1995) agree with Hollway (1995), viewing the extra-discursive as social practices and their material effects, as well as the ‘interior’ world of subjectivity and intersubjectivity. I argue, however, along with Wetherell (1995), that a distinction between the discursive and the extra-discursive is problematic, both methodologically and epistemologically.
Firstly, it denies the central role of discourse in constituting social relations and subjectivity; secondly, it risks sliding into a cause-effect dualism; and thirdly, it creates the untenable position of constantly having to decide what is discursive and what is extra-discursive. I contend that Fairclough’s (1992) conceptualisation of the discursive event circumvents these problems, while at the same time allowing a space for the emancipatory practice referred to by Hollway (1995).

In this section, I have overviewed the conceptualisations of discourse, text, context, the extra-discursive, and discursive and social practices, conceptualisations that are fundamental to the business of discourse analysis. I have indicated that discourses have an underlying regularity (within variability), and have constructive as well as restrictive effects. I follow Fairclough (1992) in seeing the discursive ‘event’ as simultaneously a piece of text (anything that can be given interpretive gloss), an instance of discursive practice and an instance of social practice. In the following sections, I explore the aims and practices of a deconstructive discourse analysis.

**What does deconstructive discourse analysis do?**

My aim in this thesis is to employ discourse analysis in a feminist oriented, deconstructive manner with regard to a variety of text relating to teenage pregnancy in South Africa. In this section, I discuss what it is that deconstructive discourse analysis does, i.e. what are its purposes or aims? Debates around the applicability of feminism to such an approach are covered in Chapter 2. In the following, I shall examine the goals of discourse analysis in general, and then of deconstruction, although the distinction is somewhat spurious, as undertaking deconstructive work implies having in some way performed an analysis of discourses. However, discourse analysis is not necessarily deconstructive - some authors’ work is more deconstructive than others.

The aims of discourse analysis, as described by various authors, are to:

- ‘elucidate webs of meaning, and the relations and consequences of competing meaning frameworks’ (Parker & Burman, 1993, p. 163);
- ‘unravel the conceptual elisions and confusions by which language enjoys its power’ (Parker, 1990b; p. 227);
attend to the conditions which make the meanings of texts possible (Parker, 1992);

‘apply a theory of the relation between meaning and subjectivity’ (Hollway, 1989, p.33);

‘clarify the linguistic resources used to make certain things happen’ (Potter & Wetherell, 1987, p. 171);

‘identify the relevant discourses and the positions they make available, and then examine the power relations that are facilitated, the historical and structural conditions giving rise to particular discourses and their ideological effects’ (Widdicombe, 1995, p. 107);

‘provide an account of psychological “objects” (e.g. mind, intentions, reasoning, etc.), human action and social practice by showing the “conditions of possibility” within which they are embedded’ and to overturn ‘commonly accepted understandings of “objects” by drawing on other (marginalised) discourses to demonstrate the constructed nature of common understandings’ (Durrheim, 1997, p. 181);

offer ‘a social account of subjectivity by attending to the linguistic resources by which the socio-political realm is produced and re-produced’ (Burman, 1991, p. 327).

Thus the aims variously centre around ‘meanings’, ‘conditions of possibility’, ‘power relations’, ‘constructionism’, ‘ideological effects’, and ‘subjectivity’ and discursive ‘positions’. A comparison of these aims with those traditionally expounded in psychological research (discovering the effect of x on y; investigating contributory factors to problem z; comparing group a with group b in terms psychological feature c, etc.) emphasises the radical difference in approach that discourse analysis brings to the field (concerning the same topics traditionally researched by psychology).

The Foucauldian focus on the power/knowledge nexus is seen most clearly in Parker’s (1989,1992), Rose’s (1989a, 1989b, 1990, 1993) and Burman’s (1991, 1994, 1996a, 1997) work. For Foucault, the target of analysis is practices, with the ‘aim of grasping the conditions which make these acceptable at a given moment’ (Foucault, 1991b, p. 75). Practices are conceptualised as ‘places where what is said and what is done, rules imposed and reasons given, the planned and the taken for granted, meet and interconnect’ (Foucault, 1991b, p. 75). Analysing ‘regimes of practice’ involves analysing their prescriptive effects regarding action (what Foucault(1991b) calls effects of ‘jurisdiction’), and their codifying effects concerning the known (effects of ‘veridiction’). The latter link to what Foucault refers to elsewhere as ‘regimes of truth’, in which
his project is to show ‘historically how effects of truth are produced in discourses which in
themselves are neither true nor false’ (Foucault, 1984b, p. 60). The will to knowledge (or truth)
refers to the structure of discourses that excludes that which is false and that which cannot be
dealt with in terms of its truth or falsity (Dant, 1991).

Deconstruction is an approach to discourse that attempts to de-stabilise it. It aims neither at
destroying the text nor assessing it as to its truth value. Instead, it questions discourses by
exploring (deconstructing) them in terms of their claims of presence, and their dependence on
absenses (Dant, 1991). Thus, deconstruction focuses on dominance, contradiction and
difference. In so doing, it enables us to envisage ways of disrupting the dominant discourse, and
to construct positions of resistance (Burman, 1990). As Parker (1989) points out, there are two
interlinked areas of specification in the process of deconstruction: (1) conceptual (opening up
texts to show how meaning is organised and the function that this serves); and (2) practical
(attending to the political consequences which flow from deconstruction).

As suggested earlier, Foucault’s genealogies are deconstructive in the sense that the positivities
of continuity, consciousness, truth, and origins are undermined. Foucault (1991b) puts it as
follows:

It’s a matter of shaking this false self-evidence, of demonstrating its precariousness, of
making visible not its arbitrariness, but its complex interconnection with a multiplicity
of historical processes, many of them of recent date (p. 75).

Foucault’s deconstruction does not leave only vagueness and negative categories (discontinuity,
dcentred subjects) but also in some way recovers some of the things thrown away - series,
contiguity, association, regularity, descent (Dant, 1991).

Relexivity in the research process

Discourse analysts (as well as feminist researchers) emphasise the importance of reflexivity in
the process of research. Two major themes emerge, that of: (1) exploring the researcher
involvement and effects, i.e. a recognition that the ‘knower is part of the matrix of what is
known’ (Wilkinson, 1986, p. 13); and (2) rendering discourse analysis itself accountable by
scrutinising the interpretive resources and processes as well as the constructive effects of the ‘discourse’ discourse, i.e. drawing attention to the discursive construction of discourse analysis’ own theoretical position and its ‘data’ (Parker, 1992). The first of these does not refer to the positivist attempt to reduce or minimise investigator effects, but rather to acknowledge them as part of the practice of research. Shotter (1992), for example, speaks of research as a process of both ‘finding’ and ‘making’. He admits that this view of research is very difficult to accept, as ‘[f]or all kinds of reasons, not just the history of philosophy, but also because of our socialization into the official communicative practices of academic life, we are still committed to an Enlightenment image of knowledge as being both systematic and unitary.’ (p. 63). As Burman (1991) points out, this type of reflexivity is not intended merely to enrich the account, but also to question relations of power in the research. Bhavnani (1990) delineates two (interwoven) aspects of power in the research relationship that should be considered. Firstly, there is the power of the researcher in the position of expert vis-à-vis the ‘subject’. Secondly, there are what she calls the ‘socially ascribed characteristics’, such as race and gender, of the participants (both researcher and ‘subjects’). The latter is especially important in South Africa where the construction of people as ‘white’, ‘black’, ‘coloured’, ‘Indian’, and ‘African’ has had, and continues to have, pervasive political effects.

My interactive positioning (the discursive positioning assigned to me by others - see Davies and Harré, 1990 and Harre and Van Langenhove, 1999) as a ‘white woman’ potentially has paradoxical effects, given the racial and gendered politics of South Africa. For example, ‘whiteness’, on the one hand, carries powerful legitimation in terms of ‘scientific’ endeavours, as it remains equated with notions such as ‘competent’, ‘cultured’, ‘educated’. On the other hand, in a time where there are increasing calls for Africanisation both within educational institutions and elsewhere, ‘whiteness’ becomes equated with ‘imperialism’ and ‘oppression’. In my interviews with service providers, only one of whom is ‘white’, the racialised positionings of myself as ‘white’ and the majority of service providers and patients as ‘African’, ‘Black’ or ‘Zulu’ seemed to translate into a space for the invocation of culture (a categorisation which is used to euphemise racialisation - see discussion in Chapter 8) as an explanatory tool. Virtually all the service providers utilised phrases equivalent to ‘in our culture’, or, in the case of the ‘white’ practitioner, ‘in Zulu culture’ in describing teenagers’ and their parents’ behaviour.
My ability to access the data used in this thesis is embedded in the power relations surrounding professional association. For example, my use of a university letterhead in my communication with heads of departments of universities, NGOs and the management of the hospital positioned me within the discourse of the academic pursuit of knowledge. The fact that I am a lecturer at a university which has links with the hospitals of the area meant that I was viewed as a fellow professional and that permission from the management and staff of the hospital was readily forthcoming.

All the service providers, with the exception of one, were female. As the conversation centred around female sexuality and reproduction, the commonality of the social marker of gender seemed to make the communication easier. Furthermore, I was seven months pregnant at the time of the interviews. Although only a few of the service providers enquired after my pregnancy, the marker of reproductive status was clear.

While there is a clear rationale for investigator reflexivity, there are dangers associated with it as well. A focus on the construction of the account by the researcher rather than what is being accounted for can be problematic. As Parker (1992) puts it, ‘There is something odd going on when the connection between the individual and the social is made in terms of “reflexivity” instead of political practice’ (p. 80). Furthermore, there is a danger of the exercise slipping into a confession either of the discursive positionings of the researchers or of their emotional investments. For example, Soal & Kottler (1996) declare their positionings as ‘white, middle-class women with an investment in progressive and feminist discourses’ (p. 125), and Burman (1996) states that their book is an expression of ‘our feminist anger with injustice’ (p. 12). As Squire (1995) puts it, reflexivity may lead to a ‘dizzying regress to residual, difficult-to-comprehend factors like repression and desire’ (p. 157). Furthermore, over-emphasis on self-referentiality may attribute ‘fictive’ status to the research, as the ‘subjectivity’ of interpretation is made prominent, thus detaching the analysis from ‘reality’ (Parker & Burman, 1993).

The second major theme, that of rendering discourse analysis itself accountable, is not really separable from the first (‘doing’ is not separated from the ‘doer’). It is connected with the inseparability of theory/political issues and method. As pointed out by various writers (Gill,
there is no necessary connection between discourse analysis and a progressive or critical politics. In fact, the reflexivity required in discourse analysis can, according to Burman (1991), work contrary to political engagement by subordinating the ‘real’ to discourse. Burman (1991) sees the solution to this in the strategic appropriation of the discourse analytic framework by, in this case, feminism. This, I believe, sounds too opportunistic, and is open to revocation. I would argue rather for a saturation of discourse analysis with progressive political issues. It is this that rescues discourse analysis from the criticism that Potter, Wetherell, Gill & Edwards (1990) level at the Parkerian approach, viz. its permeability to unexplicated common sense (a criticism which is actually unfounded regarding Parker’s work, as he is quite clear about the political nature of his work, although this may not be as purposefully spelt out in Parker (1990a) as it is in Parker (1992)).

Deconstructive discourse analysis practices

Research questions

One of the strengths of discourse analysis is that it allows for the re-formulation of traditional research questions (Potter & Wetherell, 1987). There is a change in emphasis from the position of researchers as expert ‘knowers’ or ‘measurers’ of human beings and their behaviour, to one in which researchers are ‘experts not necessarily in answers but in the range of questions we can formulate, and interpretations we can access’ (Billington, 1995, p. 38).

I was not engaged in this study in a search for the causes of teenage pregnancy, nor for a solution to the ‘problem’. My project was to step outside of the tradition which treats teenage pregnancy as a historically static, universally valid category, with its implications of transcendental personhood and structures. My aim rather was to elucidate the range of discourses (dynamic, contradictory and constantly reproduced) emerging in the South African scientific literature and service provider practices surrounding teenage pregnancy. I wished to examine the construction of the category of teen pregnancy and the power relations emanating from the complex process of that construction. Put in another way, I wished to view, in Foucauldian terms, the ‘regimes
of practices’ (the discursive and social practices) surrounding the notion of teenage pregnancy and their prescriptive effects regarding action as well as their codifying effects regarding what is known. I thus posed my questions in terms of the governmentality of teenage pregnancy, viewing the production, circulation and authorisation of ‘truths’ regarding adolescent (hetero)sexuality and reproduction, and the related categories of the family, mothering, race and economic activity. I aimed to analyse how these ‘truths’ are installed in the everyday lives of teenagers and their families.

My aim, furthermore, was to ‘inhabit’ the text in a Derridian sense, showing how what it says is systematically related to what it does not say. I wished to illustrate how teenage pregnancy operates as a category of exclusion which aids in the construction, production, circulation and refinement of its absent trace (normal adolescent sexual behaviour, correct family formation, good mothering, proper economic activity, etc.).

Text collection

In discourse analysis, the notions of statistical sampling and generalisation are abandoned as this ‘does not address the complex conditions of people and their conduct, either in their uniqueness or their commonality’ (Hollway, 1989, p. 15). The choice of text is guided rather by theoretical principles, purpose and relevance. The boundaries placed around text are based purely on pragmatic considerations, as it is recognised that meaning is never achieved within the boundaries of a work, sentence, or even an extract, but rather in an infinite network of text (Hollway, 1989). However, as Fairclough (1992) points out, selections of texts should ensure diversity and avoid homogenisation.

The text which I utilised in this study was: (1) South African research and literature on teenage pregnancy; and (2) the transcription of interviews held with service providers at a regional hospital. In the first instance, an attempt was made to collect all published and unpublished South African research and literature in the field of teenage pregnancy. The following procedures were followed in order to access this material:

- NEXUS, Psyclit, SABINET and Social Science Citation searches were conducted;
Letters were sent to Heads of Departments of all relevant social science, education and medical departments at all South African universities, as well as relevant non-governmental organisations (NGOs), requesting information concerning research conducted in the field of teenage pregnancy in their departments or organisations.

Of all the research and general scientific documents located, honours theses and research in which sex education programmes were evaluated, were excluded. Investigations into adolescent sexuality where teenage pregnancy was mentioned, and research focussing specifically on teenage pregnancy or teenage mothering were included. The result was 74 pieces of text consisting of: 25 articles published in medical journals; 9 articles published in social science journals; 5 chapters in books; 2 letters published in a medical journal; 21 masters theses; 2 doctoral theses; and 10 research reports. A full list of the data references is contained in Appendix 1. While I attempted to collect all research material on teenage pregnancy in South Africa from the early 1970s to 1997, it is likely that some documents were not located. I did not receive replies from all the university departments and NGOs approached, and hence some unpublished material may be missing. Furthermore, journals in which some published material may appear may not be listed in the citation data bases utilised, and therefore some published material may also not have accessed.

I refer repeatedly in this thesis to the body of research work collected as the ‘teenage pregnancy literature’. In doing so, I am constructing a somewhat bounded unit as my object of study. This I do for convenience rather than as an indication that the ‘teenage pregnancy literature’ is a separable segment of research practice. Furthermore, I have termed this body of text the ‘scientific literature’ on teenage pregnancy on the basis that it represents the intellectual work which is legitimated through the institutional structures of universities, publication houses and research institutes.

Of the articles, reports, dissertations and chapters collected, ten were written in Afrikaans, the language which, during the Apartheid era, enjoyed official status along with English (currently there are eleven official languages in South Africa). Afrikaans was the dominant language of the ruling National Party (NP), and the theoretical orientation of Afrikaans historically white universities (HWUs) was ‘essentially conservative, often explicitly racist, and invariably aligned
with promoting the interests of the state' (Jansen, 1991, p. 24). The English-speaking HWUs have traditionally been more liberal and progressive in their approach, with an alignment to capital rather than the apartheid state. Although the language of instruction in the historically black universities (HBUs) is mostly English, many of the academics were Afrikaans-speaking with strong links to the NP. Universities throughout the country are engaging in processes of transformation. Nevertheless, the legacies of apartheid policies and resistances or compliances to these continue to permeate these institutions as well as the attempts at transformation. The Afrikaans/conservative, English/liberal split is in evidence (although not seamlessly) in the teenage pregnancy literature. For example, the Afrikaans texts written by the Doctor Pohl de Villiers quoted in the parliamentary debate discussed in Chapter 3 invoke conservative ethical standards, social values and moral issues, whereas a more progressive ‘revisionist’ approach is taken in the English works of Preston-Whyte and colleagues.

The Afrikaans extracts used in the thesis were translated by myself and checked by an independent fully bilingual person. The translation process was relatively easy for a number of reasons. Firstly, Afrikaans is a grammatically simple language; secondly, scientific Afrikaans has taken on a number of anglicised terms; and thirdly, scientific Afrikaans avoids the idiomatic character of colloquial and creative Afrikaans, both of which are far more difficult to translate. There were a number of words, however, which presented difficulty in terms of the English equivalent not providing as rich a meaning. For example ‘ondoeltreffend’ was translated as ‘ineffectual’; however, ‘ondoeltreffend’ has further implications of not reaching a goal, a meaning which does not come through in ‘ineffectual’. Some words have dual meanings, and the context needs to be examined to decide which fits better (e.g. ‘dogters’ was translated as ‘girls’ not ‘daughters’).

My second source of data was individual interviews conducted with staff of a regional hospital in KwaZulu-Natal. Three of the service providers interviewed work at the Ante-natal Clinic, two at the Termination of Pregnancy Clinic, four at the Youth Health Centre, three for the School Health Services, and one for the Social Work Services. The interviews took place at the hospital in any available private space (some in an office, some in a tea room, some in an operating theatre). Unfortunately, one interview (with a nursing assistant from the Ante-natal Clinic) had
to be discarded because the recording was completely inaudible owing to noise and bad acoustics. An interview schedule was prepared (see Appendix 2), but I used this very loosely, structuring my conversation with the service providers around issues that they brought up. The interviews were taped and transcribed verbatim using the first six of Parker's (1992) conventions:

1. (Round brackets) indicate doubts about the accuracy of the material;
2. Empty square brackets [] indicate that material has been omitted from the transcript;
3. Authorial clarification is done by putting an explanation in [square brackets];
4. Noises of assent /hmm/, /yes/ etc. go between slashes;
5. Interruptions are shown with = marks at the end of one and beginning of the next utterance;
6. Pauses in speech are indicated with seconds in round brackets, e.g. (2) for two seconds, and (.) for less than a second.

The final three conventions proposed by Parker (1992) - indicating extended sound, emphasis in speech, and intake of breath - were not utilise because it was felt that these could become, in Parker's (1992) own words, 'artefact(s) of transcription reflecting interpretation of the material on the part of the researcher [which could be seen as] windows through which we may divine the true intentions of the speaker(s)' (pp. 124-125). Furthermore, it was felt that as three people would be working on the transcription, the fewer transcription conventions, the better, in terms of agreement concerning the written text. The text was initially transcribed by a person unfamiliar with the research. This text was checked and changed by a second, independent person, who listened to the tape and read the text simultaneously. The text generated from this procedure was finally checked and changed in the same fashion by myself. The word 'change' rather than 'correct' was used advisedly in the last two sentences, as the process of transcription is one of translation, requiring decisions concerning where to place a full stop, a comma, a pause, inverted commas, etc. so as to reflect as closely as possible what I as listener hear, so that you as reader may 'hear' the same thing when reading the material. Clearly, differences in translation are possible, and there is no one single correct version of a transcription of verbal material.

An important warning in terms of text collection is sounded by Widdicombe (1995). She cautions against treating texts as though they are produced in a social interactional vacuum.
Accounts are produced to address the interactional business deemed relevant to the particular circumstances. Thus, professional literature is created to convince other professionals of the scientific validity of the hypotheses generated and investigated in the research concerning the nature of teenage pregnancy. While the action of research text production appears to be an isolated one (the researcher on his/her own or perhaps with a team in an office), it is actually intensely interactional in the process of scientific legitimation. The collection of the text from the hospital is more clearly interactional. In this respect, I was, as researcher, not a neutral, impartial collector of text. Instead, in the activity of discussion, I and the participants were involved in a mutual process of constructing versions of social reality.

Analysis

Burman (1996c) sounds a warning, stating that in the effort for pedagogy (or is it clarity?), there is a temptation to elaborate procedures rather than perspectives. I concur and have attempted to keep the deconstructive, Foucauldian project of this study constantly in sight. Nevertheless, the need for an explication of the procedures used in the analysis remains, if only to satisfy the experimentally oriented critics (e.g. Abrams & Hogg, 1990). I set out in the analysis to perform a discourse analysis into which I melded a deconstructive approach. The initial discourse analysis is somewhat structuralist in that various discourses are identified. I argue that this stage is necessary in order to get on with the deconstructive work, much the same as Foucault used his archaeological method as a basis for his genealogies. Some structuralist work needs to be undertaken before the post-structuralist work can begin.

In order to perform the initial discourse analysis, I have relied chiefly on Parker’s (1992) seven basic criteria, and Foucault’s (1972) archaeological specifications. The deconstructive element of the analysis draws on Parker’s (1992) three auxiliary criteria, Derrida’s deconstructive method and, more specifically, on Foucault’s analytics of power and governmentality. Although the two overarching themes, discourse analysis and deconstruction, are presented as though they are sequential, they in fact inform each other constantly throughout the process.
While Potter & Wetherell’s (1987) ten descriptive stages (posing the research questions; sample selection; collection of records and documents; interviews; transcription; coding; analysis; validation; producing the report; and application) have value in creating a framework for proceeding with the business of discourse analysis, I found their approach insufficiently developed in terms of depth. They talk of coding the material into ‘chunks’, a term upon which they fail to elaborate (how, for example, is this different from the identification of discourses?). In describing their analysis stage, they make vague suggestions concerning the identification of the organisational features of documents, searching for variability and consistency, and determining the function and consequences of the data. There is a lack of specificity together with insufficient grounding in the social function of discourse (they tend to adopt a more individualistic emphasis on the rhetorical strategies of speakers (Fairclough, 1992)).

In the following, I describe the discourse analytic procedures which I followed in the analysis of the text. The research and service provider texts were analysed separately, with approximately a year between the analyses. However, the same procedure was followed. The first step was to sort the text into thematic chunks. I read and re-read the material, after which I made rough thematic notes, giving each theme a key (1a, 1b, 2a, 2b, etc.). I then re-read the text marking keys next to pertinent chunks of text. I made copies of the material and cut out the marked bits of text. These were then sorted into piles according to the keys. The act of coding, while separate from the business of discourse analysis and deconstruction, is informed by the specifications of discourse and the deconstructive method elaborated upon below. Having done the coding, I could then start with the business of analysis of discourse and deconstruction using, as stated above, Parker’s criteria, Foucault’s archaeological specifications and his analytics of power and governmentality, and Derrida’s deconstructive method. This process required reading and re-reading the piles of text pieces, all the while engaging in the conceptual work required in deconstructive discourse analysis. My reading of the coded text, and my analysis of the material, changed over time, particularly as I started to write up the analysis chapters, and as I continued to engage in reading related to the broad areas covered in the thesis. My selection of the particular extracts featured in the chapters on the scientific literature was guided by their ability to illustrate the discursive event under discussion. As the text with which I was working at the stage of write-up consisted of piles of coded pieces of paper disembodied from their original full-
length texts, the choice of articles, reports and dissertations represented in the extracts was co-
incidental to the discursive work achieved in the extracts.

I encountered some difficulty with the write-up of the chapter on the service provider practices
(Chapter 10). The analysis of the literature was more-or-less completed when I interviewed the
service providers and the started the process of analysis of this material. There were so many
points of overlap with the analysis of the literature that it felt to me that my write-up of the
service provider practices would be repetitious (pointing out that the familialisation of alliance,
racialisation, etc. are also deployed at the level of service provision). However, a re-reading of
Foucault’s work on governmentality allowed me to formulate my analysis in terms of the
mechanisms of security, thus obviating repetitions while at the same time specifying that the
governmental tactics described in the analysis of the literature are re-produced at the interface
between the service provider and the teenager or her family.

Returning to the discourse analysis, Parker’s (1992) seven criteria for distinguishing discourses
are that a discourse: is realised in text; is about objects; contains subjects; is a coherent system
of meanings; refers to other discourses; reflects on its own way of speaking; and is historically
located. Foucault (1972) delineates various levels of discursive formation, viz. the formation of
(1) objects; (2) enunciative modalities; (3) concepts; and (4) strategies.

The first of Parker’s (1992) criteria has been dealt with under the section on discourse and text.
The second is that discourses are about objects. There are two levels of objectification, firstly,
where objects are constituted through discourse (the simple use of a noun gives an object reality),
and, secondly, where a discourse refers to itself or other discourses as if they were objects.
Foucault (1972) delineates three steps in the identification of the formation of objects: (1) map
the first surfaces of their emergence: ‘show where these individual differences which ... will be
accorded the status of disease, alienation, anomaly, dementia, neurosis or psychosis, degeneration
etc. emerge, and then be designated and analysed’ (p. 41); (2) describe the authorities of
delineation; and (3) analyse the ‘grids of specification’ (p. 42). These are the ‘systems according
to which the different [for example] ‘kinds of madness’ are divided, contrasted, related,
regrouped, classified, derived from one another as objects of [for example] psychiatric discourse’
(p. 42). A simple example of a discursive object in this thesis is the pregnant teenager. She is 'contrasted, related, regrouped' and differentially classified with respect to, *inter alia*, the adult parent, the responsible teenager, the innocent child. The surface of emergence of this object is traced by Arney and Bergen (1984), who indicate that the pregnant teenager became visible in the late 1960s, early 1970s. She was separated from and began to replace the unwed mother and bearer of illegitimate children. She became an object of scientific inclusion rather than an object of moral exclusion.

The third criterion is that discourses contain subjects. A discourse allows a space for a certain type of self - 'it addresses us in a particular way' (Parker, 1992, p. 9). This criterion links up with the idea of interactive and reflexive positionings made by Davies & Harré (1990). Interactive positioning is where one person positions another within a particular discourse, while reflexive positioning is where a person positions him/herself. Something which is accorded object status may also have subject status within a discourse. Thus, the pregnant teenager is not only an object but also a subject. She is allowed certain subject positions (e.g. as an inadequate mother, as an irresponsible user of contraception, etc.).

Parker’s (1992) third criterion has some similarities with Foucault’s (1972) enunciative modalities in that one of the characteristics of enunciative modalities is that ‘the positions of the subject is specified by the situation that it is possible for him [sic] to occupy in relation to the groups of objects’ (p. 51). However, Foucault extends the enunciative modalities to specify: (1) Who is speaking? Who is ‘qualified’ to use this sort of language? and (2) the institutional sites from which the person speaks, e.g. the hospital or school. In defining the scientific reality of teenage pregnancy, for example, it is the expert (the researcher, the trainer, the health service provider, the teacher) who is qualified to make pronouncements, from the institutional settings of the university, the hospital, and the school, concerning the nature of the pregnant teenager, and the correct methods of intervention.

The fourth criterion relates to discourses presenting a coherent system of meanings. They map a picture of the world and include ways of dealing with objections to that view. This corresponds to Foucault’s formation of concepts, which are rules operating within the discursive level itself.
Foucault puts forward a description of this regularity quite different from the traditional account of the internal rules for constructing concepts available to the psychological subject (Dreyfus & Rabinow, 1982). He showed that concepts shift, overlap and reorder without recourse to an immanent rationality. Instead, his analysis turns to the system of discursive practices to account for the continuity and discontinuity of concepts (see earlier discussion of the regularity of discourses within variability). In the analysis chapters which follow, the coherence as well as the slippages, shifts and contradictions contained in the psycho-medical account of teenage pregnancy are highlighted.

The fifth and sixth criteria are linked in that they define the boundaries or limits of a discourse. The fifth criterion is that a discourse refers to other discourses. A discourse will ‘presuppose other discourses to the extent that the contradictions within a discourse open up questions about what other discourses are at work’ (Parker, 1992, p. 13). The sixth criterion is that a discourse reflects on its own way of speaking. This is where the terms used within the discourse are commented upon, for instance ‘for want of a better word’, or ‘don’t get me wrong’. Derrida’s notion of absence and presence refers here in that the written or spoken word always contains traces of its complement or absence. Foucault (1972) recognises this: language, he states, ‘always seems to be inhabited by the other, the elsewhere, the distant; it is hollowed by absence’ (p. 111). This criterion means that implicit themes suggested by absence of certain terms should be analysed.

Foucault’s (1972) formation of strategies broadly relates to criteria five and six. At this level of formation one needs to determine the possible ‘points of diffraction’ (p. 65) of a discourse. These points are characterised, firstly, by points of incompatibility, and, secondly, as points of equivalence. These are linked into points of systemization: ‘on the basis of each of these equivalent, yet incompatible elements, a coherent series of objects, forms of statement, and concepts has been derived (with, in each series, possible new points of incompatibility)’ (Foucault, 1972, p. 66). Furthermore, one studies ‘the economy of the discursive constellation to which the alternatives which have been realised (not all alternatives are realised) belong’ (p. 68). These alternatives are the discourses to which a discourse will refer (Parker’s fifth criterion). The field of psycho-medical research, discussion and debate concerning
psychologised objects (such as the pregnant teenager) is a prime example of these criteria. There are several areas of incompatibility with heated argument being conducted concerning, for example, the role of socio-economic status, race, family background, psychological features, etc. in teenage pregnancy. I have indicated that one of the main points of diffraction is between the ‘traditionalist’ and ‘revisionist’ writers’ approaches. And yet, a coherence around the reality of teenage pregnancy and the need to investigation and intervention remains.

Parker’s final criterion is that a discourse is historically located. A discourse is not timeless, but is constituted by discourses in the past. A discourse ‘poses the problem of its own limits and transformations, the specific modes of its temporality; it does not suddenly irrupt in the midst of the complicities of time’ (Foucault, 1972, p. 118).

The application of Parker’s seven criteria represents the more structural component of the analysis. The deconstructive aspect of the process relied, as stated previously, on Derrida’s deconstructive method and Foucault’s analytics of power and governmentality in his genealogical works. Although the processes are written up as if they were linear, this was not the case in the actual analysis. While performing the identification of discourses, I was constantly involved in deconstructive work, and vice versa. The two processes inform and feed on each other.

Derrida’s process of deconstruction turns oppositions into supplements, highlighting the absent, undermining the stability of the text and allowing for alternative readings. His device of sous rature (under erasure - see discussion in Chapter 2) has been formulated by Parker (1989) as follows: (1) identify an opposition, and show how one of the terms is dominant in the truth stakes over the other (e.g. teen mother = inadequate mother in opposition to adult mother = good mother, with good adult mother dominant over good teen mother); (2) subvert the opposition between the two terms by demonstrating that the privilege the dominant term enjoys can be made untenable (e.g. by demonstrating that the definition of ‘good mother’ relies on historically specific taken-for-granted assumptions concerning the nature of mothering - see Chapter 7); and (3) sabotage the conceptual opposition. The third step can be accomplished by extending the meaning of the term (e.g. mother) to include what we commonly label the opposition (e.g.
teen/adult or good/bad mother). Alternatively we could employ a different term (e.g. primary caregiver) which would prevent the opposition from reasserting itself.

Johnson (1972) highlights that deconstruction does not mean ‘textual vandalism designed to prove that meaning is impossible. If anything is destroyed in a deconstructive reading, it is not meaning but the claim to unequivocal domination of one mode of signifying over another.’ (p. xiv). Deconstruction does not attempt to point out the weaknesses and stupidities of the author, but rather how what s/he does not write/speak is systematically related to what s/he does write/speak. In deconstruction one locates

the text's ‘navel’, as it were, the moment that is undecidable in terms of the text's apparent system of meaning, the moment in the text that seems to transgress its own system of values ... which harbors the unbalancing of the equation, the sleight of hand at the limit of the text which cannot be dismissed simply as a contradiction ... a moment that genuinely threatens to collapse that system (Spivak, 1976, p. xlix and p. lxxv).

Deconstruction is not a critique of the text from a certain perspective:

The movements of deconstruction do not destroy structures from the outside. They are not possible and effective, nor can they take accurate aim, except by inhabiting those structures. Inhabiting them in a certain way, because one always inhabits and all the more when one does not suspect it (Derrida, 1976, p. 24).

However, there is a danger in deconstruction, as it can turn into an attempt to reappropriate the text, showing it what ‘it does not know’. As Spivak (1976) puts it, ‘the critic [may] provisionally forget that her own text is necessarily self-deconstructed, always already a palimpsest’ (p. lxxvii).

On the other hand, deconstruction deconstructs deconstruction, thus providing ‘a way out of the closure of knowledge ... the lure of the abyss as freedom ... the pleasure of the bottomless’ (Spivak, 1976, p. lxxvii).

The question thus arises as to where erasure ends, as the erased sign is brought to a new level of presence. The answer, it appears, is that deconstruction is never complete; it is interminable, unless terminated by the practical analyst. Furthermore, while a concept may be deconstructed, it may be necessary to continue to use it, as there may be nothing with which to replace it. However, the usage is in a detotalised, deconstructed form; the concept can no longer operate within the paradigm in which it was originally formed (Hall, 1994).
In the Foucauldian aspect of the deconstructive analysis, I utilised an extended version of Parker’s (1992) three additional criteria, and the theoretical insights of the feminist oriented Foucauldian approach outlined in Chapter 2. Parker’s first additional criterion is that discourses support institutions (in this case youth health centres, school health services, ante-natal clinics, and research centres such as universities); they validate certain institutional discursive practices while attacking or marginalising others. His second is that discourses reproduce power relations. Parker suggests analysing what categories of people would gain and which would lose from invoking a particular discourse, and who would want to promote the use of the discourse and who would want to discourage it. The problem with these propositions is that categories of people threaten to take on rigid or real status. There is a danger of a slippage into the transcendental subject. The contradictory nature of subjectivity is suppressed. For example, I may want to promote a certain discourse, say feminism, in certain instances but not in others. While the analysis of power relations is, of course, essential in a Foucauldian project, I believe we would be more in line with the Foucauldian project if we identified: (1) what it is that people stand to gain (e.g. research grants, funding for additional staff for a youth health centre, the description of expert regarding adolescent sexuality and reproduction, etc.) by invoking certain discourses, or by engaging in certain discursive practices at particular socio-historical moments; and (2) the construction of the type of person (the ‘researcher’, the ‘pregnant teenager’ etc.) who would seek to promote or, alternatively, would seek to discourage the use of a certain discourse. Furthermore, the analysis should extend to investigating what disciplinary technologies are used, and how these produce, regulate and normalise the subject. We need to look at how certain forms of subjectivity are validated while others are marginalised. This type of analysis needs to focus on power in its multiplicity. Resistant and dominant discourses should not be represented as taking bipolar positions but rather as operating in a ‘net-like organisation’ (Foucault, 1980b, p. 92).

Parker’s (1992) final additional criterion is that discourses have ideological effects. Parker retains the use of the word ideology as opposed to Foucault’s ‘regimes of truth’. He discusses the traps that can ensnare us in using the word ideology, but believes that its retention is important in terms of its progressive political effects. There is not sufficient space to engage in a debate around the notion of ideology here (see Eagleton’s (1991) thorough analysis). However,
it appears to me that in his elucidation of the ‘steps’ required in performing this criterion, Parker describes a distinctly Foucauldian project. He posits that one should show how a discourse connects with other discourses which sanction oppression, and how discourses allow dominant groups to ‘tell their narratives about the past in order to justify the present’ (p. 20). Thus, while Parker may find the notion of ideology useful, it does not appear to be essential.

Conclusion

In this chapter, I have discussed conceptualisations around the notion of discourse, its underlying regularity, its constructive effects, and the implications in terms of meaning and practices. There are various dualistic tendencies (discourse/real; practices/discourse; text/discourse; text/context; discourse/the extra-discursive) that may creep into discourse analytic work. In attempting to avoid these dichotomies, I have followed Parker (1990a) in positing: (1) that discourse is realised in text (anything that can be given interpretive gloss); (2) there is nothing outside the text; and (3) objects can simultaneously be inside and outside of texts. Also, Fairclough’s (1992) conceptualisation of the discursive ‘event’, which is simultaneously a piece of text, an instance of discursive practice and an instance of social practice, is useful, as it allows for a saturation of practice with discourse and vice versa.

In this thesis, I have utilised a methodology which I have termed deconstructive discourse analysis. Some structuralist work has been undertaken in terms of the identification of discourses surrounding teenage pregnancy. However, this is constantly infused with the deconstructive work which relies on Foucault’s analytics of power and governmentality, and Derrida’s method of sous rature. The aim therefore is to analyse ‘regimes of practice’ surrounding teenage pregnancy by investigating their prescriptive effects regarding action (effects of jurisdiction) and their codifying effects concerning the known (effects of veridiction) (Foucault, 1991b), while at the same showing that what is known, what is present or dominant, is dependent on the absent trace. The texts which formed the basis for the analysis were: (1) South African research and literature on teenage pregnancy; and (2) transcriptions of individual interviews with service providers at a regional hospital. In the analysis, I utilised Parker’s (1992) ten criteria, Foucault’s (1972) levels of discursive formation, Derrida’s process of deconstruction, and the theoretical
framework outlined in Chapter 2. The results of this analysis are laid out in the following chapters. Chapter 5 elaborates on the governmental tactics deployed specifically around the pregnant teenager, viz. the medicalisation, psychologisation and pedagogisation of teenage pregnancy. Chapter 6 elucidates how the concept of teenage pregnancy relies on taken-for-granted assumptions concerning the nature of adolescence and adolescent (hetero)sexuality. Chapters 7, 8 and 9 relate how broader governmental tactics, viz. the familialisation of alliance, racialisation, and the economisation of activity, are deployed in the literature on teenage pregnancy, and how this literature, in turn, in invoking these tactics, contributes to their solidification as governmental strategies. In Chapter 10, I turn to the service provider practices, indicating how the mechanism of security is utilised to install the governmental tactics discussed in the previous chapters at the level of practice.
CHAPTER 5
THE GOVERNMENTALITY OF TEENAGE PREGNANCY: MEDICALISATION, PSYCHOLOGISATION AND PEDAGOGISATION

In this chapter, I review how teenage pregnancy is governed through the simultaneous medicalisation, psychologisation and pedagogisation thereof. The pregnant teenager has shifted from being a moral problem who is dealt with through practices of exclusion to being a technical or social problem subjected to technologies of correction and normalisation (Arney & Bergen, 1984). She has become the object of government, subjected to practices of inclusion, requiring analysis, evaluation, diagnosis and remediation. The medicalisation, psychologisation and pedagogisation of teenage pregnancy allow for the collection of a positive knowledge concerning the pregnant teenager, the deployment of technologies of security, and the management of risk. In Chapter 10, the installment of the technologies of security in the interaction between the teenager and the service provider is analysed in more depth.

In the History of Sexuality: Vol 1, Foucault (1976) talks of the emergence of a discourse on sex within the medical establishment during the eighteenth century: ‘one had to speak of it as of a thing to be not simply condemned or tolerated but managed, inserted into systems of utility, regulated for the greater good of all, made to function according to an optimum’ (p. 24). He traces how the rituals of the confession came to function within the norms of scientific regularity. The speech of the patient was codified in clinical terms through, inter alia, the examination, the questionnaire, the deployment of a set of signs and symptoms; sex became endowed with ‘polymorphous causal power’ (p. 65), but was, simultaneously, latent, or elusive by nature, thus requiring confession; the one receiving the confession no longer merely forgave or judged, but deciphered and interpreted: ‘he was the master of truth’ (p. 67); the domain of sex was ‘medicalised’, or ‘placed under the rule of the normal and the pathological’ (p. 67, my emphasis).
In this chapter, I analyse how teenage (hetero)sexuality and reproduction is managed, normalised and pathologised within a medicalised discourse. In the analysis, I have utilised aspects of Butchart’s (1995) genealogy of socio-medical discourses regarding the African body in South Africa. Butchart (1995) traces the course of missionary medicine (characterised by the spectacular theatre of healing and the ordered observation of the hospital), mining medicine (in which ‘a vast industrial Panopticon spread an observing network of disciplinary surveillance ... to create its workforce of migrant labourers’ (p. 162)), sanitary science, social medicine and community health. It is on the latter three that I shall be concentrating in this chapter. However, before discussing these, I take a brief detour to discuss the notion of medicalised visibility and its association with audibility, as these concepts (visibility, audibility, and the medical, psychological and pedagogical gaze) are used throughout this chapter.

In *The Birth of the Clinic: An Archaeology of Medical Perception*, Foucault (1976) describes the break of the modern understanding of disease with that of Classical medicine. He traces this to the development of what he calls the ‘clinic’, which was simultaneously a new institution, the clinical hospital, and a new style of medical thought and practice. Central to this was the clinical gaze. Foucault (1973) puts it as follows:

> At the beginning of the nineteenth century, doctors described what for centuries had remained below the threshold of the visible and the expressible, but this did not mean that, after over-indulging in speculation, they had begun to perceive once again, or that they listened to reason rather than to imagination; it meant that the relation between the visible and invisible ... changed its structure, revealing through gaze and language what had previously been below and beyond their domain (p. xii).

Thus, the gaze shifted from a perception of the surface of the body to one in which the secrets and essences of the body were revealed, to one of ‘invisible visibility’ (Foucault, 1973, p. 149). The visual and the aural are intricately linked as ‘The clinical gaze has the paradoxical ability to hear a language as soon as it perceives a spectacle’ (Foucault, 1973, p. 108). Thus the medical or psychologised gaze provides the grids of visibility for the hidden, the interior, the unconscious, etc., simultaneously rendering these aspects audible as language is created to discuss their meanings or essences.
Returning to Butchart’s (1995) genealogy, sanitary science recognises only the anatomical identity of the body; it aims to achieve control over the exchange of matter between the inside and the outside of the body through external coercion; the gaze is oriented towards the interior of the body, monitoring lesions of an anatomical nature. Social medicine, emerging later than sanitary science, criticises the latter for dividing the indivisible person. It ‘demand[s] a technology of seeing that can dissolve the binary division of the population into the ill and the healthy and so induct everyone into its network of visibility’ (p. 252). This it does through the construction of personal and public health in which the habits of individuals are trained in the direction of greater attention to the well-being of themselves and their families. Thus through the public health gaze, effected primarily through the survey, we have the ‘medicalisation of everyday life’ (p. 252). Everybody must be made the well; the nation must maintain health. Hence the focus shifts to health education (the insertion of pedagogy), and the creation of a subject who is to become his/her own overseer (through a process of psychologisation). Community health emerged as a counter to social medicine’s treatment of personal idiosyncrasies and cultural variations as barriers to the cultivation of a uniform, regimented health consciousness. Within the space of community health, ‘traditional’ health beliefs and behaviours are co-opted into the production of health: ‘[T]hrough the ‘community diagnosis’ and treatment of illness the individual was transformed into a ‘microcosm of his culture as a whole’’ (Butchart, 1995, p. 273). Epidemiology is the community health version of the clinical examination. With this came the invention of ‘lifestyle’, and the focus on the precursors to future illness, which demanded the management of ‘risk’ and ‘risk factors’. ‘This installed a temporal element and made visible the environment - the surface of visibility upon which the ‘socio-ecological model’ of the new public health would begin to unfold’ (Butchart, 1995, p. 277). Each of these discursive events (viz. sanitary science, social medicine, and community health) are utilised, to some extent, in the medicalisation of teenage pregnancy, although the social medicine discourse appears to pre-dominate.

The psychologisation of teenage pregnancy has strong resonances with the medicalisation thereof, in particular with social medicine and community health. It refers to those processes which render the body, the self, emotions, the mind, the psyche and the relationship visible within psychologised discourses (Rose, 1990). The chief mechanism utilised is the confession
in which the most private and intimate details of the person’s inner being are ‘amplified to audibility’ (Butchart, 1995, p. 336). The process requires a simultaneous pathologisation and normalisation of psychologised wellness. The person, his/her behaviour, psyche, and relationships are evaluated according to (mostly unstated) norms. But, in the words of Rose (1989a):

Normality is not an observation but a valuation. It contains not only a judgement about what is desirable, but an injunction as to a goal to be achieved. In so doing, the very notion of ‘the normal’ today awards power to scientific truth and expert authority (p. 123).

These norms, while appearing fixed, are in a state of constant flux. On the basis of the normalisation and pathologisation process, mechanisms of motivation and reformation are installed by which the person’s experience of living and functioning are constructed and regulated.

In the pedagogisation of teenage pregnancy, we have the deployment of a set of ‘facts’ regarding (hetero)sexuality, contraceptive usage, correct sexual and reproductive relations, pregnancy and birth, in the sex education of teenagers. Educators, doctors, nurses, social workers, psychologists, parents and adolescents are incited to talk about sex. Pedagogisation is designed to protect the adolescent from his/her dangerous sexual tendencies, and to make everybody well. It prevents or obviates problems in the making, inducting everybody in the overseeing of his/her state health. The gaze thus shifts to a pedagogical one in which the adolescent is monitored to ascertain whether normal sexual and emotional development is taking place; programmes of educative remediation are implemented where normal development is lacking or where it is suspected that there is a risk that it could go awry.

As will be seen below, the medicalisation, psychologisation and pedagogisation of teenage pregnancy are interpenetrated at a number of interstices. For example, the prevention rhetoric evidenced in the medicalisation and psychologisation of teenage pregnancy introduces and legitimates the tactic of pedagogisation, while the pedagogisation of teenage pregnancy relies on the pathologisation of certain behaviours, relationships and emotions to inform the content of its curriculum. In its move from sanitary science to social medicine and community health, the medicalisation of teenage pregnancy relies on psychologised notions which promise to render
the individual psyche, family and social relations, and cultural variations understandable. Psychologisation, on the other hand, requires the backdrop of the clinical examination, health and illness, and diagnosis to render its statements of normalisation and pathologisation of the human condition sensible. In the following, I trace how teenage pregnancy is: medicalised through the deployment of sanitary science, social medicine and community health; psychologised through the process of the normalisation and pathologisation of certain personalised and social practices; and finally, pedagogised. An analysis of how the positioning of the expert as knowledgeable, caring and ethical legitimates the deployment of these governmental tactics concludes the chapter.

The medicalisation of teenage pregnancy

Sanitary science

Sanitary science inserts the medical gaze into the body of the adolescent, either normalising or, mostly, pathologising her reproductive ability. For example:

Extract 5.1

The younger the teenager, the more dangers are believed to attend the young mother and her infant during pregnancy and birth. Among these obstetrical problems are pregnancy induced hypertension, anaemia, premature labour, occipito-posterior presentation, cephalopelvic disproportion, vaginal lacerations as a consequence of the tight nulliparous perineum and low birth mass infants (Boult & Cunningham, 1992b, p. 163/164).

The positioning of adolescents as ‘not adult’ (see Chapter 6 for fuller discussion) combines with the vast discursive field of reproductive biology to render the adolescent as reproductively inadequate on an anatomical level (her pelvis or vagina are deficient or, alternatively, she produces an inadequate baby who is born early or weighs too little or presents in the wrong fashion). This legitimates the management of the problem through the clinical examination, or through ante-natal care.
The clinical examination continually reproduces the notion of the doctor/nurse as the observer of the interior of the body, a site hidden from the patient herself. This medical gaze is not, as Butchart (1995) points out, a cognitive or perceptual skill developed by the doctor through training. Rather it is the technology through which the body of the patient is simultaneously constructed and restrained. It allows and limits what the doctor can see, how s/he describes the functions of the body, and how s/he practices or intervenes in the bodily area of concern. The examination thus becomes the site at which capillary power installs itself, locking the patient and practitioner in particular power relations. It is a power which is simultaneously individualising and totalising (see Chapter 2 for an explication of Foucault’s linkage individualisation and totalisation), as seen in the following extracts:

**Extract 5.2**

Management obviously depends on the assessment of the patient and many factors have to be considered (Rockey, 1986, p. 17).

**Extract 5.3**

Each case is assessed on its own merits (Nash, 1990, p. 310).

As each person is ‘unique’, the doctor prescribes interventions based on this uniqueness. Totalisation operates in two ways here. Firstly, owing to the individualisation of the assessment, the patient is induced to follow the prescriptions of the programme set for her. Secondly, as the consideration of the ‘factors’ needed in the assessment relies on the characteristics of similar others, the individual joins the ranks of those normalised or pathologised within that category.

Ante-natal management allows for what Butchart (1995) has termed the external co-ercion of the adolescent’s reproductive health:

**Extract 5.4**

It is acknowledged that early and regular prenatal care substantially improves the outcome for both mother and infant (Boult & Cunningham, 1993, p. 5).
Extract 5.5

The tendency of pregnant teenagers to present late at antenatal clinics, or not attend at all has been consistently referred to ... Several authors ... make an association between paucity of antenatal care and LBW [low birth weight]. This is because nutritional and iron and foliate supplements are not able to be administered, no maternal weight gain monitored, leading to foetal growth deprivation (Boult & Cunningham, 1993, p. 47).

We see in these extracts how teenagers are incited to attend antenatal care so that they can be monitored. Resistance to this is met with expert concern as opportunities for reproductive surveillance, as well as for the management of the exchange of matter across the boundary between the external and the internal (the administration of supplements), are lost through this non-attendance.

Social Medicine

As noted previously, social medicine emerged as a result of the tension created in sanitary science in the division between the population of the ill and population of the well. It is through the introduction of the socio-medical discourse in the literature on teenage pregnancy that the sanitary science discourse is countered, but also, paradoxically, accommodated, as in the following excerpt:

Extract 5.6

Having said that maternal age alone does not have adverse effects on the outcome of pregnancy, it is still true that adolescent childbearing is associated with several problems, most of which are of a social nature (Mukasa, 1992, p. 423).

This passage counters the pathologisation of teenagers’ reproductive capacity on the basis of age, and allows the teenager to join the adult ranks of anatomically inspected reproductive women. However, by attaching ‘social’ to her status, the door is opened for the introduction of social medicine. In social medicine, the emphasis shifts from the clinical gaze focussed on the individual anatomy of the pregnant teenager to the social management of teenage (hetero)sexuality. This is effected through ‘preventive’ programmes - sexuality education and counselling - which allow for the deployment of the psychologised and pedagogised gaze (see
later discussion). In this process, everybody (the well and the unwell) are inducted into the network of visibility, and the individual is co-opted into managing her/his own (hetero)sexuality. For example:

**Extract 5.7**

These figures could possibly be lowered if teenagers could be counselled before they became sexually active. Sex counselling programmes should not only be directed at females, but should include the male adolescent, [sic] it is important to highlight all the possible consequences of sexual activity, because he must understand that the decision to become sexually active can change his life as well as that of his sex partner dramatically (Keogh, 1988, p. 30).

**Extract 5.8**

They [adolescent multiparas] need education and information to enable them to make reasoned choices about both the spacing of their pregnancies and the prevention of any more unplanned and unwanted pregnancies (Boult, 1992, p. 17).

The preventive action aimed at in Extract 5.7 is abstinence, and in extract 8 is reproductive planning. In Extract 5.7, we see how, through the psychologised notions (see later discussion on psychologisation) of understanding, knowing the consequences and decision-making, the male adolescent is handed the task of monitoring his own sexual activity (see Chapter 10 where the incitement to the technologies of the self is discussed in more detail). The expert’s task is to observe and survey the behaviour of the adolescent, ascertaining whether he is displaying sufficient understanding and adequate decision-making skills. Should this not be the case, further pedagogical efforts are indicated. Although the adolescent ostensibly has freedom of choice (humanist discourse), the content of the ‘correct’ decision is made clear in the passage. Should he choose to engage in early sexual activity, having been assisted by the expert in ‘understanding’ the ‘consequences’, he is automatically positioned either as irresponsible or deficient in understanding. The deployment of ‘reason’ to legitimate certain positions concerning sexual activity and pregnancy is also evidenced in Extract 5.8. Spacing and prevention are presented as rational responses, whereas further pregnancies are assumed to be unplanned and unwanted, and therefore unreasonable. These ‘reasonable’ choices are entrenched by the pedagogical certainty of ‘education and information’. Thus, the adolescent is disciplined through the assurance of choice, which is simultaneously limited by the superior knowledge of
the expert as to what constitutes rational and healthy behaviour.

The social medicine discourse allows for an extension of the surveillance of adolescents. Consider the following extracts:

**Extract 5.9**

Underpinning the provision of quality health care to women ... is the need to strengthen preventive programmes that promote adolescent well-being (Parekh & de la Rey, 1997, p. 223).

**Extract 5.10**

Any preventive effort therefore should be part of a multi-disciplinary, holistically integrated approach, addressing the social and welfare needs of adolescents (Schoeman, 1990, unpaginated).

The expert’s role is to be knowledgeable about and to promote health (rather than merely register and treat anatomical anomalies). S/he must provide ‘quality’ health care (Extract 5.9). The divide between the unwell (pregnant) and the well (non-pregnant) thus becomes blurred; the promotion of ‘well-being’ allows for the extension of surveillance to all adolescents. The gaze which determines health and welfare is exercised not only by doctors and nurses, but also by other professionals, such as social workers, teachers, and psychologists of the multi-disciplinary team (Extract 5.10). This inclusion allows for not only an extension but also a deepening of the surveillance of teenage sexuality, as there is no aspect of the teenager’s life which escapes attention.

**Community Health**

Social medicine’s treatment of the social as unitary allowed for the emergence of community health in which cultural variation is invoked in the analysis and treatment of problems. Consider the following quote:
Additional sociocultural and political factors regarding the avoidance of contraceptive use is evident in African countries. High cultural and social value is placed on fertility, which makes pregnancy a valued state. In oppressive African regimes political reasons for the non-use of contraceptives exist. They revolve around a claim for autonomy from state interference in family affairs, as in Algeria, and state imposition of contraceptive use, as in Namibia (Carolissen, 1993, p. 13).

Cultural and political diversity are cited here as factors in the perpetuation of teenage pregnancy. Instead of a uniform notion of wellness and health, the community health discourse introduces peculiarity and difference. It allows for the possibility of resistance to the social medicine discourse of prevention as interpreted by the expert (people may not use contraceptives as advised by health practitioners because of the ‘cultural’ value placed on fertility). It accommodates diversity, thereby undermining resistance to the community oriented medical practitioner (who understands and tolerates diversity, working within the framework of ‘cultural’ beliefs and peculiarities). Consider the following extracts:

**Extract 5.12**

[Daar is] ‘n behoefte aan ... die aanvaarding deur die mediese personeel van kulturele gelowe soos toorkuns [There is a need for the acceptance by medical personnel of cultural beliefs such as witchcraft] (Fouché, 1992, p. 77).

**Extract 5.13**

Cultural values such as that placed on fertility in many parts of the black community need to be recognized, as does the widely held belief in the black community that the fostering of contraception and family-planning strategies by government agencies is merely a cloak for attempts to limit and control the black population (Preston-Whyte, 1991, p. 46).

**Extract 5.14**

For sexuality education to be acceptable for black youths, it should fit into their subculture instead of expecting their lifestyle to adapt to the functioning of services (Schoeman, 1990, p. 17).

Cultural beliefs (Extracts 5.12 and 5.13) and values (Extract 5.13) are brought into the plane of sight here, not for evaluation and censure, but for recognition (Extract 5.13) and acceptance (Extract 5.12). Service providers are incited to adapt their practices to the peculiarities of culture or sub-culture (Extract 5.14). Thus the expert becomes flexible, understanding, and compliant.
to local conditions. However, the deployment of the cultural metaphor masks a number of inequalities. Firstly, it is to be noted that ‘culture’ has ‘values’ and ‘beliefs’ which, implicitly, are counterposed to the factual knowledge of the expert. Secondly, the notion of culture is only introduced when referring to ‘Blacks’ or ‘Africans’ or, at times, the teenage subculture. ‘White’ culture is taken as the backdrop against which the cultural variations of Africans manifest themselves (the culturalisation of teenage pregnancy is discussed in depth in Chapter 8). There is no problematisation of the assumptions contained in this backdrop, nor even a recognition of it as ‘culture’, although it may be fleetingly referred to by way of comparison as in the following:

**Extract 5.15**

The high social value which is placed upon fertility and birth in Zulu society makes, perhaps, for a different situation from that in the white community, where premarital pregnancies are (or were a decade or so ago) usually viewed in completely negative terms (Preston-Whyte & Louw, 1986, p. 382).

The ‘community’ emerges as a key factor in the maintenance of health, and is co-opted into the production thereof:

**Extract 5.16**

Tog bly die uiteindelike droom dat die totale gemeenskap verantwoordelikheid moet neem - predikante, gesondheidsowerhede, politici en sakeleiers. ... [M]et die totale betrokkenheid van gemeenskapeleiers in samewerking met ouers en onderwysers [The eventual dream still remains that the total community must take responsibility - ministers, health authorities, politicians and business. ... With the total involvement of community leaders in co-operation with parents and teachers] (De Villiers, 1991, p. 232).

**Extract 5.17**

A useful community based approach involving the ‘community health activists’ could possibly be developed in preventative education. This could involve community health workers training peer groups in general sexuality education and life skills. ... The trained peers could then form zonal groups and establish ‘teenage clubs’ which focus not only on sexuality education but also have other activities which are of interest to teenagers. The important difference between this approach and established ones is the fact that teaching methods will be less didactic, encouraging participation (Carolissen, 1993, p. 42).
The net of responsibility is spread to ‘community’ leaders in terms of community health, as seen in Extract 5.16. Preventive action is now not merely the domain of the service provider or expert, but is rather in the hands of the ‘community’. ‘Total involvement’ and commitment to the well-being of the community is incited. However, it is not only the leaders who are co-opted into the ‘co-operative’ relationship of overseeing teenage (hetero)sexuality and taking responsibility for the consequences of sexual activity, but also the peer group, as seen in Extract 5.17. As with the ‘community’, the ‘peer group’ is assumed to be homogenous. This homogenisation is what allows the speaker to refer to the ‘community’ or the ‘peer group’ in the singular. There is an assumption of commonality, which is constantly reproduced through the deployment of these terms. Exactly what these commonalities are, remains unstated. The community health discourse thus simultaneously refers to the notions of diversity and commonality. This reflects the simultaneous individualisation and totalisation referred to by Foucault - a process which operates on the individual level. The individual is described as unique, and the community as diverse. At the same time, the individual is depicted as conforming to certain normalised patterns (and hence, is totalised), while the community is portrayed as a bounded unity, following certain trends and allowing or disallowing particular behaviour patterns.

Extract 5.17 further highlights the disciplinary power relation contained in the community health discourse. We have the ‘community health activists’ as the initiators of the programme. The word ‘activist’ implies movement or ability to perform change. These activists (who, for some reason, are put into inverted commas) turn out to be none other than the health workers. The health worker’s task thus shifts from one of overseeing the individualised patient, to overseeing and mobilising groups of people. S/he apparently has been divested of power, as s/he no longer instructs or directs (s/he is not didactic). Instead, s/he mobilises the community and elicits their participation. It is precisely this type of ‘participatory’ rhetoric that masks the operation of disciplinary technology in the community health discourse. The community is now attributed with a free will and decision-making power, much the same as the humanistic individual. The community thus becomes its own overseer, managing and producing its own health and well-being, disciplining itself, and creating the conditions of possibility for certain actions while disallowing others. The rhetoric of ‘participation’ creates the illusion of a free-flowing process,
which will naturally take place, given the correct approach and conditions. The health worker is constructed as merely the catalyst in this process.

Part of the task of communities is to manage and reduce those factors considered to be ‘risk’ factors (see a fuller discussion of the management of risk and the technologies of security in Chapter 10). ‘Risk’ is paradoxical, however. While it is the ‘community’s’ task to manage and reform those ‘lifestyle’ practices and choices that are defined as precursors to a state of illness, it is the expert who defines what those risk factors are, as seen in Extracts 5.18 and 5.19 below:

**Extract 5.18**

A health belief model which was used as a conceptual framework, assisted in analysing their high-risk behaviour, i.e. unprotected sexual behaviour leading to pregnancy (Mosidi, 1992, unpaginated).

**Extract 5.19**

The relative risk values increase when the teenagers are disaggregated into groups reflecting inadequacy of antenatal care, and non-married status (Cameron, Richter, McIntyre, Dlamini & Garstang, 1996, p. 3).

The management of risk is linked to a discourse of security, both personal and societal, as evidenced in the following extracts:

**Extract 5.20**

The perceived threat of single parenthood and the disruption of schooling and its consequences were not sufficient to deter the respondents from high risk behaviour and the perceived benefits of pleasing their boyfriends (Mosidi, 1992, p. 43).

**Extract 5.21**

In the South African situation where the structures of apartheid have encouraged the formation of such a black underclass, bold and positive steps are called for if the tide of black and coloured teenage pregnancies is to be reversed. While these steps must be focussed at one level on preventive action through sexual counselling and the provision of contraception to teenagers, it is emphasized that, at another level, the number of teenage births will not be reduced without radical changes in the socio-political dispensation to which teenagers are the heirs (Preston-Whyte, 1991, p. 46).
Extract 5.20 links single parenthood to a threat to personal security in terms of the fracturing of the production of the economised self (see fuller discussion in Chapter 9), a threat brought on by ‘risky’ behaviour. In Extract 5.21, the use of the word ‘tide’ allows for an association between the threat of a ‘black underclass’ and teenage pregnancy. Thus risk, threat and security are linked to, and allow, as Butchart (1995) delineates, for the emergence of the socio-ecological approach. The political/economic/social begin to displace the individual’s occupation of positions of illness and health, implying that everybody must be involved in insuring against the threat to security (see further discussion in Chapter 10).

The psychologisation of teenage pregnancy

As we saw earlier, social medicine (and, to some extent, community health) utilises psychologisation as one of its strategies in its preventive programmes. Counselling of the individual so as to assist him/her to reach an understanding of his/her psychologised processes is deployed as a technique in the prevention of undesirable behaviour. Psychologisation promises to render the individual, his/her inner self, and relationships understandable, and hence amenable to intervention.

The psychologisation of subjectivity is individualising, a process which masks the totalisation in operation. Consider, for example, the following passages:

Extract 5.22

Pregnancy can occur at anyone [sic] of the three phases of a girl’s adolescent development: in the first phase she is working out counterdependent reactions to her mother; in mid-adolescence she may be working out oedipal issues and; finally, by late adolescence she is often yearning for a heterosexual commitment. These are natural phases of individuation and do not reflect psychiatric disturbance (Nash, 1990: p. 309).

Extract 5.23

Tog blyk dit ook uit individuele verskille dat ... elke adolescent volgens eie behoefte hanteer moet word [ It appears though that on the basis of individual differences, each adolescent must be handled according to individual needs] (Fouché, 1992, p. 142).
The overt issue in Extract 5.22 is that of ‘individuation’. The ‘girl’ is depicted as struggling towards a state of individuality by engaging in various (mostly unconscious) psychological processes. These processes are normalised - they do not represent ‘psychiatric disturbance’, we are warned. Ostensibly, the issue ends here. However, the use of the words ‘phases’ and ‘development’ suggests a totalising element which underlies the seeming emphasis on the individual. These words have the connotation of invariability and naturalness. This allows for the relegation of those not conforming to the normalised phases of development to the status of the troublesome, pathological or deviant. The process of individualisation incites subjects to look deep within to find a truth; it instructs, as we see in Extract 5.23, educators, health practitioners, and parents to arrange environments in such a way that ‘normal’, ‘individual’ development can take place, and to constantly monitor whether this development is in fact occurring.

Historically, two opposing views of psychology’s enterprise have been presented. The dominant one is that psychology explains the real world of humans, and reveals hidden dimensions of the nature of the human condition (be it the psyche, the mind, behaviour, emotions etc.). The radical, alternative view is that psychology distorts real human nature, which is waiting to be set free (see, for example, the anti-psychiatry literature - Szasz, 1970, 1979). A Foucauldian perspective accepts neither of these positions. Rather, through the processes of normalisation and pathologisation, psychology is seen as assisting in the constitution, re-production and regulation of the nature it supposedly reveals or distorts. Thus, for example, in the deployment of the confessional and normalising surveillance in the counselling session, as well as in the psychologised investigations and the proliferation of psychologised discourses concerning adolescent (hetero)sexuality and reproduction, psychology participates in the re-production and regulation of young woman, their gendered relationships, their sexuality and their reproductive behaviour.

Central to the processes of normalisation and pathologisation is the measurement of difference, similarities, the average, the most frequently occurring, etc. Owing to its stated objectivity and scientificity, measurement renders natural the processes it deems normal (on a medicalised and pedagogised as well as a psychologised level). The average and the most frequently occurring
take on the aspect of being natural, of being invariant across time and place. This allows for those falling outside of this terrain to be rendered pathological. The slipperiness of the ‘normal’, and its change in definition over time and in different (con)texts is treated in one of three ways. The first is merely to ignore it, the second, to cast the change in the language of progress, of greater understanding of the phenomenon, and the third, to invoke the liberal tradition of tolerance of ‘cultural’ difference (this is dealt with in more depth in Chapter 8).

There are two areas of deconstruction open in the process referred to above. The first is the problematisation of the object being measured. This requires asking not the question ‘Are these things actually real?’, but rather ‘What were the conditions of possibility under which they were able to be seen as real?’ This is a genealogical enterprise, requiring historical as well as social and cultural enquiry. Arney and Bergen (1984), for example, ask this question of teenage pregnancy. They trace how the concepts of the ‘unwed mother’ and the ‘illegitimate child’ dissolved into the single concept of ‘teenage pregnancy’ in the American literature in the late 1960s/early 1970s. The second area is the problematisation of the notion of measurement. Measurement implies comparison. In order to make comparisons, a starting point is required from which the comparison, and relative calibrations, can proceed. In psychologised terms, this means creating a definitional ideal. For example, in order to be able to talk of pregnant teenagers having low self-esteem, some conceptualisation of normal self-esteem is needed. In the machinations of psychologised discourses on self-esteem, however, the political, social, cultural and historical origin of this conceptualisation is obscured, and the notion takes on the aspect of being natural or pre-definitional.

In the literature, teenage pregnancy is paradoxically normalised and pathologised. On one level, the pregnant teenager is pathologised as an individual, with pregnancy indicating deviant behaviour, emotions, developmental processes or psychological status. At a second level, her individual response is normalised within pathological family relations and formation, social relations, and the vagaries of adolescence. The revisionists introduce a third level, in which the individual and family are normalised, but social structures and arrangements are problematised. Each of these levels of normalisation and pathologisation makes certain political and/or gendered assumptions. The following extracts are illustrative of the three levels referred to:
Extract 5.24

Unmarried mothers have also been found to have feelings of inferiority. Each of the subjects in this study confirmed this as they are plagued by feelings of insecurity, inadequacy and lack of achievement. Thus all the subjects display a tendency towards depression, yet all hide their feelings. Adele, Delia and Elaine’s depression was manifest, however, by evasiveness, passivity and withdrawal (Pond, 1987, p. 164).

Extract 5.25

Die sosiale lewe van die swanger dogters was ontoereikend. Hulle was meestal sku, skaam en teruggetrokke van geaardheid en kon nie maklik kontak met mense maak nie [The social life of the pregnant girls was inadequate. They were mostly shy and withdrawn by nature and could not easily make contact with people] (Brits, 1989, p. 211).

Extract 5.26

Many unmarried mothers report a negative family influence and unsatisfactory parent-child relationships. The most common form of disturbance is parental domination or rejection. In most cases where a parent is domineering, the other is passive and unassertive in the home. Parental discord and the subsequent loss of a parent (usually the father) through separation or divorce is also prevalent. The absence of the father seems to have resulted in object relation and role growth problems, as well as a large proportion of disturbed mother-daughter relationships characterized mostly by much ambivalence (Pond, 1987, p. 51).

Extract 5.27

[T]he pregnancy is in itself a sign of the girl’s deprivation. It is the expression of the need to love and be loved. Often the pregnancy is an instinctive reaction to a death or divorce in the family (Rockey, 1986, p. 16).

Extract 5.28

[T]he number of teenage births will not be reduced without radical changes in the socio-political dispensation to which teenagers are the heirs (Preston-Whyte, 1991, p. 46).

Extracts 5.24 and 5.25 pathologise the pregnant teenager on an individual level. In Extract 5.24, the unmarried teenage mother is defined in terms of the negative of the normalised traits of security, adequacy, achievement, activity, engagement, forthrightness, and mental well-being. The content of these traits is unquestioned (What does it mean to be secure, adequate etc.? By whose standards are these to be measured?). The political and gendered assumptions contained
in these norms remain implicit (see, for example, Sampson (1990) who deconstructs the notion of normality as largely coterminous with the characteristics ascribed to white males living in a liberal democratic society). Note in this extract how the expert is able to determine the subject’s feelings without her being aware of it. She is able to tell that the teenagers are ‘hiding’ their feelings. This function, whereby the expert is able to make the invisible inner workings of the person visible, allows the expert to continue to pathologise the subject despite resistance from her (by, for example, being evasive). In Extract 5.25, we see how the pregnant teenager is positioned as socially inadequate. In order for her to be depicted as shy, withdrawn and unable to make contact, an assumption of certain types of social relations as normal is made. An ideal of assertiveness, forthrightness and the ability to ‘make contact’ is presented.

The second level of pathologisation and normalisation is evidenced in Extracts 5.26 and 5.27. Family relations are pathologised, rendering the pregnancy of the teenager ‘normal’ within the familial context. The familialisation of alliance is dealt with in more depth in Chapter 7. Briefly, however, we see in Extract 5.26 how the family formation and relations within the unmarried mother’s family of origin are pathologised by an implicit assumption of the ‘normal’ family. This normal family has two heterosexual parents between whom there is a lack of discord. Parent-child relations are cast in the liberal mode of assertive non-domination and acceptance. Familial influence is positive which, in this case, means preventing unmarried parenthood. The dominance of this normalised family means that single female parent families are pathologised. As soon as there is no male figure present, the child’s growth and relationship with her mother are portrayed as disturbed. In Extract 5.27, the use of the word ‘instinctive’ naturalises pregnancy within the context of family ‘deprivation’ and allows for the vilification of single parent families. This level of pathologisation extends the expert’s surveillance to the level of the family. It is no longer the individual teenager who needs to be reformed, but the family.

The latter two levels of normalisation and pathologisation (viz. (1) where the individual is pathologised, and (2) where the individual is normalised within the context of pathologised family or social relations) interconnect with social medicine’s pre-occupation with prevention. The third level is imbricated in the community health discourse. For example, in Extract 5.28, the individual and the family are exonerated from blame. Instead, they are the innocent heirs of
a pathologised socio-political dispensation. Their reaction is normalised, and the work that has to done is to 'radically change' the structure of the society. The 'socio-political dispensation', thus, takes on ontological status (it is something to which teenagers can be 'heirs'), a structure which can be manipulated and improved by those who possess the power to do so. This structuralist view of power and society conforms to what Foucault (1978) called the unidimensional juridico-discursive notion of power, where power is viewed as centralised, possessed by particular individuals, coercive and negative, assumptions which Foucault problematised, as seen in Chapter 2.

The pathologisation of teenage pregnancy has implications in terms of the power of the expert to measure, define, predict and intervene in aspects of adolescents’ lives:

Extract 5.29

Die onvoltooide sinne-toets het beklemtoon dat die swanger tieners 'n laer selfbeeld het. [The incomplete sentence test emphasised that the pregnant teenagers have a low self image] (Brits, 1989, p. 196).

Extract 5.30

The findings of this study confirmed that the transition to motherhood is accompanied by a number of psychological consequences that place the teenage mothers at risk in terms of later life adjustment (Parekh & de la Rey, 1997, p. 227).

Extract 5.31

Counselling of pregnant teenagers and their parents is extremely important on account of the traumatic effect of such illegitimate pregnancies (Brits, 1989, p. 235).

The pathologisation of teenage pregnancy allows the expert to utilise instruments to measure the degree of pathologisation, which in turn enables him/her to place the teenager at the 'low' end of the self esteem scale (Extract 5.29). S/he is able to establish hidden or denied needs as noted in Extract 5.24. S/he predicts future scenarios based on the results of 'scientific' studies (Extract 5.30) and his/her intervention is legitimated (Extract 5.31). These expert functions are couched in humanistic terms in which the expert is portrayed as warm and empathetic, establishing rapport with the teenager, and helping to resolve conflicts and psychological problems.
The pedagogisation of teenage pregnancy

The pedagogisation of teenage (hetero)sexuality arises from social medicine’s concern with installing personal health in the habits of individuals. However, it is also appropriated in the community health discourse. Much of the literature on teenage pregnancy in South Africa bemoans the lack of sex education in the schools. Yet, in the words of Foucault (1978):

> It would be less than exact to say that the pedagogical institution has imposed a ponderous silence on the sex of children and adolescents. On the contrary, since the eighteenth century it has multiplied the forms of discourse on the subject; it has established various points of implantation for sex; it has coded contents and qualified speakers. Speaking about children’s sex, inducing educators, physicians, administrators, and parents to speak of it, or speaking to them about it, causing children themselves to talk about it, and enclosing them in a web of discourses which sometimes address them, sometimes speak about them, or use them as a basis for constructing a science that is beyond their grasp - all this together enables us to link an intensification of the interventions of power to a multiplication of discourse (p. 29/30).

In the pedagogisation of children’s sex we have:

> A double assertion that practically all children indulge or are prone to indulge in sexual activity; and that, being unwarranted, at the same time ‘natural’ and ‘contrary to nature’, this sexual activity posed physical and moral, individual and collective dangers; children were defined as ‘preliminary’ sexual beings, on this side of sex, yet within it, astride a dangerous dividing line (Foucault, 1976, p. 4).

This paradox underlies the discourses on adolescent (hetero)sexuality in the literature on teenage pregnancy (see Chapter 6 for fuller discussion). The adolescent, positioned as unstable, irrational and passively accepting external influences, is liable to engage in sexual activity, or worse, in unprotected sexual activity. This is seen as clearly deleterious to herself and others for a variety of reasons (the increased likelihood of conceiving which brings physical and psychological dangers to herself and the child, as well as societal dangers in the form of demographic and welfare concerns). Hence the call for extensive sex education programmes, all of which are designed to protect the teenager from his/her dangerous tendencies. However, the rationale for these programmes is premised on the assumption of the adolescent as opposite to that described above, viz. stable, able to make free, individual, reasoned choices. Within the mainstream literature, these choices, although not explicitly stated, are assumed to match those of the educators. The first choice presented is that of abstinence - a return to a state of innocence, free
from the binds of adult sexuality. The second is a reasoned utilisation of contraception so as to avoid the dangers of indulging in adult behaviour (such as mothering) at too early an age.

The humanist assumption of the adolescent as free, stable and reasonable is what underlies the child-centred approach to education upon which much of the pedagogisation of adolescent (hetero)sexuality relies. The basic premise of this approach is that, given an environment which caters to the child’s needs (i.e. child-centred), the child will develop naturally (Walkerdine, 1984, 1989). S/he does not need to be instructed, directed or moulded but rather facilitated in her/his natural tendency towards emotional, social, mental, behavioural and sexual growth. S/he is the ultimate agent in her/his own learning, and is actively involved in constructing and arranging her/his knowledge. Child-centred pedagogy is, to a large extent, based on the premises of developmental psychology. Thus, within the child-centred environment the child becomes the object of the scientific and pedagogical gaze which ascertains whether normal sexual and emotional development is in fact taking place. If not, the educator, parent, and medical expert are incited to arrange practices of regulation to re-orientate the child on the path of the ‘natural growth’ of her ‘innate tendencies’. Consider, for example, the following passages:

Extract 5.32

Experience has shown that the nursing staff cannot direct, dominate, manipulate or condition adolescents to do precisely what information prescribes them to do. Campaigns therefore have attempted a departure from one-way communication, where the simple model of [sender] → [message] → [channel] → [receiver] assumed an autocratic relationship between the nursing staff and adolescents. The nursing staff should be very aware of the fact that communication is two-way, recognizing the effect of communication of both the receiver as well as the source (Schoeman, 1990, p. 15).

Extract 5.33

From a pedagogic perspective this includes the trust relationship, the understanding relationship and the authority relationship between educator and educant (Oosthuizen, 1990a, p. 45).

Extract 5.34

Sex education should be presented by a person whom they [adolescents] can trust ... [and who has] adequate training, openness and neutrality (Matthews, 1995, unpaginated).
Extract 5.32 illustrates the shift from sovereign power to disciplinary power (what Walkerdine (1984, 1989) calls a shift from overt to covert regulation in her work on education) within the pedagogisation of adolescent (hetero)sexuality. The nurse is no longer able to inscribe certain patterns onto the body or behaviour of the adolescent. Instead, s/he must exercise a pedagogical gaze, which registers the effects of her/his communication on the adolescent (presumably adjusting her/his practice accordingly). Furthermore, s/he must allow confessional space for the adolescent, listening and understanding the adolescent’s individuality, and allowing her to exercise vigilance over her own behaviour (note how the legitimation for the encouragement to communication and confession in this passage is expert ‘experience’, thus placing the expert as somebody who gains knowledge not only from scientific procedure but also from experience). Thus the power or authoritarianism of the educator is ostensibly taken away. S/he is now the benign facilitator, somebody who can be trusted, but who, at the same time, is knowledgeable (Extracts 5.33 and 5.34). The educator is assumed to be a fully functioning, rational, actualised human being who is facilitating the less developed along the path of emancipation. S/he is scientifically knowledgeable and neutral about sexuality, being open, understanding and trustworthy concerning the topic of sex (Extract 5.34).

Yet not all potential mentors make the grade. Parents, in particular, do not, as seen in extract 35 below:

**Extract 5.35**

Communication patterns at home are not conducive such that [sic] teenagers can opt for guidance from their parents even if they feel that they need such guidance (Mkhize, 1995, p. 83).

The family is rendered inadequate in the transfer of sexual information. This function is arrested from the familial domain by the expert who, exercising a pedagogic gaze formulated on scientific principles, assists the adolescent in her process of sexual individualisation. Through pedagogisation, adolescent (hetero)sexuality and reproduction enter the domain of social concern, rendering them a matter of public health and welfare, as well as of social and economic security (see Chapter 9 and 10 for fuller discussion of security).
In this section, we have seen how: (1) sanitary science constructs the anatomical identity of the pregnant adolescent as inadequate, thereby legitimating the medicalised gaze of the clinical examination and ante-natal care; (2) social medicine extends the surveillance to all adolescents, as all teenagers are positioned as potentially unwell; (3) the techniques of psychologisation (in which various personal or social practices are normalised or pathologised) and pedagogisation (which disciplines adolescents through the facilitation of their ‘natural’ development) are deployed in social medicine (and, to some extent, in community health) in preventive and promotive programme; and (4) the community health approach allows the space for ‘culture’ as a variable in health and welfare maintenance, and for the inclusion of the community in overseeing its own health. In the following section, I analyse how these governmental tactics are legitimated through the discursive positionings made available to the expert.

**Expert positioning**

The medicalisation, psychologisation and pedagogisation of teenage pregnancy rely on a discourse of expertise. The persons who institute the premises and practices of sanitary science, social medicine, community health, psychology and pedagogy are depicted as authorities, professionals, and specialists in their fields. This depiction is essential in the government of adolescent (hetero)sexuality and reproduction. The experts are positioned as possessing a positive knowledge concerning the object of government (viz. the teenager, and her (hetero)sexuality, reproductive capacity, mothering ability, emotions, psychological state, behaviour, and learning styles) as well as the means of obtaining this truth. This ascription of authority, professionalism and specialism to researchers, educators, and health service providers allows, in Miller and Rose’s (1993) words, for ‘action at a distance’ (p. 73), for the ‘conduct’ of adolescents’ sexual and reproductive conduct through the power of expertise.

These experts are, in Foucauldian terms, not only the overseers of the patient, learner, group or community, but also the subject of panoptical surveillance of the medicalised, psychologised or pedagogised field. They are incited to exercise vigilance over their own conduct, comparing the ideal image of the expert presented in the literature with their own actions. Within the teenage pregnancy literature, the expert is positioned as knowledgeable, caring, and ethical, each of
which is discussed below.

The medical, psychological or educational expert is portrayed as not only knowledgeable about things which are observable or stated, but also about things which are hidden. S/he lifts the invisible and inaudible to the level of visibility and audibility. In sanitary science, s/he inspects the interior of the body, locating points of lesion inaccessible to the patient him/herself. In social medicine and community health, s/he pronounces on social and cultural tendencies and forces accessible only through ‘scientific’ investigation. In psychology, the inner workings of the psyche, the mind, emotions, etc. are laid bare. In pedagogy, the fundamental procedures of learning are explicated by the expert who then, through the application of these procedures, is able to render the individual knowledgeable concerning those processes invisible to him/herself, but visible to the expert. The expert’s role in this position of knowledge is to assess and respond to the ‘needs’ (see discussion in Chapter 6 on the construction of needs) of the individual, group or community even where these needs are not acknowledged by the latter, as illustrated in Extract 5.36 below:

**Extract 5.36**

Op ‘n ekstra persoonlike vlak blyk die ontvang van toepaslike inligting ’n baie belangrike behoefte te wees. Hierdie behoefte word nie altyd deur die adolessente uitgespreek nie, en moet dus weer eens spontaan deur die mediese personeel verskaf word [It appears on an extra-personal level that the receipt of relevant information is an important need. This need is not always expressed by the adolescent, and must thus be spontaneously provided by the medical personnel] (Fouché, 1992, p. 143).

The medical expert is further depicted as caring; s/he is empathetic, non-judgmental, patient and compassionate:

**Extract 5.37**

[T]he nurse has a vital role in the management team. She is most likely to be nearest in age and outlook to the patient. Therefore she has a better opportunity than the others to discover how the patient views her pregnancy - what she really feels and not what she has been told to feel by her family. By just listening the nurse can help the patient correlate her real thoughts from the conflicting ideas clogging her mind (Rockey, 1986, p. 17).
Extract 5.38

The care of the unmarried mother is an emotive experience. Her attendants’ reaction to her plight may vary from rejection ... to one of emotional involvement. ... [B]oth attitudes are wrong ... The unmarried mother requires compassion, patience and skill, but at all times, the nurse must remain objective and professional (Rockey, 1986, p. 17).

The confessional nature of the expert’s caring is evidenced in Extract 5.37. The nurse ‘just listens’, allowing the adolescent to discover her ‘real’ feelings and thoughts. This is juxtaposed to the family who instruct her, ‘clogging’ her mind with ‘conflicting ideas’ and feelings. This portrayal of the nurse as permitting the natural, spontaneous emergence of the adolescent’s real feelings obscures the power relation between the nurse and the adolescent. The nurse, as the recipient of the confession, is apparently passive. However, his/her positioning as expert casts the interaction within the field of scientific regularity, where certain constructions of the real self are allowed and others disallowed. The dangers of the expert’s caring slipping to the level of ‘lay’ caring, and thus undermining the powerful positioning of the medical expert, are recognised in Extract 5.38. Professional caring is not allowed to become ‘emotional involvement’, or, conversely, ‘rejection’. The caring provided by the expert is thus different (and, as implied in Extract 5.37, superior) to that provided by the family or friends. It is infused with the expert, firstly, as knowledgeable concerning the essence of the problem and, secondly, as ‘objective and professional’.

The positioning of the expert as simultaneously knowledgeable and caring allows for the installation of a system of external and internalised surveillance in the form of a code of ethical conduct:

Extract 5.39

At the same time, can it be ethically justified to deny an infant care? (Boult & Cunningham, 1993, p. 57).

Extract 5.40

My gedragskode laat my nie toe om verder oor ons grootste demografiese ramp te swyg nie [My ethical code does not allow me to be silent any longer concerning our greatest demographic disaster] (De Villiers, 1985, p. 6).
The ethics rhetoric simultaneously acknowledges and masks the power of the expert. On the one hand, the health worker and educator make decisions concerning correct and incorrect practice, something which places them in a powerful position. On the other hand, the power of this decision-making process is disguised by an appeal to a humanistic basis for the decisions. Consider Extract 5.39, for example. This question invokes images of the helpless, needy child and the caring, compassionate adult, hence enforcing a simple answer of ‘no’. Any reasonable, caring person would agree that an infant should not be denied care, and therefore decision-making concerning correct practice seems natural and without question. What appeals such as these achieve, furthermore, is the disciplining of experts. As the expert takes on the reflexive positioning (see Davies & Harré, 1990) of the knowledgeable, caring professional, s/he is unable to escape the injunction implied in the question posed. S/he becomes his/her own overseer regarding correct and ethical practice. However, the ethical code may extend beyond this. We see in Extract 5.40 how it can become not only a guide for proper practice, but also a tool, legitimating certain political positions.

In cases where the expert fails to internalise the surveillance through ethical conduct, external structures of censure step in. Councils such as the Health Professions Council of South Africa (previously the South African Medical and Dental Council) and the South African Council of Educators act as the final arbitrators of correct practice. These councils prefer to act at a distance through panoptical power. However, to ensure the efficacy of this strategy, instances of wrongful action are sanctioned and punished, mainly through exclusion from the ranks of the expert (via de-registration). Indeed, incompetent or unethical professionals are essential to the definition of the boundaries of the caring, knowledgeable expert. They serve the purpose of normalising professional practice, as well as the disciplining of those in the field. Consider, for example, the quotes below:

Extract 5.41

[T]he disastrous results of teenagers choosing, or having chosen for them, the wrong option due to incorrect counselling or no counselling at all ... (Greathead, 1988, p. 20).
Extract 5.42

Dit blyk dus dat daar meerme ‘n ‘kommunikasiegaping’ tussen sommige van die adolesente moeders en die mediese personeel bestaan [It appears that a ‘communication gap’ frequently occurs between some of the adolescent mothers and the medical personnel] (Fouché, 1992, p. 2).

The assertion in Extract 5.41 of disaster following incorrect counselling creates the conditions for the exclusion of the incompetent health service provider from the ranks of expert. If the goal of the expert is the well-being of the adolescent, then this behaviour, in which the expert falls short of caring (by providing no counselling) or professionalism (by providing incorrect counselling), has to be modified. Intimations, such as that made in Extract 5.41 (viz. that even those who have undergone professional training may prove incompetent), illicit self-surveillance on the part of experts. They need to constantly monitor whether they are providing good counselling in appropriate instances. The use of the word ‘some’ in Extract 5.42 performs the same function. It allows for the marginalisation of those whose communication patterns are inadequate and incites professionals to continually oversee their own communication efforts with teenagers.

In order to achieve the status of the caring, knowledgeable professional, training is required:

Extract 5.43

Health-care workers are highly trained experts in their respective fields and due regard must be paid to their advice on matters within their professional competence (Rockey, 1986, p. 17).

Extract 5.44

Hospitaal personeel moet in die dinamika van adoleessensie en die intrinsieke sielkundige behoeftes van swanger adoleessente opgelei word [Hospital personnel must be trained in the dynamics of adolescents and the intrinsic psychological needs of pregnant adolescents] (Fouché, 1992, p. 145).

To be inducted into the realms of the expert requires of a person to learn a set of vocabularies in which the everyday world is transformed into the professional rhetoric of readily categorisable symptoms, disorders, illnesses, behaviours, feelings, motivations, learning styles, etc.. The effect is ‘the construction of a world in which only the voice of the professional has currency, while
the voices of those outside are rendered silent’ (Parker & Shotter, 1990, p. 9). Thus we see in Extract 5.43 how the expert’s opinion must be given ‘due regard’ owing to his/her level of training. However, the boundaries of this competence are strongly policed, and experts are only allowed sway within the fields in which they have been officially inducted. Indeed, shortfalls in competence may be identified, and the need to further training suggested, as evidenced in Extract 5.44.

Conclusion

The pregnant teenager has become a scientific rather than a moral problem, and, as such, is an object of government. In this chapter, I have reviewed how, through the triangulated tactics of medicalisation, psychologisation and pedagogisation, the pregnant teenager is constructed, produced, regulated, punished, normalised and pathologised. Her hidden bodily, psychological, emotional and learning processes are brought into the plane of visibility, and simultaneously rendered audible though the professional rhetoric of causes and consequences of early reproduction. The teenager, her peers and family, the educator, doctor, nurse, psychologist and social worker, and the community all participate in overseeing, monitoring and measuring teenage (hetero)sexuality and reproduction. Each is overseer and is overseen. The teenager is incited to be ‘true’ to her ‘nature’, the family to fulfill ‘normal’ family functions, the expert to be knowledgeable concerning the nature of teenage pregnancy and able to assist the teenager attain a state of normalcy, and the community to take responsibility for instituting normalised changes. Teenage pregnancy is no longer an individual problem, but rather an issue for public concern, posing social and economic threats, and requiring public health, welfare, education and psychological interventions.

Sanitary science inserts the medical gaze into the body of the adolescent, via the clinical examination and ante-natal care procedures, either normalising, or, mostly, pathologising her reproductive capacities. Social medicine shifts the focus to the social management of the problem, introducing preventive programmes such as sexuality education and counselling, thereby deploying the psychologisation and pedagogisation of teenage pregnancy. The individual is co-opted into managing his/her own sexuality and reproduction; s/he is disciplined
through the assurance of choice which is simultaneously limited by the superior knowledge of the expert. Community health introduces cultural peculiarity and difference, inciting the expert to become flexible and understanding of local conditions, and to mobilise groups of people (the ‘community’) into overseeing their own health and welfare. A number of inequalities are masked in this discourse: firstly, ‘culture’ with its ‘values’ and ‘beliefs’ is contrasted with the factual knowledge of the expert; secondly, ‘culture’ is chiefly attributed to ‘blacks’ or ‘Africans, with ‘white culture’ as the taken-for-granted absent trace; thirdly, ‘community’ is spoken of as if it were a homogeneous whole without differential power relations.

Psychologisation promises to render the inner being of the person, and his/her relationships, understandable, and hence amenable to intervention (through, for example, counselling). It allows for the simultaneous normalisation and pathologisation of psychologised entities such as teenage pregnancy. On one level, the individual pregnant teenager is pathologised, with her pregnancy indicating deviancy in behaviour, emotions, psychological status etc.. At a second level, she is normalised within pathological family relations and formation, social relations, and the vagaries of adolescence. A third level is introduced by the revisionists who normalise the individual adolescent and her family by problematising social structures and arrangements.

Through pedagogisation, a set of ‘facts’ regarding (hetero)sexuality, contraceptive usage, correct sexual and reproductive relations, pregnancy and birth are deployed in the sex education of teenagers. Pedagogisation is designed to protect the adolescent from his/her dangerous sexual tendencies, and to make everybody well. It relies on the paradox of adolescent (hetero)sexuality being simultaneously ‘natural’ and ‘contrary to nature’, and aims at preventing or obviating problems in the making, inducting everybody in the overseeing of his/her state health. Child-centred education (which has been termed by Walkerdine (1984, 1989) as a shift from overt to covert regulation) underlies much of the pedagogisation of adolescent (hetero)sexuality. The adolescent is represented as developing naturally, making rational choices given the correct facilitative environment. However, only two sexual choices are presented - abstinence, or the reasoned use of contraceptives.
In order for the governmental tactics of medicalisation, psychologisation and pedagogisation to operate effectively, a discourse of expertise is required. These experts, portrayed as caring and knowledgeable, become the overseers of their own conduct as they internalise the premises of correct ethical and knowledgeable professional practice. Their training, knowledge and approach are juxtaposed to that of the family and friends, who are excluded from the realms of effective sex educators and confidantes. The boundaries of competence are policed, firstly, by the level or type of training achieved and, secondly, by the detailing of incompetent or unethical practice.

Medicalised, psychologised and pedagogised discourses gain much of their power through the image of progress at work. Medicine, psychology and education are presented as a human sciences which assimilate facts which are ‘out there’ to be discovered (albeit that some of these facts concern the interior of the mind, body, and psyche), and which accommodate their techniques to correspond with and assist in the ‘real’ world. Through investigation, there is a supposed move towards (an absolute) truth concerning the human condition. This truth is then deployed in interventions which bring the ultimate goals of health, happiness and knowledge closer. This image of progress ‘promises to release us from modern times while actually shackling us to them’ (Parker, 1989, p. 12). The power of the triangulated governmental tactics of medicalisation, psychologisation, and pedagogisation to produce and regulate adolescent (hetero)sexuality and reproduction is masked by this promise of progress. New aspects of adolescents’ bodies, behaviour, learning processes, emotions, social and sexual interactions are brought into the plane of visibility through expanding research and investigation. This allows medicalised, psychologised and pedagogised discourses to map the surface of the objects of government (adolescence, adolescent sexuality and reproduction) in finer lines, disciplining the teenager and her family through greater surveillance and monitoring, and inciting them to more intricate self-regulation.

Rose (1989a) states:

Government ... depends upon the production, circulation, organization, and authorization of truths that incarnate what is to be governed, which make it thinkable, calculable, and practicable (p. 6).
Thus, for the tactics of medicalisation, psychologisation and pedagogisation of teenage pregnancy to succeed, certain underlying notions need to be authorised as truthful. These include assumptions surrounding the nature of adolescence, adolescent (hetero)sexuality, mothering, family formation and relations, racial categories, and social and economic security. In the next chapter, I review the construction of adolescence and adolescent (hetero)sexuality in the teenage pregnancy literature, while in the chapters following, I analyse the governmental tactics of familialisation of alliance, racialisation and the economisation of activity.
CHAPTER 6
THE CONSTRUCTION OF ADOLESCENCE AND ADOLESCENT (HETERO)SEXUALITY

Teenage childbearing is seen in mainstream literature and amongst practitioners as ‘untimely’. Phrases such as ‘Children having children’ (Boult, 1992, p. 16) are coined. Thus, the problematic nature of teenage pregnancy is linked to the construction of adolescence as a period of development, as a transition between childhood and the final goal of adulthood. The concept of ‘teenage pregnancy’ relies on the assumption of ‘teenage-hood’ as a real thing. Thus, in order to render teenage pregnancy governable, in order for adolescents’ sexual and reproductive behaviour to be managed and governed separately from that of adults, adolescence needs to be accepted as a separable stage of development, as an identifiable phase in the life span of a human during which s/he is no longer a child, but not yet an adult. Certain ‘truths’ concerning the nature of adolescence and adolescent (hetero)sexuality need to be taken-for-granted. However, this is where the difficulty sets in. Adolescence, in many respects, acts as an ‘undecidable’. The adolescent is neither child nor adult, but is, simultaneously, both. S/he contains and excludes the binary opposition. The undecidability of adolescence relies on the social construction of both sides of the binarism, viz. the construction of the normal child, and the construction of the normal adult. Adolescence is ‘decided’, to a certain degree, by portraying it as a normal stage of transition between childhood and adulthood. However, the decidability is only temporary, constantly threatening to slip back into undecidability. For example, when a teenager becomes pregnant, she breaches the socially constructed chronology of age, the transitional nature of adolescence. She becomes an undecidable by, in the words of Lawson (1993), ‘pollut[ing] the category of child and becom[ing] a deviant adult’ (p. 105).

In ‘deciding’ adolescence as a difficult, but natural stage of transition, adolescence takes on the aspect of ‘normality’. Ironically though, as Rose (1989b) points out, ‘our conceptions of normality are not simply generalisations from our accumulated experience of normal children
[and adolescents]’ (p. 121). Instead, the ‘normal’ operates as the absent trace of the pathologised presence of marginalised, problematic behaviours such as early reproduction. It is the assumed, the behaviour, feelings and thoughts that are not in need of explanation, but which form the tacit backdrop against which the pathological is etched. This chapter is about bringing this absent trace to the surface, about examining the assumptions concerning adolescence implicit in the governmental tactics deployed with respect to teenage pregnancy, and about exploring how this normalised absence is related to the pathologisation of teenage pregnancy.

The concept of adolescence relies on a developmentalist framework. This developmentalist framework has deployed ‘an entire lexicon of supposedly benign words [which] makes human development seem independent of the social and political context’ (Burman, 1997, p. 138). The focus of developmental psychology is not on specific adolescents developing in particular socio-historical circumstances, but on a generalised, abstract adolescent. The pregnancy of an adolescent brings into visibility not only her transgression of the child/adult boundaries, her undecidability, but also her sexuality - a teenager who is pregnant clearly has had sex with a male at least once. The focus on adolescent sexuality brings to the fore further contradictions, further undecidables, as the female adolescent is positioned as simultaneously saturated with and devoid of sexuality (see Foucault’s (1976) analysis of the hysterization of women’s bodies); she is knowledgeable but also innocent. Sex is at the same time natural and contrary to the nature of adolescence. The result of the above is that ‘[t]he sex of children and adolescents has become, since the eighteenth century, an important area of contention around which innumerable institutional devices and discursive strategies have been deployed’ (Foucault, 1978, p. 30). These devices and strategies no longer ask the question, in the words of Arney and Bergen (1984), ‘How are we to discover and punish desire that aims at perverse objects in its dark and concealed actions?’, but rather ‘Why is sexual desire not in its proper place in the balanced order of things? What has caused desire’s aim to be in error?’ (p. 15). The ability to ask the latter questions assumes a certain knowledge of the nature of sexuality. The absent traces of normal (hetero)sexuality and normal adolescence, together with the undecidability of both, allow for the simultaneous invocation and proscription of adolescent sexual behaviour. It is to a discussion of these taken-for-granted notions of the nature of adolescence and adolescent (hetero)sexuality that underlie the theorisation of teenage pregnancy, and which the theorisation of teenage pregnancy
inversely help to construct and re-produce, that I turn in this chapter.

The chapter is organised in the following way. The construction of adolescence as a ‘transitional stage’ (in which the adolescent is portrayed as ‘not adult/not child’, as undergoing a period of cognitive growth, and as prone to experimentation and turmoil) is discussed. An explication of the gendered construction of female adolescents as the ‘passive recipients of external influences’ concludes this section. This is followed by an analysis of the underlying discourses of adolescent (hetero)sexuality found in the literature. The ‘humanist’ discourse, which depicts adolescent (hetero)sexuality as a process of self development and self-actualisation of the free person, the ‘moral decay’ discourse, which portrays adolescent sexual involvement as a relaxation of moral standards, and the ‘biological’ discourse, which situates sexuality within the mechanisms of biology, are examined.

The construction of adolescence

In the literature reviewed, the notion of adolescence is generally treated as historically invariant and culturally static (see most of the extracts presented in this chapter). Some exceptions exist, as in the following extract:

Extract 6.1

Times have changes. Physical maturity is reached during these troubled early adolescent years as an archaic left over, like the appendix. In tribal societies preservation of the species depended on early impregnation; if a young girl became pregnant an accepting tradition and strongly supportive group structure existed (Gillis, 1991, p. 121).

We have here an acknowledgement of change and difference. However, apart from the assumption of culture as bounded, with the equation of mere basic biological forces with ‘tribal’ societies (see discussion in Chapter 8 on culturalisation), the category of adolescence remains fixed as a reality. Historical analysis illustrates, however, that adolescence has only emerged as a category in recent history (Harari & Vinovskis, 1993). The category of adolescence furthermore, presupposes ‘childhood’. There is a growing body of literature which problematises the notion of childhood, and by implication adolescence (e.g. Aries, 1962; Kessen,
These writers have illustrated that childhood has a history, and that it is not a timeless, transcultural phenomenon. They have understood childhood as the product of a number of cultural processes and modernist ideas, which have come to define a specific life stage as different from others and as in need of special treatment. Kessen (1979), for example, speaks of the ‘cultural invention’ of childhood, where the child is seen as a ‘free-standing isolable being who moves through development as a self-contained and complete individual’ (p. 819). In the same way, the very notion of teenage pregnancy relies on the construction of adolescence as a separable, identifiable phase in the experience of human life. However, even this contains contradictions, indicating the difficulty of ‘deciding’ adolescence. We noted, for example, in Chapter 3, how the official definition of the end of adolescence and the assumption of the responsibilities of adulthood in Apartheid South Africa varied according to the nature of the task (‘white’ males could kill, but not sign contracts at the age of eighteen), and the racial classification of the person (with ‘white’ and ‘coloured’ children receiving welfare to the age of eighteen, and ‘black’ children to the age of sixteen).

As noted, the dominant discourse in the teenage pregnancy literature concerning adolescence is that of ‘transitional phase’ between childhood and adulthood. Adolescence is portrayed as a period of natural progression and growth between the child and adult state of being. However, as such, the adolescent becomes an undecidable, ‘not adult/not child’ with the qualities of childhood and adulthood being simultaneously missing and present. In particular, the rationality of adulthood is portrayed as lacking, with the adolescent going through a phase of cognitive development. The undecidability of adolescence allows for the depiction of the teenager, in negotiating the transition from childhood to adulthood, as engaging in experimentation and experiencing a certain amount of turmoil. However, this turmoil is somewhat gendered with females entering the domain only obliquely. Instead the dominant discourse of feminised adolescence is ‘the passive recipient of external pressures’.

As a period of transition, adolescence is broadly treated in two contradictory ways in the literature. In the first instance, it is implicitly defined as a period of pathology, as a phase of rapid, tumultuous changes. Within this framework, teenage pregnancy becomes almost normalised, as it is rendered understandable within the framework of the difficulties of
adolescence. Researchers thus utilise the ‘nature’ of adolescence to explain teenage pregnancy. However, there is a further contradiction here, as very few of the authors condone teenage pregnancy. Therefore, while saying that it is understandable from the point of view of the difficulties of adolescent development, they simultaneously pathologise it. In the second instance, adolescence is seen as normal period, with the developmental tasks taking place in a smooth, unruffled way. From this perspective, teenage pregnancy is an aberration of the few. As we shall see in the literature discussed below, it is the first instance which dominates.

Adolescence as a transitional phase

Natural growth and progression

Adolescence is portrayed as a time of natural, inevitable, universal development in which the organism moves, following a developmental blueprint, from a less to a more complex organisation of physiological, cognitive, emotional and psychological attributes. Implicit is the idea of the final or ideal product - the normal adult living in the normal environment. This normal adult is, to a large extent, coterminous with the characteristics ascribed to white, middle-class males living in liberal democratic environments (Sampson, 1990). However, there are a couple of contradictions that emerge. The first is that the achievement of adulthood is differentiated along gender lines. For example, parenthood is equated with the achievement of female adulthood, but not male. This is further discussed in Chapter 7. The second is that while, on the one hand, the eventual outcome of the developmental blueprint is presented as the unitary adult, complete and normal, on the other hand, the person is split into many facets, each of which follow a natural progression, seemingly separate from (or at least only marginally linked to) the other. This splitting allows us to talk of the physical, moral, cognitive, emotional, and behavioural aspects of adolescent development. As these various facets of human development become more and more specified, so the nature of adolescence becomes more and more regulated, and subject to government.

The theme of natural progression/development has been utilised in different ways by researchers in the field of teenage pregnancy in South Africa:
**Extract 6.2**

Kohlberg has found that in the early teens, girls are at what he calls level 3 of moral development. At this stage the girl obeys rules, seeks approval, and conforms to her peers. This may put her at risk of possible pregnancy. If she progresses to stage 4 she becomes durable [sic] and respects authority. Traditionally [sic] the male is seen as sexually dominant over the female, so this stage may also be risky. Miekle (1985) found that 81% of 13-14 year olds and 31% of 16-18 years [sic] are at level 3, where approval is sought and conforming to the group is important (Oosthuizen, 1990, p. 45).

**Extract 6.3**

Growing teenagers, unlike their older counterparts, do not utilize their body fat for foetal growth, but use it for their own physical development, resulting in lower birth weights for their infants (Boult and Cunningham, 1993, p. 48).

These extracts illustrate how, through medicalised and psychologised discourses, the teenager’s developmental status is used, firstly, to explain her propensity to become pregnant and, secondly, to render her incapable of motherhood. The teenage woman is clearly put into a double-bind situation in Extract 6.2. She is subject to the moral developmental blueprint which sees her progressing through various invariant stages of moral development. Yet it is this very process which renders her vulnerable to external influences (peer pressure; male authority) which, in turn, puts her at risk for the ‘unnatural’ occurrence of teenage pregnancy. Having conceived, the teenager’s developmental stage is then used to pathologise her ability to mother (see further discussion on mothering in Chapter 7). In extract 6.3, for example, the authors argue that the teenager’s physical developmental blueprint is detrimental to the infant, as she utilises her body fat for her own rather than her baby’s physical growth.

**Not adult/not child**

As a phase of transition, adolescence acts as a category of exclusion of both childhood and adulthood; it is an undecidable, as evidenced in the following extract:
Extract 6.4

[N]o more a child but not yet a woman, and now faced with a woman’s role and responsibilities! (Gillis, 1990, p. 121).

The adolescent no longer has the characteristics ascribed to children (innocence, naturalness etc.), but has not reached the ultimate state of adulthood. Adolescence thus becomes defined by what it is not, by what it lacks. Hence adolescents are not dependent (as children are) and yet not independent (as adults are):

Extract 6.5

They have needs to be taken care of and to remain dependent, while also striving for autonomy and independence. (Pond, 1987, p. 159).

Extract 6.6

He is, however, still seen in modern society as a child because he is dependent on parental (financial) assistance and is thus unable to function independently] (Dreyer, 1991, p. 55).

As conception propels teenagers into the adult side of the ‘adult/child’ dichotomy through the equation of parenthood with adulthood, the opposition chiefly used in the literature is to the supposed characteristics of adulthood. In contrast to adults, adolescents are: economically and psychologically dependent (Extracts 6.5 and 6.6); unreliable (e.g. ‘Respondents affirmed their use of contraception in the future. Such affirmation is not reassuring’ (Boult & Cunningham, 1992a, p. 307); ‘irresponsible’ (Boult & Cunningham, 1993, p. 10); ‘psychologically immatur[e]’ (Boult & Cunningham, 1993, p. 7); ‘emotionally immatur[e]’ (Gunston, 1986, p. 539). They lack self-acceptance (e.g. ‘Selfaccepting as such is extremely important, as a result of the connection is has with the level of maturity’ (Fouché, 1992, p. 141)). This depiction of adolescents (in particular deviant adolescents) as immature and dependent performs important governmental work. It invokes the mature, independent adult as the guide, as the (benign) manager of the conduct of adolescents. As parents are portrayed as deficient in this task (see Chapters 5 and 10), it is the expert who takes on this aspect.
The splitting of development into the various sub-areas of physical, cognitive, emotional and behavioural growth allows for people who look like adults to be classified as sub-adults. Statements such as the following become possible: ‘he is on his way to physical maturity but is still mentally immature’ (Dreyer, 1991, p. 108). Nevertheless, the clear separation of adolescence and adulthood is evidenced in the following extract, where adolescents are depicted as being embarrassed by being mixed with adults in interviews concerning contraception:

**Extract 6.7**

There is no privacy [at the family planning clinic] as the professional nurses share rooms when taking history. This may embarrass the adolescent particularly if a woman of her mother’s age is being interviewed simultaneously (Mosidi, 1992, p. 2).

The dominance of the ‘not adult’ side of the ‘not adult/not child’ dualism creates a conundrum within the field of teenage pregnancy, as motherhood is equated with adulthood. The teenager’s motherhood (or potential motherhood) status is dealt with in two ways. In the first, her motherhood is viewed as an assistance in the maturing process (Extract 6.8 below), in the second, the contradiction created by the intersection of ‘motherhood = adulthood’ and ‘adolescent ≠ adulthood’ is highlighted, thereby pathologising the teen mother (Extracts 6.9 and 6.10):

**Extract 6.8**

They have realized the importance of education in assuring a bright future. This is an indication that motherhood has caused them to taste the responsibilities and the demands of adulthood (Mkhize, 1995, p. 93).

**Extract 6.9**

Even if she [teen mother] returned to school she was no longer a child in the full sense of the word (Preston-Whyte, 1991, p. 29).

**Extract 6.10**

They have their mothers being [sic] a support system. This inhibits the development of autonomy. Thompson et al (1992:22) explains [sic] that the teenage mothers’ dependency on adults for norms of parenting and preparation for child care exacerbates difficulties associated with the transition to motherhood (Mkhize, 1995, p. 99).
Extract 6.8 portrays adults as responsible: they understand the demands of life and the importance of education. By implication, the adolescent is not responsible. However, by participating in an adult function like mothering, the adolescent may become responsible, and achieve the status of adulthood. The author of Extract 6.9 extricates the adolescent from the child end of the child/adult dichotomy, but only partially so. The use of the phrase ‘in the full sense of the word’ means that the adolescent, while no longer a child, is not allowed full adult and therefore motherhood status. She remains an undecidable. In Extract 6.10, motherhood is clearly seen as an adult function. Yet the teenager is dependent and lacks autonomy, and hence cannot be a real mother. She has to rely on her own mother for guidance, but this in turn inhibits her development into adult status.

As noted, the chief opposition to adolescence highlighted in the literature is adulthood. Indeed, in acting as a category of exclusion, the ‘adolescence as transition’ discourse allows for certain basic assumptions concerning the nature of adulthood to be made. In the words of Sampson (1990) ‘When we deconstruct the prevailing conception of personhood, its political side is revealed. The dominant western understanding of personhood is based in great measure on a liberal individualist framework’ (p. 117). The person (adult) is assumed to be a unitary being. In contrast to the adolescent, s/he is able to reason in a linear, logical fashion (see later discussion); she is fully self-aware and capable of ‘mature’ decision-making; she is emotionally and morally developed (content unspecified); and she takes responsibility for her individual actions. This decontextualised being is given the status of the ideal, universal, self-fulfilling adult, the final result of ‘good’ development. But, in the words of Burman (1997): ‘[T]he project of development becomes a tautology, self-serving and self-maintaining: if the more developed possess what the less developed lack, then not only do those in power define what development is, they also obscure the exercise of such power within the naturalizing language of development’ (p. 140). The expert, in the form of the educator, the health service provider, and the researcher, as well as the reader of the text, are implicitly positioned as the ‘adult’ in the teenage pregnancy literature. S/he takes on the adult attributes listed above in contrast to the adolescent, who is portrayed as in need of assistance in attaining the goal of normal adulthood (the process of which does not, it is implied, include early reproduction).
As noted above, the adult towards whom the adolescent is moving is able to reason logically and to make mature decisions. The adolescent, as a ‘not adult’ person is depicted as lacking the full complement of adult cognitive and rational wherewithal, which s/he is in the process of developing. It is the negative aspect of the cognitive growth (the lack of ability), rather than the positive aspect (cognitive development), which is emphasised in the literature on teenage pregnancy. On the one hand, it is the pregnant teenager in particular who is seen as lacking, on the other, adolescents in general.

Teenagers are depicted as lacking: knowledge (e.g. ‘The teenagers in the sample were woefully ignorant of the costs of infant care’ (Boult & Cunningham, 1992b, p. 163)); the ability to plan ahead (e.g. ‘Many factors explain these behavioural patterns [unprotected sex], such as ... the adolescent’s tendency not to plan ahead’ (Preston-Whyte, 1991, p. 10)); decision-making competence (‘It seemed that students were ambivalent about what they wanted, as well as unsure about how to go about obtaining what they wanted’ (Craig & Richter-Strydom, 1983a, p. 244)); conceptualisation skills (e.g. ‘[T]he baby is conceptualised as an object and not as a living being’ (Gillis, 1990, p. 121)); and the ability to be realistic (e.g. ‘[T]hey do not think of themselves as mothers’ (Gillis, 1990, p. 121)). The assumption implicit in this portrayal is that there is an ideal, mature way of thinking. This involves being fully informed, being able to plan ahead and make decisions, being able to conceptualise about matters in a realistic way. At first glance these characteristics seem reasonable (I have chosen this word advisedly). They appear as cognitive traits which have universal and timeless utility. It is this very appearance that invests those defined as possessing these characteristics with power. The informed, logical decision-maker is able to render those lacking these characteristics as inferior, as lacking. Walkerdine (1989), in talking of the possession of mathematical skill and knowledge (supposedly one of the highest forms of rational reasoning) leaves a question mark: ‘But what if it is all a fantasy, a very powerful fantasy of control over time and space?’ (p. 43). This question opens up the space for a problematisation of the absolutism assumed in a cognitive approach which renders the universe objectively knowable through the application of certain cognitive procedures.
The view of adolescence as a time of emerging rationality and abstract-thinking has been used by researchers both to blame the teenager and to rescue her from victim status. This contrast is evidenced in the extracts below:

Extract 6.11

Piaget believes that the girl also believes in the ‘personal fable’ at this stage. This implies that she believes pregnancy will never happen to her, after all she is not ready for babies! It seems that teenage girls are only able to make rational decisions with regard to contraceptive use once they are cognitively able to distance and differentiate themselves from their parents (Oosthuizen, 1990a, p. 46).

Extract 6.12

Hierdie oënskynlike ‘onkunde’ sluit baie goed aan by die aard van die kognitiewe vermoëns van adolessente. Alhoewel adolessente veronderstel is om reeds abstrak te kan rederneer, meld McArney en Hendee (1989) dat die vermoë tot hierdie denke selde volkome in adolessensie ontwikkel en dat dit dikwels eers in volwassenheid begin ontwikkel [This apparent ‘ignorance’ accords well with the nature of the cognitive abilities of adolescents. Although adolescents are supposedly already able to reason abstractly, McArney and Hendee (1989) indicate that ability in this thought form is seldom completely developed in adolescence, and that it often develops only in adulthood] (Fouché, 1992, p. 92).

Extract 6.13

Our research suggests that early pregnancy, or at least the neglect of contraception represents a fairly rational reaction to personal and societal pressure placed upon young women (Preston-Whyte & Zondi, 1989, p. 48).

Extract 6.14

However, it was indicated that the teenage father has the ability to enter the adult world and accept his fatherhood because he has the ability to rationalise the thinking required to put him in the formal-operational phase [sic] (Dreyer, 1991, p. 109).

Extracts 6.11 and 6.12 present the teenager as making irrational decisions, engaging in fantasy (personal fable), unable to think for herself (undifferentiated from her parents), and lacking the ability to reason abstractly, attributes which, it is implied, contribute to her deviant reproductive behaviour. Extracts 6.13 and 6.14 present the teenager as being able to rationalise. However, there are implied caveats. Preston-Whyte and Zondi (1989 - Extract 6.13) bring a revisionist perspective to their work by presenting teenage pregnancy as a rational decision under certain
circumstances (personal and societal pressure). However, it is only ‘fairly’ rational, and presumably under other, more favourable, circumstances, the teenager’s ‘reaction’ would be irrational. Dreyer (1991 - Extract 6.14) attributes the quality of rationality to teenage fathers, who only have to display acceptance in order to enter this domain. Female adolescents, on the other hand, have to display more than pure acceptance to be classified as rational. Whether characterising the teenager as irrational or as (partially) rational, what none of the above authors question is the basis of the rationality to which they refer. The rational, logical, mature decision-maker remains an implicit ideal.

Experimentation and turmoil

In negotiating the transition from childhood to adulthood, adolescents are portrayed as restless and searching, as testing the boundaries of existence. Because they are not yet adult, because their state is an undecidable one, they experience a ‘developmental imperative of experimentation and rebellion’ (Nash, 1990, p. 309):

Extract 6.15

The emotional and physiological pressures experienced by teenagers who are discovering and exploring their sexuality are, of course, universal (Preston-Whyte & Zondi, 1989, p. 60).

Extract 6.16

They often lack recreational facilities, and the boredom caused by the inactivity is generally considered to be causally connected to their unrestricted sexual experimentation. Teenager loiter or idle [sic] in the streets. And as the teenage stage is one during which young people need to use up all the energy they have, they redirect that energy if they have nothing else to do, to sexual experiment [sic] (Ntombela, 1992, p. 7).

In both extracts the ‘imperative to experiment’ is presented as universal - all teenagers experience emotional and physiological pressures to explore their sexuality (Extract 6.15), and all have excess energy that needs to spent (Extract 6.16). These pressures and energy are depicted as hydraulic in nature - if they are not channelled into ‘good’, ‘productive’ pastimes, they will lead to ‘negative’ behaviour, such as unrestricted sexual experimentation (Extract 6.16).
The rhetoric of experimentation and turmoil allows a space for the introduction of the mature adult who guides the teenager through this difficult time. The consequences of this not occurring are seen as deleterious:

**Extract 6.17**

Normal adolescence is a time of emotional turmoil and rapid physical development that in itself necessitates additional nutritional and emotional support. An unwanted pregnancy at this stage of a child’s development is an overwhelming burden which, unless properly handled, may result in permanent personality damage and disastrous long-term consequences for the rest of life (Rockey, 1986, p. 16).

In this extract, the person who ‘properly’ handles the situation is implicitly the responsible adult. If s/he is absent, the result is ‘disaster’ and ‘damage’.

Fine and MacPherson (1994), in their work on adolescents’ and women’s bodies, stress the incompatibility of the image of the experimenting adolescent and that of femininity. The restless, searching experimenter is a masculinised construct, they posit. Attempts by girls to satisfy the tenets of this construct involve their ‘displaying notably a lack of maturing but also a lack of femininity’ (Fine & Macpherson, 1994, p. 220). In the following extract we see how the rhetoric of adolescent experimentation and turmoil is given a feminised bent:

**Extract 6.18**

Erikson believes that by the time a girl reaches puberty she has feelings of uncertainty about what she previously learned. She ... finds it difficult to accept herself and the obvious physical bodily changes which occur. ... As a result she seeks clarification of who she is and thus, according to Erikson, she reflects a blunt ego image onto the male partner. The feedback which she gets is of prime importance to the clarification of who she is as a sexual being (Oosthuizen, 1990a, p. 45).

The female obliquely enters the domain of the experimenter in this extract by being ‘uncertain’ rather than ‘restless’ or ‘searching’; she seeks ‘clarification’ concerning her deficient ego state rather than ‘experimenting’ with ways of being. Instead of resolving the conflict through exploration of her relationship with the environment, she does so as the passive recipient of information from a male. Indeed, the ‘passive recipient of external influences’ is one of the
dominant discourses appearing in the teenage pregnancy literature. It is to this that I turn in the following section.

Feminised adolescence: passive recipient of external influences

The image of the female teenager as the passive recipient of external forces of adversity and socialisation features strongly in the literature on teenage pregnancy. These forces extend to the family, the peer group and the media:

Extract 6.19

Baie van hierdie dogters kom uit huise met geen gesinsreëling en geen waarde nie. Hulle word blootgestel aan die invloede van die altyd teenwoordige seksgeoriënteerde advertensies in koerante en tydskrifte. Hul maats is vir hulle geen voorbeeld nie en druk word subtiel op hulle toegepas om te konformeer [Many of these girls come from homes with no family structure and no values. They are exposed to the influence of the always present sex oriented advertisements in newspapers and magazines. Their friends are no example and pressure is subtly exerted on them to conform] (De Villiers, 1985, p. 302).

Peer influence is the most vilified of the external influences. It is seen as ‘clandestine and misinformed’ (Schoeman, 1990, p. 17). Teenagers ‘have to conform to their peer group behaviour or else suffer the scars of rejection’ (Mkhize, 1995, p. 101). Solutions offered by researchers to this problem vary. What they have in common is the implicit legitimation of expert intervention. Two examples illustrate this. The first is Schoeman’s (1990) statement that peer influence ‘has the potential of being transformed into positive reinforcement of behaviour’ (p. 17). Thus, while peer influence is allowed free rein, it is negative, but once it comes under the overseeing authority of the expert (as in peer counselling programmes), it is positive. The second example is Mkhize’s (1995) argument that ‘It is essential that the teenagers rediscover themselves’ (p. 101). This implies that there is an essentialised [good] adolescent nature which is in opposition to the one subverted by peer pressure. The manner in which this is to be achieved is implicitly through the guidance of experts and other adults.
By separating the individual from the social, the use of the peer pressure argument creates a paradox which is not acknowledged. Who are these peers, other than other adolescents? When does an adolescent become part of the peer group which exerts pressure, and when is she an individual on whom pressure is being exerted? The peer group is attributed agency in the form of influence or pressure, while the individual on whom we are focussing is constructed as the passive recipient of the content of this influence.

Parents are cast in a negative light as external influences, not so much because of what they actively do, but because of what they do not do:

**Extract 6.20**

The lack of communication between the teenagers and their parents affects the development to higher levels of social and coping skills among the teenagers (Mkhize, 1995, p. 104).

**Extract 6.21**

Pregnant adolescents experience the transference of ethical standards and social values in the family as significantly more unclear (Blom, 1990, p. 121).

Thus parents are portrayed as not engaging in the confessional with their daughters, and not passing on moral values (content unspecified) to them. The daughters become the passive recipients of communication and ethical standards from other (incorrect) sources.

‘Society’ also comes under the spotlight, but in a more generalised normalising and moralising function:

**Extract 6.22**

It is inevitable in a fast changing society that the teenager is left vulnerable. The teenager finds himself in a normative vacuum. Before a new morality can be clearly crystallised, further changes occur in the norms of society (Dreyer, 1991, p. 54).
This passage clearly places the teenager as a passive recipient either of ‘good’ morals, or of moral ‘emptiness’. Although not explicitly stated, the moral vacuum referred to is equated with ‘bad’ morals (such as engaging in pre-marital sex) whereas fixed moral norms (including aspects such as abstinence from sex) are good. While change is acknowledged, it is simultaneously vilified, and some sort of absolutist morality sought. The content of this morality remains critically unexamined (see later discussion on the ‘moral decay’ discourse of sexuality).

The discourse of female adolescent passivity allows space for and complements the one of needs (see Woodhead’s (1990) problematisation of the concept of childhood needs which ‘conceals in practice a complex of latent assumptions and judgments about children’ (p. 60)). As the adolescent passively receives external influences, she may be acted upon by experts who understand her real needs. For example:

**Extract 6.23**

[By fulfilling an adolescent’s needs for survival, love and belonging, power, freedom and fun, education can assist teenagers in making more responsible choices (Mosidi, 1992, p. 43/44).]

It is at this intersection (the ‘passive’ adolescent and the adolescent in ‘need’) that the role of the expert is legitimated. As the teenager is under pressure from negative external forces, she needs intervention from experts in order to render external forces positive, and more conducive to assisting her in attaining a state of ‘normality’ (by, for example, ‘making more responsible choices’ - Extract 6.23). A contradiction emerges here, however, as it is postulated that only young people can really understand/know each other:

**Extract 6.24**

[The nurse has a vital role in the management team. She is most likely to be nearest in age and outlook to the patient. Therefore she has a better opportunity than the others to discover how the patient views her pregnancy - what she really feels and not what she has been told to feel by her family (Rockey, 1986, p. 17).]

The solution to the expert versus youth understanding adolescents is to merge the two. Therefore, in Extract 6.24, the nurse is both young and a professional; peer counsellors are adolescents and under the supervision of experts.
The ‘passive recipient’ discourse links up with the discourse that Fine (1988) calls the ‘sexuality as victimization’ discourse in her analysis of sexuality education in the United States. In this discourse, ‘adolescent sexuality is represented as a moment of victimization in which the dangers of heterosexuality for adolescent women ... are prominent’ (p. 31). Thus the female adolescent is positioned as the passive recipient of male advances. She is incited to protect herself against pregnancy, and to rely, paradoxically, on male protection which is primarily available through marriage (see Chapter 7 for further discussion). ‘[F]emale subjectivity, including the desire to engage in sexual activity, is placed outside the prevailing conversation’ (Fine, 1988, p. 32).

In this section, we have seen how the construction of adolescence acts, firstly, as a category of exclusion and inclusion, as an undecidable, with adolescents simultaneously lacking and possessing the attributes both of child and of adult, and, secondly as a legitimating tool for the intervention of experts. The pregnancy of a teenager propels her into the adult side of the adult/child binarism, and thus the ‘not adult’ side of the ‘not adult/not child’ dualism is emphasised in the literature. This allows for the expert, as the implicit rational, stable adult, to be invoked to guide the adolescent, who is portrayed as not fully cognitively mature (and therefore prone to irrational behaviour), and as liable to engage in experimentation and experience emotional turmoil. The portrayal of adolescence as a period of transition relies on the assumption, firstly, of the ideal endpoint of ‘normal adulthood’, and, secondly, the reality of ‘rationality’ and emotional stability as fixed, universal characteristics of ‘normal adulthood’. As noted, these assumptions are open to deconstruction. In addition to the ‘transitional phase’ discourse, a feminised discourse is deployed in the literature. Female adolescents are portrayed as the ‘passive recipients of external influences’. The intersection of this discourse with that of adolescent ‘needs’ legitimates the intervention of experts in female adolescents’ lives. In the following section, I trace the treatment of adolescent (hetero)sexuality in the literature, indicating how this overlaps with the construction of adolescence.

**Adolescent (hetero)sexuality**

The undecidability of adolescence, or the simultaneous inclusion and exclusion of the adolescent from childhood and adulthood, is necessary for, firstly, the recognition, and secondly, the
problematisation of adolescent (hetero)sexuality. Adolescent (hetero)sexuality can be recognised as adolescents are excluded from the dominant discourse of childhood innocence. Simultaneously, it can be problematised as (hetero)sexuality belongs to the adult domain. Adolescent sexuality, therefore, emerges as another undecidable.

Three distinct discourses appear in the literature concerning adolescent (hetero)sexuality, viz. the ‘humanist’ discourse, the ‘moral decay’ discourse, and the ‘biological’ discourse. While contradictory, these discourses have one thing in common, and that is an opening up of a space for the gaze of the expert. Within the ‘humanist’ discourse, (hetero)sexuality, which is depicted as an essentialised, unitary phenomenon about which facts may be known, is depicted as part of the self-development and self-actualisation of the free person. This discourse promises integration and a unitary being, and allows for the calls for a holistic, multi-disciplinary approach to sex education, while at the same time excluding those unknowledgeable or uncomfortable with respect to (hetero)sexuality from the domain of sexual educators. The ‘moral decay’ discourse is explicit about its position on teenage sex. Teenagers’ sexual activity is seen as a relaxation of moral standards, and there are calls for intervention through the deployment of the church, ‘democratic’ principles or traditional culture. The ‘biological’ discourse situates (hetero)sexuality within the mechanisms of biology. The expert gaze thus falls on the body of the adolescent, monitoring maturation, nutrition, and natural sex drives. A discourse of ‘pleasure’, or what Fine (1988) calls the ‘discourse of desire’, is virtually absent in the literature. Where it does appear, it is surrounded by caveats and warnings so as to render it dangerous.

The ‘humanist’ discourse

Within the humanist discourse, the individual is engaged in a process of self-development and self-actualisation with respect to her (hetero)sexuality. Consider, for example, the following extracts:

Extract 6.25

[T]he teacher [needs] to come to terms with his or her own sexuality before the subject can be addressed comfortably in the classroom (Boult & Cunningham, 1993, p. 11).
[T]he teenager herself becomes sexually self-actualized as a woman by exploring, differentiation [sic], disturbing her from [sic], by being objective and emancipating herself in the realm of her own sexuality (Oosthuizen, 1990a, p. 45).

We see in these extracts how the individual is incited to self-surveillance concerning her (hetero)sexuality, through the processes of ‘coming to terms’, ‘exploring’, and ‘differentiation’. She is charged with making herself free and ‘objective’. Implicit in this discourse are assumptions regarding the nature of personhood and the nature of (hetero)sexuality, each of which will be discussed below.

With respect to the nature of personhood, consider Oosthuizen’s (1990b) discussion of the ideal situation:

Extract 6.27

[T]he activities or feelings with regard to the teenager’s sexual values have been freely chosen by her ... from among alternatives ... after due reflection [and] ... have been freely prized and cherished [and] ... incorporated into her actual behaviour’ (Oosthuizen, 1990b, p. 13, emphasis in the original).

The individual here is essentially free. She is accorded decision-making abilities and rationality in the form of reflection. Alternatives are presented to her in an unproblematically real and bounded manner by an external source. Through the process of rational reflection she will choose the correct alternative (the content of this correct alternative is never explicitly stated, but remains implicitly real). This process, if effected correctly (a space is allowed for deviance), will bring her joy, and influence her behaviour in a unidirectional sense. The adolescent, however, is, to a large extent, excluded from the domain of the free, rational person by dint of his/her exclusion from the ranks of adulthood, as seen above. This allows for the failure of the adolescent’s sexual enlightenment and self-actualisation, and her consequent engagement in ‘deviant’ sexual behaviour.

(Hetero)sexuality is treated as a unitary, essentialised and historically constant phenomenon. What is seen to have changed is the approach to it. It has now been freed from the shackles of the past, as evidenced in the following extract:
Thus, pregnancy, the undeniable evidence of sexual activity on the part of the female daughter, was seen as a scandal. Now owing to ‘greater understanding’, the problem shifts from being a moral problem to being a scientific one, which legitimates the intervention by experts and allows for endless investigation, measurement and scientific talk around the nature of the pregnant teenager (see Foucault’s (1978) discussion of sexuality in The History of Sexuality: Vol. I). These scientific principles are formulated on the ‘biopsychosocial’ approach, an approach which, through its promise of the integration of what is seen as the various aspects of human nature, allows for the tentacles of disciplinary technology to extend more broadly and more deeply into the construction of the human being. This is evidenced in the following extracts:

Extract 6.29

Seksualiteit is ‘n integrasie van die fisiese, sosiale en intellektuele aspekte van die individu [Sexuality is an integration of the physical, social and intellectual aspects of the individual]’ (Brits, 1989, p. 202).

Extract 6.30

The sex educator should work from a holistic perspective, thereby putting sex education in a natural context’ (Matthews, 1995, unpaginated).

As noted, (hetero)sexuality is presented as an essentialised, unitary phenomenon in the literature. As such, it is depicted as ultimately knowable:

Extract 6.31

Research on teenagers and their sexual activity, on the other hand, reveals a lot of ignorance and a proliferation of myths about sexuality and pregnancy. This points to a need for enlightening teenagers on the facts of sexuality and reproduction (Mfono, 1990,
In this extract, ‘facts’ concerning (hetero)sexuality are juxtaposed with ‘myths’, and ‘knowledge’ of the facts with ‘ignorance’. Knowledge is equated with enlightenment, and hence with the liberal, self-actualised individual. Thus, provided one has been given sufficient information concerning the topic, and provided that one has the requisite skills and background to comprehend the information in such a way as to utilise it ‘responsibly’, one is rendered free and sexually self-fulfilled.

This rendition of (hetero)sexuality as essentialised and knowable allows for the exclusion of certain individuals in the pedagogisation of (hetero)sexuality:

Extract 6.32

Peers and the mass media [a]re now the primary source of sexual knowledge. This information is seen as ‘erroneous and/or distorted’ (Parekh & De la Rey, 1997, p. 227).

Extract 6.33

[T]he attitude most adults have with regard to sex education is one which regards sex and children’s sexuality as totally taboo in education (Oosthuizen, 1990a, p.45).

Extract 6.34

[M]others clam up about sex long before their daughters reach adolescence. In this way, sex is turned into a veritable Pandora’s box (Mfono, 1990, p. 6).

Parents, peers and the mass media are portrayed in these extracts as inadequate educators of adolescents with respect to (hetero)sexuality either because their ‘facts’ are wrong, or because they attempt to suppress any talk about (hetero)sexuality (treat it as ‘taboo’ or ‘clam up’ about it). This opens a space for experts to take on the role of sex educator. These experts, positioned as enlightened and equipped with scientific knowledge, are seen as being able to reveal the truth concerning (hetero)sexuality to adolescents.

Although (hetero)sexuality is ultimately knowable in the humanist discourse, the individual may fall short of the requisite knowledge, a category into which the teenager easily falls, as reinforced
by the image of the adolescent as deficient in rational, logical thought (see earlier discussion):

**Extract 6.35**

The fact that 139 young teenagers were engaging in sexual activity without understanding the relationship between procreation, contraception and sexual intercourse should give parents, guardians and school authorities pause for thought (Boult & Cunningham, 1991, p. 110).

Various other categories of exclusion from the position of ‘knowledgeable concerning (hetero)sexuality’ are created in the literature. Consider the following quotes:

**Extract 6.36**

It would appear that it is difficult trying to educate girls unless their affect is stable. Thus sex educators need to establish whether their pupils are affectively stable before they start to educate them. ..... An increase in sexual knowledge obtained via education alone is not enough to prevent a girl from falling pregnant. There also needs to be change in form or structure of thought (Oosthuizen, 1990a, p. 46).

**Extract 6.37**

These differences [in knowledge] may reflect the different socialisation of adolescents in rural as opposed to urban areas. Formal public celebration (intonjane) of the onset of womanhood, as signified by menarche, still occurs in Transkei (O’Mahoney, 1987, p. 773).

Extract 6.36 allows for the psychologisation of adolescents in their pursuit of the facts of the (hetero)sexuality. The affectively labile and cognitively underdeveloped are depicted as unable to benefit from sex education in the same way as the ‘normal’ adolescent. Instead, they require extra psychologised attention from the experts. Extract 6.37 allows for the traditionalisation of certain adolescents - those from rural areas, those exposed to certain public rituals, are portrayed as more knowledgeable than those who have broken away from this (see Chapter 8 on the traditionalisation of ‘black’ people).
The ‘moral decay’ discourse

I have coined the name for this discourse from Craig and Richter-Strydom’s (1983a) quote: ‘Moral decay’ among the youth was given as a cause by some respondents to the open-ended essay (p. 244). It is this discourse that allows researchers to refer to adolescent pregnancy as ‘the premier social evil of the Third World’ (Van Coeverden de Groot, 1991, p. 1379). Within this discourse teenage pregnancy and the accompanying sexual activity are attributed to ‘a relaxation of moral standards in recent years’ (Prinsloo, 1984, p. 697). This ‘relaxation’ is associated with an alternative, vilified morality, termed permissive:

Extract 6.38

[T]ieners [word] deur ‘n permissiewe ‘nuwe moraliteit’ geëindoktrineer ... en daarom begin hulle buite-egtelike seksuele omgang as die standaard aanvaar’ [Teenagers are indoctrinated by a permissive ‘new morality’, and therefore they are beginning to accept extra-marital sex as the standard] (Brits, 1989, p.3).

This discourse acts in some ways in opposition to the humanist discourse. In place of the notions of freedom and individual choice implied in the humanist discourse, the moral decay discourse dubs permissiveness as giving ‘te veel vryheid aan kinders op ‘n vroëe ouderdom [too much freedom to children at an early age]’ (Brits 1989, p. 205). The implicit assumption here is the necessity of a sovereign type power where ‘correct’ moral standards, such as sex only within the confines of marriage, are inculcated, and freedom restricted.

The positive values assumed to be the opposite of ‘moral decay’ are never explicitly cited. Instead, they take on the aspect of common-sense or the taken-for-granted. It is assumed that the reader or listener understands and accepts the premises implied in the discourse. Consider the following quote:

Extract 6.39

‘n Interessante feit is dat hierdie dogters [swanger tieners] nie losbandig is nie, 77% het ‘n permanente verhouding met net een man gehad [An interesting fact is that these girls are not promiscuous; 77% had a permanent relationship with just one man] (De Villiers & Clift, 1979, p. 196).
This passage has a clear gendered project (consider the use of the word ‘girls’ for the females and ‘man’ for the males and the association of the ‘girls’ with promiscuity, and not the men). However, what I wish to emphasize in this context is the authors’ position concerning the morality of sexual encounters. They express surprise that they are unable to position these pregnant teenagers within the ‘moral decay’ discourse as they had a permanent relationship with ‘just’ one man. But more tellingly, their use of the word promiscuous is assumed to need no explanation. Behaviour where one engages in sexual activity with more than one person is labelled promiscuous, and therefore undesirable.

Another example comes from Ntombela (1992) who, under the heading of ‘Perception of the moral aspect’, writes:

Extract 6.40

An overwhelming percentage of the pregnant teenagers in this study did not think of procuring an abortion in spite of their pregnancy. ... This shows that, even though pregnant, they still could think clearly and positively about the whole matter’ (p. 90).

The linking of pregnancy with the possibility of unclear thinking reflects a positioning of women as irrational. Yet, because this sample chose the ‘correct’ moral stance on abortion, they are rescued from this positioning (however temporarily).

Authors invoke various ‘regimes of truth’ to which the fundamentals of ‘good’ moral behaviour belong (although often they are assumed, as above). ‘Democracy’¹ (‘This [sexual education] included moral education; knowledge of accepted norms and values of a Democratic society’ (Oosthuizen, 1990b, p. 169)), the church (‘Dit is belangrik dat die kerk ook moet besef dat tienerige swangerskap ’n gemeenskapsprobleem is’[It is important that the church must also realise the teenage pregnancy is a community problem] (De Villiers and Clift, 1979, p. 199)) and traditional culture (‘ the ‘contagious ill luck’ ... believed by traditionalists to be associated with the loss of virginity before marriage. Raum (1973:452) likened it to shame or disgrace’ (Preston-
The ‘moral decay’ discourse resonates with Fine’s (1988) work in which she identifies what she calls the ‘sexuality as individual morality’ discourse in the sexuality education curricula in the United States. This discourse ‘values women’s decision making as long as the decisions made are for premarital abstinence’ (p. 32). It is saturated with the language of self-control and self-respect which ‘reminds students that sexual immorality breeds not only personal problems but also community tax burdens’ (p. 32).

The ‘biological’ discourse

In this discourse, (hetero)sexuality is undergirded by biological functions which are assumed to act independently of the cultural or social. A split is created between the biological and the sexual, and between the biological and the social. Two trends emerge in authors’ handling of the biology-sexuality-social connection. The first is where the social is admitted to only obliquely through the mechanisms of biology. For example, sexual maturation is posited to occur earlier as a result of increased nutrition; while increased nutrition is admitted to be related to social and political factors, the primary interest is in the biological status accorded by nutrition. The second is where the social is influenced by the biological. We see in Extracts 6.42 and 6.43 below, for example, how ‘society’ is depicted as pressurising adolescents to perform biologically-based (hetero)sexual functions.

This discourse contains within it a hydraulic hypothesis. This posits that as a result of biological mechanisms, sexual impulses and drives (which are assumed to be unproblematically real) are created which need, on the one hand, to be accepted and, on the other, to be curbed. It links to the depiction of adolescence as a transitional stage of experimentation, as seen earlier, as sexual energy or pressure leads to exploration and experimentation. As with the ‘experimentation’ discourse of adolescence, the hydraulic nature of (hetero)sexuality is gendered:
There are differences in sexual drives between males and females [which] ... could have placed the respondents at a greater disadvantage with a greater likelihood for coercion (Mosidi, 1992, p. 30).

The power of this discourse lies in its ability to render gender relations, such as coercive sexual encounters, natural (albeit regrettable) owing to differentiated biological mechanisms, as depicted in Extract 6.41. The biological mechanism attributed to women is reproductive capacity. Thus, although the female adolescent is not attributed the agency implied in the ‘drive’ discourse, she is thoroughly saturated with sexuality, or, in Foucauldian terms, hystericised. The masculinised biological mechanism revolves around what Hollway (1984, 1989) calls the ‘male sex drive’ discourse, while the feminised one is related to fecundity. Consider the following extracts where these are contrasted:

**Extract 6.42**

In fact it is expected that boys will seek sexual relationships with girls and the boy who does not do so is ridiculed (Preston-Whyte & Zondi, 1992, p. 235).

**Extract 6.43**

Having many girlfriends is proof of potency for a man (Preston-Whyte & Zondi, 1991, p. 1392).

**Extract 6.44**

Intercrural sex satisfied the girl’s lover (Mfono, 1990, p. 8).

**Extract 6.45**

[T]hey [teenage women] feel confused, lonely and that no one understands them. At this stage they may become fair game to an attentive boyfriend who says he loves her and finds her sexually attractive (Oosthuizen, 1990a, p. 46).

**Extract 6.46**

Regarding the subjects’ interpersonal style in their heterosexual relationships, most tend to be submissive, passive and unassertive ... [A]n inability to resist the male partner in the male-female power differential [is] a prime reason for adolescent sexual activity (Pond, 1987, p. 162).
Extract 6.47

A wife who fails to have a child fairly speedily after marriage is as open to questioning and eventually ridicule as the young girl who is known to be having sexual relations regularly but who does not become pregnant (Preston-Whyte & Zondi, 1989, p. 65).

Extract 6.48

Most of the younger girls interviewed said they felt it was important not to get the reputation of being infertile (Preston-Whyte & Zondi, 1989, p. 58).

The ‘male sex drive’ discourse identified by Hollway (1984, 1989) is reflected in Extracts 6.42 to 6.45. The central proposition is that males are driven by biological necessity to seek out sex (with women - see Extract 6.42). They are opportunistically aroused and seek sexual variety (Extract 6.43). The drive is satisfied through sex, even in a lesser form (Extract 6.44). The woman occupies the position of object. She is ‘sexually attractive’ (Extract 6.45) to the man who sees her as ‘fair game’ (Extract 6.45), and therefore mounts a conquest on her. However, in her position of object the female is placed in a double bind position. She is incited, on the one hand, to labour to achieve her object status through, for example, making herself attractive to men. On the other hand, she is rendered responsible for curbing the male’s sex drive. We see, for example, in Extract 6.46 how teenage women are pathologised as ‘submissive, passive and unassertive’ and not ‘resisting’ the male sex drive.

Whereas men are ‘ridiculed’ for not fulfilling the tenets of the ‘male sex drive’ discourse, females reported to be open to social censure for not reproducing (Extract 6.47). Fecundity is the feminised complement of the male sex drive. Fertility is portrayed as a strong feature of feminised sexual identity. Females are depicted as labouring to maintain the position of fecundity (Extract 6.48).

The marginalised discourse: sex as pleasure

This discourse, in which sex is seen as pleasurable, is extremely rare in the professional literature. I could find only isolated examples, and in these ‘sex as pleasure’ is treated in a marginalised manner:
Extract 6.49

Longing to have a boyfriend, they must sleep with him, and having done so, they need to prove their fertility by having a baby. This does not even take into account that they may enjoy the experience! (Preston-Whyte & Zondi, 1991, p. 1392).

Extract 6.50

The messages they get from the media are that sex is fantastic. Parents need to explain that sex in tense dicey situations is not pleasant! (Oosthuizen, 1990a, p. 47).

In Extract 6.49 the ‘sex as pleasure’ discourse is diluted by its insertion within a number of caveats. The female adolescent is chiefly positioned as a passive victim. Emotions virtually ‘force’ her to enter into sexual relations with her boyfriend; external pressure demands proof of fertility. When the discourse of desire/pleasure, in which agency is attributed to the female, is introduced, it is undercut by what has preceded it. In Extract 6.50, the discourse of pleasure is set up as a straw object to be targeted for annihilation as pleasure is rendered dangerous. It is interesting to note that in both passages the authors found it necessary to use an exclamation mark when referring to sex as pleasurable. This draws attention to the work of undermining the discourse of pleasure achieved in the extracts.

The marginalisation of the discourse of pleasure within the professional literature echoes Fine’s (1988) analysis of sexuality education in the United States. She found the ‘authorized suppression of a discourse of female sexual desire’ (p. 30). When it is spoken of, ‘it is tagged with reminders of “consequences” - emotional, physical, moral, reproductive, and/or financial’ (p. 33). The question of why the discourse of pleasure is marginalised in these and other broad fields of practice arises. It appears that this discourse, which attributes agency to female teenagers, counteracts the other (albeit contradictory) discourses of (hetero)sexuality which, firstly, legitimate the expert’s intervention, and, secondly, re-produce particular gendered sexual relations. If desire is foregrounded, then the incitement by experts for teenagers to exercise self-government (see Chapter 10) is weakened, and females are allowed to take a subject position in (hetero)sexual relations.
Conclusion

In order to render teenage pregnancy governable, teen-age needs to be recognised as a separable stage in the life-course of humans, so that those fitting into the teenage category can be targeted for investigations regarding their nature, as well as interventions with respect to their behaviour. Discourses surrounding teenage pregnancy are simultaneously constructed by and participate in the construction of discourses surrounding adolescence and adolescent (hetero)sexuality. Three things are achieved in this mutual construction: (1) the undecidability of adolescence and adolescent (hetero)sexuality is simultaneously highlighted and masked; (2) the intervention of the mature, responsible, adult expert is legitimated; and (3) various gendered power relations are re-produced. Each of these will be discussed below.

In the ‘transitional’ discourse of adolescence, the adolescent is presented as progressing naturally through a phase of development which separates childhood from adulthood. This discourse attempts to decide the undecidable, the adolescent, who is neither child nor adult, but at the same time is both. It (the ‘transitional’ discourse) has been utilised by researchers in the field of teenage pregnancy in a variety of ways. The teenager’s transitional developmental status has been employed in explaining her propensity to become pregnant, and her inadequacy in terms of mothering. She has the marks of adulthood - being pregnant, becoming a mother - but she is actually a child in that she became pregnant through lack of knowledge, assertiveness, etc., and she cannot really mother as she lacks maturity and ability. Like the child, the adolescent is portrayed as unable to make reasoned decisions, or to plan ahead. However, s/he is also in a stage of emerging adult rationality and abstract thinking. The combination of these portrayals allows for the condemnation and rescue of the pregnant teenager, in that pregnancy may be depicted as the result of irrational, or ‘fairly rational’ (Preston-Whyte & Zondi, 1989, p. 48) actions. The simultaneous exclusion of the adolescent from childhood and adulthood is necessary for, firstly, the recognition and, secondly, the problematisation of adolescent (hetero)sexuality. Adolescent (hetero)sexuality can be recognised as adolescents are excluded from the dominant discourse of childhood innocence. At the same time, it can be problematised as (hetero)sexuality belongs to the adult domain. Adolescents are hence depicted as simultaneously saturated with and devoid of sexuality.
In describing the nature of adolescence, or alternatively utilising it as an explanatory tool, the literature on teenage pregnancy replicates the general developmental psychology literature in focussing on the generalised adolescent, abstracted from his/her socio-historical circumstances. The cultural and historical specificity of the notions of adolescence and childhood, elucidated by various authors (Aries, 1962; Harari & Vinovskis, 1993; Smart, 1996), is not recognised. The developmentalist framework within which the notion of adolescence is embedded masks the operation of power. The underlying, gendered goal of the ‘normal’ adult, who is presented as unproblematically unitary and with characteristics largely coterminous with those ascribed to the rational, white, middle-class male, is not questioned. The rationality of adulthood is seen as universal and objective. The process of abstraction and universalism masks the power of those who, on the basis of scientific principles, define the nature of development and the interventions required to facilitate its natural progression. The ‘transitional’ discourse with its image of the experimenting, non-rational, developing adolescent who experiences emotional turmoil allows the space for the introduction of the mature, rational, stable adult in the form of the expert who guides the adolescent through this difficult time.

The positioning of the adolescent as lacking in the adult qualities which characterise the free, self-actualised person allows for the depiction of her failure in sexual self-actualisation, and her engagement in deviant sexual behaviour, in the ‘humanist’ discourse of (hetero)sexuality. One such mechanism is through ignorance of the ‘facts’ (as opposed to the ‘myths’ spread by her friends) of (hetero)sexuality. Knowledge of these ‘facts’ is presumed to be in the hands of the experts who, through a process of pedagogisation, guide the adolescent in authentic sexual self-development. This pedagogisation is not be one imposed from above, but rather corresponds to the child-centred approach referred to in the previous chapter, where the natural sexual development of the adolescent is monitored, and strategies of self-surveillance put in place. In contradistinction to this, the ‘moral decay’ discourse of (hetero)sexuality introduces the person in need of strict moral guidance, of a sovereign-type power which imposes particular standards and restricts freedom. The teenager who engages in sex outside of marriage falls squarely into the ‘moral decay’ discourse, and thus is open to interventions which utilise various moral strategies (through the appeal to ‘democracy’, the church, or traditional culture) to inculcate
particular behaviour patterns.

A dominant discourse in the literature is that of the female adolescent as the passive recipient of external influences of adversity and socialisation. This discourse stands in opposition to the image of the experimenting teenager who is agentic in searching and testing boundaries. However, this latter picture of adolescence does not feature strongly in the teenage pregnancy literature, as its premises are in opposition to the discourse of femininity. In the ‘passive recipient’ discourse, no such contradiction exists. The most vilified of the external influences is the peer group (parents are seen as not exerting sufficient influence, and ‘society’ is implicated somewhat obliquely). This vilification relies on a splitting of the individual from society, in that the ‘peer group’, which is given the agentic status of exerting influence, is separated from the ‘adolescent’, who is passive. The ‘passive recipient’ discourse is instrumental in legitimating the expert’s intervention, as the expert, who understands the true nature of adolescence and (hetero)sexuality, must rescue the adolescent from misinformed, negative influences. The ‘biological’ discourse of (hetero)sexuality links to the gendered depiction of female adolescents as passive recipients of external influences. It contains within it the hydraulic hypothesis which saturates (hetero)sexuality with drives or impulses. However, these drives (as with the experimenting adolescent) are masculinised, with females positioned as the objects of male desire. The biological mechanism attributed to females is fecundity, the passive receipt of fertilisation by the male.

The one discourse which attributes agency to the female teenager and excludes the expert ((hetero)sexuality as pleasure or desire) is virtually absent from the literature. Where it does appear, it is negated either directly or indirectly. The female teenager fits easily into the discourse of hystericisation (see Foucault, 1978), where her body is seen as thoroughly saturated with (hetero)sexuality but without the hydraulic drive attributed to males. Without the agentic avenues of desire or drive open to her, she remains, in the literature, the passive victim of her own (hetero)sexuality.

In this chapter, we have seen how the pregnant teenager’s parents are depicted as not engaging in the confessional with her, and as not passing on acceptable moral values to her. In the
following chapter, I move on to describing one of the broader governmental tactics deployed in the literature on teenage pregnancy, viz. the familialisation of alliance. The teenage pregnancy literature utilises and at the same time contributes to the familialisation of alliance, the simultaneous deployment of sexuality and alliance along the husband-wife and parent-child axes. Certain family formations and functions are legitimated or taken for granted and others marginalised.
In the *History of Sexuality Vol. 1*, Foucault (1978) talks of the ‘deployment of alliance’. By this he refers to ‘a system of marriage, of fixation and development of kinship ties, of transmission of names and possessions’. (p. 106). The deployment of sexuality, which ‘proliferat[es], innovat[es], annex[es], creat[es], and penetrat[es] bodies in an increasingly detailed way, and control[s] populations in an increasingly comprehensive way’ (p.107), was originally focussed on alliance, and continues to act in conjunction with the deployment of alliance, but is not reducible to it. The main elements of deployment of sexuality have developed along two primary dimensions of alliance: the husband-wife axis and parents-children axis.

This interpenetration of the deployment of alliance and that of sexuality in the form of the family allows us to understand a number of facts: that since the eighteenth century the family has become an obligatory locus of affects, feelings, love; that sexuality has its privileged point of development in the family (Foucault, 1976, p. 108).

Thus we have what I have called the familialisation of alliance, a governmental tactic through which the complex interconnection of sexuality and alliance are deployed. In this chapter, I explore how this governmental tactic is utilised in the South African literature on teenage pregnancy to achieve particular readings of adolescent reproduction, and how, in turn, this literature contributes to the re-production and re-circulation of the tactic of familialisation of alliance.

The husband-wife axis of the familialisation of alliance is forefronted in the teenage pregnancy literature through the invocation of the conjugalisation of reproduction and the consequent pathologisation of the single female parent and what are termed ‘broken’ homes. The parent-child axis is emphasised in the functionalisation of families. Families are incited to take on certain responsibilities in order to ensure the growth of the free, self-actualised individual (who, in this case, does not fall pregnant when a teenager). They are the site for the development of the psychologised individual. In the words of Aries (1962):
The care expended on children inspired new feelings, a new emotional attitude, to which the iconography of the seventeenth century gave brilliant and insistent expression: the modern concept of the family (pp. 396-397).

The familialisation of alliance can only occur if the family appears to be a ‘natural’ phenomenon, if it is seen as culturally and historically invariant, or at least as only marginally variable. This ‘naturalness’ then allows for experts to scrutinise family formation and function, and make pronouncements concerning beneficial relations of alliance and how these serve universal human and social needs. Scientific and professional descriptions are turned into familial prescriptions, which gain their power by appearing to be universally valid and natural. Parents are surveyed, monitored and evaluated and an appeal is made to children’s natural development and needs. Parents, where found defective in meeting those needs, are then ‘educated, supplemented, and in the last instance supplanted by psychologically trained professionals’ (Rose, 1989a, p. xi).

Families, in general, do not need to be co-erced into performing familialised practices. Instead, the ‘wishes, desires and aspirations of adults’ (Rose, 1989a, p. xii) are acted upon to produce the required behaviour. The representation of the family as a ‘private’ domain, and its splitting from the ‘public’, reinforces the incitement to self-surveillance. The family takes on responsibility for the socialisation of the individual, self-regulating its interactions in line with normative prescriptions. The obfuscation of the political in the familialisation of alliance means that familialised political action is precluded. Yet, the ‘privacy’ of the family is belied by the intervention of experts in families on the margin (for example, through the practice of removing children from those families deemed unfit).

The family appears in two inter-related forms in the teenage pregnancy literature. The first is the teenager’s family of origin, the second, the family formed by the teenager bearing a child. In the first instance, the family is positioned as not fulfilling the functions required of a family and hence as contributing to the occurrence of teenage pregnancy. This relies on the normalisation of certain familial functions. These are the development of: (1) the affectively actualised, and (2) the responsible citizen. In the second type of family (that formed by the teenager, by the establishment of the parent-child axis of alliance), it is the absence of marriage (the husband-wife
axis of alliance), and the motherhood of the teenager that are pathologised. This relies on the dominant discourses, firstly, of marriage as the appropriate setting for reproduction (the conjugalisation of reproduction), and, secondly, of proper mothering. The pathologisation of these two family types (the family of origin and the family formed by the teenager) is interrelated as there is the suggestion of generational effects. The familial formations which are singled out as deleterious in their effects (whether as the family of origin or as the family formed by the teenager), are the single parent family and the broken family. These portrayals of the family find resonance in the official definitions of the family found in the South African statute books. We saw in Chapter 3, for example, how South African family law defines the responsibilities and duties of parents in terms of care and protection, and educational and financial provision (actions which have commonality with the development of the affectively actualised and responsible citizen).

The functionalisation of the family

The family of origin of the pregnant teenager is pathologised as not performing the functions which would lead to the normalisation of the teenager (which means that she would not fall pregnant). This relies on dominant discourses concerning normal personhood which incite the family to assume certain responsibilities with respect to the development of that person, viz. the development of the affectively actualised and responsible citizen. Each of these responsibilities is discussed below. The functionally deviant family defines the borders of the functional family. The association of this deviance in the literature with lower socio-economic status and African culture belies the power relations operative in the invocation of the discourse of family functionality. The functionalisation of the family formed by the teenager bearing a child centres around her mothering. This dealt with in a separate section below.

The development of the affectively actualised person

The incitement for the family to develop the affectively actualised person corresponds with the familial discourse identified by Soal & Kottler (1996) as ‘the normal loving family’.
family, posed as ‘normal’, is characterised by harmonious relationships and the smooth running of domestic affairs. It is the sphere in which the members develop into healthy, happy, well-adjusted individuals. Words and phrases associated with this discourse are: ‘belangstelling [interest]’; ‘aanmoediging [encouragement]’; ‘affektiwe responsiwiteit’ [affective responsiveness]’ (Blom, 1990, p. 121); ‘supportive role [of the parents]’; ‘listening and caring’ (Tanga, 1991, p.13); ‘parental warmth’ (Oosthuizen, 1990b, p. 215); ‘acceptance’; ‘unconditional love’; ‘appreciation’; ‘feels worthwhile and lovable’ (Oosthuizen, 1990a, p. 47). The ‘normal loving’ family thus is responsible for the emotional needs of the individual and is the location for the ‘fulfilment’ of the self.

The impetus to produce affective responsibility relies on an appeal to future outcomes:

**Extract 7.1**

Familial relationships, especially parent-child relationships, affect the child’s developing self-concept, and the experiences gained in the family are carried over to other relationships (Pond, 1987, p. 51).

This assurance of the link between familial relationships and the child’s future happiness works on the desires of parents, invoking their will to self-monitoring and the adjustment of behaviour patterns. The association depends on the interlinking of the liberal, humanist notions of the free, self-determined, bounded individual (in the form either of the parents or of the child as the future adult), the developing child who has certain emotional needs, and familial relationships as private, domestic affairs (through which affective functions are performed).

With ‘affective responsibility’ comes the inducement to speech through the notion of ‘communication’:

**Extract 7.2**

Parents are available to discuss, deliberate, communicate and understand their daughter’s viewpoint and she theirs’ (Oosthuizen, 1990a, p. 47).
Extract 7.3

[M]others who were able to share their problems freely with their parents are those who have open patterns of communication with their parents. ... [T]eenagers who are unable to disclose their thoughts, feelings and attitudes to parents become frustrated and unhappy (Mkhize, 1995, p. 104).

This confessional, in which parents are ‘available’ to ‘deliberate’ and ‘discuss’ (Extract 7.2) or teenagers are able to ‘share’ or ‘disclose’ their feelings (Extract 7.3), operates in the familial setting to render both the parents and the child ‘truthful’ to themselves and each other (although it is generally the child who is seen as the confessor, and the parent as the guide). The corollary of the confessional is that failure to engage in the ritual will lead to negative consequences; in Extract 7.3, we see how teenagers may become ‘frustrated’ and ‘unhappy’. This adds to the incitement of parents and children to regulate their discursive behaviour.

Patrolling the borders of this ‘normal loving family’ is the deviant or pathological family whose affective responsibility has turned in on itself and has produced ill effects in the child. Consider Extract 7.4 where negative affect (dependency and rejection) are associated with unmarried motherhood (see later section on the conjugalisation of reproduction):

Extract 7.4

Also prominent in the unmarried mother’s parent-child relationship is the dependency deprivation syndrome which is a pattern of dependence and rejection in which the child is expected to play a parental role in order to fulfill the parents’ unfulfilled dependency needs (Pond, 1987, p. 52).

Development of the responsible citizen

Extract 7.5

Swanger adolessente ervaar die oordrag van etiese standaarde en sosiale waardes in die gesin as beduidend meer onduidelik, met minder aanmoediging tot outonomiteit en die ontwikkeling van ‘n eie waardestelsel as nie-swanger adolessente [Pregnant adolescents experience the transfer of ethical standards and social values in the family as significantly more unclear, with less encouragement to autonomy and development of a personal value system than do non-pregnant teenagers] (Blom, 1990, p. 121).
The family is invested with the responsibility of creating responsible citizens who are, as described above, ethical, autonomous (Extract 7.5), free, self-actualised (Extract 7.6), and hold acceptable social values which they personalise as their own (Extract 7.5). This citizen is economically useful (‘preparing the daughter for a productive and lucrative role in society’ (Mfono, 1990, p.6)), able to make individualised decisions (‘The girl is taught that she has freedom of choice and that she is responsible for her own actions’ (Oosthuizen, 1990a, p. 47)), self-identified and independent (‘her search for identity and the concomitant dependence-independence conflict’ (Pond, 1987, p. 51)), and stable (‘a close relationship between parents and daughter leads to emotional, spiritual and psychological stability in the teenage girl’ (Oosthuizen, 1990a, p. 46)).

The modern, responsible citizen is not a being who is co-erced into action by external forces, or by the law. Instead, s/he is ‘obliged to be free’ (Rose, 1989a, p. xi), endowed with choice and individual decision-making. Yet this status is not automatic. She and the family have to work to achieve this ideal. As noted above the girl must ‘search for identity’, and there is potential ‘dependence-independence conflict’. The parents therefore have to monitor their own behaviour to ensure that they are providing the correct circumstances for the development of this responsible citizen in their home. Consider the following extracts

Extract 7.7

Die sosiale milieu van die dogters was ontoereikend, omdat die voorbeeld wat deur die ouers voorgehou is, nie navolgswaardig was nie [The social milieu of the girls was inadequate because the example set by the parent was not worth following] (Brits, 1989, p. 195).
Extract 7.8

[T]he family and the shaping of a particular consciousness within the immediate and extended family system ... creates subjectively, an unconscious but determining covert attitude to teenage pregnancy, per se. The attitude which is unconsciously created in this context is one of acceptance towards premarital pregnancy. Objectively, however, the attitude espoused by the family is condemnatory of premarital pregnancy, but overwhelmingly accepting of the baby. Thus tension exists between the objective acceptance of the baby and the overt condemnation of premarital pregnancy. The impression is that these tensions may be conflated for both teenagers and parents (Preston-Whyte, 1991, p. 34).

In Extract 7.7, we see how parents are incited to ‘set an example’, to behave in ways that will be replicated by their children in the formation of the responsible citizen. In this case, the parents fall short of the ideal, passing deviance on to the next generation. The process of parental self-surveillance is a complex one, as evidenced in Extract 7.8 where the conscious and the unconscious are juxtaposed to create a double bind situation. The parents in this extract may consciously attempt to pass on ‘acceptable’ values (being non-reproduction in teenage years) to their children, but unconsciously (a domain visible to the expert, but invisible to the individual themselves) they negate this attempt.

The creation of the sexually responsible citizen is one of the major tasks ascribed to parents. It is also the main area in which parents are depicted as lacking. Consider the following extracts:

Extract 7.9

Throughout this paper ... it has been stressed that parents are the most important sex educators of their children. In the establishment of sexual values by their teenage daughters, parents are considered to be the greatest influencing factor which will determine whether their daughters establish worthwhile sexual values or not (Costhuizen, 1990b, p. 122).

Extract 7.10

Most parents, and mothers in particular, may warn their daughters vaguely ‘to stay away from boys’, but offer little, if any, actual advice on how to negotiate relationships with men and boys. Most adopt the Christian stance of chastity before marriage for the benefit of their children. In effect, they turn a blind eye to what they know is reality, and pretend to believe that their own daughters are ‘good’ (Preston-Whyte & Zondi, 1992, p. 235).
Extract 7.11

They found that teenagers use birth control less often and less effectively when their parents do not know that they are having sexual relations and would disapprove if they found out. In the light of this, family planning programmers may need to initiate a different strategy, that of encouraging or educating parents to communicate more with their youngsters about sexual matters (Setiloane, 1990, p. 9).

Parents, thus, are ‘the most important sex educators of their children’ (Extract 7.9); they are the ‘greatest influencing factor’ (Extract 7.9). They are also deficient in this regard: they ‘turn a blind eye’, ‘pretend to believe’ something which is in fact not real, ‘offer little’ to their children (Extract 7.10), and do not communicate with them (Extract 7.11). The perceived inability of parents to fulfill their responsibility in terms of creating the sexually responsible citizen has been hypothesised in the literature as owing to the incest taboo. Foucault’s (1976) statement concerning incest is of relevance here:

[Int] in a society such as ours, where the family is the most active site of sexuality, and where it is doubtless the exigencies of the latter which maintain and prolong its existence, incest - for different reasons altogether and in a completely different way - occupies a central place; it is constantly being solicited and refused; it is an object of obsession and attraction, a dreadful secret and an indispensable pivot. It is manifested as a thing that is strictly forbidden in the family insofar as the latter functions as a deployment of alliance, but it is also a thing that is continuously demanded in order for the family to be a hotbed of constant sexual incitement (p. 109).

In the same way, the sexualised parent-adolescent relationship is simultaneously portrayed as absent, and demanded. Either way, the expert is able to position the parent as deviant. On the one hand, the ‘sexual values’ which s/he may attempt to ‘establish’ in his/her child may be deemed not ‘worthwhile’, as in Extract 7.9 where the authorial voice is clearly the arbitrator of whether sexual values are worth-while or not. On the other hand, if s/he does not engage in overt sexual discussion, s/he is remanded as irresponsible and ignoring reality (Extract 7.10). This allows for the surveillance and pedagogisation of the sexualised parent-child relationship, as evidenced in Extract 7.11 where experts in the form of family planning programmers are encouraged to educate parents concerning their responsibility in creating the sexually responsible citizen. The incitement to parents to engage in sex education and communication with their children relies on the depiction of sexuality as an uncontested, unitary domain, in which ‘facts’ can be separated from ‘fiction’ (see discussion in Chapter 6). The parents’ role is portrayed as the simple transmission of a set of undisputed facts to the teenager. It is assumed that if this is
done, then sexual responsibility will follow.

Although the development of the responsible citizen rests chiefly on the image of the naturally developing liberal individual produced through surveillance and self-monitoring, a rhetoric of control or authoritarianism is also in evidence. Here parents are seen as authorities whose responsibility it is to control the behaviour of the child so as to conform to socially accepted norms. They impose external standards of behaviour (in this case avoiding sex, or at least pregnancy) on their offspring. They are depicted as possessing power or being in command. This allows for them to be blamed for their children’s socially undesirable behaviour as they are positioned as (wilfully) not exercising the power invested in them. For example:

**Extract 7.12**

Litlle parental supervision and control were fairly general features of the background of teenagers who were sexually active at an early age and who later conceived (Preston-Whyte, 1991, p. 14).

**Extract 7.13**

Teenagers spend most of their time away from their parents (i.e. at school) and there is lessened parental control over teenagers. Teenagers are therefore exposed to circumstances leading to teenage motherhood (Mkhize, 1995, p. 84).

This lack of control, which may be accounted for by modern social arrangements as in Extract 7.13, implies an even greater need to expert supervision and guidance.

**Functional deviance**

**Extract 7.14**

Volgens ‘n sisteemteoretiese benadering wat as uitgangspunt van hierdie studie geld, hou tienerswangerskappe verband met disfunksionele gesinsfusksionering [According to a systems theory approach which serves as the basis for this study, teenage pregnancy is related to dysfunctional family functioning] (Blom, 1990, p. 2).

The functionally deviant family is what defines the functionally normal family (and vice versa). In Extract 7.14, it is implied that the normal family does not have a teenage daughter who is
either pregnant or has a child (perhaps if she were married and had a child the family may be retrieved from outside the domain of ‘normality’). A pregnant teenager indicates that the family has failed in its responsibility in producing the affectively actualised and responsible citizen. In the extracts listed above, we see how teenage pregnancy is associated with families which: do not transfer acceptable ethical standards or encourage autonomy (Extract 7.5); do not provide the optimal conditions for self-actualisation, have inadequate patterns of communication and are overprotective (Extract 7.6); do not set a good example (Extract 7.7); give conflicting messages concerning the desirability of pregnancy (Extract 7.8); do not exercise sufficient control (Extracts 7.12 and 7.13).

The association of family deviance with teenage pregnancy and the concomitant normalising of certain patterns of behaviour is underlaid by further, more pernicious discursive attributions, viz. the association of family deviance with lower socio-economic status, and African culture (see Chapters 8 and 9 for a fuller discussion of the economisation of activity and culturalisation in the teenage pregnancy literature). Consider the following excerpts:

**Extract 7.15**

Die meeste van hierdie dogters het ‘n lae sosio-ekonomiese agtergrond. Die ouers in hierdie klas het ook min invloed op of belangstelling in hulle dogters. Die gevolgtrekking is dat die gesinverhouding nie betekenisvol gebruik kan word om hierdie toestand [tienerswangerskap] te verhoed nie. Die ouers se invloed is baie ondoeltreffend [Most of these girls have a low socio-economic background. The parents in this class also have little influence over or interest in their daughters. The conclusion is that family relations cannot be meaningfully used to prevent this situation [teenage pregnancy]. The parents’ influence is very ineffectual] (De Villiers & Clift, 1979, p. 199).

**Extract 7.16**

This [lack of communication] can be attributed to the African culture which does not favour children to have [sic] open discussions with their parents (Mkhize, 1995, p. 104).

**Extract 7.17**

Weens die ekonomiese druk op die gesin waar albei ouers gedwing word om te werk, is die hedendaagse ouers dikwels nie genoegsaam betrokke by hul kinders nie. Dit kan lei tot ‘n gebrek aan kommunikasie [Because of the economic pressure on the family where both parents are forced to work, today’s parents are frequently not sufficiently involved with their children. This can lead to a lack of communication] (Dreyer, 1991, p. 54).
In Extract 7.15, poor parents are depicted as ‘having little influence or interest in their daughters’. They are portrayed as refusing to take on the responsibility of developing the responsible, affectively self-actualised individual. This positioning allows for a more direct intervention by the expert in lower socio-economic status families than in middle- or upper-class ones. The authors of Extract 7.15 state that the family cannot be ‘used’ (by implication by the expert) to any good effect. This means, it would seem, that the expert needs to step in directly. In Extract 7.16, functional deviance is extended to ‘Africans’. They are portrayed as refusing to allow a confessional space within which the self-actualising, affectively mature individual may emerge.

There is a gendered aspect to the pathologising presence of lower socio-economic status, as evidenced in Extract 7.17. The implication here is that were the mother not working, there would be sufficient involvement and communication. It is assumed that mothers work because of economic pressure. This assumption attempts to rescue the woman from blame (she is forced, rather than choosing, to work). What is achieved, however, is a pathologisation of families with two working parents, and a gendering of family functions such as communication and involvement (if the mother were at home these functions would be well-performed). This gendering of familialised function has been noted elsewhere (see Phoenix & Woollett (1991) who indicate that the responsibility for the reproduction of good habits is vested in mothers in their positioning of primary caregivers). The extract also achieves a legitimisation of the expert’s intervention. Modern social arrangements (two parents working) are portrayed as meaning that parents are unable to preform their functions adequately, thereby creating the space for the expert to supplement the parents through pedagogisation or psychologisation.

In this section, we have seen how the family of origin of the pregnant teenager is portrayed as refusing, or, alternatively, as not capable of performing, the functions of developing the affectively actualised and responsible citizen who, it is assumed, would not conceive and bear a child at an early age. This portrayal relies on a particular reading of personhood (free, self-actualised, rational and responsible for his/her own actions). Furthermore, it allows a space for the incitement of families to take on the responsibilities outlined, and, in the final instance, for the supplanting of the family by experts. The association of functional deviance with lower
socio-economic status and the ‘African’ culture relies on the governmental tactics of the economisation of activity and culturalisation, both of which are discussed in later chapters. In the following section, I turn to the functionalisation of the family formed by the teenager in bearing a child. Having come from a family in which normalised patterns of behaviour are depicted as missing, the teenager is positioned as inadequate in her parenting tasks. Functional deviance is portrayed as being transmitted from one generation to another.

**Mothering**

Not all teenagers who conceive become mothers. However, much of the pathologisation of teenage pregnancy revolves around the question of teenagers’ ability to mother. South African research has positioned teen mothers as being ambivalent towards and covertly rejecting their children (Rubensztein, 1992), as finding mothering difficult, as lacking patenting skills (Mkhize, 1995) as well as knowledge concerning the emotional needs of the child (Erasmus, 1990), and as having negative ‘irrational’ thought and feelings concerning their children (Fouché, 1992). This relies on what Johnson (1990) calls the ‘invention of ‘good mothering’” (p. 2). Underlying the debate on teen mothering is an implicit assumption concerning what it means to be a ‘good mother’. The characteristics of the universalised ‘good mother’ are taken-for-granted. They form the normalised absence, the silent signifier on which the discussion of the merits of teenage mothering depends. Mothering is treated as a stable, inviolable category, something which is self-evident, rather than an activity which is informed by and reflects the socio-political preoccupations of the particular time and place. A viewing of the post-structuralist and feminist writings on mothering (e.g. Gienn, Chang & Forcey, 1994; Jackson, 1993; Johnson, 1990; Walkerdine & Lucey, 1989; Weedon, 1987) indicates, however, that there is great variability across and within historical periods and societies in terms of child-rearing practices and the relationship between mother and child as well as between both of them and significant others. For example, Newson and Newson (1974, cited in Burman, 1994) indicate how the prevailing moralities which have governed approaches to childcare have varied over time in Britain. From the mid-eighteenth century to mid-nineteenth century there was a ‘religious’ morality, with a focus on preparing children for death. After World War I, medicine and later psychology, with their promise of earthly survival in return for adherence to ‘scientific mothercraft’, succeeded
religion as the dominant moral authority governing childcare. Children’s ‘needs’ and ‘natural development’ were emphasised and there was a shift in emphasis from prescription to flexibility.

In the following, I illustrate the taken-for-granted assumptions concerning mothering in the psychologised literature on teenage pregnancy, viz. that mothering is (1) essentially a dyadic relationship, (2) a task that requires a certain level of competence or skill, (3) a pathway to adulthood for females, and (4) supplemented by the public figure of the father. In analysing these underlying premises of mothering, I illustrate how the pathologisation of the teenage mother allows for the crystallisation of the ‘good’ mother, how the splitting of the public from the private space of mothering has powerful effects, and how the professionalisation of mothering is legitimated. Furthermore, I indicate the gendered nature of the reproduction of mothering.

**Mothering as a dyad**

The literature on teenage pregnancy follows the general trend within developmental psychology of treating mothering as a dyadic relationship (see Burman’s (1994) discussion of developmental psychology). The mother’s influence on the child is foregrounded, and isolated from its contextual background. This serves to obscure the relationships that surround and involve infants and young children and their mothers, as well as the context and the sexualised relationship within which women become pregnant (Pateman, 1992). It splits the domestic from the social and public. In the words of Burman (1994):

> The focus on the interpersonal dyad leaves out of the picture the wider social structural relations, relations of power ... and thus correspondingly works to obscure the ways those wider structural relations enter into and are (re)produced within micro-social relations (p. 44).

This emphasis allows for the depiction of a nuclear family formation as generic (see later discussion in this chapter). It also permits, firstly, the surveillance and, secondly, the simultaneous idealisation and pathologisation of women’s relationships with, and their actions with regards to, their children. In the teenage pregnancy literature, the idealisation of the dyad is rendered silent. Instead, teen mothering becomes the repository of blame for later deviance:
Extract 7.18
There exists the real possibility of a lack of bonding between the young mother and her infant, leading to adverse psycho-social consequences for the child, its family and society (Boult & Cunningham, 1993, p. 57).

Extract 7.19
Teenage mothers see their friends as having fun and enjoying life without the added responsibility of a child. Resentment, jealousy and feelings of having ‘lost out’ often become apparent and are adversely projected onto the child (Greathead, 1988, p. 26).

We see here how teenage mothering is associated with a ‘lack of bonding’, ‘adverse psycho-social consequences’ (Extract 7.18) and the ‘adverse’ projection of negative feelings (Extract 7.19). The pathologisation of the mothering dyad is taken up in the literature on teenage pregnancy with the added dimension of the equation of adolescence with childhood. In Extract 7.19, notions concerning the nature of adolescence (having fun, enjoying life) allow for the invocation of a negative dyadic relationship.

The separation of the mother-infant relation from its relational and historical context thus allows for the blaming of marginal mothers such as teenage mothers, and for what Nicolson (1993) calls the ‘patriarchal myth of maternal power’ which ‘renders women culpable’ while simultaneously ‘depriv[ing] them of effective social influence’ (p. 203) as they are seen as inadequate in what is cast as their central role. Although mothering is portrayed as an essentially private role, marginal mothers become accountable for social problems. The irony lies in the fact that they are rendered responsible in a realm (the socio-political world) from which they are largely excluded through the depiction of mothering as a domestic activity.

This ‘domestic’ activity has become saturated by what Walkerdine & Lucey (1989) call ‘Bowlbyism’. Bowlby’s work on attachment has been taken up within the professional and popular literature to emphasise the importance of bonding between the mother and infant at birth as well as the continual presence of the biological mother (consider Extract 7.18 where the concept of ‘bonding’ is linked to child, familial and societal outcomes). This underlies the present depiction of the ‘good’ mother as the caregiver who is always available and always attentive. Burman (1994) believes that ‘This rendering of the cosy world of innocent and
dependent childhood both reproduces and produces the division between public and private realms’ (p. 79). This split is spurious, however, as the plethora of research, child-care manuals, ante-natal classes, and parenting programmes renders mothering intensely public and political. However, the illusion of the domestic privacy of motherhood is maintained in order to mask the powerful regulating effects of the professionals’ prescriptions.

Bowlby’s assertions concerning the mothering role has led to the development of the ‘maternal deprivation’ thesis (Nicolson, 1993). The notion of ‘maternal deprivation’ served to redefine women’s responsibilities in the post-war period in Britain (when men were returning to find women -competently- doing the jobs they had vacated to serve in the war). The emphasis on the child’s need for a ‘secure base’ and the adverse consequences of the absence of the biological mother has served to obscure the gendered aspect of the concept. Despite the work of feministscountering the idea that biological mothers have to be constantly present, and the call for good child-care facilities, the idea of maternal deprivation remains an emotionally and morally charged one, which has powerful effects in women’s lives. This thesis of ‘maternal deprivation’ is very much in evidence in the literature on teenage pregnancy:

**Extract 7.20**

The vast majority of these girls intended returning to school within months of giving birth. A considerable proportion of their infants, therefore, would in all likelihood be placed in a high-risk situation (Loening, 1992, p. 84).

**Extract 7.21**

Many of the girls in this group showed little preparedness for motherhood, [sic] they were not going to care for their children themselves and usually expected the mother to care for the child. In fact, babies born under these circumstances are considered typical ‘unwanted’ children (Van Regenmortel, 1975, unpaginated).

**Extract 7.22**

[A] seriously impoverished environment can lead to changes in the life of the care giver, resulting in the baby becoming a ‘football child’, passed from one relative to another with no opportunity of bonding with any one individual. The result is maternal deprivation, the indelible consequences of which have been well documented (Loening, 1992, p. 85).
It comes as no surprise that half the young prospective mothers did not welcome their pregnancies. While many of them changed their attitudes once they held the baby in their arms, there was a nagging fear in the minds of doctors and nurses that they would be unable to sustain this love once the children began to make greater demands on them. In fact a substantial number (one in five) reported persistently negative feelings even after birth of their babies (Loening, 1992, p. 83).

In the above extracts teenage mothers are depicted as reneging on their care-giving duties, either through returning to school (Extract 7.20), lack of preparedness (Extract 7.21), unforeseen changes in their lives (Extract 7.22), or by simply being an inconsistent adolescent (Extract 7.23). The result is portrayed as ‘unwanted’ (Extract 7.21) or ‘football’ children (Extract 7.22), who are placed in a ‘high risk’ situation (Extract 7.20), carrying the ‘indelible consequences’ of maternal deprivation (Extract 7.21). The use of the words ‘high risk’ and ‘indelible consequences’ is powerful in this context. ‘Risk’ and ‘consequences’ imply the calculation of future probabilities, and the comparison of one outcome with another - tasks carried out by the experts in their capacity as truth purveyors. They (the words ‘risk’ and ‘consequences’) situate the expert in the position of authority regarding what actions need remedying because of their dangerous implications and which do not, and allow for such phrases as ‘a nagging fear in the minds of doctors and nurses that they would be unable to sustain this love’ (Extract 7.23 - see Chapter 10 for discussion on the utilisation of risk in the legitimation of service provider practices).

The pathologisation of the teenage mother-infant dyad brings into focus the characteristics of the ‘good’ mother. The negative casting of the teenage mother as not bonding with her infant (Extracts 7.18 and 7.22), resenting her baby and feeling jealous of her friends (Extract 7.19), returning to school (Extract 7.20), lacking preparedness (Extract 7.21), not welcoming her pregnancy and being inconsistent (Extract 7.23) implies that the ‘good’ mother is, inter alia, prepared for, welcomes, and bonds well with her baby, feels no ambivalence or negative emotions, is consistent in her approach, and stays at home. Those not fitting into this idealised portrait pay the cost of the professionals’ censure (external and internalised). This romanticisation of mothering as an unambivalent labour of love and sacrifice renders the gendered and familial power relations surrounding mothering invisible, and serves to position the expert as the authority on beneficial mothering practices.
Mothering as a skill

Within what I have called the ‘skill’ discourse, mothering is seen as a set of tasks and activities which require a set of basic prerequisite skills for their successful accomplishment. In this discourse:

Normal development has become a problem, something to be achieved, necessitating continual nurturing and surveillance. The ‘interaction’ of the child with its environment is to be structured, organized, and managed to produce the optimal outcome (Burman, 1994, p. 199).

The ‘skill’ discourse stands in contradistinction to one of the dominant discourses of motherhood, viz. the ‘natural’ discourse in which mothering is seen as biological and instinctive (see Marshall’s (1991) account of this discourse in child-care manuals). This latter discourse, while dominant in the general literature on mothering, is marginalised within the teenage pregnancy literature. This foregrounding of the ‘skill’ discourse and the backgrounding of the ‘natural’ discourse is powerful in a number of respects with regard to teenage motherhood. If mothering were natural, then, given the biological capacity to conceive and bear a child, mothering would follow automatically for teenage mothers. This would render teenage pregnancy unproblematic, in at least this sense. On the other hand, ‘skill’ implies that a deficient state exists, viz. a state in which the relevant person does not possess the necessary skills, as evidenced in the following extracts:

Extract 7.24

The majority who perceived mothering to be very difficult, had a problem in performing every mothering related task. They felt this task is not really for teenagers. .... Such experiences were in spite of the fact that the teenage mothers did receive lessons during their prenatal sessions (Mkhize, 1995, p. 86).

Extract 7.25

[T]he teenage mothers’ dependency on adults for norms of parenting and preparation for child care exacerbates difficulties associated with the transition to motherhood (Mkhize, 1995, p. 99).
Extract 7.26

The girl is usually unable to comprehend that motherhood is a 24 hour per day, 7 day per week, role and that her responsibility for the child will last for a minimum of 18 years - longer than she has lived. This, plus the teenager’s total inability to cope, results in a high incidence of child abuse, neglect and possible abandonment by teenage mothers (Greathead, 1988, p. 23).

Extract 7.27

[A]dolescents give birth to LBW [low birth weight] infants who will require skilled nursing and are at risk for rehospitalization, as are their infants with normal birth weight owing to the mother’s lack of skills and poor socio-economic background (Boult & Cunningham, 1993, p.44).

The ‘skill’ discourse allows for the depiction of teenage mothers as finding mothering difficult (Extracts 7.24 and 7.25), unable to cope (Extract 7.26), and lacking skills (Extract 7.27). This creates a space for a linkage between teen mothering and future negative outcomes for the child. In Extract 7.26, for example, the teen mother’s ‘inability to cope’ is linked to abuse, neglect and abandonment. In this extract she is further depicted as cognitively deficient in her inability to comprehend what is required of motherhood. This complements her positioning as unskilled, further strengthening the correspondence between teenagers’ ‘bad mothering’ and negative child outcomes.

The depiction of teenagers as deficient in mothering skills allows a space for the intervention of the professional through a process of pedagogisation:

Extract 7.28

It is clear that much needs to be done to facilitate the teenager’s adjustment to motherhood. One suggestion is to establish school-based programmes for adolescent mothers that equip them with life skills (Parekh & De la Rey, 1997, p. 228).

As seen in Extract 7.28, the role of the expert in the pedagogisation of mothering is not one of dictation, instruction or imposition. Instead s/he ‘facilitates’ the autonomous, intrinsic processes involved in becoming a mother. The regulation thus is not overt, but rather covert, as the teenager is incited to be true to herself and the taken-for-granted characteristics of the ‘good’ mother (for an in-depth analysis of the covert regulation of child-centred pedagogy see...
Walkerdine (1984)). A space is allowed for the failure of this pedagogisation, however, as seen in Extract 7.24, where teenagers are depicted as inadequate in their mothering despite efforts from the experts. Nevertheless, the experts remain in the position of authority. We see, for example, in Extract 7.25, how the teenager’s reliance on other adults (who are not experts) actually exacerbates her difficulties with regard to mothering.

Other, less direct, linkages are made around teenagers’ inability to mother, as illustrated in Extract 7.27. The first linkage made in this extract concerns the professionalisation of teenage reproduction. Note how a contrast between the teenage mother’s lack of skills and the professional nurse’s skillfulness is created. The adolescent is positioned in a double bind situation in the extract. She is cast as physiologically incompetent (giving birth to low-birth-weight infants), but even where she avoids this by having a normal birth weight infant, she puts her child at risk (which implies professional intervention) through her mothering incompetence. The second linkage made is between ‘bad mothering’ and poverty. Although the authors of Extract 7.27 do not go so far as to say that poor socio-economic status causes a lack of mothering skills (or vice versa), the close linguistic association belies the assumed sociological link. This link has been commented on in the feminist literature (e.g. Smart, 1996; Phoenix & Woollett, 1991; Walkerdine & Lucey, 1989). For example, Smart (1996), in her revisionist history of motherhood in Britain, shows how, ‘In the context of ‘normalizing motherhood’, working-class unmarried mothers are perceived as most disruptive of the norms. They are presumed to be ‘bad mothers’” (p. 38). She indicates that the rise of the ‘psy’ professions led to a range of persuasive policies and professional practices which were gradually brought to bear on working-class mothers to alter their mothering practices. ‘These strategies were strongly supported by ideologies of motherhood that express the natural characteristics of mothers as coinciding with a class-specific, historically located ideal of what a mother should be’ (Smart, 1996, p. 45 - see chapter 9 where I consider how poverty becomes the pathologised presence).

The ‘skill’ discourse of mothering has important effects in terms of the regulation of women. As Burman (1994) points out, mothers have, in many respects, replaced children as the primary focus for developmental psychological investigation. This allows for infinite definition, categorisation and calibration concerning what constitutes ‘good’ mothering, or what Phoenix
and Woollett (1991) call the professionalisation of motherhood. These principles are then brought to bear upon women in a number of ways, viz. through: 1) direct intervention in women’s lives (e.g. advice from nurses); 2) women’s subscription to psychological accounts (via magazines, for instance) concerning the best practices with regard to children; and 3) through the impact developmental psychology has on the cultural climate and provision of services for mothers and their children (Burman, 1994). Marginal, ‘bad’ mothers (including poor and teenage mothers) provide the pathologised backdrop against which the characteristics of the ‘good’ mother are defined, as well as the legitimation for the proliferation of professionalised discourse on mothering, and the encouragement of mothers to subscribe to the professionalised images of the ‘good’ mother.

**Motherhood as a pathway to womanhood**

**Extract 7.29**

Emosioneel is hulle nog kinders, fisies nog nie klaar ontwikkel nie, skolasties nog nie bruikbaar opgevoed nie en ekonomies totaal ongeskik om hulself of die kind te versorg. [Emotionally they [teen mothers] are children, physically not completely developed, insufficiently schooled and economically totally unsuited to caring for themselves or the child] (De Villiers & Clift, 1979, p. 195).

Extract 7.29 ‘decides’ adolescents by placing them firmly in the ‘child’ category as physically, scholastically and emotionally immature, with motherhood implicitly placed in the ‘adult’ category. This dichotomy (adolescent = (quasi)child // mother = adult) underlies some of the pathologisation of teenage pregnancy in the mainstream literature (if adolescent = child, and mother = adult, then adolescent should not = mother). The revisionist literature, however, takes a slightly different tack in this regard. In an attempt to ‘understand’ teenage pregnancy in South Africa and to put it into context, the authors of these articles (chiefly Preston-Whyte and colleagues - Preston-Whyte, 1991; Preston-Whyte & Allen, 1992; Preston-Whyte & Louw, 1986; Preston-Whyte & Zondi, 1989, 1991, 1992) emphasise how teenagers may see becoming a mother as a pathway to the desired status of adulthood, as seen in Extracts 7.30 and 7.31 below:
Childbirth confers on girls the valued status of motherhood and it may be the pathway to adulthood in cases where marriage is delayed by lack of money, suitable accommodation or the necessity of amassing bridewealth. By having a child a girl realises an important aspect of her femininity (Preston-Whyte & Zondi, 1991 p. 139).

So strong is the value placed on fertility that, as we have seen, even where marriage does not occur, childbirth can and does stand on its own. Indeed having children is seen as the necessary foundation of successful womanhood and even a professional career cannot compensate for not having children (Preston-Whyte & Zondi, 1989, p. 65).

Two interesting features emerge in these extracts. The first is the slippage between adulthood and femininity (Extract 7.30 associates the pathway to adulthood with the realisation of femininity, while Extract 7.31 depicts having a child as contributing to the successful accomplishment of womanhood). The underlying, unexamined assumption is that the type of adulthood achieved by women is different from that achieved by men. It is strongly gendered around the conception and bearing of children. The second feature is the association of marriage with adulthood. It is implied that where gaining adulthood through marriage is delayed, the girl may attain this status through bearing a child. Adulthood status is thus depicted as being achieved by women through a relationship with another, either a man or a child, but not through the masculinised path of career building (Extract 7.31).

While the ‘motherhood as a pathway to adulthood’ hypothesis is an attempt to ‘de-pathologise’ teenage pregnancy, the maintenance of the adolescent = (quasi)child/mother = adult dichotomy implicit in the hypothesis creates the conditions of possibility for the pathologisation of teen mothering, as evidenced in the following excerpt:

The teenage mother’s perception of mothering as a reward for fulfilment in womanhood, is an indication of a psychological problem. They are looking at womanhood in their own persons disregarding the norms and values of society bearing a child under these circumstances. This points out to [sic] a great psychological need (Mkhize, 1995, p. 87).
We see in Extract 7.32 how an adolescent’s attempt to become an adult through reproduction is cast as a psychological problem. The individual adolescent is singled out and psychologised, while ‘society’ is exonerated. This allows for the professional to step in to ameliorate the individual’s ‘great psychological need’.

Fathering: the absent trace

The male counterpart in teenage pregnancy is largely absent from the literature, and fathering is mentioned very seldom. This lack of comment on fathering has, until recently, been a feature of the developmental psychology literature as well (Burman, 1997). The recent rise in interest in fatherhood has to do, according to Alldred (1996), with the change in family structures, in particular with the increase in single-parent families. The ‘threat’ to the nuclear family that this implies has created the conditions of possibility for the rise of fatherhood as a counterpart to motherhood. However, fathers are depicted as different from mothers:

Extract 7.33

This [migrant labour] has negatively affected the family in that there is no one playing a paternal role in the family and most women find it difficult to rear children on their own (Mkhize, 1995, p. 39).

Extract 7.34

Die belangrikste gebiede waar die vader ‘n pertinente invloed het, is die ontwikkeling van ‘n geslagsrol by sy kind, die ontwikkeling van sy kind se kognitiewe moontlikhede en die motivering van sy kind. Vaderlike betrokkenheid is gebonde aan invloed [The most important areas in which a father has a pertinent influence are the development of his child’s sex role, the development of his child’s cognitive potential and the motivation of his child. Fatherly involvement is attached to influence] (Dreyer, 1991, p. 37).

Fathers are represented as adding positive ingredients to the deficient mother-child relationship. In Extract 7.33, the paternal role is depicted as supplementing the maternal one as mothers cannot cope on their own. This supplementation includes, as evidenced in Extract 7.34, sex role development (for boys), and the masculinised concept of rational cognitive development (see Walkerdine, 1988). This positioning re-produces the masculinity/femininity duality. While mothers are seen as sufficient for the development of a feminine identity in girls, fathers are
needed to overlay masculine identity on the potential (dangerous) feminine identity imposed by mothers on boys. Fathers’ ‘influence’ in terms of motivating their children and developing their cognitive abilities emphasises their (fathers’) public role, a role which stands in contradistinction to the tenets of motherhood.

Fathering is presented as a more encompassing activity than motherhood, which is confined to the infant-mother dyad. Consider the following extracts:

Extract 7.35

Sy vaderlike role kan geknelter word deur praktiese probleme waarmee hy gekonfronteer kan word soos onder andere waar hulle gaan woon of waar hy ‘n werk gaan kry om finansieel vir sy gesin te sorg [His fatherly role can be jeopardised by practical problems with which he may be confronted, such as where they are going to live or where he is going to work in order to care financially for his family] (Dreyer, 1991, p. 37).

Extract 7.36

Whereas her husband or boyfriend may have been a fine spouse or lover, the mother-to-be may wonder, and at times with a realistic basis, whether he has the capacity or desire to be a responsible father and provide the emotional security necessary for themselves and their future children (Malivha, 1993, p. 26).

In Extract 7.35, the role of decision-making concerning broader issues such as place of abode and financial issues are relegated to the father. In Extract 7.36, the job of providing emotional security for the family (as opposed to the child) is attributed to the father. Where the mothering role is extended beyond the infant-mother dyad, it is to labour emotionally with regard to the desire or capacity of the father to be responsible and provide for the family (Extract 7.36).

These representations of fatherhood have important gendering effects. Fathers, although enjoying a higher profile than previously, remain excluded from primary care-taking. Mothers, on the other hand, have their roles restricted to the domestic sphere:

Extract 7.37

Most if not all young women had no expectations of finding interesting employment or having a career, and saw their future prospects as being confined to the domestic sphere (Preston-Whyte, 1991, p. 35).
Mothering, as an essentialised status, thus, lacks the powerful aspect of decision-making concerning broader family issues (Extract 7.35), or access to ‘interesting’ economised activity (Extract 7.37). Mothers are excluded from the public sphere inhabited by fathers. Women may enter this domain, but not in their capacity as mothers (except possibly to take on nurturing jobs such as early childhood educare). Men, on the other hand, experience no such splitting, as fathering is an activity invested with public participation. Fathers, while principally inhabiting the public realm, also occupy the private one, but in a custodial role. This equation of mothering with the private space allows for the installation of psychologised discourses concerning mothering in the lives of women who have children. Women are incited to monitor and manage their children’s behaviour and their own interactions with their children in minute detail - an incitement not levelled at men.

In this section, I have illustrated how certain taken-for-granted assumptions concerning mothering (mothering as a dyad; mothering as a skills-based occupation; mothering as a pathway to feminised adulthood) allows for the pathologisation of teen mothering. In the dyadic relation, the idealised aspect of mothering is rendered silent, while the ‘skill’ discourse situates teen mothers as deficient through their youthfulness. This pathologisation of teen mothers serves to crystallise the characteristics of the ‘good’ mother, simultaneously providing the legitimation for professionalised intervention and the motivation underlying the incitement of mothers to manage their mothering practices. The strong association of mothers with the domestic, private space serves to exclude fathers from primary care-giving (although fathers may join the private sphere in a custodial role), and mothers from the public domain, as well as masking the operation of power in the installation of psychologised discourses in the practices of mothers. The reproduction of mothering is intensely gendered, with the implication that women achieve adulthood, firstly, in a different way to men (through the conceiving and bearing of children), and, secondly, through relationship with another (either a man or a child). In the following section, I examine how the absence of a relationship with a man in the formation of a family, either in the single parent family or the ‘broken’ family, is problematised.
Family Formation

Certain family forms (in particular the nuclear family and, with a push, the extended family) are seen as able to successfully perform the familialised functions spoken of above. Other family forms serve to define and normalise the nuclear family and its functions. What is assumed as normal in the teenage pregnancy literature is marriage and the creation and maintenance of a male-female dyad with children. The quality of the husband-wife alliance is not taken into consideration. Therefore, any marriage of any quality which creates the nuclear family is acceptable, while any other family structure, no matter the quality, is relegated to the category of unacceptable. It is a marital relationship with a man that accords the woman the right and the ability to parent. The single parent and ‘broken’ family rupture this conjugal authority, and create family forms portrayed as threatening to the well-being of children. These issues are explored below.

Marriage: the conjugalisation of reproduction

Arney and Bergen (1984) trace the shift in the general scientific literature around 1970 from the morally loaded terms ‘illegitimate child’ and ‘unwed mother’ to the term ‘teenage pregnancy’. Pregnant teenagers were no longer treated as moral problems, but rather as objects of scientific interest:

Power organized around a moral discourse punished by exclusion, by placing its object [the ‘unwed mother’, the ‘illegitimate child’] on the other side of a moral boundary. Power organized around a scientific discourse on sexual desire makes its objects of knowledge [the ‘pregnant teenager’, ‘adolescent sexuality’] visible and subject to unending inquiry (Arney & Bergen, 1984, p. 11).

However, it appears that while the gaze has ostensibly shifted to the scientific problem of the pregnant teenager, the moralising issue of unwed motherhood undergirds much of the debate on teenage pregnancy. There is a constant slippage between the concept of teenage pregnancy and unwed parenthood. Consider, for example, the following statement from a thesis entitled ‘n Studie oor tienerswangerskappe in Paarl-Oos met spesiale verwysing na sosio-ekonomiese faktore [A study of teenage pregnancy in Paarl East with special reference to socio-economic
factors]’ (my emphasis):

**Extract 7.38**

Armoede en ‘n lae opvoedingspeil, asook onkunde, het ‘n groot rol gespeel by buite­egtelike swangerskap in Paarl-Oos [Poverty and a low educational level, as well as ignorance, played a large role in extra-marital pregnancy in Paarl East] (unpaginated, my emphasis).

Although the study is ostensibly about teenage pregnancy, the use of the qualifier ‘extra-marital’ belies the slippage between teenage and unwed reproduction. In some instances the moralisation concerning marital status is made fairly explicit:

**Extract 7.39**

Hierdie swangerskappe was egter minder problematies omdat die meeste van die geboortes binne die konteks van ‘n huwelik plaasgevind het [These pregnancies were in fact less problematic because most of the births took place within the context of marriage] (Fouché, 1992, p.1).

**Extract 7.40**

One third of the adolescents in this study were married and the pregnancies were presumably desired and socially acceptable (Ncayiyana & Ter Haar, 1989, p. 232).

Hence teenage parenthood is rendered positive within the context of marriage. Unwed teenage pregnancy is, by implication, problematic, undesirable and socially unacceptable. In fact, teenage pregnancy is assumed by health professionals and researchers to be unwed teenage pregnancy. The ‘unwed’ part of the description remains the unsaid or assumed. Teenage pregnancy within wedlock is relegated to the unproblematic and hence is uninvestigated and unmonitored. Thus we have the governmental strategy of what I have called the ‘conjugalisation of reproduction’. This echoes Foucault’s (1986) work on the ‘conjugalisation of sexual relations’. Foucault’s historical analysis traces the development of Christian censure of non-procreative sexuality to the condition where the state of marriage coincided with and contained sexual activity. In the case of teenage pregnancy there is a ‘scientific’ censure of non-conjugal reproduction. The basis for this censure is cast in the professionalised language of the negative causes and consequences of teenage parenthood, read implicitly as unwed parenthood.
The unmarried mother is rendered personally deviant as well as culpable for relationship and socio-political problems. Each of these will be discussed below. Consider, for example, the following quotes where unwed mothers are positioned as psychologically and physiologically inadequate on a personal level:

**Extract 7.41**

The subjects in this study [about unwed mothers] were all found to have a poorly defined sense of identity. They are unsure of themselves, have low self-esteem and generally a negative self-concept (Pond, 1987, p. 163).

**Extract 7.42**

Regarding defence mechanisms, King (1970) found unmarried mothers to make use of denial as part of their ego defence (Pond, 1987, p. 164).

**Extract 7.43**

Only in this way can there be any hope of reducing the incidence of pregnancies in unmarried teenagers and, where pregnancy does occur, of eliminating some of the complications noted (preterm labour and anaemia) through early and good antenatal care (Goldberg & Craig, 1983, p. 863).

The psychologised language used in Extracts 7.41 and 7.42, while pathologising unwed teenage mothers on a personal level (they have a ‘low self-esteem’ and ‘negative self-concept’; they are in ‘denial’ and lack a sense of ‘identity’), simultaneously provides a ‘more acceptable’ vocabulary for the motives and consequences of the unwed woman’s actions than does the ‘moralising’ language of ‘socially unacceptable’ or ‘problematic’ seen in Extracts 7.39 and 7.40. She is rendered understandable, open to the professional gaze and intervention. What is implicit is the assumption that the factors ‘causing’, and the consequences of, unmarried motherhood are different from those of married motherhood. As Macintyre (1991) points out, the factors used to explain unmarried motherhood are often similar to those used to explain why married women might not have babies. Extract 7.43, which comes from an article entitled ‘Obstetric complications in adolescent pregnancies’ (my emphasis), achieves an interesting slippage whereby the unwed mother becomes a medicalised deviant on a physiological level. Although the article is about medical complications in pregnant adolescents, this extract attributes pre-term labour and anaemia only to those who are unmarried.
The following quotes indicate how the unmarried teenage mother is rendered culpable for interpersonal and social problems:

**Extract 7.44**


**Extract 7.45**

[R]esearch in Chapter 4 reveal[s] a more casual type of heterosexual relationship and a tendency among unmarried mothers for these relationships to be superficial and non-committal (Pond, 1987, p. 163).

**Extract 7.46**

We believe that this high incidence of unwed motherhood ... constitutes [a] disturbing trend because of its implications for future family life and community stability (Ncayiyana & Ter Haar, 1989, p. 232).

**Extract 7.47**

Teenage motherhood contributes significantly to the downward economic spiral affecting female-headed household and whole communities where early procreation and late marriage (or never married status) have become the norm (Boult & Cunningham, 1993, p. 6).

Extracts 7.44 and 7.45 portray the unwed mother as interpersonally deficient. Her relationship with her parents is poor (she is dominated and rejected), and her relationship with her partner is ‘superficial and non-committal’. She contributes to poor family life, community instability (Extract 7.46) and poverty (Extract 7.47). The converse of the pathologisation of unwed motherhood is the assumption of certain properties of the state of marriage (the normalised absence). It is implied that marriage, as a general state, is the basis for ‘good’ family life, community stability, positive economic growth, sound psychological state of mind, and good interpersonal relationships.

This discursive construction of marriage as positive and wholesome on a number of levels is undergirded at times by moralistic and Christianised language:
Die oogmerke van kuisheid voor die huwelik en getrouheid daarna moet behou word [The goals of abstinence before marriage and fidelity thereafter must be kept] (De Villiers, 1985, p. 302).

In die Westere kultuur, is die huwelik as heilig aanvaar en egskeiding was heeltemal ondenkbaar ... Alhoewel dit sekerlik steeds die ideaal bly, wil dit egter voorkom asof die egskeidingsyfer en die aantal onstabiele huwelike die teendeel beweer. [In the Western culture, marriage was accepted as holy and divorce was completely unthinkable. Although this probably remains the ideal, it appears that the number of divorces and unstable marriages attest to the opposite] (Dreyer, 1991, p. 55).

The ‘must’ of Extract 7.48 indicates a moralising stance concerning sex before marriage, and extra-marital relationships. Extract 7.49 is interesting in a number of respects. Firstly, it sets up the possibility for cultures other than the ‘Western’ one to be excluded from the positivity of ‘holy’ marriage (see Chapter 8 for a fuller discussion of culturalisation in the teenage pregnancy literature). Secondly, the use of the phrase ‘unstable marriages’ allows for a caveat in the sanctification of marriage. The fact that marriages break down or are ‘unstable’ does nothing to undermine this sanctification. Instead, what it allows is for certain people and their relationships to be cast as deviant as their marriage lack stability. Pregnant teenagers easily fall into this latter category of people, as illustrated in the following extract:

If she [the pregnant teenager] marries, her marriage may be unstable, or may eventually end in divorce (Keogh, 1988, p. 31).

The pregnant teenager is therefore caught in a double bind of a disguised moralising discourse. On the one hand, she cast as personally and inter-personally deviant as well as culpable for social instability should she conceive and bear a child out of wedlock. On the other hand, should she be married or get married, she joins the ranks of those who threaten the sanctification and stability of the institution of marriage.

There are further gendered binds in which the teenager is caught with regards to the issue of marriage. Consider the following extracts:
Extract 7.51

For the male: If the boy chooses to marry the girl, he may also end up having limited educational and career opportunities, resulting in financial problems, [sic] thus he may find it difficult to cope with the demands [sic] of parenthood (Keogh, 1988, p. 31, emphasis in the original).

Extract 7.52

No-one can deny that some young women become pregnant deliberately to ‘catch’ their boyfriend. More often than not, this backfires. Thus, the whole question and its possible solution must depend on the willingness of the man to marry (Greathead, 1988, p. 26).

Extract 7.53

Women without means of economic support, while clearly not prostitutes in the generally accepted sense of the word, often survive with the help of men with whom they form permanent and semi-permanent non-marital sexual relationships (Preston-Whyte & Zondi, 1991, p. 1390).

In Extract 7.51, the specification of the consequences of marriage for the male suggests that there are different consequences for male and female teenagers. The emphasis here is on the masculanised, ‘instrumental’ activities of education, career and wealth generation. Extracts 7.51 and 7.52 suggest that men are in the position to choose whether to marry a woman or not, whereas the teenage woman is portrayed as attempting to trap the man. She is accorded negative agency in her utilisation of her body to ‘ensnare’ the man. Contraceptive responsibility is assumed to be hers, with the man as the victim of her lack of contraceptive use (her ‘irresponsibility’). Extract 7.53 implies that women who are not in a marital relationship but who rely on the economic support of their partner (even if the relationship is permanent) are prostitutes. The addition of ‘not in the accepted sense of the word’ does not detract from the assertion. This implies that a woman has an automatic right to her partner’s income when in a marital relationship with him (presumably the authors would not call married women who survive because of their husband’s income ‘nearly prostitutes’). However, outside the marital alliance, she is portrayed as having to utilise the economic potential of her body to gain access to her partner’s financial resources. The hint of control on the part of the woman in terms of access to her body is negated by the negative moralising connotations of the word ‘prostitute’.

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One of the effects of the slippage between the concepts of teenage pregnancy and unwed motherhood is the legitimization of professionalised surveillance and intervention. As marriage renders conception in adolescence socially acceptable, the linkage of the two notions is important as it is the lack of marriage which is depicted as rendering teenage pregnancy problematic. The assumption of (1) the silent unwed signifier and (2) marriage as a desirable state of relationship (bringing, as indicated above, social stability, economic growth, and interpersonal harmony) legitimates the intervention of the expert not only for the good of the (unwed) teenager but also for the common good.

**The single parent family**

The conjugalisation of reproduction governs the formation of the ‘normal’, nuclear family. The single parent family ruptures this conjugalisation. As such, it stands as the most maligned in the teenage pregnancy literature, either in the form of the family from which the teenager originates, or in the form of the family which she forms by having a child. The pathologisation of single parenthood takes place on three levels: (1) the person of the single mother; (2) the association of this family formation with lower socio-economic status; and (3) the single parent’s fracturing of the conjugalised deployment of sexuality.

The following three quotes indicate how the person of the mother who parents alone is pathologised:

**Extract 7.54**

It is possible that a relaxation of moral standards in recent years and a more understanding and tolerant attitude on the part of the public has resulted in a far more ready acceptance of childbirth out of wedlock among most racial groups everywhere (Prinsloo, 1984, p. 697).

**Extract 7.55**

Overwhelmingly, it implies that an adolescent who has not reached a respectable degree of psychological maturity ... becomes a mother, and in most cases, a single parent (Mfono, 1990, p. 6).
Extract 7.56

The single parent may also want to go out and enjoy life, and feel that the child became a restrictive aspect in life. These feelings can be conveyed to the child, leading to unhappiness (Keogh, 1988, p. 31).

The single parent is portrayed in these extracts as occupying a morally suspect position (Extract 7.54 - acceptance of unwed childbirth is associated with relaxed moral standards), being psychologically immature (Extract 7.55 - she has not reached a ‘respectable’ level of psychological maturity), and selfish (Extract 7.56 - she wants to enjoy life to the detriment of her child).

The association between single, female-headed families and lower socio-economic status is oft repeated in the literature. The tone is one of humanitarian concern, as evidenced in the excerpt below, where the ‘future well-being’ of the child is invoked as a disturbing issue:

Extract 7.57

When it is recalled that some two-thirds of these girls live in single-parent families ... it can be assumed that the future well-being of these infants may well be in jeopardy for financial reasons (Boult & Cunningham, 1992b, p. 163).

This association between single female-headed households and lower socio-economic status remains unproblematised in the teenage pregnancy literature as well as in general psychological texts (Roseneil & Mann, 1996). It is stated as an unfortunate fact which is of concern to the teenager and her child. However, there are a number unexamined effects of the uncritical usage of this association. Firstly, the assumption that female-headed households are always single-parent families (or that single-parent families are necessarily female-headed) belies the hegemonic view that (i) there needs to be a head of a family, and (2) men are naturally the ‘head’ of two-parent households. The label ‘male-headed’ is seldom, if ever, applied to any type of family (nuclear or otherwise). Male ‘headship’ is the assumed, the normalised absence. When female-headed families are foregrounded, as in single parent families, they are pathologised as they imply men’s loss of their familial and sexual roles within the family (Alldred, 1996). Secondly, while the association between female-headed households and lower socio-economic status is made with humanitarian concerns in mind, the effect is to pathologise women in their
single parent status. Consider, for example, the following extracts:

**Extract 7.58**

The pregnant girls were more likely to come from lower socio-economic classes, from families with less frequent church attendance, and from one-parent households with the mother as head (Craig & Richter-Strydom, 1983b, p. 454).

**Extract 7.59**

Although unwed teenage motherhood appears to be culturally tolerated and accepted in Transkei, it does interfere with schooling and may produce households headed by women, often resulting in poverty and unfavourable social conditions for both the teenage mother and her child (Buga, Amoko & Ncayiyana, 1996b, p. 95).

In Extract 7.58 lower socio-economic status, single female parents and less frequent church attendance are associated. The question arises as to why less frequent church attendance is mentioned (as opposed to, for example, less frequent attendance at sporting events or cultural dances). The posing of the research question concerning church attendance appears to centre around the assumption of an association between moral responsibility, good citizenship and church attendance. Therefore, the implication is that these young women (from lower socio-economic status, single parent families) fall short of the moral ideal through a lack of religious fibre. In Extract 7.59 single female parent families are associated with unfavourable social conditions. What these conditions are, is not specified. However, the single female parent in some way appears responsible for these conditions.

The use of the single female parent family/lower socio-economic status association as an unfortunate but real fact in the literature has important gendered effects. The conditions of possibility under which single female parent families tend to join the ranks of the poor are not examined (especially the gendered conditions of possibility, such as the discursive fixing of proper childcare arrangements which restricts women’s time available for income generation). Instead, women who choose or who are forced to become single parents are positioned as contributing to the perpetuation of the low socio-economic classes, and the supposed negative social conditions that go along with this status.
With single female parent families the husband-wife axis of the deployment of sexuality within the family is removed. This creates a rupture in the simultaneous forbidden nature of and incitement to sexuality within the family. The single female parent has separated sexuality from marital alliance, thus disrupting the neatness of the deployment of sexuality within marriage. In this, she becomes a sexual deviant, open to morally loaded descriptions. Consider, for example, the following extract where there is a proposal of a generational transference of sexual deviance from the single mother to the teenage daughter:

**Extract 7.60**

Not infrequently the mother herself has a history of a teenage pregnancy. Where a local teenager has been reared by a single parent (unmarried, widowed or divorced), she is more likely to become sexually active than if she comes from a family of married parents (Nash, 1990, p. 310).

This separation of sexuality from alliance has further powerful implications for the single female parent and her child with the construction of the notion of legitimacy. It is only through the marital alliance that a child becomes a ‘legitimate’ member of society. When this alliance is fore-gone, the mother and child are relegated to the margins of society:

**Extract 7.61**

[T]eenage unwed motherhood as deviant behaviour can justifiably be viewed as a social problem in this sense: The function of the principle of legitimacy for the social system as a whole is to determine the social placement of the child in the family and society so as to ensure or facilitate its proper socialisation (Seabela, 1990, p. 25).

This implies that a child in the single female parent family is not properly placed socially or properly socialised. The definition of this ‘proper’ socialisation remains implicit, the normalised absence, never being clearly spelt out. It gains its shape largely through the foregrounding of the ‘improper’, the pathologised presence, part of which is the family of the single female parent.
The broken family

The ‘broken’ family, which is implicated in ‘causing’ teenage pregnancy in the literature, serves as the defining limit of the intact, well-functioning family. The ‘broken’ family is portrayed as being created either through the wilful actions of individuals (e.g. through divorce), or through circumstances (e.g. widowhood or migrant labour):

Extract 7.62

The basic marriage link may be absent and, even when present, does not provide lifelong security due to such factors as inadequate or even non-existent financial support from males, divorce, widowhood, and premarital pregnancy (Preston-Whyte & Louw, 1986, p. 382).

Extract 7.63

The phenomenon of growing numbers of street children and unwanted and abandoned babies in developing countries is well documented. This problem has its roots not only in poverty, but also in the ‘disorganization in the family’ as a result of migrant labour systems, rapid population growth, civil war, violence and increasing urbanization and Westernization (Boul & Cunningham, 1992a, p. 304).

We see in these extracts how the ‘broken’ family becomes associated with insecurity, lack of financial resources (Extract 7.62), street children, unwanted and abandoned babies, and social problems such as civil war, population growth, urbanisation, etc. (Extract 7.63). This implies that intact families are stable, well-off, want and care well for their children, live in peaceful times, occupy the rural areas and are not ‘westernised’ (in the case of ‘blacks’), and have reasonably sized families (and therefore do not contribute to the vast population growth - see Chapter 8 for an examination of the concepts ‘urbanisation’ and ‘westernisation’, and Chapter 9 for a discussion of the connection of economised security with population growth).

The notion of the ‘broken’ family is only possible if a static view of familial relations is taken. The nuclear (or occasionally the extended family structure) is taken as the fixed frame from which any deviation creates a break or rupture. This approach does not allow for any dynamic change or fluidity in relations of alliance. This fixing of the formation of alliance allows for the pathologisation of forms deviating from the nuclear, intact family. This family is implicated in
personal as well as societal disruption, as evidenced in the following two excerpts:

Extract 7.64

Another underlying theme among some of the subjects ... is a fear of exposure, hurt and rejection. This fear is prominent with Adele, Delia and Elaine, and may be related to childhood experiences of rejection. Both Adele and Delia come from divorced homes and King (1970) has noted that parental discord may result in a fear of rejection in the children (Pond, 1987, p. 159).

Extract 7.65

Family disorganization has been noted as a factor in black teenage pregnancy in Africa, South Africa and America. Rapid urbanization and westernization has eroded many of the traditional norms and values of the black family in Africa and South Africa (Boult & Cunningham, 1992b, p. 161).

In Extract 7.64, we see the psychologisation of two people’s choice not to remain in a marital alliance. The subjectivity of the children of divorced couples is constructed and circumscribed by images of rejection, discord, hurt. In Extract 7.65, there is the culturalisation of family rupture. The stable ‘traditional’ family is pictured as disrupted by ‘westernisation’. In this culturalisation, the ‘traditional’ and the ‘west’ are juxtaposed as real, circumscribed phenomena, which on meeting create ‘disorganisation’. The ‘west’ shatters or undermines (‘erodes’) norms and correct ‘values’ in traditional ‘black’ families, but not in ‘white’ families as they form part of the normalised absence. Having pathologised ‘black’ families as ‘broken’, it is easy to implicate them in the creation of social problems such as teenage pregnancy (see Chapter 8 for a more in-depth look at culturalisation in the literature).

Conclusion

The familialisation of alliance is a governmental tactic through which the complex interaction of sexuality and alliance are deployed. The husband-wife and parent-child axes of alliance have become normalised, and, as such, have become the primary dimensions for the simultaneous invocation and proscription of sexuality. Families are immanently important to government as they are the sites for the development of the psychologised individual. They allow for action at a distance through the definition of the family as a private space. There is no need for co-ercion
or force. Instead, the desires and aspirations of parents and spouses are acted upon to achieve, in the first place, the production of the self-actualised, responsible citizen in their children, and, in the second place, conjugal bliss.

The familialisation of alliance acts as a tactic of governmentality through presenting the family as a natural, culturally and historically invariant social phenomenon. The nuclear family formation is privileged, taking on the aspect of the normalised absence. In contrast, the single-parent and the broken family are foregrounded as socially deviant. The single-parent family fractures the conjugalised deployment of sexuality and subverts the assumption of male headship in the family. The single mother is portrayed as occupying a morally suspect position, being psychologically immature and selfish, and as coming from a lower socio-economic background, which is associated in the literature with 'unfavourable' social conditions (this, in turn, relies on the privileging of middle-class social conditions as favourable). The 'broken' family defines the limits of the intact, well-functioning family. It allows for the fixing of the nuclear family formation as the site for psychologised security and normal familial relations and childhood development. It becomes the repository for social problems such as unwanted babies and teenage pregnancy.

Arney and Bergen (1984) indicate that the pregnant teenager, the object of scientific inquiry, has replaced the moral problem of the illegitimate child and unwed mother in professionalised discourse. However, an analysis of the teenage pregnancy literature indicates that, while the problem is posed in 'scientific' terms, it is the rupture of the conjugalisation of reproduction that is of issue. 'Scientific' language serves to disguise the moralisation concerning the marital status of the pregnant teenager, and to censure non-conjugal reproduction. The unmarried mother is rendered personally deficient and culpable for relationship and socio-political problems, while wed teenage pregnancy is relegated to the unproblematic.

The functionalisation of familial alliance requires families to take on certain social responsibilities. Families are tasked with the affective development of their members (which means creating the healthy, happy, fulfilled individual espoused in the liberal tradition), and the creation of the responsible citizen (who is ethical, autonomous, economically useful, stable, and
who exercises vigilance over his/her own sexuality). Families are incited, in the first instance, to ‘facilitate’ the development of this affectively fulfilled, responsible citizen, but, in the last instance, to exercise control over their members to comply with socially accepted norms. These familial functions are maintained through self-surveillance, emotional labour, and the confessional (through the inducement to communicate). The monitoring of functional deviance in the family is what allows, firstly, for the limits of functionality to be defined, and, secondly, for the family to be educated and finally supplanted by the expert. The association of functional deviance with single-parent, ‘broken’, lower socio-economic status and African families renders these families as the pathologised presence, with the normalised absence being married, ‘intact’, middle-(or upper) class, white families.

The invocation of certain taken-for-granted assumptions concerning mothers (mothering as a dyad; mothering as a skills-based occupation; mothering as a pathway to feminised adulthood) allows for the pathologisation of teen mothering. In the dyadic relation the idealised aspect of mothering is rendered silent, while the ‘skill’ discourse situates teen mothers as deficient through their youthfulness. The equation of adolescence with childhood renders the adolescent who crosses the divide to mother=adult deviant. This pathologisation of teen mothers serves to crystallise the characteristics of the ‘good’ mother, simultaneously providing the legitimation for professionalised intervention and the motivation underlying the incitement of mothers to manage their mothering practices. The legitimation of the expert as authority, and hence for professionalised intervention, is achieved in a number of ways. The saturation of the literature with Bowlbyism allows the expert to make pronouncements concerning the ‘risks’ and ‘outcomes’ of maternal deprivation, which in turn implies that ameliorating action needs to be taken. The ‘skill’ discourse allows for the endless definition, categorisation and calibration of what constitutes ‘good’ mothering - tasks carried out by the expert. It also allows for the pedagogisation of mothering. The re-production of mothering in the psychologised literature of teenage pregnancy is intensely gendered. The strong association of mothers with the domestic, private space serves to exclude fathers from primary care-giving (although fathers may join the private sphere in a custodial role), and mothers from the public domain. Women with children are incited to monitor, evaluate and manage their mothering practices, an incitement to which men are not subjected. Fathers, instead, are situated firmly in the public domain; when stepping
into the private space, it is to being the public into this space.

We have seen in this chapter how ‘non-Western’ and ‘black’ family alliances are implicated in the fracturing of the conjugalisation of reproduction and the creation of the broken family. In the following chapter, I explore the governmental tactic of racialisation, indicating how the culturalisation and traditionalisation of ‘black’ people act as a thin veil for racialisation.
CHAPTER 8
THE RACIALISATION OF TEENAGE PREGNANCY

In Chapter 3 we saw how race, as a signifier, has had (and continues to have) particular pertinence in South Africa. During Apartheid, people were classified according to the Population Registration Act into the main divisions of ‘white’, ‘black’, ‘coloured’, and ‘Asian’, and, on the basis of this classification, were given access to certain areas to live (Group Areas Act), schools to attend, jobs to perform, resources (such as water and sanitation) to utilise, hospitals to present at, etc., and denied access to others. A person could apply for a change in racial signifier, and thus be re-classified from, for example, ‘coloured’ to ‘white’, ‘Asian’ to ‘coloured’, etc.. These applications were made by individuals in order to allow them access to the resources reserved for those signified in the category to which s/he wished to belong (with ‘white’ being a clear signifier of privilege allowing access to the best resources). In this chapter, I explore how the governmental tactic of racialisation is utilised in the teenage pregnancy literature to achieve particular purposes, and how, in turn, this literature contributes to the entrenchment of race, culture and tradition as fixed, ‘natural’ signifiers.

The term racialisation was initially used by Fanon (1967) in discussing the difficulties facing decolonised intellectuals; it has been employed by other authors in a variety of ways. What is common to all usages of the concept is that it refers to ‘a representational process whereby social significance is attached to certain biological (usually phenotypical) human features, on the basis of which people are designated as a distinct collectivity’ (Miles, 1989, p. 74). It is a process anchored in historical and social power relations. Historically, ‘race’ surfaced as a signifier of difference in scientific and philosophical thought in the early nineteenth century. The Enlightenment concern with the universal development of civilisation was replaced with the notion of humans representing distinct, primordial groups, characterised by specific physical traits (Jones, 1997). It became the repository for representations of difference as biological
variance was represented as natural, inherent and unalterable.

In viewing the governmental tactic of racialisation, my aim is not to ask whether or not ‘race’ exists, or how it ‘explains’ certain phenomena. Rather, the question becomes, in the words of Donald and Rattansi (1994), ‘not how natural differences determine and justify group definitions and interactions, but how racial logics and racial frames of reference are articulated and deployed, and with what consequences’ (p. 1). This is in contradistinction to the argument of many anti-racist theorists, who target the irrationality of racist beliefs by asking the question, “Is it true?” (Donald & Rattansi, 1994). Instead, the focus remains on how race is utilised in the truth stakes to produce and maintain particular power relations, through its use as an explanatory tool in social science research.

Racialisation is a process of *differance*. For example, the signifier ‘black’ relies on the absent trace, ‘white’, each of which is read in its interrelated deferred (or historical) meaning. The ‘scientific’ claim of superior and inferior ‘races’ has largely disappeared (Miles, 1989). However, there remains the privileging of one side of the discursive opposition, in the case of the teenage pregnancy literature, ‘whiteness’. As noted in Chapter 2, Phoenix and Woollett (1991) use the concept of ‘normalised absence/pathologised presence’. Applied in the context of psychological literature, this would refer to the way in which ‘whiteness’ is seldom referred to as a racial category. Thus, it becomes a silent signifier, maintaining and obfuscating its privileged position in these texts. On the other hand, ‘blackness’ materialises in the literature as a repository of culture, attitudes, traditions, values, ethnicity and behaviours, all of which are yoked into the explanatory framework of a problematised phenomenon such as teenage pregnancy (see, for example, Wong’s (1994) work in which he discusses the ‘unproblematized construction of “whiteness” as a privileged site in psychology ... and how their [racial minorities] objectification and control have informed the construction of “whiteness”’ (p. 134).). In this chapter, I indicate how, in the psycho-medical teenage pregnancy literature, ‘black’ and ‘African’ are the pathologised presence, in need of explanation, investigation and intervention, with ‘white’ forming the unproblematised absence. A simple example of this is that of the 74 theses, reports and articles analysed in this thesis, nineteen used the words ‘coloured’, ‘black’, ‘African’, ‘Zulu’ or ‘Xhosa’ as signifiers in the title. Not one used the word ‘white’ despite the fact that people
classified in this category are in the minority in South Africa.

In this chapter, I explore, firstly, the construction of racialised boundaries in the teenage pregnancy literature and how the signifier ‘white’ remains the tacit backdrop or absent trace against which the signifiers ‘black’, ‘coloured’, ‘Indian’, and ‘African’ are etched, and, secondly, the technologies utilised to maintain these boundaries. I have termed these technologies the traditionalisation and culturalisation of ‘black’ people. They represent strategies to essentialise and naturalise racial collectivities through an appeal to pseudo-historical explanations (the myth of origin), while at the same time masking the underlying process of racialisation. These strategies have emerged in general scientific and political debate partly in response to the casting of certain propositions as racist. They allow for the ‘sanitary coding’ or ‘disguise’ (Wetherell & Potter, 1992, p. 71) of racialisation. These culturalist and ethnicist explanations have been termed the ‘new racism’ in the general literature on racism (see, for example, Anthias & Yuval-Davis, 1992, and Donald & Rattansi, 1994).

**Racialised boundaries**

The construction of racialised boundaries takes various forms in the literature on teenage pregnancy:

**Extract 8.1**

‘n [N]avorsingstudie van tienerjarige Nie-blanke dogters (almal met buite-egtelike swangerskappe) [is] ondemeem [A study of teenage Non-white girls (all with extra-marital pregnancies) was undertaken] (De Villiers & Clift, 1979, p. 196).

**Extract 8.2**

Illegitimacy rates remain high in the non-White groups and the rate is increasing among Whites (Prinsloo, 1984, p. 699).

In Extracts 8.1 and 8.2, ‘white’ is utilised as an unproblematic signifier of presence, despite the fact that in South Africa’s and in Europe’s history those defined as ‘white’ had previously been categorised as belonging to different races (Miles, 1989). This strong form of ‘white’ presence
allows only for a homogenisation of all that is not ‘white’ into the category of ‘non-white’. However, in more recent texts, this signifier, ‘non-white’, becomes further gradated, allowing, firstly, for more intense monitoring and inspection of the characteristics of the Other and, secondly, for a further obfuscation of the tacit backdrop of whiteness. Consider the following quote:

Extract 8.3

In die empiriese ondersoek wat hierop volg was ongeveer ‘n kwart van die totale aantal proefpersone egter persone wat volgens die eertydse Bevolkingsregistrasiewet as ‘kleurlinge’ geklassifiseer was. Aangesien kleurlinge dikwels ‘n hoë vlak van verwesterig openbaar het, kon dit die veralgemeenbaarheid van die studie beïnvloed het [In the empirical investigation which follows, nearly a quarter of the total sample were actually people who, according to the former Population Registration Act, were classified as ‘coloureds’. Because coloureds have frequently shown a high level of westernisation, the generalisability of study may have been influenced] (Fouché, 1992, p. 66).

The category of ‘non-white’ finds finer distinctions here. The study is about ‘black’ pregnant teenagers, but the presence of ‘coloureds’ threatens to invalidate the findings. An interesting political backflip is performed in the passage. The writer uses quotation marks around the word ‘coloureds’ in the initial sentence. This practice was (is) common in progressive academic circles in South Africa. It indicated the author’s distancing from the creation of an Apartheid category of race. These quotation marks and the reference to the former Population Registration Act implies, at face value, that the writer is aware of the constructed nature of the category ‘coloured’. However, in the very next sentence we see the disappearance of the quotation marks, and the ascription of ‘westernisation’ (read ‘white-isation’ - the power relations created by the use of the concept of ‘westernisation’ is discussed later in this chapter) to the ‘coloureds’.

A further gradation of racial categories is introduced with the notion of ethnicity. The discourse of ethnicity gained currency in political and academic language in the 1950s and 1960s. In South Africa the ‘African’ population was no longer seen as one ‘race’ comprising of different ‘tribes’, but rather as timeless ‘separate ethnic groups, each with its own language, legal system, lifestyle, values and socio-political identity’ (South African Yearbook, 1976, cited in Sharp, 1988). Academically, there was an increase internationally in the number of journal articles and index entries concerned with ethnicity (Jones, 1997). The surge in interest in ethnicity represented a
shift in classificatory terminology because of the increasingly pejorative connotations of the existing taxonomic categories which centred chiefly on ‘race’ (see Sollors (1989) who, in his book *The invention of ethnicity* situates the emergence of ‘ethnicity’ within the history of modern nationalism).

The seeming naturalness of ethnic groupings is belied by the slipperiness of the boundaries constructed around various groups, which a close reading of the literature reveals:

**Extract 8.4**

Several authors ... draw attention to the tendency of Black females to have disproportionately more low birth-weight-infants than do females of other ethnic groups (Boult & Cunningham, 1993, p. 46).

**Extract 8.5**

The high social value which is placed upon fertility and birth in Zulu society makes, perhaps, for a different situation from that in the white community, where premarital pregnancies are (or were a decade or so ago) usually viewed in completely negative terms (Preston-Whyte & Louw, 1986, p. 382).

**Extract 8.6**

In African societies in South Africa, especially amongst the Zulu and the Xhosa, adolescent sexuality was acknowledged and allowed expression through intercrural intercourse called ‘ukusoma’ (Mfono, 1990, p. 718).

The boundaries constructed around ‘ethnic’ groups depend on the contrastive categories generated. In the Extract 8.4, ‘black’ is set against ‘other’, in the Extract 8.5, ‘Zulu’ against ‘white’ and in the Extract 8.6, ‘Zulu’ against ‘Xhosa’. Extract 8.4 assigns ‘black’ (which is usually referred to in racial terms) to the category of ethnic group. This achieves powerful effects because of the medicalised content of the sentence. The association of the word ‘ethnic’ with medical terms implies that we are dealing with static, timeless entities which have determined biological features as well as cultural characteristics. In Extract 8.5, the construction of ‘white’ as a group in juxtaposition to ‘Zulu’ is a reflection of the political move to unite English-speaking and Afrikaans-speaking people of European descent in South Africa against the ‘total onslaught’ of the ‘blacks’ (and communism). This homogenisation stands in contrast to the division of ‘black’ into ‘Zulu’ and ‘Xhosa’ evidenced in the Extracts 8.5 and 8.6. Indeed,
the language of difference applies in the literature to ‘blacks’ only. This opens up the space for
greater surveillance and monitoring of the characteristics of the various ‘black’ ‘ethnic’ groups.
This type of racialised boundary shifting has been commented on by authors in other parts of the
world. Rattansi (1994a), for example, indicates how ‘shifting forms of boundary maintenance,
division and alliance ... emerge in relation to local politics’ in Britain (p. 39). As is the case in
South Africa, the drawing and re-drawing of these boundaries take place chiefly, Rattansi states,
within ‘minority communities’ in relation to ‘white’ groups.

Racialised boundaries are policed in a number of ways, viz. through: (1) the construction of
cross-national similitude of ‘races’; (2) medicalisation; and (3) psychologisation. In these
governmental strategies, it is the Other, the ‘black’, the ‘African’, who is foregrounded with the
‘white’ remaining as the tacit background which renders the characteristics of the Other visible.
Consider the following excerpts:

Extract 8.7

The Black (or Afro-American) teenage pregnancy rate in the USA is comparable with
rates for countries in Africa - and cause for concern and intervention. Other reasons for
the authors’ choice of comparative analysis have to do with genetic factors singular to
African people, which are largely unsubstantiated, but nevertheless bear examination
(Boult & Cunningham, 1993, p. 1).

Extract 8.8

The apparent association between race or ethnicity and [the] tendency for teenagers (and
older females) of African descent to give birth to smaller infants than their counterparts
of other ethnic origins is well documented but not satisfactorily explained (Boult &
Cunningham, 1993, p. 51).

Extract 8.9

A higher frequency of contracted or inadequate pelvis among Black patients was found
by Off et al. (1985) ... They contend, on the basis of forensic data that, ‘ ... a narrower
pelvic girdle (for equivalent body size) is a racial characteristic of blacks’ ... before
qualifying that this need not imply greater risks as Black women tend to have smaller
neonates than White women (Boult & Cunningham, 1993, p. 22).
Malone (1990) explains this relative ‘closedness’ when he says that African blacks are usually very ‘open’ with their bodies and very private with their words. This finding also explains the contradictory non-verbal bodily attitude (sad face, emotionless facial expression, irritability and apparent uninvolved bodily attitude) that the researcher noticed with some of the adolescents (Fouché, 1992, p. 79).

In Extract 8.7, the signifier ‘black’ in its pathologised presence is so pervasive as to link people living in completely different parts of the world. Biologised similitude (even with the caveat of ‘largely unsubstantiated’) is extended to imply sociological likeness. ‘Blackness’ becomes associated with pathology (teenage pregnancy), which allows for ‘concern and intervention’ and further monitoring by the expert, who, in this context, takes on the aspect of that which describes the absent trace - ‘whiteness’. The biologisation, and hence the essentialisation, of racial boundaries is legitimated by the insertion of the medical gaze into the body of the ‘black’ person. We see in Extracts 8.8 and 8.9 how sanitary science (see Chapter 5) defines the anatomical identity of the ‘black’ woman as deviant. Her pelvis is ‘contracted or inadequate’, the implicit comparison being the white woman’s pelvis (note how these adjectives stand despite the anatomical identity of small pelvis not meaning any greater danger in birth). She gives birth to smaller babies than women from ‘other ethnic’ groups. The assumption is that ‘other ethnic’ group babies are normal-sized, making ‘black’ babies small (if black babies were ‘normal’, other babies would be large). This medicalised gaze is extended to a psychologised monitoring of the ‘black’ body, as evidenced in Extract 8.10. The psychologised notion of non-verbal communication (sad face, bodily attitude) is used to define ‘blacks’ as ‘open’ with their bodies. Issues not reflected upon are: (1) the observer, the researcher who defines this particular ‘non-verbal bodily attitude’ as peculiar to ‘blacks’; and (2) the (con)text within which the observation is being made (in this case a hospital setting soon after the birth of a child). The highlighting of certain behaviours in the linguistic (con)text of a discussion of ‘blacks’ belies the hegemonic assumption of other (less contradictory, perhaps) behaviours as typical of ‘whites’, and therefore normal and not in need of explanation.
There is a somewhat meek voice which seeks to divest the signifier ‘black’ of its pathological presence in evidence in the teenage pregnancy literature:

**Extract 8.11**

It is claimed that during pregnancy and childbirth, young females of African descent are more prone to anaemia, cephalopelvic disproportion and a tendency to give birth to low birth-mass infants, than their counterparts from other cultural or geographic origins. These assumptions need to be examined and challenged. A counter argument is the indisputable evidence that Afro-American and African females live their lives on a lower socio-economic scale than do women in industrialised countries (Boult & Cunningham, 1993, p. 1).

In Extract 8.11, there an attempt to overturn the pathologisation of the African body by introducing the notion of socio-economic status. However, the signifier ‘African’ remains intact, even in the weakened form of ‘Afro-American’, with ‘women in industrialised countries’ operating as the absent (white) trace (despite the fact that ‘Afro-American’ women live in an industrialised country). Racialised boundaries are maintained and reproduced, albeit with ‘African’ in a less pathologised position.

The re-production and maintenance of racialised boundaries achieves a number of purposes. Firstly, it allows race to be used as an explanatory tool in the investigation of medical, psychological or social deviance (we have seen in the above extracts how an ‘inadequate’ pelvis (Extract 8.9), contradictory communication patterns (Extract 8.10), and illegitimacy (Extract 8.2) are accorded to ‘black’, ‘African’ or ‘non-white’ groups of people). Secondly, it makes it possible to attribute subject status to race or culture, i.e. race or culture are accorded the ability to do things. In Extract 8.3, ‘colouredness’ is accorded subject status in that it is a variable that can influence scientific enquiry. Consider also the following extract where ‘blackness’ is accorded subject status:

**Extract 8.12**

Since both pregnancy groups come from similar psychosocial background[s], one could hypothesize that the black culture does not discriminate [against] the teenager who falls pregnant accidentally, but she is supported just as well as the teenager who planned her pregnancy (Malivha, 1993, p. 70).
Black culture (see later discussion on culturalisation) is depicted as not discriminating, rather than people. It is this subject status (which is simultaneously anchored to and divorced from individuals’ identities) which, firstly, produces racial divisions as real entities, and, secondly, allows race to be talked of as a real entity which influences people’s bodies, behaviour and ways of viewing the world.

In this section, I have analysed how the production of racialised boundaries (whether in the grosser form of ‘white’/’non-white’, or in the finer distinctions of ‘black’, ‘African’, ‘coloured’, ‘Indian’, ‘Zulu’, ‘Xhosa’, etc.) is achieved through the construction of cross-national similitudes, medicalisation and psychologisation. The construction and maintenance of racialised boundaries is not merely a process of demarcating naturally occurring divisions between various groups of people. Instead it achieves the tasks of, firstly, creating ‘black’ or ‘African’ as the pathologised presence and ‘white’ as the normalised absence, secondly, of homogenising English- and Afrikaans- speaking people of European descent into the category of ‘white’, while producing finer and finer distinctions and therefore possibilities for monitoring and surveillance of those previously referred to as ‘non-white’ (they are no longer merely ‘black’ or ‘African’, but ‘Zulu’, ‘Xhosa’, ‘Tswana’, ‘Sotho’, etc.), and, thirdly, of investing race with the subject status necessary to utilise it as an explanatory tool in the scientific endeavour to account for ‘social problems’ such as teenage pregnancy. In the following, I indicate how the governmental strategies of traditionalisation and culturalisation are used to simultaneously exoticise (and hence foreground) and pathologise ‘black’ people.

The traditionalisation of ‘black’ people

Spiegel and Boonzaier (1988) point out that the word ‘tradition’ is ‘seldom used without subjective, value-laden implications’ (p. 40). They indicate that the word is generally invoked to legitimate certain practices or to suggest people’s backwardness or conservatism. In the teenage pregnancy literature, ‘tradition’ is utilised in both manners, as well as to explain the occurrence teenage pregnancy amongst ‘black’ people.
‘Tradition’ is a word associated in the literature with ‘African’ people or on occasion with a ‘black’ ‘ethnic’ group such as the ‘Zulus’. A dichotomy is created between the ‘traditional’ and the ‘modern’, with ‘traditional’ implicitly meaning ‘black’ and ‘modern’ implying ‘white’. The ‘traditional’ is portrayed as a static and separate set of values, beliefs and social practices which is neatly bounded and which is shared by all members of the group. Black people may move from the ‘traditional’ to the ‘modern’ (it is never suggested that ‘whites’ may move from the ‘modern’ to the ‘traditional’) but at a cost, viz. the breakdown of traditional lifestyles. It is the construction of the circumscribed unity of the ‘traditional’ which allows for this imagery of breakage. Consider the following extracts:

Extract 8.13

[It is shown that the collapse of these traditional societal structures brought many problems for the inexperienced teenagers who become unwed mothers (Mkhize, 1995, p. 38, my emphasis).]

Extract 8.14

The problem has wider social origins than might at first appear, although particular and unique local factors may be involved - especially with regard to urbanization and the disruption of traditional Zulu life (Craig & Richter-Strydom, 1983b, p. 454, my emphasis).

Extract 8.15

The process of cultural diffusion that has resulted from contact with Western culture and the urbanization process had shattering effects on the traditional life of the blacks (Seabela, 1990, p. 80, my emphasis).

We see here the construction of ‘traditional’ society as a real, non-changing entity in juxtaposition to ‘modern’ society. On meeting, the ‘traditional’ is portrayed as ‘breaking’ (note the terms ‘collapse’, ‘disruption’, ‘diffusion’, ‘shattering’ used in the above extracts) under the weight of processes termed ‘modernisation’, ‘urbanisation’ and ‘westernisation’. ‘Blacks’ become more like ‘whites’ (the tacit, normative backdrop) as they display the characteristics constructed as ‘modern’, ‘urban’ and ‘western’. However, because of the ‘black = tradition’ signification, blacks are ‘modernised’ rather than ‘modern’, ‘urbanised’ rather than ‘urban’, and ‘westernised’ rather than ‘western’. The ‘modern’, the ‘urban’ and ‘western’ remain the domain of the ‘white’ who forms the normalised absence.
‘Western’ and ‘urban’ are spatial signifiers, with ‘westernisation’ and ‘urbanisation’ implying the breaching of spatial boundaries. The ‘traditional’ African is portrayed as ‘rural’, as rooted in the soil of Africa. On moving to the city (a word whose roots stem from the notion of civilisation), s/he fractures the parameters of cultural specificity and intrudes on the spatialised domain of those defined as ‘western’, viz. ‘whites’. ‘Whites’ in South Africa attain the status of ‘westerners’ because of their supposed association with another region of the world (even if they have never left South Africa). They are accorded automatic ‘western’ status; they belong to the spatialised hegemony of the ‘West’, whereas ‘Africans’ have to labour to achieve ‘westernisation’, but remain a pathologised mimic of the real thing. This is reflected in Packard’s (1989) work. In his analysis of the writings and discussions of ‘white’ medical authorities in South Africa from the late nineteenth century to the postwar period, he talks of the myths of the ‘healthy reserve’ and the ‘dressed native’. The rural areas, from which African labour was drawn, were idealised as ‘healthy reserves’ while urban areas were portrayed as bringing high morbidity rates, alcoholism, family separation, and crime owing to the African’s difficulty in adjusting to urban industrialised life. The ‘dressed native’ symbolised the latter, in the apparent incongruence of ‘European’-style clothing when worn by Africans.

The ‘black = tradition’ equation necessitates a smudging of internal differences within a group:

**Extract 8.16**

It is thus clear ... that Zulu Christians and Zulu traditionalists alike recognize premarital pregnancy as a potentially disruptive situation. Christians often speak of ‘bad luck’ but may not go to the lengths of attacking the boy concerned. Similarly, because they do not wish to be overtly associated with traditional cosmology, they may not, in speaking of the issue, distinguish *umgezo* [a cleansing ritual] from the general *amademeshe* [damages, or compensation] due to the girl’s guardian (Preston-Whyte & Louw, 1986, p. 367).

A distinction is made here between Christians and ‘traditionalists’ (with the implication that Christians are more ‘modern’), but their over-riding defining feature remains that they are ‘Zulu’. Note how the Christians do not wish to be ‘overtly’ associated with beliefs that could be termed traditional. This implies that covertly, under the external appearance of Christianity (the veneer of modernisation), they are actually like the traditionalists, who represent pure Zulu ethnicity.
The traditionalisation of ‘black’ people serves, in part, to render them as the Other:

**Extract 8.17**

Socialization into sexual life took place specifically through formal instruction which was given at the puberty rites such as initiation schools for boys and girls. Such practices have been characteristic of many traditional African communities. These puberty rites served to prepare children for life as adult members of society (Seabela, 1990, p. 71).

**Extract 8.18**

[Trad]itional patterns which were used in developing adolescents such as ceremonies celebrating puberty and early marriages, are breaking down due to a lack of parental control (Tanga, 1991, p. 34).

**Extract 8.19**

[W]e will explore ... one set of Zulu cultural responses which seek to contain the problem in a ritual manner derived from, but by no means identical with, the way in which it is reported to have been dealt with in the past (Preston-Whyte & Louw, 1986, p. 361).

We see here how the practices ascribed to ‘black’ people are exoticized through the use of words such as ‘rites’, ‘ritual’, and ‘ceremonies’. In this way, these practices are rendered strange (as opposed to ‘modern’ or ‘western’ practices which are assumed to be ‘normal’) and hence worthy of explanation and investigation (in Extracts 8.17 and 8.18, it is explained how traditional rites were used to prepare adolescents for adulthood, while in Extract 8.19, the aim of the authors’ investigation into traditional cultural responses is laid out). It is through these processes of explanation, examination and inquiry that not only the ‘traditional’, but also the ‘modern’ is constructed. In the words of Rattansi (1994b): ‘[T]he encounters between ‘the West’ and ‘the rest’ have been mutually constitutive ... the ‘Western’ identities ... have been framed relationally, in difference [and *diferance*] - that is, by conceptions of what ‘the West’ is not like, by way of constructions of the supposed attributes of the subjugated or colonized Other’ (p. 37).

The traditionalisation of black people is used to achieve particular effects. Consider the following passages:
Rapid urbanization and westernization has eroded many of the traditional norms and values of the black family in Africa and South Africa. The percentage of out-of-wedlock births has grown steadily during the past 30 years in South Africa (Boult & Cunningham, 1992b, p. 161).

In families and communities in which various forms of ritual initiation into sexual practices are slackening, ignorance or erroneous ideas about sexual anatomy and physiology abound. Where communication of sexual attitudes and behaviour is highly restricted, distortions in sexual unfolding are predictable. These can range from neurotic fears, shame and guilt to excessive food and body pre-occupation and acting out promiscuity (Nash, 1990, p. 309).

The urban population that consists of members of different ethnic groups also had a disintegrative effect on the traditional pattern of mate selection. Urbanization encouraged and facilitated inter-tribal marriage or marriage between members of different ethnic groups (Seabela, 1990, p. 80).

The imagery of the ‘breakage’ of ‘tradition’ is used to pathologise ‘black’ people. For example, it is put forward as a causative factor in ‘social problems’ such as teenage pregnancy (in Extract 8.20 ‘urbanisation’ and ‘westernisation’ are associated with out-of-wedlock births), as well as in individual psychological problems (see Extract 8.21 where the slackening of ritual initiation is portrayed as causative of, *inter alia*, neurotic fears, shame, guilt and acting out). Furthermore, it serves to entrench ethnic boundaries (in Extract 8.22, the traditional is depicted as being broken down not only by the ‘urbanisation’ of people, but also by the conjugal and sexual mixing between ‘ethnic’ groups).

In complement to the above, ‘tradition’ is lauded as promoting stability, a sense of identity and pro-social behaviour. This is used to legitimate certain practices and to promote normative prescriptions with regard to sexualised interactions. Because ‘tradition’ is vague about time it carries with it the implication of infinite timelessness. In the words of Alldred (1996), ‘tradition evokes a history [which] ... then confers a moral weight so that it becomes possible to argue that it *ought to be* simply because it *has been*’ (p. 147). Consider the following passage:
By the time the traditional Zulu boy and girl reached the stage where they could begin to think about marriage they knew a great deal about sex and enjoyed it as a pleasurable part of life. This stands in sharp contrast to the findings presented here, which can be epitomized by admonition: ‘Stay away from boys for they will bring shame to you’. Open social control has been replaced by ignorance and secrecy; intracrural sex play has been replaced by abstinence or coitus. Comparing the accounts of the sexual activities of traditional youth with that which seemingly exists in the townships at present, the difference does not seem to be in the practice of accepting a lover for sexual purposes, but in the degree of social control exercised over that activity and the nature of the sexual activity itself. The Zulu youth in the townships today seem to be forced to drive an ‘individual’ bargain often from the standpoint of ignorance. In traditional Zulu culture it was never the sole responsibility of parents to educate a child in sexual matters and to enforce the rules and norms of the community in this regard. Sex education was in the hands (and eyes) of almost the whole community, and there was apparently little confusion about appropriate sexual conduct. The peer group played a prominent role in the education and control of its members through the age-set organization of traditional Zulu life. There was little ambiguity as to the social norms and rules in traditional Zulu societies. High levels of consensus existed and the social control of individual behaviour was effective (Craig & Richter-Strydom, 1983b, p. 454, my emphasis).

There are a number of assumptions made in this extract. Firstly, behaviour which constitutes ‘appropriate sexual conduct’ is taken for granted. It appears to mean intracrural sex play, perhaps abstinence, but certainly not sexual intercourse (or any other sexual interactions such as those between same sex partners or with inanimate objects). Secondly, ‘traditional’ ‘Zulu’ society is assumed to be a non-contestable, real entity. It is presented as harmonious, consensual, non-ambiguous and effective. This positive rendering of the ‘traditional’ serves to legitimate the practices ascribed to it, in particular social control through the disciplinary technologies of education and observation. Note how ‘modern’ adolescents (it is assumed that those who live in urban settings are ‘modernised’ as opposed to their ‘traditional’ counterparts) are ‘ignorant’, whereas the ‘traditional’ teenagers ‘knew a great deal about sex’ owing to the sex education they had undergone. In traditional society, sexual behaviour is portrayed as having been observed and monitored (‘in the hands (and eyes)’) by the ‘whole community’, including the peer group. Thus, through the use of the word ‘tradition’ (which lends historical weight to the argument) certain sexual behaviours (sex play and abstinence) are rendered acceptable, and certain social practices (observation, monitoring, education) concerning the policing of sexuality are legitimated.
These images find resonance with Wetherell and Potter’s (1992) work in New Zealand. In their analysis of Pakeha (people of European descent) discourse concerning Maori affairs or politics, they distinguished two constructions of ‘culture’. The first was culture as ‘heritage’ - a set of traditions, rituals and values passed from one generation to another. The second concerned culture as ‘therapy’, in which it was suggested that young Maoris needed to re-discover their culture in order to become ‘whole’ again. Although Wetherell and Potter (1992) found that these constructions were applied in different contexts and were used to produce different objects and subjects, there appears to be some overlap between them (the word ‘re-discover’, for example, implies, to a certain extent, going back to something that existed before). Wetherell and Potter state:

Culture as therapy blends together humanistic psychology with social analysis of anomie and alienation. Culture [which includes heritage] becomes offered as a form of treatment for delinquent and dispossessed individuals and communities (p. 131).

While the authors of Extract 8.23 do not go so far as to offer ‘traditional’ culture as a remedy to teenage pregnancy, the positive rendition of ‘traditional’ youths’ experience of sexual education in comparison to that of youths living in townships resonates with the culture as therapy construction as well as with the myth of the ‘healthy reserve’ referred to above.

The normalising prescription of certain practices and relations through an appeal to tradition takes on a gendered aspect in a number of respects, as evidenced in the following extracts:

Extract 8.24

Commitment to the ideal of premarital chastity was to an extent facilitated by the very nature of the social organization of traditional African communities which allowed for very few opportunities for social contacts between boys and girls (Seabela, 1990, p. 73).

Extract 8.25

African and Asian traditions have in the past encouraged early marriage for girls, just before or soon after puberty. Thus, sexual intimacy and childbearing began at a relatively early age, resulting in consequential reduction in extra-marital pregnancy (Setiloane, 1990, p. 3).
Extract 8.26

Previous generations of Africans had little difficulty in absorbing the child of an unwed young mother into the extended family. Times have changed: urbanization, the migratory system, and poverty have resulted in many families being unstable, and often female-headed, with meagre resources (Loening, 1992, p. 84).

Extract 8.27

The overwhelming behavioural cause identified by most analysts for increased fertility is modernization. This has caused both an erosion of traditional values and controls and the introduction of new values and norms, such as equal sex roles, postponement of early marriage and non-virginity prior to marriage (Preston-Whyte, 1991, p. 10).

In Extracts 8.24 and 8.25, we see how the ‘conjugalisation of reproduction’, in which a female’s reproductive behaviour is legitimated only in a marital alliance (see Chapter 7 for a fuller discussion), is promoted. In Extract 8.24, ‘tradition’ is depicted as promoting chastity prior to marriage through lack of opportunity, while in Extract 8.25, the ‘tradition’ of early marriage is used to legitimize early sexuality and reproduction. The conjugalisation of reproduction is thus legitimated and re-reinforced by its association with historically validated behaviour. In Extract 8.26, the ‘female-headed’ household, as a ‘modern’, ‘urban’ invention, is associated with instability and poverty. The implication is that the ‘male-headed’ family, associated with ‘tradition’ and ‘rural’ life, is stable and wealthy (see Chapter 7 for a fuller discussion of the treatment of the single parent in the literature). Male ‘headship’ is assumed and therefore there is no need to add the qualifier ‘male-headed’ to the words ‘extended family’ in the first sentence. This headship is legitimated by its association with historical precedent, while female headship is pathologised. In the Extract 8.27, it is ‘equal sex roles’ that are associated with the ‘modern’ which in turn is associated with teenage pregnancy. The implication is that traditionally sex roles were unequal and that this is one of the values which is being ‘eroded’. The use of the word ‘eroded’ is important here. The word is associated with the geomorphological idea of conservation, and is seen as a negative force - that which is being eroded needs to be preserved. In this case it appears that this includes unequal sex roles.

Tradition is utilised as an explanatory tool in the causation of teenage pregnancy in contradictory ways. On the one hand, traditional values are seen as contributing to the circumstances which make teenage pregnancy possible; on the other hand, it is the breakdown of traditional practices
that is forwarded as causative of teenage pregnancy. Each of these is evidenced in the extracts below:

**Extract 8.28**

One of the most prominent features of African family life is the importance of children ... In African tradition the establishment of a family is meant for procreation ... Africans put a great value on bearing and rearing children in an individual’s life. There is a clear expression of this value in the explanations given by some of the elderly people in their explanations of the reasons why parents will not encourage their teenage daughters to use contraceptives (Seabela, 1990, p. 91).

**Extract 8.29**

In traditional African communities the primary [sexual] socialization of children was not necessarily the responsibility of the child’s own parents as seems to be the case in modern society. Socialization of children into adult life in all its dimensions was the primary responsibility of the child’s kin group as well as other adults in the community at large [Teenage pregnancy is attributed later in this text partly to the lack of communication between parents and adolescents] (Seabela, 1990, p. 71).

In both of the above extracts, the ‘traditional’ is used as an explanatory tool with the modern as an implicit backdrop. In Extract 8.28, the ‘traditional’ value placed on children is invoked to explain the occurrence of early reproduction. This value is expressed by elderly people (who epitomise the ‘traditional’) with contraceptives (which are associated with the modern and which prevent pregnancy) being what is shunned. In this extract, ‘tradition’ remains intact, as a negative contributory factor in the occurrence of teenage pregnancy. In Extract 8.29, however, the ‘breakage’ metaphor is invoked as an explanatory tool, with the adequate ‘traditional’ communication patterns being replaced by inadequate modern ones.

Although ‘traditional’ ‘African’ ‘culture’ is, for the most part, overtly lauded, it is covertly equated with backwardness:

**Extract 8.30**

[T]he process of urbanization that South African blacks have undergone as a result of the development of an industrial economy in many areas of the country [is a factor in the socio-cultural change of the life of blacks] (Seabela, 1990, p. 80).
This ostensibly is a neutral description of a sociological fact. But the use of the word ‘development’ is important. ‘Development’, as opposed to the word ‘occurrence’ for instance, has implications of moving towards something better, something more advanced. By implication, the opposite (the ‘traditional life of blacks’ quoted by the author one sentence later) is less advanced, less developed.

**Culturalisation**

The South African literature on teenage pregnancy treats culture in the positivistic anthropological fashion. ‘Cultures’ are seen as neatly bounded entities which are self-contained and self-regulating. They are attributed subject status with the power to influence or even determine events:

**Extract 8.31**

Vir die swart meisies is die tienswangkerskap nie so problematies as wat dit vir die ouers, onderwysers, gemeenskapeleiers en gesondheidsdienswerkers nie. Dit is vir hulle meer aanvaarbaar om aan kulturele reëls te voldoen, dit wil sê om te voldoen aan die algemene verwagting van haar [sic] vriende, as om van voorbehoedsmiddels gebruik te maak [Teenage pregnancy is not as problematic for black girls as it is for teachers, community leaders and health service providers. It is more acceptable for them to heed cultural rules, that is to heed the general expectation of her [sic] friends, as opposed to making use of contraceptives] (Brits, 1989, p. 11).

**Extract 8.32**

Cultural as well as peer group pressures also play a role in teenage pregnancies (Ntombela, 1992, p. 7).

**Extract 8.33**

This difference does not necessarily mean that the boyfriends’ support [for the pregnant teenagers] is weaker than girlfriends’, but this aspect is also culturally determined (Tanga, 1991, p. 88).

‘Culture’ is portrayed in these extracts as something which has rules, exerts pressure and determines outcomes. It is rendered real by the ascription of a wholeness which affects people’s actions and beliefs. It is held accountable for teenagers not using contraceptives (Extract 8.31),
for their becoming pregnant (Extract 8.32), and for differences in social support (Extract 8.33).

In order to maintain the discourse of the cultural boundedness, a discourse of difference is necessary:

**Extract 8.34**

Different social groups and cultures have very different reactions to an extra-marital pregnancy. In some, all babies are welcomed into the extended family while in others, the pregnancy is a dire insult to the family’s honour (Rockey, 1986, p. 17).

This discourse of difference is couched in the liberal framework of acceptance and understanding:

**Extract 8.35**

This last objection [to contraceptives] ... deserves attention. It is an inherent part of a set of interlocking cultural values which we have already met in this chapter. These are: the love of, and desire for, children, either within marriage or outside it; and the emphasis on, indeed approval and encouragement of, active male sexuality. Both derive from the paramount importance which is placed on fertility. ... This value underlies, and makes understandable, the refusal of parents to allow young girls access to easy contraception (Preston-Whyte & Zondi, 1992, p. 236).

**Extract 8.36**

‘n Behoefte aan enersyds die aanvaarding deur die mediese personeel van kulturele gelowe soos toorkuns ... en andersyds ‘n behoefte aan die verligting van intrapsigiese stres wat veroorsaak word deur die bygelowe [A need on the one hand for the acceptance of cultural beliefs such as witchcraft by the medical personnel, and on the other hand a need for the relief of intra-psychic stress caused by these superstitions] (Fouché, 1992, p. 77).

The liberal discourse of tolerance masks the powerful effects it achieves. In Extract 8.35, the ‘cultural’ ‘values’ (of ‘Africans’) are given ‘attention’ and rendered ‘understandable’. The question of who is paying attention or doing the understanding, of who the beneficent listener or reader is, remains hidden. The dominant ‘values’ with regard to which the ‘cultural’ ‘value’ of fertility needs to be explained are invisible. They form the normalised, de-culturalised absent trace which is not in need of explanation. In the second extract, it is made explicit who is doing the ‘accepting’. The medical personnel’s ‘beliefs’ (which the reader is assumed to share) form the tacit, dominant backdrop which renders those of the patients curious. The patients’ ‘beliefs’
are depicted as ‘superstitious’ and therefore not based on reality - a reality which, it is assumed, needs no explanation. This construction of the strange and illusory nature of the patients’ ‘beliefs’ legitimates the intervention of those tacitly positioned as rational and in touch with reality. The medical personnel’s position is made even more powerful by the use of the word ‘intra-psychic’ which suggests ‘unconscious’ processes over which the patient has little ‘conscious’ control, and which require trained professional help to render them audible and therefore open to resolution.

The liberal discourse of tolerance of cultural difference (which is epitomised by the rhetoric of multiculturalism) is understood by its proponents as ‘generous, progressive, committed to harmony and imbued with good-will ... [with] racism [as] an unforgivable moral lapse’ (Wetherell & Potter, 1992, p. 135). However, a different knowledge/power axis (that of particularism which masks the underlying racialising project) is operative in culturalisation. As Rattansi (1994a) points out, incidences such as the Rushdie scandal expose ‘the weaknesses of any benign multiculturalism premised on the assumption of easy harmony and pluralism’ (p. 39).

The legitimation of the intervention of the expert through the culturalisation of teenage pregnancy is evidenced in the following extracts:

**Extract 8.37**

Against this common background all studies found unique associations of attitudes and beliefs which may be referred to as cultural models which affected the exact patterning of sexuality in the local situation. These nuances of belief and their accompanying action are important reminders of the complexity of the field and of the necessity for intervention and educational programmes to be tailored to fit local circumstances (Preston-Whyte, 1991, p. 42).

**Extract 8.38**

Die hoë kulturele waarde wat geplaas word op kinders en vrugbaarheid asook die afwesigheid van enige ernstige nagevolge na so ’n geboorte wys daarop dat hier sprake is van ’n unieke stelsel van kulturele waardes, reëls en gewoontes wat aangespreek sal moet word voordat enige strategie wat gerig is op die voorkoming van tienerswangerskappe in die swart gemeenskap op enige sukses kan hoop [The high cultural value placed on children and fertility as well as the absence of any serious consequences after such a birth indicates that there exists here a unique set of cultural...]

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values, rules and customs which will need to be addressed before any strategy aimed at the prevention of teenage pregnancy in the black community can hope to have any success] (Brits, 1989, p. 12).

In Extract 8.37, we see the societal equivalent of individualisation. Interventions need to be localised, fitting the specific circumstances. The use of the word ‘complexity’ in the passage is important. It legitimates the surveillance of local ‘actions’ as well as the position of the expert as the authority concerning suitable interventions. A constant monitoring is made possible through the ‘tailoring’ of programmes to ‘local circumstances’. In the Extract 8.38, ‘culture’ is attributed object status. It is something which must be acted upon before the real work of the prevention of pregnancy can begin. It is unclear what situation the author thinks will prevail once the ‘unique set of cultural values’ has been ‘addressed’. One of two possibilities exist. The first is that the values will be changed to more ‘acceptable’ ‘cultural’ values (which, it is assumed, require no explanation). The second is that ‘cultural’ peculiarities are something specific to ‘blacks’, and that once this has been removed a state of generalised reasonableness will be installed.

Indeed, this view of culture as something possessed by ‘blacks’ or ‘Africans’ is pervasive in the literature, as most of the passages presented so far indicate. Consider, also, the following extract:

**Extract 8.39**

It is however with much disgrace that the cultural values of the African people were perceived to be inferior and on the other hand the western way of life which was seen to be superior did not bring a substitute for the social structures that were broken (Mkhize, 1995, p. 43).

Thus ‘Africans’ have ‘culture’ whereas the ‘westerners’ have a ‘way of life’. ‘Westerners’ constitute society, the common sense against which the cultural peculiarities of ‘Africans’ are etched. This is echoed in the discursive constructions studied by Wetherell and Potter (1992). The Pakeha were portrayed as having ‘civilization’, a ‘mundane, technical and practical outlook’ (p. 135), but not culture. When they were depicted as having culture, it was the ‘high’ culture of operas, novels and art. A clear linkage is also created in the above extract between the traditionalisation and culturalisation of black people. Witchcraft, a word signifying ‘tradition’ and ‘superstition’, is culturalised as a ‘cultural belief’.

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If culture is a possession of ‘blacks’, it is also something which they can lose, as evidenced in the ‘acculturation’ thesis. Their ‘social structures’ or traditions are broken down, and they stand as empty vessels waiting to be refilled:

**Extract 8.40**

Different African cultural practices and beliefs have been diluted in the past few decades. ... In this respect, the African people are not unlike other cultural groups around the world, who, because of slavery, colonisation and/or industrialisation and increasing urbanisation, have been forced to negate the ways of their forefathers (Setiloane, 1990, p. 2/3).

The reference to the ‘forefathers’ in this passage entrenches the myth of origin (part of traditionalisation) which contributes to the construction of the ‘cultural’ entities. The view expounded in this excerpt (that acculturation is something which only happens to the colonised) is echoed in other discursive environments (see, for example, Wetherell & Potter, 1992). Butchart (1995) places the thesis of acculturation of the colonised in South Africa in historical perspective:

In South Africa ... the idea of ‘indirect rule’ described the tactics adopted by the colonists to resolve the crisis posed by the perception that the education and ‘civilization’ of Africans was eroding their malleability and docility, thereby endangering social control and threatening the economic base of cheap labour. To contain this threat, the discourse of indirect rule translated African dissatisfaction out of the lexicon of political resistance and into the vocabulary of ethnology, anthropology and psychology. Signs of ‘native restlessness’ thus became symptoms of ‘deculturation’ or ‘acculturation’, iatrogenic consequences of the colonial cure for African barbarism (p. 197).

The acculturation thesis places ‘blacks’ in a double bind situation. On the one hand, the ‘way of life’ which substitutes their culture is seen as detracting from their original way of being, bringing with it social problems such as teenage pregnancy. On the other hand, acculturation is seen as bringing them to a more advanced state of being. Each of these is evidenced in the following extracts:

**Extract 8.41**

It appears that acculturation is also a factor contributing to teenage pregnancy. Christianity brought with it the fact that one’s body is God’s temple and therefore no one must temper [sic] with it. There was, therefore, a shift away from interfemoral sex
practices *(ukusoma)* to teaching girls not to allow anyone to touch their bodies *(Ntombela, 1992, p. 4).*

**Extract 8.42**

Aangesien hierdie studie spesifiek op die behoeftes van die swart swanger adolessent fokus en die Afrika-kultuur in ‘n oorgangspaniode tussen die Derde en Eerste Wêreld is, is die bepaling van behoeftes belangrik om hierdie oorgangskultuur beter te begryp [As this study specifically focusses on the needs of the black adolescent and as the African culture is in a transitional phase between the Third and First World, the establishment of needs is important in order to understand this transitional culture] *(Fouché, 1992, p. 2).*

In Extract 8.41, the ‘traditional’ (which emphasised interfemoral sex) is juxtaposed with the ‘modern’, in the form of Christianity (which concentrates on abstinence). The loss of ‘black’ people’s traditional culture through ‘acculturation’ is held responsible for teenage pregnancy. In contrast to this, Extract 8.42 portrays the transition of ‘African’ ‘culture’ from a ‘third’ to a ‘first world culture in positive terms. The ‘first world - third world’ terminology used in the extract is part of the international discourse concerning issues surrounding development. The supposed neutral usage of the terms masks a host of inequalities between regions and people *(Sharp, 1988).* In this excerpt, ‘Africans’ are positioned as moving from the under-developed (and therefore undesirable) third world to the developed (and therefore desirable) first world.

With the attribution of ‘culture’ to the Other comes the possibility of juxtaposing ‘culture’ with the rational, a juxtaposition that legitimates expert intervention:

**Extract 8.43**

Although unwed teenage motherhood appears to be culturally tolerated and accepted in Transkei, it does interfere with schooling and may produce households headed by women, often resulting in poverty and unfavourable social conditions for both the teenage mother and her child *(Buga, Amoko & Ncayiyana, 1996b, p. 95).*

**Extract 8.44**

Kulturele betekening van tienerswangerskap: in die swart bevolking is tienerswangerskap nie ‘n wesenlike probleem vir die tiener nie. Slegs die gemeenskapswerkers, onderwysers, gemeenskapeleiers en die ouers is bekommerd daaroor vanweë die geweldige groei van die swart bevolking [Cultural meaning of teenage pregnancy: teenage pregnancy is not a major problem for the teenager in the black population. Only the social workers, teachers, community leaders and parents are worried about it because
of the tremendous growth of the black population] (Brits, 1989, p. 203).

In Extract 8.43, ‘cultural’ tolerance of particular events, such as unwed teenage motherhood, is placed in contradistinction with conditions which any ‘reasonable’ reader would agree are intolerable, viz. the interruption of schooling, female-headed households, poverty and poor social conditions. This ‘reasonableness’ relies on the reader sharing the authors’ assumptions concerning the nature of schooling (see Chapter 9 for a discussion on the production of the economised self through education), and the undesirability of female-headed households (see the section on single parents in Chapter 7). These ‘unfavourable social conditions’ should, by implication, be ameliorated by the rational expert. In Extract 8.44, those who are rational (social workers, teachers, community leaders and parents) are contrasted with those who are not. Finding teenage pregnancy not to be a problem is attributed to ‘cultural meaning’, whereas worrying about it is ascribed to concern for the greater good, viz. the need to control the population growth (see Chapter 9 for a fuller discussion on the issue of population control).

The revisionist literature attempts to overturn the juxtaposition of ‘black culture’ with rationality, positing that teenage pregnancy is a reasonable response to a certain set of circumstances. Consider the following extracts where the standards used to judge teenage pregnancy as a social problem are called into question:

**Extract 8.45**

May the international trends not suggest that we are looking at the situation from the wrong perspective - a perspective based on a Western (and in this country, an essentially white) middle-class morality which, at bottom, judges the births to be the result of lax sexual morals and which fails to see that other standards may be admissible in running one’s life (Preston-Whyte, 1991, p. 37/38).

**Extract 8.46**

If early pregnancy holds no or little stigma and if it does not result in a deterioration of their present or likely future circumstances, there is little incentive to strive to achieve what are, after all, largely middle class and, in the South African context, white norms and values (Preston-Whyte, 1991, p. 22).

This revisionist literature reflects the civil rights and, in South Africa, the Black Consciousness movement in re-evaluating the assumed ‘western’ ‘white’ standards used to judge ‘black’ people.
The values which tolerate teenage pregnancy are re-interpreted as ‘alternative’ rather than ‘lax’. While this literature serves the political purpose of challenging the dominant culturalisation of ‘black’ people, it falls into the same trap of constructing cultural categories as real entities. ‘Western’, ‘white’ ‘middle-class’ morality, norms and values are invoked as unproblematically valid characteristics.

**Conclusion**

Racialisation is a governmental tactic which allows the articulation, deployment and maintenance of a set of power relations based on phenotypical features. People are assigned to particular collectivities signified as racial, and later ethnic, or cultural groups. Although crude ‘scientific’ racism has essentially disappeared, a ‘new racism’ has appeared in which ‘culture’, ‘ethnicity’ or ‘tradition’ perform the governmental work previously achieved by the category of race. Traditionalisation and culturalisation obscure the process of racialisation, while simultaneously providing the disciplinary tools for greater gradation and monitoring of those cast as the Other. The boundaries of collectivities are, to a large extent, policed by the gendered notions of sexuality, marriage, reproduction, and the family (Anthias & Yuval-Davis, 1992), and the teenage pregnancy literature is no exception in this regard.

The governmental tactic of racialisation is utilised in the teenage pregnancy literature to achieve particular effects. Through (1) the construction of racialised boundaries as real, natural entities (despite the historical slipperiness of racial categories), (2) the traditionalisation of ‘black’ people, and (3) the culturalisation of ‘black’ people, the behaviours, actions, and social conditions under which ‘black’ people live are rendered strange and hence open to scrutiny. ‘Black’ people are exoticised and cast as the Other; they become the pathologised presence when social problems are fore-fronted. What remains tacit and hidden (as opposed to audible and visible) is the normalised absent trace of ‘whiteness’. This acts as the backdrop against which the ‘traditions’ and ‘culture’ of ‘black’ people are etched. It implicitly defines the person who is explaining, understanding or accepting the rituals, behaviours, beliefs and values of the Other. It represents the common sense or rationality which is juxtaposed to ‘cultural’ ‘beliefs’ or ‘myths’. It contains the definition of the expert who is not engaged in ritualistic behaviour or
myth-making, but rather in beneficial interventions and fact-finding.

The traditionalisation and culturalisation of ‘black’ people create double binds for ‘black’ people. The ‘traditions’ of ‘black’ people are portrayed as breaking down; however, this does not mean that the ‘black’ person then becomes ‘western’, ‘modern’ or ‘urban’. Rather, s/he has to labour to become ‘westernised’, ‘urbanised’ or ‘modernised’, always remaining a poor mimic of the ‘real thing’. Culturalisation of ‘blacks’ allows for the thesis of acculturation which positions ‘blacks’ simultaneously as advancing to a more developed state of being, and as floating in a sea of culturelessness.

In the following chapter, I explore the governmental tactic of the economisation of activity, indicating how the investment of certain activities with economic value, and the relegation of others to the unpaid, private realm is utilised to pathologise early reproduction. I indicate how economisation and racialisation operate as mutually reinforcing strategies of pathologisation.
CHAPTER 9

THE ECONOMISATION OF ACTIVITY AND ECONOMISED SECURITY

In Chapter 7, we saw how the family is vested with the task of producing the responsible citizen who, amongst other things, is economically useful. The daughter should be prepared ‘for a productive and lucrative role in society’ (Mfono, 1990, p. 6). In this chapter, I trace how the economisation of activity acts as a governmental tactic in the teenage pregnancy literature, and how, through the deployment of this tactic, certain gendering effects are produced, poverty is pathologised, and economised security invoked in the regulation of the poor’s bodily, psychological and familial functioning.

In order to act as a governmental tactic, the economisation of activity has to make two basic assumptions. The first concerns the nature of the individual engaged, or preparing to engage, in economic activity. This individual is portrayed as the ‘rational economic man’ (Edwards & Duncan, 1996, p. 116), or what Foucault refers to in his course of lectures at the Collège de France as *homo economicus* (Gordon, 1991). He is an autonomous, self-contained, free, reasoning agent with potential skills to develop and market; he makes rational economic decisions, consciously carrying out the plans he has devised; his actions are governed by the drive to maximise well-being to himself and his family; his labours are not regulated or organised through compulsion, but are acts of choice. He is masculinised (hence my use of the ‘he’ rather than the ‘s/he’ pronoun), although females are allowed to occupy the position as long as they act in accordance with the premises of the ‘rational economic man’. The second assumption concerns the nature of the domain within which the individual engages in economic activity. This domain is depicted as immanently public - the field of free market exchange in which rational economic individuals interact to maximise financial gain. Miller and Rose (1993), in their paper ‘Governing economic life’ (in which they trace, *inter alia*, the emergence of techniques for managing the world of the workplace that have come to lay special emphasis upon
the psychological features of the producing subjects), state:

Before one can seek to manage a domain such as an economy it is first necessary to conceptualize a set of processes and relations as an economy which is amenable to management. The birth of a language of national economy as a domain with its own characteristics, laws and processes that could be spoken about and about which knowledge could be gained enabled it to become an element in programmes which could seek to evaluate and increase the power of nations by governing and managing ‘the economy’ (p. 80).

The construction of the ‘economy’ relies on the split between the public and the private, the investment of certain activities with economic value, and the relegation of others to the unpaid, private sphere. The boundary between these (what counts as production in an economised sense, and what does not) is not the result of a self-evident, natural process of differentiation, but rather is tied to the workings of power relations, in particular gender and class relations. Oakley (1974, 1981), for example, discusses the shift in housework from a manufacturing activity to one in which the housewife labours within the unpaid, private sphere to produce and maintain the home, the husband in his capacity as economic worker, and the children as future workers. Some of these gender and class relations will be highlighted in this chapter.

The separation of ‘a set of processes and relations’ from other processes and relations, and the labelling of the former as the ‘national economy’ has allowed for the invocation of economised security as a technology of government. Because these processes and relations amalgamate into a phenomenon (the economy) which affects all people (whether they are engaged in economised activities or not), processes and relations which threaten the well-being of the economy are a concern for all, and thus become a matter of national economised security. In this chapter, we shall see how the portrayal of the pregnant teenager as rupturing economised security invokes the expert as the protector of the common good. In Chapter 2, we saw how Foucault ascribed three general traits to the method of security, viz. that: (1) it deals with series of possible and probable events; (2) it evaluates through the calculation of comparative cost; and (3) it prescribes an optimal mean within a bandwidth of the acceptable rather than by strictly demarcating the permitted from the forbidden. In this chapter, and in the one that follows, the application of the method of security in the area of adolescent sexuality and reproduction will be explored.
Also in Chapter 2, I delineated how Foucault sees modern governmental rationality as simultaneously individualising and totalising. While the economisation of activities allows for the invocation of a rhetoric of economised security which affects the common good, we simultaneously have the situation where the ‘economic fates of citizens within a national territory are uncoupled from one another, and are ... understood and governed as a function of their own particular levels of enterprise, skill, inventiveness and flexibility’ (Rose, 1996a, p. 330). In this latter process, the individual is solicited as an ally in the assurance of economised security through ensuring that s/he invests in the management and enhancement (chiefly through pedagogisation) of his/her own economic capacities. S/he is incited to develop skills, to market his/herself, and to plan a career path. S/he is rendered as an active agent in his/her own economic governance (Rose, 1996a). We shall see in this chapter how the pregnant teenager is pathologised as she fractures the production of her economised self.

In the following, I describe the positioning of women in relation to the economisation of activity in the teenage pregnancy literature, and the implication of this for pregnant teenagers. The assumption of the rational economic man opens up four positions for women, viz. the dependent woman, the economic woman, the loose woman, and the poor woman. Following this, I discuss the manner in which poverty is foregrounded as a pathologised presence, as the poor are positioned as fracturing of economised security. They do so by refusing the production of the economised self, and contributing to unchecked population growth. This portrayal of the poor as a threat to the common good legitimates, firstly, the intervention of the expert for the sake not only of the well-being of the adolescent and her child, but also for national security, and, secondly, for the endless monitoring and calibration of the poor and their personal and familial habits. In this latter regard, the poor are depicted as fracturing bodily and psychologised harmony, as well as normal functioning and formation of the family. Throughout the chapter, I indicate how the governmental tactics of economisation and racialisation overlap as mutually reinforcing strategies of pathologisation.
The economisation of activity and the positioning of women

The rational economic man assumed in the economisation of activity is masculinised, allowing women one of four positions to occupy in relation to this man, each of which is reflected in the teenage pregnancy literature. The first is the complement of the rational economic man, viz. the domestic woman dependent on the rational economic man for sustenance for herself and her children. The second position is the economic woman, who enters the public realm, taking on the characteristics of the rational economic man. Although this position is open to women, it is also rendered dangerous in terms of child outcomes. The third position is the loose woman who gains access to financial resources through the economisation of her body. The final position is the poor woman, one who is not dependent, not economic and not loose, and hence has no access to financial resources. Each of these is discussed below.

The dependent woman

In the private/public split, the ‘dependent woman’ populates the private sphere. She is incapable of economised activity and relies on a male to bring the public with its accompanying monetary value into the household. Her role is domestic and/or maternal, neither of which is seen to carry economic worth. These roles are relegated to the status of ‘not work’ and ‘non-skillful’ as evidenced in the following quotes:

Extract 9.1

These women [those who marry and bear children] do not expect to have a career or even to work consistently to provide for themselves (Preston-Whyte & Allen, 1992, p. 219).

Extract 9.2

With little education and few skills, they are dependent financially on their often-absent menfolk (Nash, 1990, p. 307).

In Extract 9.1, the activities carried out in the home (such as rearing children) are clearly not seen as work. Only activities that are carried out in the ‘public’ sphere and which are vested with economic worth are given the status of work. This is further entrenched by the equation of
economised activity with skill as evidenced in Extract 9.2. The implication of this passage is that the work which occupies women in the home is not skilful.

The male counterpart to the dependent woman, the male provider, is positioned firmly in the public sphere. He is depicted as the stalwart who protects the woman and children from the potential dangers which can infiltrate from the public to the private. Consider the following extract where the male is expected to reliably meet the economic needs of his family:

**Extract 9.3**

If unemployed, there is the question of the father’s chance of finding reliable employment with a family to support. He needs a job that will meet their immediate needs (Greathead, 1988, p. 26).

Although the dependent woman provides the most comfortable complement for the rational economic man, this positioning is depicted as deviant in the teenage pregnancy literature. Because of the teenager’s (assumed) unwed status (see Chapter 7 for a discussion on the conjugalisation of reproduction), her dependency is not fixed to a male, but often to her family:

**Extract 9.4**

[I]t is the mother and her consanguineal kin who (despite damages) bear the major burden of support in the case of premarital births (Preston-Whyte & Louw, 1986, p. 382).

Where there is a potential male provider, he is presented as unreliable:

**Extract 9.5**

When the cost [of child-care] is calculated, it will usually become apparent to the teenager that expenditure far exceeds income. Many respond by saying that their parents or boyfriends will support them. Support from the boyfriend seldom materialises and many mothers end up trying to obtain maintenance through the courts. Even after a verdict in favour of a mother and child, payment of maintenance is not guaranteed. The teenager needs to be made aware that few actually receive financial support (Greathead, 1988, p. 26).

The phrase, ‘The teenager needs to made aware’, in Extract 9.5 renders the adolescent female (rather than her partner) responsible for her financial predicament as she should realise that,
because she is not married to the man, her status as a dependent woman is precarious.

The teenager, thus, may occupy the position of a dependent woman, but in a deviant form. Even where she enters into a marital relationship with a man, her motives are the antithesis of the ‘real’ dependent woman for whom the basis of the exchange is one of love:

Extract 9.6

It is highly probable that she will drop out of school even if someone in her family helps to take care of the baby. Of even greater significance is the fact that she will not be able to find a steady job that pays enough to provide for herself and her child. Such teenagers may even be compelled to marry people they might otherwise not have chosen (Ntombela, 1992, p. 8).

In this extract, the teenager is depicted as failing in the production of her economised self (see later discussion), as well as in fulfilling the tenets of the economic woman; she is hence ‘compelled’ to marry for financial security (rather than love). The latter belies the assumption that most women make free, unpressurised choices (which are not influenced by financial concerns) with respect to their marriage partner.

The economic woman

The economic woman is one who has crossed the divide from the supposedly private domain to the public one. She engages in activities which bring financial gain, and hence is positioned as more powerful in relation to men than the dependent woman:

Extract 9.7

Other women, many of whom have achieved professional status or built up a flourishing business, state openly that marriage is ‘just a trap’ and ‘a woman is better off alone’ (Preston-Whyte & Zondi, 1992, p. 233).

In Extract 9.7, the economic woman is portrayed as being able to resist the ‘trap’ of marriage because of her access to financial resources either through professionalism or business. She enters the domain of the rational man, and thus is able to refuse her construction as a dependent woman.
The economic woman is simultaneously portrayed in a positive and a negative light. On the one hand, she is held up as the ideal to which females should aspire; on the other hand, this entry into the public domain is problematised, particularly in terms of child outcomes:

**Extract 9.8**

In the short term, these incentives to delay pregnancy might be a reasonably well-paid job, possibly a career, and the likelihood that marriage will not be delayed by general unemployment, lack of housing, and poverty. In the long term, education and the widening of female horizons beyond the home and childbearing, seem to be the directions which intervention and policy should take (Preston-Whyte & Allen, 1992, p. 223).

**Extract 9.9**

In many black families both parents are working and in female-headed households it is virtually inevitable that the responsible and able-bodied women may have to spend long hours either at work or in informal money-making. If the latter does not take them away from home, it may bring large numbers of men to the house in order to buy food and drink. Children are thus either left alone at home for most of the day or soon become involved in helping their mothers make money (Preston-Whyte & Louw, 1986, p. 383).

In Extract 9.8, the feminised arena of household maintenance and child-rearing is relegated to second-rate status. It is suggested that females need to move beyond this, to enter the masculinised sphere of financial gain, and that professionalised intervention should concentrate on this. In contrast, Extract 9.9 depicts women who work outside the home as neglecting their children, and women who perform economised activities in the home as abusing their children by involving them in the generation of income (the assumption here is that children should play or learn, but not engage in activities that are invested with economic worth). The dichotomy evidenced in these two extracts is connected to the familialisation of alliance. In Extract 9.8, the economic woman is invoked as a preventive strategy in the formation of a family outside the conjugal relationship. In Extract 9.9, the functionalisation of the teenager’s family of origin (developing the affectively fulfilled, responsible citizen) allows for the pathologisation of the economic woman. The implication is that the activities of the economic woman and those of child-bearing and rearing are mutually exclusive (the economic woman prevents child-bearing and interferes with child-rearing). This exclusion (economised activity and child-rearing) is heavily gendered, as there is never the suggestion that a man engaged in economised activity is jeopardising his children’s adjustment and well-being, or that his engagement in work outside
the home ought to act as a brake on his decision to have children. In fact, it is quite the reverse, where greater economised gain for a man means greater security for his children.

Thus, while the female may step into the world of public endeavours, she never entirely leaves the private sphere. She remains responsible for private matters, such as child-rearing and the management of domestic affairs, in ways not extended to her male counterpart, even if he is not working in the public domain. Indeed, she is expected to desire the private domain, and not to be ‘fulfilled’ by an economised life:

Extract 9.10

It may be suggested that even if African women anticipate success in terms of a career, the majority also place great store by having children. This emerged when we asked the girls if they thought it ‘enough’ to have a career. Most replied firmly in the negative, and one commented, ‘... even if I wanted just to be a professional ‘somebody’, do you think my husband would be satisfied?’ (Preston-Whyte & Zondi, 1992, p. 237).

These researchers clearly expected the respondents in their study to want ‘more’ (domestic/maternal activities) than just a career (economised activity) in the posing of their question ‘Is it enough?’. One wonders whether the same question would have been posed to male respondents.

The loose woman

The loose woman is one who ruptures the tenets of both the dependent and the economic woman. She does not leave the domestic sphere, but gains access to financial resources through the use of her body outside the marital relationship. This activity, while falling into the category of economic exchange, is excluded from legitimated economisation of activity as it threatens to disrupt the power of the rational economic man by dissolving both the private/public split and the conjugal rights of the rational economic man.

When the teenager is positioned as the loose woman in the literature, she is placed in a double bind position. Consider the following quotes:
Extract 9.11

Poverty ... encourages girls to seek other means of earning a living. Inevitably teenage girls fall prey to older men who fall in love with them. These men attract teenage girls by giving them money, buying them clothes, and eventually having sexual intercourse with them. It is at this point that the problem of teenage pregnancy starts, especially if the girl knows nothing about contraceptives (Ntombela, 1992, p. 2/3).

Extract 9.12

Within African communities men control most resources which are then used by some as a means to coercing teenage girls to enter into a pseudo-consensual sexual relationship (Parekh & De la Rey, 1997, p. 223/224).

In Extract 9.11, we see the depiction of a straightforward exchange - financial value for sexual favours. The female is positioned as simultaneously innocent and culpable. On the one hand, she ‘seeks’ to earn a living by commercialising her body; hence she is active. On the other hand, she ‘falls prey’ and ‘knows nothing’, and thus is innocent and passive. The latter position is made possible by the equation of adolescence with (quasi)childhood and the consequent construction of pregnant teenagers as victims (see Chapter 6). Whether active or passive, however, the teenager is rendered accountable for the occurrence of pregnancy following on this exchange. The man is represented as a distant figure, with no responsibility for contraception (it is the teenager who ‘does not know’). In Extract 9.12, power is viewed as something which is possessed by certain classes of individuals (in this case African men) who are then able to use this power to force others into doing something. The use of the words ‘pseudo-consensual’ has powerful effects in this passage. They produce a double bind (as in Extract 9.11) in which the woman is simultaneously responsible and unable to make her own decisions concerning the utilisation of her sexuality. The ascription of this process to ‘African’ communities achieves a racialised goal (see chapter 8 on racialisation).

The poor woman

The poor woman is one who is not dependent, not economic and not loose. Females are portrayed as naturally occupying the position of poverty, a condition foreign to masculinity (which is circumscribed, in part, by the tenets of the rational economic man):
Extract 9.13

Socio-economic factors incorporate the effects of poverty, urbanization, a migrant labour system and the emasculation of the Black male (Craig & Richter-Strydom, 1983b, p. 454).

Extract 9.14

It has been argued that a lot of the so-called feminisation of poverty starts off with teenagers having babies (Mfono, 1990, p. 6).

Extract 9.13 links poverty with the emasculation of males. Because the rational economic man is masculinised, when economised activity is taken away from the male, he is depicted as losing the properties which define him as male, his essential personhood. There is no equivalent defeminisation of females in situations of poverty. Indeed, conditions of poverty are equated with females with no suggestion that their essential personhood is eroded, as evidenced in Extract 9.14. The conditions of possibility for the ‘feminisation of poverty’ have, to a large extent, to do with the gendered investment of certain activities with economic value, and the relegation of others to the private, unpaid sphere. Because the domestic is feminised, and unpaid, it follows that poverty is the natural state of females, unless they are in a relationship with a male. However, for males, poverty is not natural, and leads to an erosion of their masculine being. It disrupts dominant gendered relations by placing the male in an equivalent, unpaid position as the female.

In Chapter 7, I wrote about the association that has been made between single ‘female-headed’ parent families and lower socio-economic status. I indicated that the link has strong gendered effects, in that women (and not men) are positioned as perpetuating poverty through their reproductive actions, as is evidenced in the following excerpt:

Extract 9.15

Teenage motherhood contributes significantly to the downward economic spiral affecting female-headed households and whole communities where early procreation and late marriage (or never married status) have become the norm (Boult & Cunningham, 1993, p. 6).
There is some debate concerning whether a straight linear correlation does actually exist between single female parent families and poverty or not (see, for example, Moore, 1996). My aim is not to argue either way, but rather to indicate that it is significant that female ‘headship’ is only forefronted in connection with poverty in the teenage pregnancy literature. The (poor) single female parent fractures not only the husband-wife deployment of sexuality but also the gendered economic relation of power set up through the public/private split in the economisation of activity as she becomes the sole bread-winner. One is left with the impression that it is the female’s refusal to go through the processes leading to her attachment to a man that creates the conditions of possibility for poverty rather than a complex of issues, including, for example, which activities are vested with economic worth and which are not, and who is rendered responsible for child-care arrangements and who is not.

In this section, I have discussed the positioning of women in relation to the rational economic man assumed in the economisation of activity. We have seen how women may occupy four positions, viz. the dependent, the economic, the loose and the poor woman. Each position is depicted as holding some danger for the pregnant or mothering teenager. The dependent teenage woman is portrayed as deviant as her dependency is not confined within the marital alliance. She ruptures the conjugalisation of reproduction, and depends instead either on her partner to whom she is not married, or her family. The economic woman (which the pregnant or mothering teenager is assumed not to be) is used in the literature either as an incentive to prevent early reproduction or to pathologise the teenager’s mother (as neglecting or abusing her children). The invocation of the loose woman places the pregnant teenager in a double bind, as she is portrayed as simultaneously culpable and innocent in the ‘prostitution’ of her body, but nevertheless responsible for her pregnancy. The pregnant teenager as the poor woman is the discursive positioning most emphasised in the literature. As such she is depicted as fracturing economic security through her contribution to the population growth, her refusal to produce an economised self, and her deviant bodily, psychological and familial functioning. These are discussed in the following sections.
Teenage pregnancy and poverty: The fracturing of economised security

Teenage pregnancy is mostly associated in the literature (South African and international) with lower socio-economic status, although there is the odd voice that counters this position (e.g. Geronimus (1991) in the United States, Seabela (1990) in South Africa). My project here not to argue for or against the teenage pregnancy - poverty link, but rather to illustrate how the dominant association serves as a self-perpetuating reciprocal cycle of pathologisation. In the racialisation of teenage pregnancy, ‘blacks’ are cast as the Other; in the economisation of activity the poor occupy this position (and very often it is poor ‘blacks’). The poor become the pathologised present, whose presence relies on the taken-for-granted backdrop of the normalised rational economic man:

Extract 9.16

[N]o country can afford the vicious circle of socio-economic demands that will be generated by this catastrophe [babies born to teenagers]. Worst of all the babies born are often defective at birth, with little chance of holding their own in life because of their subsequent inferior intellectual and somatic development. The demographic consequences are formidable (De Villiers, 1985, p. 301).

Extract 9.17

Tienerjarige swangerskap is ‘n kringloop met bose gevolge wat alle ander pogings tot sosio-ekonomiese vooruitgang strem [Teenage pregnancy is a cycle with vicious consequences which thwarts all other attempts at socio-economic development] (De Villiers & Clift, 1979, p. 199).

Extract 9.18

The cost of these problems is not borne just by the mothers and babies, but by the whole society (Greathead, 1988, p. 28).

Extract 9.19

Society cannot stand by and remain indifferent to their and their children’s plight. They are all victims of their circumstances and unwitting perpetuators of the cycles of poverty (Boult, 1992, p. 17).
In the above extracts, teenage pregnancy is directly equated with poverty which, in turn, threatens ‘national’ economic security. As mentioned earlier, one of the characteristics of the method of security is that it deals in the series of possible and probable events. In the above passages, we see how teenage pregnancy is depicted as: (1) leading to ‘defective’ children, who probably will not be able to hold their own (engage in economised activities), and will therefore probably add to the burden of poverty which, it is implied, is not carried by the poor themselves, but by the ‘country’ (Extract 9.16); and (2) contributing to the probability of demographic (and therefore economic) disaster (Extract 9.17 - see later discussion on population control). The language of economic development, in which an unstated endpoint is assumed, is used in the above excerpts to render the teenager and her children culpable for ruptures in the idealised progression of economic growth (see Miller & Rose’s (1993) discussion on the intellectual preconditions for the emergence of the discourse of economic growth). The pregnant teenager is relegated to the margins of economic security which positions her as a burden to society. Her reproductive behaviour renders not only her personal life difficult and open to socio-economic disadvantage, but also affects the population. She contributes to the number of poor people, as well as to the (large) number of people per se. Therefore, she becomes a problem to the ‘country’ (Extract 9.16) and ‘society’ (Extracts 9.18 and 9.19), as the prosperity and well-being of the population is threatened.

This positioning of the pregnant teenager as fracturing economised security allows for the deployment of the community health discourse. As everybody is affected, everybody must be involved in providing a solution to the problem (see Chapter 5 for further discussion on the community health discourse):

**Extract 9.20**

An appeal is made to leaders in commerce, education and the church to regard this catastrophe as one in which they have a distinct and vested interest and which they too must strive to help eradicate (De Villiers & Clift, 1979, p. 195).

The child-bearing teenager is depicted as contributing to economised instability in two major ways, viz. through: (1) her fracturing of the production of her economised self; and (2) adding
to the population growth. Each of these is discussed below.

**Teenage pregnancy and poverty: the fracturing of the production of the economised self**

The rational economic man is not a person who occurs naturally (although he is normalised). Instead, he is positioned as having to labour to attain his status, partially through the process of pedagogisation and skill development. He is incited to produce the economised self through learning and the achievement of rationality and marketable competence. The pregnant teenager fractures this production of the economised self, hence joining the ranks of the poor:

**Extract 9.21**

Teenage pregnancy interferes with future career opportunities, often resulting in poor performance at or early drop-out from school as well as unemployment and poverty (Mukasa, 1990, p. 423).

**Extract 9.22**

[T]he younger the woman when she has a child, the shorter her scholastic career, leading to socio-economic deprivation (Van Coeverden de Groot, 1991, p. 1381).

**Extract 9.23**

For those who could not continue their education due to poverty it was clear that what employment opportunities were available were limited to boring and unprestigious jobs (Preston-Whyte, 1991, p. 28).

**Extract 9.24**

Above all, continued education reduced the likelihood of poverty and dependency on social welfare (Nash, 1990, p. 311).

**Extract 9.25**

[A]dolescents who give birth may fail to complete their education. They then have limited job opportunities which results in poverty and thus increases the strain on themselves and their families and the community (Mosidi, 1992, p. 3).
Extracts 9.21 and 9.22 make a clear association between education and the attainment of the rational economic man status. Disruption of the production of this economised self leads to ‘unemployment and poverty’, and ‘socio-economic deprivation’. This is depicted as having two costs: personal and societal. In Extract 9.23, we see how certain activities are accorded interest and prestige while others are relegated to the boring and unprestigious (and hence as lacking worth). The teenager is positioned as suffering personally as the interruption of her schooling means that she is confined to boring, unprestigious jobs. However, it is not only her personal freedom of choice (of future career or job) which the teenager is seen to disrupt through her non-continuation of education, but also the national economic security. In Extracts 9.24 and 9.25, the non-educated teenager is portrayed as depending on social welfare, and putting a strain on the ‘community’ (the former is somewhat misleading as no formal, government-backed social welfare is available for pregnant or mothering teenagers in South Africa; the issue of social welfare dependency does, however, feature strongly in the British- and American-based literature). The threat to economised security together with the humanitarian concern for the teenager’s personal well-being provide the impetus for the regulation of teenagers through increased pedagogisation. This takes two forms. Firstly, there is the vision of education as a preventive measure, and, secondly, education for those teenagers who are already mothers is advocated:

Extract 9.26

Die meeste dogters het net ‘n laer skool opvoedingspeil. Dogters met ‘n standerd 7 of hoër opleiding raak minder swanger. Verpligte onderwys tot ten minste standerd 7 of ‘n alternatiewe vorm van verpligte opleiding of diensplig moet dus ‘n prioriteit word veral met dogters vanuit ‘n lae sosio-ekonomiese agtergrond [Most girls have only a primary school education. Girls with a standard 7 or higher education are less likely to fall pregnant. Compulsory education until at least standard 7 or an alternative form of service must become a priority especially with girls from a lower socio-economic status] (De Villiers & Clift, 1979, p. 199).

Extract 9.27

Providing greater schooling and higher educational opportunities for girls and women in the communities studied [is a recommendation]. This in turn would lead to the achievement of self-esteem especially if linked to a loosening up of gender discrimination in respect to employment (Preston-Whyte, 1991, p. 50).
Extract 9.28

Of cardinal importance is the necessity for increasing these adolescent mothers’ educational levels. Public and private welfare agencies could initiate training schemes that would provide these young women with marketable skills (Boult, 1992, p. 17).

Extracts 9.26 and 9.27 take different political stances. In Extract 9.26, a sovereign-type of power is envisaged where force is used to make adolescent women comply with activities considered good for them, viz. education or at least some kind of service that will keep them from reproducing. Extract 9.27 advocates disciplinary technology where the subjectivity of the person, in the form of her self-esteem, is worked upon through education to produce the desired effects (viz. the economic woman who does not reproduce early). What is common to both is the assumption of the nature of schooling and the linear association between education and a ‘better’, economically productive life (see discussion later in this section). As seen earlier, security does not operate by defining what is acceptable or not in absolute terms. Instead, a bandwidth of possibilities with an optimal centre is invoked. In this case, education which occupies teenagers, and which produces the affectively actualised, responsible citizen who does not reproduce early, is depicted as the optimal. However, failing this, the production of teen mothers as the rational economic woman is instituted, as evidenced in Extract 9.28. The incitement to teen mothers to labour to produce an economised self contradicts the tenets of motherhood, however. The public/private split is in danger of collapsing. It is rescued, however, by the portrayal of teen mothers as unable to really benefit from schooling either through the conflict that is created between their private and public roles (Extract 9.29 below), or by their inherent inadequacies (Extract 9.30 below):

Extract 9.29

Teenage mothers who have returned to school are finding it difficult to perform a mother and a scholar role simultaneously. This inter-role conflict is likely to pose a threat to the teenagers’ education progress (Mkhize, 1995, p. 87).

Extract 9.30

Teenage mothers do realise that their priority is to continue with education. Some do not have the means and others are in a dilemma. The latter realise that continued education will be an endless effort due to their school performance which has always been poor (Mkhize, 1995, p. 15/16).
The revisionist literature attempts to rescue the teenager from her positioning as the disruptor of the production of the economised self. Consider the following quote:

**Extract 9.31**

It is common practice amongst blacks that the baby of the unmarried teenage mother be brought up or taken care of by the teenage mother’s parents. The baby is accepted and loved like all the children in the family. In the contemporary society in which there is a great value put on educational development, the unmarried teenage mother will normally go back to school to continue with schooling in preparation for a professional career, while her child is being taken care of in her parental home (Seabela, 1990, p. 97).

While trying to de-pathologise the teenager’s educational status (her child is well-cared for while she continues in activities which will produce economic reward), this passage falls prey to the same underlying assumptions concerning, firstly, the nature of education and, secondly, the relationship between education and the production of the rational economic man. These are discussed below.

The nature of education is seldom commented upon in the teenage pregnancy literature. It is assumed to be an unproblematic process of the transfer of ‘factual’ knowledge and rationality, and the acquisition of mastery over particular skills deemed necessary for the activities attributed to the rational economic man. Where the nature of education is commented upon, the comments belie the underlying project assigned to education. Consider the following extract:

**Extract 9.32**

The overall goal of education is to educate the child so that she may become a self-actualized woman who has achieved her full potential (Oosthuizen, 1990b, p. 10).

Education is thus presented as the labour which produces the liberal, free individual who is self-actualised and who fulfills her potential. This individual is the stuff of the rational economic man, individualised and self-contained.

A full deconstruction of education and schooling is beyond the scope of this thesis and the reader is referred to Walkerdine (1984, 1988, 1989, 1990) and Ball (1990) in this regard. However, a
short summary of some pertinent points will be made. The first is that schooling is a phenomenon of rather recent origin. Foucault (1977) mentions the emergence of the school and the classroom in the nineteenth century as one of the appartuses involved in the shift from the spectacle of punishment to disciplinary technology. Walkerdine (1990) comments on the rise of popular and then compulsory schooling thus:

The school was an arena for the development of one set of techniques for 'disciplining' the population. The emergence of ... schooling related specifically to the problems of crime and poverty, understood as characteristic of the population: criminality and pauperism. Schooling was seen as one way to ensure the development of 'good habits' which would therefore alleviate these twin problems (p. 20).

The school, in the teenage pregnancy literature, occupies much the same position. It is depicted as the terrain through which teenagers will come to act in a civilised, reasonable, self-regulating fashion, which includes not reproducing while young. Teenagers are incited to become agents in the production of their economised selves.

The second point relates to the knowledge gained through the process of education. This knowledge is presented in the teenage pregnancy literature as devoid of political or socio-moral content. It is seen as 'factual', unproblematically reflecting the real world of work, and leading to a mastery of reason as well as the skills required to render the world manageable. Walkerdine (1990) refers to this as the 'omnipotent fantasy of control over the workings of the universe' (p. 54), which, while a fantasy, has real and powerful effects. There is, furthermore, no acknowledgement of the political choices that are made in deciding what counts as knowledge and what does not. Just as certain activities are vested with economic worth (the public world of work), and others are not (the private domain of housework and child-care), so certain kinds of knowledge are given precedence over others. This is neatly summed up by Fashesh (1991), a mathematician, who contrasts his mathematics with that used by his uneducated mother who makes clothes without a pattern:

Without the official ideological support system, no one would have 'needed' my math; its value was derived from a set of symbols created by hegemony and the world of education. In contrast, my mother's math was so deeply embedded in the culture that it was invisible through eyes trained by formal education. Her math had no symbols of power (p. 58, my emphasis).
The third point relates to the way in which inequalities are denied through the invocation of the education discourse. The impression gained from the teenage pregnancy literature is that given the opportunity to attend school, females, and poor females in particular, will be able to reach the heights attained by the rational economic man. All that stands in their way is their recalcitrant attitude to the attendance of school. This language of equality masks the gendering effects of schooling which has been documented elsewhere (see, for example, Macleod, 1995; Walkerdine, 1984, 1989, 1990).

**Teenage pregnancy and poverty: the fracturing of population control**

Gordon (1991) comments on Foucault’s treatment of security as follows: ‘Whereas sovereignty has as its object the extended space of a territory, and discipline focuses on the body of the individual (albeit treated as member of a determinate collectivity), security addresses itself distinctively to “the ensemble of a population”’. Although this clearly refers to processes much wider than population growth and control, it is indicative of why the rhetoric surrounding these issues (population growth and control) is so saturated with concerns with security. Consider the following extract:

**Extract 9.33**

The main area of concern is the effect that teenage child-bearing has on the time gap between generations. The younger the average mother is at the time of the first birth, the less time is needed to reproduce a second generation and consequently the higher the population growth. Thus for a country in which the rate of population growth outstrips the rate of economic growth, considerable advantages can be gained from investment in youth-oriented family-planning clinics, education and other measures aimed at the postponement of the first birth and the encouragement of the use of modern contraception (Preston-Whyte, 1991, p. 11/12).

We see here how teenage mothers are positioned as posing a threat to the economised security of the country by contributing to a high population growth which ‘outstrips’ the economic growth. The population, which emerged as a problem in the science of government at the same time as the recentring of the economy on a different plane from the family (Foucault, 1991a), is monitored, its numbers, increase and economised output measured. The juxtaposition of the linear increase of the population with that of the economy (the calculation of comparative cost
mentioned earlier) provides the grounds for rational concern, which is translated into a need for expert intervention (youth-oriented family-planning clinics). It is interesting that this need for professionalised assistance is posed in the economised term of ‘investment’. The implication is that the economised activity of professional support will counter the economic problems created by the non-economised (and economically draining) activity of early reproduction.

The language of threat concerning the demographic consequences of teenage pregnancy is pervasive. Consider the following extracts:

**Extract 9.34**

Die demografiese ramp wat Suid Afrika in die vooruitsig staar is in ‘n groot mate afhanklik van ons hoë insidensie van tienerswangerskappe. [The demographic catastrophe which faces South Africa in the future is to a large extent dependent on our high incidence of teenage pregnancy] (De Villiers, 1991, p. 231, my emphasis).

**Extract 9.35**

[B]old and positive steps are called for if the tide of black and coloured teenage pregnancies is to be reversed (Preston-Whyte, 1991, p. 46, my emphasis).

**Extract 9.36**

Die bevokingsontploffing [can] sekerlid in die R.S.A as die mees prominente probleem van die eeu beskou word [The population explosion [can] surely be viewed as the most prominent problem of the century in the R.S.A.] (Dreyer, 1991, p. 55).

The words ‘catastrophe’, ‘explosion’ and ‘tide’ invoke images of disaster and of being swamped, images common to the general literature on population control (Yuval-Davis & Anthias, 1989). This creates the impetus for action on the part of the relevant authorities:

**Extract 9.37**

As a youthful population, subject to a low level of education, the necessity to be educated in health matters and procreation in particular becomes even more pertinent if the country is to avoid the burgeoning population and economic problems faced by most of Sub-Saharan Africa (Boult & Cunningham, 1993, p. 59/60).
If population limitation and decrease are national goals, serious and urgent consideration must be given to the legalization of abortion and the provision of a safe and relatively inexpensive service of this nature (Preston-Whyte, 1991, p. 51).

The incitement to expert intervention on the basis of national security or welfare differs somewhat to that formulated on the basis of humanitarian concern for the teenage woman and her child. In the latter, the nature of adolescence is seen as the antithesis of child-bearing. The posited personalised negative outcomes for the teenager and her child provide the legitimation for the expert in his/her role as beneficent carer to assist, support, prevent, counsel and generally render the teenager true to herself in terms of the tenets of ‘normal’ adolescence. However, when the notion of population growth and control is raised, the language of alarm (note the words ‘burgeoning’, ‘serious’, ‘urgent’ in Extracts 9.37 and 9.38) and the implication of threat to prosperity positions the expert more in the role of the protector of the common good (as in the science of police) than of humanitarian carer of the adolescent. Sex education and abortion become matters of ‘national’ concern, affecting the whole ‘country’. Thus, the medicalisation, psychologisation and pedagogisation of adolescent sexuality and reproduction are legitimated not only by a humanitarian concern for the adolescent and her child, but also by considerations concerning national security and prosperity. We see in the extracts above how appeals are made for the installation of pedagogisation (Extract 9.37) and sanitary science (Extract 9.38) on the basis of the threat posed to the common good by early reproduction.

Expert intervention on the basis of national security is further invoked by: (1) universalisation of the problem; and (2) the use of statistical ‘evidence’. Each of these is illustrated in the quotes below:

Extract 9.39

Demographers and policy-makers all over the world are concerned with the demographic consequences of early reproduction and the impact it has on fertility and population growth (Preston-Whyte, 1991, p. 11).
Dit is belangrik om daarop te let dat Suid-Afrika van die lande is wat die grootste bevolkingsgroei toon. In 1900 was die bevolking 5 miljoen, in 1975 het dit gestyg tot 22 miljoen en na raming sal dit tot 47 miljoen in die jaar 2000 groei [It is important to note that South Africa is one of the countries with the largest population growth. In 1900 the population was 5 million; in 1975 it had risen to 22 million, and it is estimated that it will grow to 47 million by the year 2000] (Dreyer, 1991, p. 55).

Foucault (1991a) traces the shift in the use of statistics from the time when they worked to benefit (in a mercantilist tradition) the monarchical administration to when they became one of the major technical factors in the technology of the government of the population and the economy. Statistics ‘revealed’ that the population had its own regularity and aggregate effects; it rendered the population amenable to scrutiny. As Hacking (1991) points out, the bureaucratic machinery that collects statistics has engendered a range of concepts in the human sciences. ‘It may think of itself as providing only information, but it is itself part of the technology of power in a modern state’ (Hacking, 1991, p. 181). The use of statistics to denote disaster together with the appeal to the universality of the problem in the above quotes imply that the only rational path is for the intervention of the professionals who, it is assumed, are not prone to reproductive excesses.

The discourse of population control creates a split, between those who tend to reproduce excessively and those who don’t. The latter are positioned as rational, controlled, and sensible about family matters, while the former take on the aspect of the Other - irrational, uncontrolled and lacking sense. The Other becomes the repository of all that is opposite to the rational economic man. In the context of teenage pregnancy, it is the young who most obviously occupy the position of the Other. Less obviously, but nevertheless pervasively, it is the poor and ‘blacks’ or ‘coloureds’ who are situated as breeding uncontrollably:

In the rich countries, death rates have fallen to very low levels, but birth rates have also dropped. In poor countries, birth rates have remained high while at the same time dramatic cuts in the death rate have been achieved. ... South Africa represents a microcosm of the world’s demographic situation. The whites, with a higher standard of living and smaller numbers, correspond to the Western developed countries, while the non-whites, with a lower standard of living, and higher numbers, correspond to the poor countries of the world. ... The increase of the Coloured population hinders their socio-
Economic development. (Van Regenmortel, 1975, p. 2/3).

**Extract 9.42**

Kulturele betekening van tienerwangerskap: in die swart bevolking is tienerwangerskap nie ‘n wesenlike probleem vir die tiener nie. Slegs die gemeenskapswerkery, onderwysers, gemeenskapleiers en die ouers is bekommerd daaroor vanweë die geweldige groei van die swart bevolking [Cultural meaning of teenage pregnancy: in the black population teenage pregnancy is not a major problem for the teenager. Only the social workers, teachers, community leaders and parents are worried about it because of the tremendous growth of the black population] (Brits, 1989, p. 203, emphasis in the original).

**Extract 9.43**

Gesinsgroottes onder blankes in die R.S.A. toon ‘n afname. In die verlede het die gesin uit heelwat kinders bestaan aangesien kinders as ‘n ekonomiese bate beskou is met die addisionele paar hande wat kon werk en geld inbring. ... Tans blyk dit dat kinders verwek word om die volwassenes psigiese- en maatskaplike behoeftes te beveel. Gepaardgaande hiermee, het die ouer-kindverhouding aansienlik verbeter [Family sizes have shown a decrease amongst whites in the R.S.A. In the past, the family consisted of several children as children were seen as an economic asset with the additional pair of hands that could work and bring money in. It appears presently that children are conceived to satisfy the psychological and social needs of the adults. Together with this, the parent-child relationship has improved considerably] (Dreyer, 1991, p. 55).

In Chapter 9, I analysed the process of racialisation in the teenage pregnancy literature, and how ‘blackness’ (or ‘colouredness’) is accorded pathologised presence. In the above quotes, we see how this process is further entrenched through the discourse of population growth. Extract 9.41 equates the desirable (the ‘West’, wealth, low birth rates) with ‘whites’. The non-desirable (poverty, many births) is attributed to ‘non-whites’ or ‘coloureds’. ‘Coloureds’ are rendered culpable for poverty and for the ‘disaster’ attendant on population growth. In Extract 9.42, the technology of culturalisation (obliquely) masks the process of racialisation. ‘Blacks’ are portrayed as breeding uncontrollably, although the experts are partially rescued by their rational response of being worried about it. Extract 9.43 depicts ‘whites’ as having developed past the situation where they require children to help support them. They have become more like the rational economic man who bears the financial responsibility for his family, which in turn provides the emotional haven he requires. They have achieved the status of liberal individuals who have psychological and social needs and who labour at the relationship they have with their children.

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The split between the poor, ‘black’, irrational excessive breeders and the rational, middle-class, ‘white’ reasoned reproducers is evidenced in the way in which the notion of over-population is conceptualised. The gross number of people is calculated and this is compared with resources. The quantity and type of resource utilisation by various groups of people are not considered. The conceptualisation of over-population in terms of numbers of people makes it possible for the rational (usually middle-class, most often ‘white’) expert to pathologise poor, ‘black’ people as they (poor, ‘black’ people) tend to have more children than do middle-class people. Were the quantity and type of resource utilisation to be brought into the equation, middle-class and wealthy people would cease to fare so well in terms of being exempt from the fracturing of economised security, as their per capita consumption of resources far exceeds those of poor people.

The revisionist literature attempts, in part, to reverse the pathologisation of blacks as uncontrollable breeders. Consider the following quotes:

**Extract 9.44**

Cultural values such as that [sic] placed on fertility in many parts of the black community need to be recognized, as does the widely held belief in the black community that the fostering of contraception and family-planning strategies by government agencies is merely a cloak for attempts to limit and control the black population (Preston-Whyte, 1991, p. 46).

**Extract 9.45**

The high value placed on fertility and its proof in childbirth should prepare us for some resistance to ‘family planning’ (Preston-Whyte & Zondi, 1989, p. 63).

We see in Extract 9.44 how the process of culturalisation and the ‘contextualisation’ of the issue within a political field are used to render teenage pregnancy understandable. However, the racialised boundaries remain intact, and the positioning of blacks as uncontrollable breeders stands, albeit in a supposedly comprehensible form. Furthermore, ‘culture’ is associated with ‘beliefs’ and ‘values’ in implicit juxtaposition with scientific ‘facts’. Exactly who is doing the recognising of these values and beliefs remains unstated. The ‘us’ in Extract 9.45 are presumably those who do not resist ‘family planning’, who do not need to prove fertility, those writing and those reading the text. Here, as elsewhere in the revisionist literature, the language of understanding and tolerance masks the operation of power, as well as the assumption of certain
actions and positionings as normal, and the rendering of others as in need of explanation and comprehension.

In this section, we have seen how the teenage pregnancy-poverty link serves as a reciprocal chain of pathologisation. Teenage pregnancy, which is depicted as promoting poverty and vice versa, becomes a matter of ‘national’ concern as the poor pregnant teenager fractures economised security by refusing the production of her economised self while at the same time contributing to the potential ‘disaster’ of unchecked population growth. This positioning of the poor as fracturing economised security allows for the endless monitoring of the poor, their familial alliance, their parental styles, their sexuality, and their health and well-being. This surveillance, in turn, legitimates the intervention of the expert in the name of upliftment of the poor from their position of disadvantage. The latter is carried out with humanitarian concern, the unstated aim of which is to attempt to create the poor in the image of the rational economic man, whose familial life, parental style, sexuality and health and well-being are tacitly accepted as the norm.

In the following section, I delineate how the intervention of the expert is legitimated through the portrayal of the poor as fracturing: (1) their own bodily and psychological harmony through, *inter alia*, the intrusion of disease, death and contrary attitudes; and (2) the proper functionalisation and formation of the family.

**Teenage pregnancy and poverty: the fracturing of bodily and psychologised harmony**

**Extract 9.46**

It is not uncommon for teenagers who fall pregnant early in life to have a repeat pregnancy quite soon, leading to larger families and greater financial burdens. ... The standard of life and the general health of the whole family are subsequently almost always effected [sic]. Children of teenage parents are thus obviously born with a disadvantage in life, as their situation seldom constitutes optimal conditions for emotional and physical development (Schoeman, 1990, p. 14).

In Extract 9.46 we see how the poor disrupt the tenets of an acceptable emotional and physical development. The optimal conditions referred to and the end point of ‘good’ emotional and
physical development remain unstated. They are the ‘taken-for-granted’, the normalised absence. What is foregrounded is the poor family who has failed to achieve a satisfactory ‘standard of life’ and ‘general health’ (The use of word ‘standard’ in this context is important; it belies the underlying technology of calibration which allows for the positioning of poor families as deficient).

The poor fracture bodily harmony through the transmission of illness and the intrusion of death, as evidenced in the following quotes (which overlap the technologies of racialisation and economisation by invoking blacks and the poor as the Other):

**Extract 9.47**

This [the condition in which teenage pregnancy occurs] leads to the development of an ‘underclass’ in which, owing to social and environmental circumstances, black people in particular are trapped and in which the rapid heterosexual spread of HIV infection is almost inevitable (Preston-Whyte & Zondi, 1991, p. 1393).

**Extract 9.48**

The effects of the protracted economic downsewing [sic] ... in this country with its concomitant high unemployment, particularly among Blacks, is reflected in the high percentage of infant mortality (Boult & Cunningham, 1993, p. 57).

In these extracts, the poor, who are concomitant with ‘blacks’, disrupt bodily harmony through the spread of HIV, and infant mortality. In Extract 9.47 the use of the humanist phrases ‘owing to social and environmental circumstances’ and ‘black people ... are trapped’ is off-set by the use of the word ‘underclass’, which belies the power relations in operation between the expert researcher and the poor people investigated (‘Under whom? Who defines whom as underclass?’ one has to ask).

In addition to the rupturing of bodily functioning, the poor are positioned as deficient in a psychologised sense. Consider the following passages which invoke the psychologised notions of attitudes and the cognitive ability to plan:
Extract 9.49

[A] long history of limited job opportunities, economic deprivation, and the restriction of political rights which might have led to better social conditions, seems to have produced attitudes of fatalism and defeatism in the community at large. For all the women, and particularly the younger women, who were interviewed the future seemed to offer nothing to warrant so-called ‘sensible’ attitudes to pre-marital pregnancy (Preston-Whyte & Allen, 1992, p. 221).

Extract 9.50

The concept of family planning assumes that one has or can control one’s destiny and plan for tomorrow. However, the political climate and the level of poverty in South Africa do not allow the average South African the luxury of planning for the future, let alone determining their destiny. This cannot be expected of people living from hand to mouth (Setiloane, 1990, p. 10).

In Extract 9.49, what constitutes ‘sensible’ attitudes to pre-marital pregnancy remains unstated (despite the authors’ apparent acknowledgement of the situatedness of these ‘attitudes’ through the use of quotation marks and the words ‘so-called’). The type of future which would allow sensible attitudes to pre-marital pregnancy also remains the tacit backdrop which, it is assumed, needs no explanation. The assumption of proper ‘attitudes’ to pregnancy and that people should have particular futures allows for the relegation of the poor to psychologised pathology. The words ‘fatalism’ and ‘defeatism’ perform important functions in Extract 9.49. They imply a state of passivity, a state in which the poor cannot help themselves. In Extract 9.50, we see how the poor are depicted as incapable of the cognitive ability to plan. This serves to infantilise poor people as they are unable to engage in the adult activity of planning. What is achieved in the above extracts, through the portrayal of the poor as the passive victims of circumstances, is the legitimation of the intervention of the understanding expert who assists the poor in curbing the spread of HIV, reducing infant mortality, developing ‘sensible’ attitudes to teenage pregnancy, and in planning ‘responsibly’ for their future.

Teenage pregnancy and poverty: the fracturing of familialisation

In their position as the pathologised presence of the rational economic man, the poor are depicted as fracturing normalised familial functioning and formation (see Chapter 7 for a fuller discussion...
of the familialisation of alliance):

**Extract 9.51**

Die meeste van hierdie dogters het ‘n lae sosio-ekonomiese agtergrond. Die ouers in hierdie klas het ook min invloed op of belangstelling in hulle dogters. Die gevolgtrekking is dat die gesinverhouding nie betekenisvol gebruik kan word om hierdie toestand te verhoed nie [Most of these girls have a low socio-economic background. The parents in this class have little influence over or interest in their daughters. The conclusion is that family relations cannot be meaningfully used to prevent this situation] (De Villiers & Clift, 1979, p. 199).

**Extract 9.52**

Poverty, poor and overcrowded housing, few community recreational facilities, and high unemployment are the most striking and consistently reported concomitants of early births in the Cape. ... However, in considering the social background of girls who have babies before marriage, a number of additional themes tend to recur. They centre on what is often referred to in the literature as ‘poor home background’, in particular, ‘a lack of parental interest and control’ and poor communication between parents and children on sexual matters (Preston-Whyte & Allen, 1992, p. 212).

**Extract 9.53**

All [factors] pointed to poverty, overcrowding, lack of recreational facilities and to the fact that many mothers have to work in urban areas and that both they and the fathers experience difficulty in controlling the free-time activities of their children (Preston-Whyte, 1991, p. 28).

**Extract 9.54**

The social consequences were seen to be those associated with the additional economic burden of another infant in the household, and those associated with further breakdown of family life and coherence in the Township environment (Craig & Richter-Strydom, 1983a, p. 240).

We see in Extracts 9.51, 9.52 and 9.53 how the poor family is positioned as refusing the functionalisation of the family. Family members are depicted as not taking affective responsibility for the daughters (Extracts 9.51 and 9.52 - they lack ‘interest’), as neglecting to engage in the confessional (Extract 9.52 - ‘poor communication’), and as unable to promote responsible behaviour in their children (Extracts 9.52 and 9.53 - they exercise little ‘control’ over the actions of their daughters). The poor family hence is portrayed as abdicating its responsibility in producing the rational, liberal, self-contained, normalised individual. In Extract 9.54, the
‘broken’ family is associated with poverty and the breakdown of traditionalism in the township environment (see Chapter 8 for discussion on the traditionalisation of ‘black’ people).

The mother-child dyad of poor families is foregrounded and pathologised through the ‘mothering as a skill’ discourse and the infusion of ‘Bowlbyism’ in the literature:

**Extract 9.55**

[I]t is clear that social and economic deprivation militate against the development of a wholesome relationship between the young mother and her child. A young girl who lacked love and stability in her childhood is unlikely to have developed parenting skills to provide and sustain a loving and secure environment for her children (Loening, 1992, p. 86).

An opposition is created here between poverty and the development of mothering skills. In Chapter 7, I indicated that the invocation of the ‘skill’ as opposed to the ‘natural’ discourse of mothering had the strategic effect of excluding adolescents from ‘good’ mothering on the basis of their age. Its deployment in this passage achieves the dual function of positioning adolescent and poor mothers outside the boundary of skilful mothering. A further opposition is posed between poverty and the interlocking notions of security and love (it is assumed that security and love are features of middle-class homes). This is reflected in Walkerdine and Lucey’s (1989) work on the positioning of working class women in Britain as bad mothers. They indicate that the supposed ‘democracy’ between mothers and children which prevails in the kitchen of middle class families (as opposed to the overt conflict in evidence in working class homes) masks the operation of power and renders conflict covert.

The discursive positioning of the poor as fracturing familialised functions and formation allows for the intervention of the psycho-medical expert, who takes on the aspect of the normal, stable, middle-class person with an ‘intact’, conjugal, ‘functional’ family background. This intervention need not be direct. As mentioned in Chapter 7, the application of disciplinary technology (working on the desires and aspirations of parents and families through the scientific explication of beneficial familial relations and formation) and the incitement to self-surveillance in the family may be sufficient. However, the avenue of direct intervention in the families of poor people remains open. We see in Extract 9.51, for example, the statement that ‘family relations’ of poor
people] cannot be meaningfully used to prevent’ teenage pregnancy; this implies that the expert must take charge.

Conclusion

The governmental tactic discussed in this chapter, the economisation of activity, is deployed in the teenage pregnancy literature to: (1) produce particular gendering effects; and (2) simultaneously pathologise teenage pregnancy and poverty by discursively positioning them as a threat to ‘national’ economised security, thereby legitimating the regulation of the poor pregnant teenager and her family through increased pedagogisation and the surveillance of their bodily, psychological and familial functioning. In order to act as a tactic of government, the economisation of activity makes two basic assumptions, viz. the reality of the rational economic man, and the necessity of the private-public split with public activities invested with economic worth and private ones not. The rational economic man, who performs public activities invested with economic worth, is masculinised. This allows women four basic positions with regard to the economisation of activity: the dependent, the economic, the loose woman, and the poor woman. Each of these ‘women’ (as discursive positions) occupies the non-economised, private domain in a fundamental (rather than custodial) manner. The economic woman is allowed into the realm of the rational economic man, but remains responsible for matters of the home and family. In the context of the teenage pregnancy literature, it is the poor (often ‘black’) woman who is forefronted as the pathologised presence. Because the private sphere is, firstly, feminised, and, secondly, non-economised, a state of poverty is depicted as the natural consequence of a female (especially a young one) bearing children outside a conjugal partnership with a man, viz. of the woman who forms the pathologised single female parent family.

The economisation of activity renders those falling outside of its domain deviant. The poor who, in this context, become equated with the pregnant teenager, occupy the position of the Other. It is not only their economic recalcitrance that is at issue, but also their personal and social being, as they are seen to fracture the basic tenets of bodily and psychologised harmony, and the functionalisation of families. The rendition of the poor as victims of circumstances in their physical, emotional, and familial misfortunes (a reading that requires the normalisation of certain,
unstated physical, emotional and familial states of being) legitimates the intervention of the
beneficent expert. Contrarily, the positioning of the poor as disrupting economised security
through, *inter alia*, their tendency to breed uncontrollably and their refusing the production of
the economised self is infused with a language of threat and alarm which invokes the expert as
the protector of the common good rather than as the humanitarian care-giver for the adolescent
and her child. Dominant discourses concerning the timing and context of reproduction and
proper economic activity are entrenched through the appeal to ‘national’ security, societal
stability and the welfare of the ‘country’. Furthermore, universalisation and statistics which
‘reveal’ the disastrous tendencies of the population are used to legitimate technologies of
population control implemented by those vested with the maintenance of security. These latter
are assumed to be the opposite of the poor and the pregnant teenager - they are rational,
controlled, sensible, and reproduce *in small* numbers.

In his course of lectures at the Collège de France, Foucault indicated how, in Becker’s economic
analysis of crime and crime prevention, *homo economicus* is utilised to drive out *homo criminalis*
(Gordon, 1991). In much the same way, the rational economic man is depicted in the teenage
pregnancy literature as being the antithesis and hence the solution to the vexing twin problems
of teenage pregnancy and poverty. In contradistinction to the pregnant teenager, the rational
economic man is controlled and rational (whereas she contributes, through her irrational
behaviour and tendency to experiment, to uncontrolled population growth); he labours to produce
his economised self (whereas she interrupts her schooling); he engages in activities within the
public sphere, activities which are accorded economic worth (whereas she presides in the private
domain where activities are relegated to the status of ‘not work’). As such, the production of the
*homo economicus* in the teenager is posited as the amelioration of the teenage pregnancy/poverty
dilemma through, *inter alia*, pedagogisation. There is, however, a paradox that creeps into the
teenage pregnancy literature. Various gendered incongruencies disallow the simple proposal of
*homo economicus* driving out the poor pregnant teenager in the same way as it was proposed that
he be used to drive out *homo criminalis*. Firstly, the rational economic man is masculinised
while poverty and domestic or maternal duties are feminised. Therefore, the economic woman
is never equivalent to the rational economic man as she either has to forego child-bearing or
remain responsible for domestic/maternal duties. Secondly, the teen mother is defined as
dependent (although in a deviant form), and therefore is portrayed as not really being able to benefit from the education designed to produce her as an economised being. Thirdly, the schooling that is promoted as a preventive and remedial strategy in teenage pregnancy has gendering effects, as documented elsewhere.

To conclude this chapter on the economisation of activity, let me quote Foucault (1991a) who, in his paper on ‘Governmentality’, states:

This, I believe, is the essential issue in the establishment of the art of government: introduction of economy into political practice. ... To govern a state will therefore mean to apply economy, to set up an economy at the level of the entire state, which means exercising towards its inhabitants, and the wealth and behaviour of each and all, a form of surveillance and control as attentive as that of the head of a family over his household and his goods (p. 92).

in the surveillance of economised security, and in the deployment of the tactics of governmentality, it is the expert who is the attentive head of the family. In the following chapter, I turn to the technical means by which this surveillance and the tactics of governmentality elucidated in the last five chapters are installed in the everyday lives of teenagers, viz. through the mechanisms of security deployed by service providers in their interaction with teenagers in sexuality education programmes, counselling sessions, antenatal care and the termination of pregnancy.
CHAPTER 10
SERVICE PROVIDER PRACTICES:
TECHNOLOGIES OF SECURITY

Foucault (1991a) indicated in his description of governmentality that one aspect is 'the development of a whole complex of savoirs' with the 'essential technical means [of governmentality being] apparatuses of security' (p. 102). In Chapters 5 to 9, I have explicated the 'complex of savoirs', or what Miller and Rose call intellectual technologies, surrounding teenage pregnancy in South Africa. In this chapter, I analyse the 'technical means' by which the tactics of governmentality described in previous chapters are installed in the everyday lives of teenagers, viz. through the 'apparatuses of security' operating at the interface between the teenager and the expert. The interface that I have chosen to investigate in this regard is the one between teenagers and service providers at a regional hospital, rather than, for example, the interface between teenagers and researchers conducting interviews, questionnaires, etc. The reason for this is threefold: (1) accessing service providers dealing with adolescent sexuality and reproduction is much easier than accessing researchers working in this area; (2) the former interface occurs much more frequently than the latter, and hence is the site where the technologies of security are most apparent; and most importantly (3) the primary job description of service providers is to assist, care, cure and generally manage the health and ill-health of patients while the primary job description of researchers is to investigate and describe the truth, with helping as a secondary aim; therefore service providers are most clearly defined as being involved in the 'conduct' of people's conduct.

As indicated in Chapter 2, Foucault saw security as a specific principle of political method and practice. Although security is distinct from pastoral care, the science of the police, sovereignty, and discipline, it combines with these practices in order to produce its effects. For example, it operates within the science of police through the interweaving of security with prosperity, and therefore the happiness of the individual with the economic well-being of the population. Thus (as seen in Chapter 9), the expert becomes the protector of the common good, ensuring that
actions which fracture economised security (such as teenagers' tendency to reproduce at an early age, and therefore to add to the threat of population growth) are monitored and classified, and that interventions are instituted as a matter of 'national' as well as 'individual' concern. In liberalism, security operates by insisting on liberty, by ensuring the 'natural' processes intrinsic to the population. The expert's task is to set in motion forms of regulation that facilitate the unfolding of these natural processes, the nature of which is known in detail by the expert through access to scientific knowledge. In pastorship, security is installed through the shepherdship of the leader, who cares for and guides the members of the flock who, in turn, are encouraged in the technologies of personal submission, renunciation and mortification. Foucault saw the present forms of government as having their roots in disciplinary technology, pastorship, a reason of state, the science of police and the advent of liberalism (Gordon, 1991). The mechanisms of power in modern governmentality form a complex ensemble of the techniques of all of these forms of government. In Chapter 9, we saw how the techniques of the science of police (the connection of security with prosperity; the expert as the protector of the common good, ensuring the health and welfare of all) are deployed in descriptions in the scientific literature with regard to teenage pregnancy. In this chapter, I analyse how the techniques of pastorship and of liberal humanism are utilised (interchangeably) by service providers in the service of security.

The chief mechanism of security deployed by the service providers, whether through the techniques of pastorship or of liberal humanism, is the management of risk (of which the management of error forms a part). The management of risk is intricately interwoven with the advent of the insurance technique in the middle of the nineteenth century (Gordon, 1991). The insurance technique illustrated the

superiority of the notion of collective solidarity over that of individual responsibility precisely on the question of accidents at work. ... [A]ccidents [became] effects of an unwilled collective reality, not of an individual will but effects arising from the general division of labour which, by making all actors interdependent, results in none being in a position to assume full responsibility (Donzelot, 1993, p. 111).

Thus we have what Donzelot calls the socialisation of risk. Fate, fortune, destiny, which are individual matters over which little control can be exercised, are replaced with risk, the combination of abstract factors over which the collective may exercise vigilance and management (Castel, 1991; Kendall, 1995). In the case of teenage pregnancy, the socialisation of risk operates
partially through the collective’s contribution of taxes to the establishment of Youth Health Centres, School Health Services, Antenatal Clinics, and Termination of Pregnancy Clinics. These institutions represent the collective’s insurance against the risk of teenagers contributing, firstly, to social problems and, secondly, to demographic disaster through early reproduction.

The service provider becomes the insurer of the physical, emotional and social well-being of the adolescent and her child, as well as the protector of the common good, through the application of the governmental tactics of medicalisation, psychologisation and pedagogisation. The management of risk is achieved not only by the collective’s investment in institutions of health and welfare, however, but also by installing risk management at the individual level. The pastoral technique of warning and fact-telling, the liberal humanist techniques of individualisation and the provision of the confessional space, and the technologies of governmental self-formation (each of which will be discussed in this chapter) are utilised to render the adolescent and her family responsible for the overseeing of their own conduct and the associated risks.

The insurers’ task, however, is not merely to passively register the existence of risk, and then offer guarantees against them. Instead, they ‘produce risks’ (Ewald, 1991, p. 199). They must identify problems in potentia and hence prescribe prophylactic techniques to pre-empt their occurrence. To be subjected to a programme of risk prevention it is no longer necessary to display symptoms of dangerousness or abnormality, but rather to possess the characteristics which specialists consider to be risk factors. The possibilities for intervention become endless, for ‘what situation is there of which one can be certain that it harbours no risk, no uncontrollable or unpredictable chance feature’ (Castel, 1991, p. 289). The problematisation shifts from pathology to normality, with normality as the fragile outcome of averting risk (Rose, 1992). For example, sexuality education programmes, aimed at guiding desire in ‘appropriate’ directions, are not instituted merely for sexual recalcitrants. One needs merely to be teenager for it is to be considered essential that one undergo such a prophylactic intervention.

The method of security has three general traits, viz. it: (1) deals with series of possible and probable events; (2) evaluates through the calculation of comparative cost; and (3) does not prescribe an absolute demarcation between right and wrong, but rather ‘by the specification of
an optimal mean within a tolerable bandwidth of variation’ (Gordon, 1991, p. 20). In this chapter, I analyse how these features of security are deployed in the management of risk with regard to teenagers’ reproductive capacities. The specification of the possible and probable events following early reproduction, together with the comparison of the cost of leaving parents and adolescents to their own devices with the cost of service providers’ intervention, provide the justificatory strategies needed for the technologies of risk management. The management of risk does not extend only to the prevention of teenage pregnancy, but also to the amelioration of effects attached to actual pregnancy. The bandwidth of possibilities referred to above implies that the management of risk includes the occurrence of pregnancy. The act of error (conceiving a child) merely sets into motion a new set of risk management strategies.

The chapter is organised in the following way. The collective’s investment in reproductive health and welfare is elucidated in terms of a description of the units dealing with the possibility or actuality of teenage pregnancy at the regional hospital utilised in this research. The governmental tactics implicated in the functions carried out in these units are discussed. This is followed by an exploration of the strategies used by the service providers to justify their interventions (viz. the specification of possible or probable events following uninformed sexual interactions and early reproduction, and the calculation of the comparative costs of intervention and non-intervention) as well as the power relations set up between themselves and adolescents and parents. Finally, the governmental techniques (pastoral power and warning and fact-telling; liberal humanism; the incitement to technologies of the self; and sovereign power) utilised in the production and maintenance of adolescent reproductive health and welfare security are explicated.

The collective’s investment in reproductive health and welfare

As indicated earlier, the collective insures against the increase of social and demographic problems supposedly attendant on early reproduction through its investment in the establishment and maintenance of various units which deal either with the prevention or the ‘treatment’ of teenage pregnancy. There are four units at the regional hospital (which is described in Chapter 3) featured in this study which deal with the possibility or actuality of teenage pregnancy, viz. the
Youth Health Centre (YHC), the School Health Services, the high risk Antenatal Clinic and the Termination of Pregnancy (TOP) Clinic. The preventive programmes (such as the holiday programme, sexuality education in the schools, and contraceptive counselling in the Youth Health Centre) are instituted, inter alia, to manage the risk of teenagers conceiving. The 'curative' aspects (ante-natal care, termination of pregnancy, counselling by a social worker) are about the management of a new set of risks which the error (pregnancy) invokes. The focus here is on the prevention either of future problems regarding the child or of further error on the part of the mother.

The two units which deal with the prevention of teenage pregnancy are the YHC and the School Health Services. Teenagers present at the YHC for counselling concerning sexual issues or other matters of concern. They are given contraceptive advice on request, and are issued with contraceptives. Officially, the age catered for is up to 20 years. After that, people are referred to the Municipal Clinic, which is where adults may collect contraceptives. However, if the woman is still at school, university or technikon, she may go to the YHC even if she is well into her 20s. The construction of 'youth', thus, is not strictly attached to age, but centres, in some respects, around the degree of dependency assumed when a person is a student (see the discussion on the construction of adolescence in Chapter 6). This arrangement also indicates how interventions are geared to deal with the potential disruption of the economised self (through education) which is assumed to accompany early reproduction. Once the young woman is no longer attending an educational institution, it is assumed that her life is not disrupted through pregnancy, as the feminine is associated with the private which includes child-rearing.

The school health nurses visit schools, performing a variety of preventive functions, such as health monitoring and the presentation of talks on hygiene. One of these functions is sexuality education. These nurses together with the staff from the YHC organise holiday programmes for adolescents each year, in which a number of topics, including sexuality, are discussed. The YHC and the offices of the school health nurses are on the hospital grounds, but are separate from the main hospital building. The implication of this spatial arrangement is that teenagers who receive the services rendered by the YHC or the School Health Services are not really ill and therefore should not be made to go to the hospital proper. However, the situation of the units within the
hospital grounds give lie to the medicalisation of teenager’s sexuality.

Pregnant teenagers may present at the hospital either at the Antenatal Clinic or the TOP Clinic. The Antenatal Clinic is fed by the hospital’s satellite clinics. It is the ‘high risk’ clinic to which any woman with problems considered dangerous to the course of the pregnancy (such as high blood pressure, anaemia, previous caesarian section, diabetes) are referred. All women 17 years and younger are automatically referred to the hospital Antenatal Clinic, as they are considered high risk, especially for cephalopelvic disproportion (where the pelvis is too small for the passage of the baby during birth). At the Antenatal Clinic, their blood pressure and urine are monitored, the foetus’s heartbeat is listened to by a doctor, and palpations and measurements conducted. Scans are performed only in selected cases, for example, with those women who have previously had a caesarian section, or where there is a discrepancy between the date estimated from the palpation and the date given by the woman. The woman’s details are then entered into a register and she is issued with vitamin tablets. Those with ‘social’ problems are counselled either by one of the nurses or by the social worker. Significantly, all teenagers are considered to fall into this category.

At the TOP Clinic women may request abortions up to the 12th week of pregnancy. After this, up to the 20th week, abortions may be performed if, in the opinion of a medical practitioner, continued pregnancy will pose a threat to the woman’s physical or mental health, the foetus is likely to be severely physically or mentally abnormal, the pregnancy resulted from sexual abuse, rape or incest, and finally, if continued pregnancy will significantly affect the woman’s social or economic circumstances. A woman coming for termination of pregnancy first presents at the Out Patient Department. She is sent for a pregnancy test and ultrasound, after which she is counselled either by the hospital social worker or by a nurse. She may refuse the counselling should she wish, but has to sign a form to this effect. Some time is allowed to elapse between the woman’s first presentation and the actual procedure in order to allow her to reconsider her decision. She is given tablets that induce the foetus to take in the evening and morning before the actual abortion. Sometimes the abortion is spontaneous, with the foetus ‘evacuating’ without assistance during the night. Otherwise the doctor inserts a spatula into the woman’s cervix in order to complete the procedure. The women are encouraged to come to post-abortion counselling but
The management of risk concerning the possibility or actuality of teenage pregnancy instituted at this hospital involves thus a combination of medicalisation, psychologisation and pedagogisation. In their counselling and presentation of sexual education talks, the service providers of the YHC and School Health Services utilise the tactics of social medicine, pedagogisation and psychologisation. All teenagers are incited to be involved in the production and maintenance of sexualised health and welfare. They are rendered truthful to the tenets of normalised adolescence and adolescent sexuality in the pedagogical and confessional space. At the same time, the pedagogical and psychologised gaze determines whether teenagers are developing according to normalised patterns of sexual development, and further preventive programmes are instituted where actual or potential deviance is found.

Psychologisation and social medicine are deployed through the counselling of the socially deviant, viz. those teenagers who are pregnant. This aspect (counselling) is emphasised more heavily in the TOP Clinic than in the Antenatal Clinic, implying that those who seek to abort are more socially or psychologically deviant than those choosing to continue with their pregnancies. In the counselling, teenagers are incited to inspect themselves, their motives, the outcome of their decision to terminate the pregnancy or carry the baby full-term, their relationships and their future. They are given time to labour over these processes. The fact that few return for post-termination counselling indicates some resistance on the part of women to the psychologisation of the procedure. If the teenager decides to terminate her pregnancy, sanitary science breaches the bodily boundaries to extract what is interior to the body through the insertion of exterior (via tablets and instruments). Sanitary science is also deployed in the Antenatal Clinic through the penetration of the expert’s gaze into the anatomical welfare of the woman and her baby, the monitoring of her bodily proportions, fluid and growth, and the insertion of the beneficial exterior into the interior of the body through the administration of tablets.
Justificatory strategies

In order for the mechanisms of security to be installed at the interface between the service provider and teenager, it is necessary for the service provider to invoke justificatory strategies which legitimate his/her actions as well as the power relations set up between him/her and adolescents, and their parents. There are two broad strategies used. The first is the calculation of possible or probable events following either uninformed sexual interaction or early reproduction. The negative portrayal of these events casts the intervention of the service provider as imperative in the interests of the future well-being of the individual adolescent and her child, as well as of the collectivity. The second strategy is the specification of the costs to health and welfare of leaving adolescents and parents to their own devices. The well-being of the adolescent is depicted as being placed in jeopardy by the parents, while adolescents themselves are portrayed as incapable of independent living without the guidance of the beneficent service provider. In implicit contrast (comparative cost) the service provider is characterised as engaging in practices which bring health and welfare to the adolescent and her parents.

The calculation of possible and probable events

For an action to be risky, it must be possible to calculate the probability of negative events following the action. It is in this way that risk is produced as problems are identified in potentia. However, the construction of particular behaviours as problematic is historically and socially situated. In the case of teenage pregnancy, for example, we have seen how teenage pregnancy only started representing a domain of investigation and intervention in the late 1960s (Arney & Bergen, 1984). This emergence took shape around the calculation of particular negative social, emotional, physiological and educational outcomes as likely to occur when a female has children early in life. In the scientific literature, these calculations are depicted as the neutral, scientific recording of a real set of circumstances attendant on teen reproduction. In professional practice, they take the form of expert opinion, which holds sway owing to the superior knowledge and training of the service provider, and his/her access to scientific facts. The calculation of the probability of negative events following certain behaviours or attitudes (for example, pregnancy
resulting from sexual ignorance, or socio-economic disadvantage resulting from early child-
bearing), together with the casting of these calculations in the moulds of scientific findings or
expert opinion, provides the legitimation for professionalised intervention. Consider the
following extracts in which service providers specify the negative personalised and collective
outcomes of teenage pregnancy:

**Extract 10.1**

E 2: Well (.) it starts them off on a life-time of reproduction and probably single motherhood,
because, you know, once it has happened once *it is very likely to happen again*. It also
means that there are a lot of children who are being brought up by the Gogos
[grandmothers]. You can argue that the nuclear family is a European concept, but they
are not getting the [inaudible] that they should. Their mother is not there, and the
grandmother is old, sometimes not (.) well (.) things are relatively unstructured,
undisciplined /hmm/. But I think that the main concern is that these kids are being
brought into families where there is stress financially already (.) and then there is the
problem of schooling etcetera (my emphasis).

**Extract 10.2**

G: And the economy is affected.
I: The economy, what?
G: The economy of the country, because you find that there are so many teenagers who have
got children. They become drop-outs from school. They don’t have work to do because
they are not trained, they are not skilled, you know.

**Extract 10.3**

H: I don’t see anything positive [with teenagers conceiving], especially for the over
population (1)
I: You think that is part of the problem, that they are contributing to the overpopulation?
H: Hmm. Why should you have children when you don’t need (1) and you are also not
working. They should have children when they know that they can see for those children.
[]
I: In what way is the over population a problem?
H: Ai, it is a problem because now all these shacks that they build next to our houses []
Because people run away from the rural areas. They’re starving. People are working in
town. They don’t bring money home then they build this shacks next to our houses.

2 A, B, D, E, F, G, H, J, K, L, M and P represents respondents while I represents
myself as interviewer.
Extract 10.4

E: I think that it also needs to be said that childbirth is sometimes something people don’t survive. There are no two ways about it /hmm/. People think that childbirth and pregnancy is safe. Well, it is, to a large extent, but there certainly is the potential that either the baby or the mother will die. [] Let’s see (.) in May, last month, there were four deaths. (.) And now we have had two this last week. So it looks like June is going to be the same. And (1) um (.) we work out maternal mortality per hundred thousand (2) so it sounds high. I think the latest figures are about 55 per 100 000. We deliver 7 000 women a year here, so we should have 5 deaths per 10 000, and we are probably getting more than that.

Extract 10.5

E: And then there is a higher medical risk as well, a higher risk of pre-eclampsia, a higher risk of maternal death, more difficult pregnancies.

Extract 10.6

B: [M]ost of them, after delivery, we find that they have maternal psychosis, sort of mentally disturbed, after delivery due to the problems that were not solved during antenatal care.

Extract 10.7

E: I think that what happens if a girl gets pregnant, you know, under the age of 16, it cuts short her teenage years (1) which means that she misses out on a certain amount of growing up. She now has this responsibility which really never leaves you (1) and I think it leads to a less developed woman than it would have, had she had the chance to go through her education (.) training, whatever. Instead she’s having to be responsible for a baby from the age of 16.

Extract 10.8

K: [I]t is better for the boys, because they don’t have any trouble of carrying a baby. All that you know they keep on being boys, while you [as a female] getting (.) being a young teenager being a mother of a child.

Extract 10.9

E: [T]hey think it’s okay to have multiple sexual partners. It really doesn’t matter too much who you sleep with. The consequences you will think of later. The fact that there may be (.) I am not sure if I am being racist in saying this, but it may be a Zulu phenomenon, that they don’t really think about tomorrow (.) in general.
Extract 10.10

E: That is the one thing about Zulu obstetrics is that they are very prone to hypertension, and we are really on the look out for that. That is an area where ante-natal care seems to concentrate is blood pressure management.

In Extract 10.1, E intimates that the probability of continuing error in terms of reproductive behaviour is high amongst teen mothers. The unfavourable behaviour or conditions following on teenage child-bearing identified by this speaker include: single parenthood; having more than a couple of babies; child-care by extended family; financial problems and the disruption of schooling. Thus the pregnant teenager is calculated as fracturing the conjugalisation of reproduction, the correct formation and functioning of the family (see Chapter 7), and the production of the economised self, as well as posing a threat to economised security (see Chapter 9). Although the speaker reflects on the discourse of familialisation ('you can argue that the nuclear family is a European concept' - see Parker (1992) who discusses how discourses may reflect on themselves), he continues to utilise it as a legitimating strategy in the management of pregnant teenagers.

The fracturing of prosperity or economised security is listed by service providers as one of the key probable events of teenage pregnancy, as noted in Extracts 10.2 and 10.3. We see in these extracts how the socialisation of risk operates. In Extract 10.2, the teenagers are not positioned as experiencing personal misfortune, or as suffering owing to their lack of skills and their consequent inability to trade skills for a living. Instead, it is the country, the collectivised economy, which is affected. However, underlying this socialisation of risk is a finer gradation in terms of who shoulders the burden of troublesome behaviour. In Extract 10.3, we see how it is not the pregnant teenager who is presented as carrying the burden, or rural people, or people living in shacks, but rather the people living in houses, those implicitly defined as decent, hard-working, and caring properly for their children, viz. those not fracturing economised security. These are the ones who have to put up with the recalcitrants, and whose responsibility it is therefore to implement mechanisms for the management of risk.
As noted in Chapter 9, Foucault (1991a) interconnects the emergence of the science of government with the advent of a statistical science that illustrated that the population had particular regularities. Statistics allows for the calculation of the number of members of a population likely to engage in certain behaviours or to fall prey to certain bodily irregularities, and hence for the calculation of risk. In Extract 10.4, E compares the official statistics with those for the particular hospital, indicating that the risk of maternal death is higher in the population utilising this hospital than in the general population. The threat of the intrusion of death, and its regularity, is used to legitimate the deployment of sanitary science in the monitoring of the anatomical identity of the pregnant woman.

The teenager who conceives or bears a child is portrayed as posing a threat to economised, familialised, and conjugalised security as noted above. She also poses a personalised risk to her bodily, mental and social functioning, as evidenced in Extracts 10.5, 10.6 and 10.7, where she is depicted as at risk for medical complications (Extract 10.5), psychological disturbance (Extract 10.6), and developmental disruption (Extract 10.7). However, the risk is not spread evenly amongst all teenagers. Risk, and therefore its management, centres around gendered and racialised or ethnicised boundaries. In Extract 10.8, K indicates that conceiving a child poses no real danger for a male teenager. He continues to be a person without the threat of having to care for a child. Fatherhood poses no personalised risk, and is not therefore the target of serious intervention programmes. In Extract 10.9, E positions ‘Zulus’ as more likely (than whom it is not stated but implied) to be socially negligent as they are unable to plan for the future, and hence are indiscriminate in their sexual habits. In Extract 10.10, E biologises ethnicity, positioning Zulu women as bodily dysfunctional.

**The calculation of comparative costs: the inadequacy of parents and adolescents**

In order to justify the intervention of service providers, as opposed to leaving adolescents to themselves to manage their own risks, or alternatively allowing parents to intervene, service providers need to position parents and adolescents as incapable of performing the tasks required to manage risk and error, and therefore as incurring costs to the production of reproductive health
and welfare. In this section, I utilise Davies and Harré’s (1990) conceptualisation of interactive and reflexive positioning to analyse the justificatory strategies of the service providers. Interactive positioning is where one person positions another discursively while reflexive positioning is where one positions oneself. Davies and Harré (1990) explore their thinking on positioning to develop a theory of subjectivity. My aim in this section is not to join this track of thought, but rather to indicate how the ways in which the service providers position themselves vis-à-vis parents and adolescents serve, firstly, to legitimate their intervention as experts through the calculation of comparative costs to health and welfare, and, secondly, to maintain the power relations immanent in the service provider - patient relationship. Consider the following extracts in which parents are interactively positioned by the service providers:

**Extract 10.11**

I: Why do you think that they [parents] don’t tell them [teenagers about sexuality]?

L: They say it is embarrassing. Our culture (.) it is not allowed (.) doesn’t allow them to talk with you about these things. Even some of them they are against the TV. [] Our customs are sometimes not good (.) I can say that.

I: You think it is not good?

L: Ya, it is not good. Let me say nowadays (.) you have to tell your child the truth (.) really.

**Extract 10.12**

J: Well in our culture, our parents, they so secretive so as nurses we must be open to them.

**Extract 10.13**

G: Parents tend to neglect their children. Um (.) because some of them, when they [teenagers] ask questions concerning something like this, they [parents] just push them away, or saying ‘I’m busy, I’m (. ) I’ll listen to you later’, or saying ‘Oh no, you are naughty’. You know (1) just pushing them away (.) not to listen to them.

**Extract 10.14**

B: We can talk with the child alone first, the mother alone, and then together. Because there are some things that she cannot express in front of the mother, about the boyfriend (.) all those things.

**Extract 10.15**

G: They become angry. They reject this little one. And this little one will go to (.) maybe to the boyfriend’s house. And the other one, others resort to being street children after
getting pregnant.

Parents are positioned as inadequate in communicating the ‘truth’ (Extract 10.11) concerning sexuality to teenagers. They avoid the issues, finding them embarrassing (Extract 10.11) and hence become secretive (Extract 10.12) and evasive (Extract 10.13). This inadequacy was often couched in the interviews in culturalised terms as evidenced in Extracts 10.11 and 10.12 (see Chapter 8 for further discussion of the process of culturalisation). In contrast to the parents’ failure in this regard, we have phrases such as ‘you have to tell your child the truth’ (Extract 10.11), ‘as nurses we must be open’ (Extract 10.12) and ‘to listen to them’ (Extract 10.13). This positions the service provider, firstly, as the expert who knows what the ‘truth’ is, and, secondly, as humanitarian carer who is open and who listens to teenagers as opposed to parents who are closed and do not listen. Extract 10.14 extends this latter positioning. The service provider manages the interaction of herself and the parents (first excluding and then including them) on the basis of her superior position as confessor with respect to sexual issues.

Apart from being ineffective in the role of sexuality educator and confessor, parents are positioned as culpable for social problems in their ineptitude in terms of dealing with a crisis in the family. When a teenager becomes pregnant, they are depicted as being unreasonable: they become angry and reject the teenager (Extract 10.15). This in turn leads to social problems such as street children (Extract 10.15 - elsewhere respondents mentioned repeated births, abuse by the boyfriend and school drop-out as consequences of the parents’ response to the pregnancy of their daughter). This portrayal of the inadequacy of parents in managing risk in their children implies that there is a reproductive health and welfare cost of the service providers not intervening. This is paid in terms of the transfer of ‘truth’ concerning sexuality to the adolescent, the provision of the confessional in which the adolescent can render herself truthful to another, and the curbing of social problems.

In the following extracts we see how teenagers are interactively positioned by service providers as being unable to successfully conduct their lives independently of expert assistance:
Extract 10.16

G: And they want to experiment, that what will happen if I sleep with a boy (.) or if I sleep with a girl? What will happen?

Extract 10.17

I: Why are teenagers falling pregnant?
H: I think ignorance. Because teenagers (.) even if you talk to them (.) they always think that even if I do it for the first time I will not fall pregnant.

Extract 10.18

H: They can sleep with you today, the following day with somebody else.

Extract 10.19

F: The older people, they know what they are doing, they don’t need any assistance.

Extract 10.20

E: I am the only specialist.

Extract 10.21

P: Because we have the staff that were trained, they know how to answer those questions.

As teenagers are the primary target of intervention with regard to early reproductive issues, the service providers need to position them as unable to conduct their sexual and reproductive lives successfully without the assistance of the expert. Thus they are portrayed as: experimenting and hence in need of assistance in planning their activities in a rational fashion (Extract 10.16); ignorant and hence in need of education (Extract 10.17); promiscuous and hence in need of information (to use condoms) (Extract 10.18). This is in contrast to adults (Extract 10.19), who are rational, know themselves and know what they require, and in contrast to service providers who position themselves as experts, who are specialised (Extract 10.20) in the management risk and error, and who are trained and hence knowledgeable (Extract 10.21). The cost thus of non-intervention is portrayed as ignorance, promiscuity and uncontrolled experimentation on the part of the teenagers, all of which are saturated with risk. Intervention, on the other hand, brings rationality, knowledge and control.
This positioning of parents and adolescents as inadequate in the management of risk, and therefore as contributing to the decline of reproductive health and welfare, places service providers in a powerful position vis-à-vis parents and adolescents. They define what the truth concerning sexuality is; they have knowledge concerning the ‘correct’ methods to be used in the management of risk and the prevention of social problems; they understand how to communicate with adolescents; they utilise the powerful tool of rationality in their practices; and they manage the interactions between themselves and parents and adolescents by strategically excluding or including them in counselling or educational sessions. An further example of the power relations between adolescents and service providers is provided in Extracts 10.22 and 10.23:

**Extract 10.22**

K: They [peers] teach each other. They sleep around and then they discuss about it. It is when we just tell them ‘It is not right to ask a friend about something’.

**Extract 10.23**

P: You know that peer educators are so listened to compared to (1) whatever. It differs to when one talks to the small one. Because they look at you and say ‘This old mom. What are they saying to me?’ But when he talks to the peer, he hears it well.

Because of their inadequate self-management, adolescents are positioned as deficient educators of each other, implying the need for expert assistance (Extract 10.22). However, there is a paradox that steps in at this stage as peers are utilised as a tool in the dissemination of information through peer educator programmes (Extract 10.23). Thus, while not subject to the influence of the expert, peers are positioned as unreliable sources of information. However, once they become co-opted into the expert’s field of intervention, they are seen as potentially positive instruments for the management of risk and error.

In this section, I have explicated the strategies used by service providers to justify their interventions and the power relations set up between themselves and adolescents and parents in this process. The specification of the negative probable events following uninformed sexual interactions or early reproduction allows the space for the introduction of techniques of risk management in the form of preventive sexual education programmes, counselling, ante-natal care or terminations of pregnancy. The calculation of the comparative costs of intervention and non-
intervention positions parents and adolescents as inadequate in the management of their own sexual and relationship affairs, and therefore as in need of assistance from experts trained and specialised in these matters. In the following section, I discuss the governmental techniques used by the service providers in the management of risk.

**Governmental techniques used in the management of risk**

In the introduction to this chapter, I indicated that security combines with the practices of various governmental forms in order to produce its effects. In this section, I indicate how the service providers interchangeably utilise the techniques of pastorship, liberal humanism, the incitement to governmental self-formation or the technologies of the self and, in the last instance, sovereign power in the management of risk. In the first of these, they position themselves as the equivalent of the shepherd, guiding and caring for the members of the flock who are encouraged to engage in personal submission, renunciation and mortification. The chief techniques used by the service providers in the deployment of pastorship are warning and fact-telling. In the second (liberal humanism), the service providers are positioned as neutral, beneficent experts who allow the natural unfolding of the essences of the adolescent. Individualisation and the provision of the confessional space are the techniques used by the service providers in this form of governmentality. The incitement to the technologies of the self combines pastoral and liberal humanist techniques to shape the conduct of adolescents and to enlist them in the governmental formation of themselves. Teenagers are encouraged by the service providers in the self-technologies of despotism, epistemology and attentiveness. In occasional instances, sovereign power is invoked, with service providers being the final arbitrators concerning contraception, crisis intervention arrangements and the termination of pregnancy. These are discussed below.

**The techniques of pastorship**

**Extract 10.24**

B: I would like to ask from her why she stays there [with her boyfriend]. [] And to enlighten her that it is not right to stay with a man before marriage.
Extract 10.25

A: It was very, very sad (.) because even after the foetus has come, we called the mother and told her (.) because we knew that she was a nurse, she knows what she did to the child. We told her that ‘What you did to the child is wrong. You don’t think to the future. You think just for now. If she happened not to get another child, she will say something to you as her mother’.

Extract 10.26

I: Um (1) you said that one of the things that you ask about is what is going to happen to the unborn child?

B: Ya, who is going to look after the child, because she needs to attend the school. The mother’s side or the father’s side? Have they discussed all those things? (.) Who is going to take the child to the clinic for immunisation? Are they going to have a nanny? Who is going to pay for that nanny to look after that child?

Extract 10.27

F: Some come because they are sexually active, ‘I’ve just come for the Jorva [injection - usually Depo Provera]’. And then ‘What’s your age, sisí [sister]?’ and they say ‘I’m just 14(.) 15’ ‘Ooh, you see, my friend, we are faced with a problem now. If we are fifteen, we are now sexually active. Let us look now at the dangers of early sex’. [] More especially with the blacks (.) this Mhlanga thing, where all the really virgins, they go and display their bodies. ‘Just look how beautiful you are. If all the small virgins (.) young girls are called to display their bodies, will you still find yourself happy with exposing yourself?’ And then she will start to be shy (1) and then you carry on.

Extract 10.28

J: We used to prepare holiday programmes so that we keep them busy because they [inaudible] workshop. When they just sit at home, moving up and about the streets (.) you know, they can do a lot of mess. But when they are together sharing something which they can benefit out of (.) it is much better.

Extract 10.29

J: They do rely on us and we love them.
I: In what way do they rely on you?
J: You know, whatever we are telling them, they take it as a something they need for them. It helps them (.) what we used to tell them. (.) So they rely to us. (.) They used to ask deep questions of which they can’t ask if it was a parent (.) you know /ya/. So you must be a friend to them.
Extract 10.30

B: I did try to calm her then, you see, that the mother should accept things as it is. Maybe, as the time goes on, God can do wonders. She said ‘The child is going to die. What must I do?’ I said ‘No, she won’t die; pray to God’.

The responsibility of the pastor is to care for and guide the members of the flock. Her caring is demonstrated in the regard s/he shows: using words such as ‘my friend’ or ‘sisi’ (Extract 10.27); being loving, helpful and dependable (Extract 10.29), and calming people in a time of crisis (Extract 10.30). S/he understands what is good for them: getting married (Extract 10.24); attending school (Extract 10.26); remaining a virgin (Extract 10.27); keeping busy (Extract 10.28). Because s/he cares for the members of the flock, and because s/he understands what is good for them, s/he guides them in the path of rightful action. In order to perform this function of guidance, s/he has to arbitrate concerning the moral correctness of actions, and to indicate the correct path in cases of wrong action. We see in Extract 10.24 how the nurse proclaims that ‘it is not right’ to co-habit with a man. Having done this, her task is to ‘enlighten’ the teenager of this. The word ‘enlighten’ implies that the teenager was in a state of ignorance or darkness, and that once she has been informed of the correct way, she would not hesitate to follow it. Recalcitrance is, however, anticipated, in which case, the pastor’s job is to chastise the perpetrator. The service provider quoted in Extract 10.25 had related a story where a teenager’s mother had taken her to a private doctor who had administered tablets to induce abortion after having been refused at the hospital because the teenager was not willing to terminate her pregnancy. The teenager returned to the hospital bleeding, with the foetus aborting spontaneously. We see in Extract 10.25 how the service provider chastises the mother, informing her that what she did was wrong, and that as a nurse, she should have known better. Chastisement, however, is not mere censure. Instead, it is designed to assist the member in reverting to the correct path. Note, in Extract 10.25, how the nurse explains to the mother that the daughter may feel resentful of the mother in future. This explication of possible future events performs the function of helping the mother reform her behaviour (she is told later to ‘communicate’ with her daughter).

In order to carry out the functions of care and guidance, the pastor requires the member to render him/herself accountable to him/her (the service provider). We see in Extract 10.26 how the
service provider puts herself in the position of inquisitor, seeking answers for a multitude of questions regarding the arrangements made. This information is necessary for the nurse to evaluate whether the correct procedures are being followed.

Other than chastisement and moral arbitration, the techniques used by the pastor are shame, rightful activity, comfort, supplication to a higher power, and warning and fact-telling (the latter are the principle techniques used, and are discussed in a separate section below). In Extract 10.27, the service provider places herself in the position of pastor through pronouncing that sex in adolescence is a problem and a danger. She utilises the age differential to reinforce this position. Having established this position, she invokes the culturalised ritual of the display of bodily purity, and partially positions the adolescent as of pure body (‘look how beautiful you are’) in order to shame the teenager (‘she will start to be shy’). In Extract 10.28, we see how the holiday programme is depicted as being of benefit (rightful activity), while the other potential activities of the adolescents during the holidays are portrayed as negative (‘do[ing] a lot of mess’). The service provider quoted in Extract 10.30 had related a story of a mother bringing her pregnant daughter to the Antenatal Clinic where it was discovered that she (the daughter) was HIV positive. We see in the extract how the service provider acts as comforter (‘I did try to calm her’) and incites the mother to make supplications to a God concerning her daughter.

**Warning and fact-telling**

The management of the risk of future negative events is installed in pastoral power relations through warning and fact-telling. Teenagers are warned concerning future hazards, and told the ‘facts’ of the situation. Consider the following extracts:

**Extract 10.31**

F: We usually say that we like to see the children before they reach (.) they get their periods. Just to warn them how they should behave (.) more especially because other people say that it is wrong for a girl to be in love. So we used to tell them they can be in love, but

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3 Each year, a reed dance ceremony is performed in the presence of the ‘Zulu’ king; only girls who are virgins are allows to participate.
say no to sex. But it is easier if you get a person before she starts being sexually active. At times you find it’s rather too late, and if you tell them of the dangers of steady sex, they are already involved. (1) Well (1) what they (.) they are involved in sex, we tell them about (.) that they might fall pregnant, and they should know that if they fall pregnant (.) others that they do take the contraceptives (1) if they don’t want the baby. If they fall pregnant, they might keep the baby. (1) Well, it is just of late that we have had (1) if they do do that, they do the abortion.

Extract 10.32

J: We just teach them about the stages of growth [ ] The stages (.) we explain that (1) and then we explain to them (.) and giving them chances to ask some questions of what is of concern (1) and to know as they grow up what must they expect in life (.) the changes that come. At some stage (1) and when they are caught by the stage to get involved in sex (.) and so we used to teach them that they must expect that in life. It is natural, but not in every manner.

I: What do you mean when you say, ‘Not in every manner’?

J: I mean to say what they must watch out (.) what they must not do. But sex they can do it but not in their age, not in their stage. (1) And whether they feel like to have sex we used to educate them in as far as this family planning is concerned since the youth they are highly exposed to sex.

Extract 10.33

I: And what sort of thing would you like to see discussed about pregnancy and childbirth [with teenagers]?

E: Well (.) fairly non-detailed information about the fact that it is necessary to have medical care, that they should have ante-natal care from the very beginning, and basically (.) perhaps just to discuss some of the things that can go wrong in pregnancy in a very undetailed way, about high blood pressure, and [inaudible], anaemia. They need to say that these are the things that people get into trouble over, and they need to be seeing a doctor or at least a midwife to have these things picked up, so that they don’t get problems. (1) No, I think that it also needs to be said that childbirth is sometimes something people don’t survive.

Extract 10.34

J: With us, they are so secretive (.) parents are so secretive, so we used to tell them the facts that when you meet with a boy, you are going to fall pregnant, you know. Then as far as when you reach that menstrual period for sure what will happen to you which will make you to have a partner or to have sex with somebody. We used to tell them so they grow (.) well (.) knowing the facts.
P: If you don’t give the information to the kids, nature allows no vacuum. They will get information from the wrong sources, which won’t be the right information.

The pastor’s task of guiding the members of the flock involves warning them of the potential of future hazards, hazards which s/he, through his/her position of greater wisdom, is able to see more clearly than the ordinary person. In this way, security’s pre-occupation with probable and possible events is installed in the everyday actions of individuals. The service providers, in their pastoral position, warn their students and patients about potential pitfalls and difficulties regarding sexuality, pregnancy and child-bearing. Thus we see how they tell teenagers ‘of the dangers of steady sex’, ‘that they may fall pregnant’ (Extract 10.31), what they must ‘expect in life’ (Extract 10.32), that ‘things can go wrong in pregnancy’ and that ‘childbirth is sometimes something that people don’t survive’ (Extract 10.33). Certain inevitable events, such as menstrual periods (Extract 10.34), or the changes or stages of life (Extract 10.32), are warned together with the probable (owing to a biological urge) sexual behaviour that will accompany them (Extracts 10.32 and 10.34). These warnings of future possibilities are neatly converted into prescriptions for behaviour. Teenagers are warned ‘how they should behave’ (Extract 10.31), ‘what they must watch out’ for and ‘what they must not do’ (Extract 10.32). They are instructed to ‘say no to sex’ (Extract 10.31), to ‘take the contraceptives’ (Extract 10.31), and to ‘have ante-natal care from the very beginning’ (Extract 10.33).

Foucault (in Gordon, 1991) indicates that security does not make a clear binary distinction between what is permitted and what is not. Instead, there is a bandwidth of variation concerning the allowed, although there is an optimal middle-path within this bandwidth. We see in Extracts 10.31 and 10.32 how abstinence from sex is the optimal middle-path recommended by the service providers. However, sexual intercourse and even pregnancy lie within the acceptable bandwidth, but carry with them a different set of warnings and prescriptions concerning behaviour than does non-coital behaviour. Put simply, if the teenager is a virgin, there is the danger of the desire for sex, and thus the behaviour recommended is ‘say no’. If she is sexually active, there is the possibility of pregnancy, and thus she should use contraceptives. If she is pregnant, there are potential complications in the pregnancy, and thus she should seek professional medical assistance.
The warning concerning potential hazards, and the prescription of certain behaviours, is not couched by the service providers in the language of hazy probabilities. Rather, the teenagers are told the ‘facts’ (Extract 10.34) and what to expect (Extract 10.32). That this fact-telling may be challenged is indicated in Extract 10.35, where it is intimated that information may be obtained from other ‘wrong’ sources. In this respect, service providers need to position themselves as the authority, as the ones in possession of the correct information, the ‘facts’, which adolescents may obtain from them by asking questions (Extract 10.32).

**The techniques of liberal humanitarianism**

Interspersed with the pastoral care discussed above, the service provider positions her/himself as the liberal humanitarian. Liberalism places limits upon direct coercive interventions into individual lives; the rights of the individual have to be respected. Thus the authority must act upon the choices, wishes, values, and conduct of the individual in an indirect manner. Disciplinary technology, in particular the confessional and panoptical surveillance, are essential in this process. The individual is rendered truthful to his/her fundamental nature, a nature known in depth by the expert; s/he is incited to institute the technologies of self-surveillance. Consider the following extracts:

**Extract 10.36**

B: She’s having a right to live, and also a right to decide. And so that she will feel free to report anything that is happening.

**Extract 10.37**

P: As I said earlier on, their [the teenagers’] needs differ, so then they are teaching (1) There are many topics that they cover, but according to the need of that particular group that has come (.) or that particular individual that has come.

**Extract 10.38**

P: It’s the approach. (1) Take that person (.) take that teenager as a unique teenager. (1) Respect that teenager. She is unique from other teenagers. [] You should trust them. In fact the relationship develops trust. [] You have to accept them as they are, even if she comes to you and says ‘I am pregnant’.
Extract 10.39

H: We just don’t instruct them [in counselling]. They tell you where the problem is and you find out from them which is the best way to solve the problem.

Extract 10.40

P: You need to empathise [in counselling]. You need to show that person that you are there and that you are listening.

Extract 10.41

G: We are not going to tell anyone about what they have told us because it is confidential, so that’s then why they like to come to our services and ask questions.

Extract 10.42

B: She can raise her other problems [in counselling] rather than the one she is consulting on. And also maintain privacy (. ) privacy (. ) because she can’t just tell you anything.

The principle technique of liberal humanism is individualisation in which the individual is accorded rights and obliged to be free (Extract 10.36). She has to make her own decisions, and is rendered unique (Extracts 10.36 and 10.37). The humanitarian’s job is to respect, accept, trust (Extract 10.38) and empathise (Extract 10.40) with the person, thus allowing her to render her problems audible (‘report anything’ - Extract 10.36). This stands in contradistinction to the pastor’s role of moral arbitration. Instead, the humanitarian remains neutral, even when the teenager presents deviancy (‘comes to you and says ‘I am pregnant’’ - Extract 10.38). The humanitarian’s task is to understand difference, and to accommodate it within a broad bandwidth. She adjusts her approach according to the ‘needs’ of the individual or group (Extract 10.37).

As opposed to the pastor, the humanitarian is not there to instruct (Extract 10.39). Instead his/her role is to allow the teenager the space to render herself truthful to herself. The teenager must be permitted to confess what the problem is, and then to labour to find the solution (Extract 10.39). The task of the confessor is to make it possible for the teenager to render herself audible (‘you are listening’ - Extract 10.40) by demonstrating to the teenager feelings of identification (‘empathise’; ‘you are there’ - Extract 10.40), maintaining confidentiality (Extract 10.41), and creating a private space within which the teenager may confess (Extract 10.42). The individualisation inherent in liberal humanism together with the provision of the confessional
space allows for the incitement to certain technologies of the self (in particular the self-technology of epistemology). This is discussed in depth in the next section.

The boundaries of the humanitarian service provider are patrolled by those falling short of the tenets thereof:

**Extract 10.43**

L: They must change the racism, their attitudes.
I: Explain to me a little more what you mean by that.
L: Let me say, as I am a black, if I am working with whites I must not [laughing], I do not know how to put it [] but I must give them the same respect.

**Extract 10.44**

H: Because they [nurses at satellite clinics] never stop shouting. Those who are older, this child look like their daughters (.) so that’s why they shout at them.

**Extract 10.45**

P: Because I mean I was trained. I know what happened to me. It did not take me overnight to change and [inaudible].
I: How did you change? What happened?
P: This was true training, as I said, to attend a session in Durban. And I remember at one stage where somebody was visualising. [] They do it on video, then they play it back, so you see yourself. [] Then I was looking at myself. So imposing and authoritative, you know /hmm/. So we had some in-service training for days, three days, one week, and things came right.

In Extract 10.43, we see how the nurse who is speaking positions other nurses as racist, implying that these nurses apply respect differentially to ‘black’ and ‘white’ people (see Chapter 8 for a discussion of the process of racialisation in the literature). Liberalism requires that all are equal, and thus those differentiating between people on the basis of race are censured. In Extract 10.44, it is the older nurses who are excluded from the domain of humanitarianism. They shout at the teenager, implying that they have passed judgement instead of accepting them. The identification of this exclusion with age intimates that these nurses are old-fashioned and not in tune with the modern, humanitarian approaches. Extract 10.45 indicates how service providers are incited (through disciplinary training) to become humanitarian care-givers, and how they have to labour to achieve this status. P relates how she was rendered visible to herself through the playback of
video material on a role-play situation. She is positioned and positions herself in this playback as imposing and authoritarian, practices in opposition to humanitarianism. She indicates that this ‘came right’ though intensive training, and labouring on the self to ‘change’. This incident illustrates the operation of panoptical surveillance turned to self-surveillance. The viewing eye of the video is turned to self-visualisation, allowing the nurse to see her own behaviour directly, and later indirectly, as she monitors her continued interactions with teenagers. This procedure (video-taping of role plays) is utilised to encourage her in the application of a similar principle in her interaction with teenagers, viz. rendering them truthful to themselves through the infusion of humanist values in the nurse-teenager interaction. Thus, the supervisor becomes supervised, with the net of surveillance operating in varied directions.

The incitement to self technologies

Dean (1994b) refers to governmental self-formation as ‘the ways in which various authorities and agencies seek to shape the conduct, aspirations, needs, desires, and capacities of specified categories of individuals, to enlist them in particular strategies and to seek defined goals’ (p. 156). In this section, I outline the self technologies to which the service providers incite their clients. Rose (1996b) describes the technologies of the self as ‘the elaboration of certain techniques for the conduct of one’s relation with oneself, for example requiring one to relate to oneself epistemologically (know yourself), despotically (master yourself) or in other ways (care for yourself)’ (p. 135). These technologies are practised, firstly, under the authority of some system of ‘truth’ and, secondly, under authoritative persons from the theological, psychological or pedagogical disciplines. In the following, I trace the ways in which teenagers are encouraged by the psycho-medical experts of this particular hospital in the self technologies of (1) despotism, (2) epistemology, and (3) attentiveness. In this process, the techniques of pastorship and liberal humanism are strategically invoked.
The self technology of despotism

Extract 10.46

K: I just tell them, ‘Well, all what is happening it is just natural. It is supposed to happen but one thing is to control yourself. When the time comes, you must stick to only one partner and not to have so many partners’.

Extract 10.47

J: I would include the gospel [in training]. It helps a lot to be a youth having Jesus as your personal saviour.
I: In what way does it help the teenagers to know about the gospel?
J: It helps them. You know, when you are a Christian if you are a saved somebody, you know. You read the Bible and according to the Bible it is a sin to have sex before marriage and then as you grow up you have a goal that I will have sex when I am married, you know, and you keep on praying that ‘God, please help me’, then I can’t do it even if, you know, I’ve got those feelings but you don’t do it then you don’t, you simply don’t.

The most clear indication of despotism over the self is control. In Extract 10.46, we see how teenagers are incited (in a pastoral fashion) to exercise control over what are presented as natural sexual urges. In Chapter 6, we saw how the hydraulic hypothesis concerning sexuality (that biological mechanisms control sexual impulses and drives) is invoked in the literature. Here it is presented as something which must be recognised, and then controlled, firstly, with regard to timing and, secondly, with regard to the number of partners. The invocation of nature is important in this context, as it allows for the bandwidth of permissible behaviours referred to earlier. The individual is incited to gain ascendency over nature; however, if she fails in this task, she remains within the ambits of the expert’s gaze as what she has done is natural, rather than evil. Contradictorily, evil, or sin, is invoked in Extract 10.47 as a motivation for control. Sex outside of the conjugal relationship is presented as sinful. Christianity is depicted as rescuing the individual from hard-to-control urges. Instead of having to decide on the correctness of actions herself, the individual is guided by the inscriptions of God in the Bible. Instead of labouring alone, she labours to maintain her relationship with God who then assists her in her efforts at abstinence. The pastor (in this case the service provider) guides her in her supplication to a higher power, and in her interpretation of the word of God.
The despotism of the self in terms of sexuality is strongly gendered. Contrast of Extracts 10.48, 10.49 and 10.50.

**Extract 10.48**

F: Tell her about the dangers of early sex. What should she avoid (.) like the privacy (.) which is important. I like that very much. They will never do that in public. It’s you (.) female (.) who will give him privacy (.) and once you are together (.) and then the trouble starts.

**Extract 10.49**

L: I used to talk to them about that they must avoid having so many boyfriends.

**Extract 10.50**

H: We will give them [boys] information and such things (.) and explain the pregnancy (.) how the pregnancy occurs (1) explain the menstrual circle so a lot of them has that information. (1) It will help them in the end, because there are safe periods. If they really can’t make it, how they use the safe periods.

Three features emerge in the above extracts with respect to the gendering of the self technology of despotism with regard to sexual relations, viz. control of access to the body; avoidance of particular situations; and the hydraulic sexual drive. In Extract 10.48, female teenagers are warned of the ‘dangers of early sex’ which is paired with an encouragement to patrol the male’s access to her body. This type of warning is not extended to males (instead they are ‘informed’ - Extract 10.50), and the incitement to control sexual bodily access is absent. In order to implement access control, female teenagers are incited to employ the strategy of avoidance - avoidance of privacy (Extract 10.48) and of ‘having so many boyfriends’ (Extract 10.49). Males are not encouraged in avoidance. Instead they are informed that ‘if they really can’t make it’, then they may have sex, but in the ‘safe’ period (Extract 10.50). The gendered nature of the hydraulic hypothesis concerning sexuality, which was noted in Chapter 6, is repeated here. Males are depicted as more at the mercy of their sexual desires than females. Thus, control of sexual urges, the patrolling of access to the body, and the avoidance of particular sexualised situations and relations are firmly placed in the domain of female rather than male mastery of the self.
The incitement to self technologies of despotism includes not only control of sexual urges and access to the body, but also control of the emotions:

**Extract 10.51**

M: When we counsel them, we tell them, ‘When you are a parent, you just have to accept what is happening to you (. ) because maybe it was a mistake that you get this child /hmm/. [] So don’t be frustrated about it. Just accept it /hmm/. Take it as it is and tell yourself, ‘Anyway, I am not alone. (1) I can face this problem and I can go through it and I can give my love to my child’.

In Extract 10.51 control over emotional turmoil (frustration) is incited and the opposite emotion (acceptance) recommended. Problem management is advocated, and the individual is encouraged in the self technology of self instruction.

**The self technology of epistemology**

The self technology of epistemology requires the person to labour to know the self. It relies heavily on the humanistic discourse of individuality. Consider the following extracts:

**Extract 10.52**

G: In terms of self-esteem (. ) um (1) we talk about (. ) telling them that they are just unique. Nobody must disturb each and every one. One must do his own thing. He must decide what he wants to do. He must never be influenced by other people /hmm/. Because, you know, the peer group (. ) they become so strong, and you find that you do something that you were not prepared to do (. ) because of the peer pressure /hmm/. And we encourage them to go through to their careers, because they can just be disturbed by so many other things.

**Extract 10.53**

M: I think they should be encouraged to be as open as possible (1) to get the information that they think they need to get to help them. (1) And they should make sure that they’ve got enough information in order to protect themselves and in order to reach their goals /hmm/ so that they know what step to take at a time (. ) because they just do whatever they think at any time. (. ) It means that they are not going anywhere. But if they have got a goal in life they will do all they can to discipline themselves /hmm/. With the information that they have, they will be able to make informed decisions.
L: When they come back [from the ultrasound prior to a termination of pregnancy], that is when we started to do counselling. (.) Just ‘Why you want abortion?’. Then she will tell you her reason why she wants abortion. Then you have to tell her the options (.) to do this and that and that.

The discourse of individuality is reflected in Extract 10.52, where the individual is depicted as ‘unique’, as somebody separate and different from other people. This difference implies that the person must labour to get to know the self, in its uniqueness and difference. The labour extends, however, to maintaining that uniqueness from the threat of negative outside influences such as the peer group (Extract 10.52 - see Chapter 6 for a discussion of the paradox contained in the invocation of the peer group as an adverse influence). An unexamined contradiction steps in here. On the one hand, adolescents are incited to maintain their individuality, to let nobody ‘disturb’ them. On the other, the service providers ‘encourage them’ to engage in certain practices (such as continuing with their education in order to have a career). Individuality, uniqueness or difference do not include, it would appear, engaging in activities that are considered deviant (such as bearing a child).

Knowing the self is complemented with ‘factual’ knowledge of the world. In Extract 10.53, we see how adolescents are incited to ‘get enough information’. This knowledge together with knowledge of the self are presented in Extracts 10.52 and 10.53 as allowing the person to make decisions, protect themselves from negative external influences, and formulate and follow through on goals. Although the teenagers are depicted as making individual decisions, and planning their own futures, there is an implicit understanding that only certain of these decisions, and only certain of these goals, gain the approval of the authority. In Extract 10.53, for example, the adolescent who does not conform to particular practices of the self are presented as ‘not going anywhere’.

The incitement to the self technologies of epistemology allows for the positioning of the service provider as guide. The expert may question the teenager as to why she wants to engage in certain actions, such as having an abortion (Extract 10.44), because she must know herself and her reasons for her actions. However, the power relations between the adolescent and the service
provider allows the service provider to consider her (the adolescent’s) knowledge as deficient, and hence in need of supplementation. The expert, as the guide who has access to a better knowledge, thus steps into the breach and presents her with other alternatives (see Extract 10.44). As noted previously, the expert does not impose. Instead, the individual is incited to consider options and to labour with regard to her decisions.

The self technology of attentiveness

Extract 10.55

B: And I told the child, ‘As you are now HIV positive (.) first of all (1) if you want to survive you must accept that you are HIV+ so that everything will go right. Try to (.) try to join some HIV clubs, you see. Eat healthy food; do exercises. (.) Your close friends should know; your dentist should know about it; if you are working, they should know about it /hmm/. (.) Don’t be shy; mix with other people who know the causes of this (1) you see /ya/.

Extract 10.56

L: They also must use condoms (1) and I also advise them if they see any changes, they must not stay away. They must (.) they must go straight to the hospital (.) or straight to the nearest clinic and discuss the issue /hmm/ because some of them after TOP they used to say they are having [inaudible] or maybe irregular menses.

Extract 10.57

I: What should the contents be [of a course on teenage pregnancy]?
L: (2) How to care for themselves (1) because they have (.) they must have their times to care for themselves. Especially nowadays you can find then a child of 17 years (.) she is staying at the University of *** but the parents they are staying in Jo’burg. She needs to think how to present herself (.) besides the parents (.) even if she is staying away from home but she can respect herself (1) and her parents.

The self technologies of attentiveness imply an awareness and care of various personal functions. We see, for example, in Extract 10.56 how the adolescent is incited to labour on the body. She must monitor the exchange of matter from the external to the interior of the body (‘eat healthy food’) and she must work on maintaining the body through bodily exertion (‘do exercises’). This bodily attentiveness is extended to health care and reproductive management. The adolescent is motivated in Extract 10.56 to prevent pregnancy and HIV infection through the use of
condoms, and to present herself to the expert when she notices bodily deviation (such as irregular menses).

Care of the self includes attentiveness to the presentation of oneself to the external world. We see in Extract 10.57 how the teenager is depicted as having to present herself as respectful. This type of care, it is implied, not only reflects on the person herself, but also on her family. Attentiveness to relationships is invoked in Extract 10.55, where the adolescent is incited to communicate with others concerning her HIV+ status, and labour concerning her contact with others (‘don’t be shy’).

Sovereign power

Extract 10.58

L: You are not allowed to say that you must not do that [terminate the pregnancy].

Ostensibly the service providers do not utilise sovereign power over the teenagers, as testified to by L in Extract 10.58. Instead, they self-referentially position themselves as humanitarian care-givers and pastoral guides of the adolescents. However, there are times when sovereign-type power is invoked. Consider the following extracts:

Extract 10.59

D: It was their arrangement, and then I approved it, really because the child had to be removed from that place so that it won’t happen again.

Extract 10.60

H: I must inform her, ‘No even if you want injection you cannot take it because of this reason. Take this’. I give the last opinion.

In Extract 10.59, the social worker indicates that she ‘approved’ the removal of a child from the home. Although this ostensibly was the arrangement made by the family, she has the final say over the matter. If the plan made by the family was not in accordance with what she considered to be in the best interests of the child, she would not have approved the plan, and other actions
would have followed. In Extract 10.60, a nurse relates how she may refuse the request of a teenager for the injection form of contraception. Access to contraception and to termination of pregnancy (the service provider in the TOP Clinic has to decide which of the applicants will have preference as only a limited number of abortions are performed each week), and decisions concerning living arrangements in crisis situations are patrolled by service providers.

**Conclusion**

In this chapter, I have illustrated the technologies of intervention utilised at a regional hospital in South Africa. The practices of the service providers are the technical means by which the tactics of governmentality are installed in the everyday lives of teenagers. The governmental tactics of racialisation, culturalisation, economisation, familialisation, pedagogisation, medicalisation and psychologisation discussed in previous chapters are deployed at the interface between the service provider and adolescent or parent through the mechanisms of security. These mechanisms combine with the techniques of pastorship and liberal humanism to form a complex ensemble of governmentality. The chief mechanism of security utilised is the management of risk, the collective and individualised insurance against the occurrence of probable or possible negative future events. The service providers thus become the insurers of emotional, physical and social well-being. However, their task is not merely to offer guarantees against risk, but also to produce risk by, for example, calculating the probability of negative outcomes (e.g. pregnancy) from a specified action (e.g. uninformed sexual interaction). The possibilities for intervention thus become endless as everybody is potentially at risk (thus, for example, all teenagers must undergo sexuality education programmes).

Various strategies are employed to justify the collective’s investment (through the payment of taxes to establish and maintain units dealing with adolescent sexuality and pregnancy) in the insurance of adolescent reproductive health and welfare, viz. the specification of possible and probable events following either uninformed sexual interaction or early reproduction, and the calculation of the comparative costs of intervention versus non-intervention. The costs of non-intervention are portrayed as a lack of a confessional space and of the transfer of ‘truth’ to teenagers, and hence as ignorance, promiscuity and uncontrolled experimentation on the part of
the adolescents. The risk implied in the specification of negative future events is not seen as personal misfortune or fate, but rather becomes socialised as the whole society is depicted as suffering. This then makes it imperative that preventive and ameliorating action be taken. Underlying the socialisation of risk, however, is a finer gradation in which decent, hard-working people are seen as being imposed upon by those who are recalcitrant in the correct management of their sexual and reproductive affairs. Risk and its management hence centres around class, but also (as illustrated in the extracts) around gendered and racialised boundaries.

In the calculation of the comparative costs of intervention and non-intervention, adolescents and their parents are positioned as inadequate in the task of reproductive behaviour management. Parents are depicted as ineffective in the role of sexuality educator and confessor, and as culpable for the social problems attendant on their daughter conceiving. Teenagers, on the other hand, are positioned as irresponsible, as they are ignorant, promiscuous and prone to experimentation. Contrary to this, service providers reflexively position themselves as experts, who are specialised, have the correct training, and hence are knowledgeable concerning the correct path of action.

The service providers utilise the techniques of pastorship, liberal humanitarianism and the incitement to technologies of the self quite interchangeably in the application of security. Sovereign power is invoked at times in patrolling access to such things as contraception, termination of pregnancy and crisis intervention arrangements. In the position of ‘pastor’, the service provider cares for and guides teenagers and their families; s/he understands what is good for them, and therefore arbitrates concerning the moral correctness of actions, and chastises those who deviate from the correct path. Techniques used by service providers include shame, rightful activity, comfort, supplication to a higher power, and warning and fact-telling. Warning and fact-telling installs security’s pre-occupation with possible and probable events in the everyday lives of teenagers and their families, with warnings being neatly converted into prescriptions for behaviour. In the position of liberal humanist, the service provider does not intervene directly but rather acts on the choices, wishes, values, and conduct of the individual. The principle techniques are individualisation and the provision of the confessional space. The techniques of pastorship and liberal humanism are used interchangeably in the incitement to technologies of the self deployed by service providers. Teenagers are encouraged to control themselves, to know
themselves and to care for themselves. The technology of control is strongly gendered with the control of sexual urges, the patrolling of access to the body, and the avoidance of particular situations and relationships falling into female but not male mastery of the self.

This chapter concludes the analysis section of this thesis. In Chapters 5 to 9, I have analysed the governmental tactics of medicalisation, psychologisation, pedagogisation, the familialisation of alliance, the conjugalisation of reproduction, racialisation, and the economisation of activity as they appear in the technologies of representation (viz. the scientific literature) surrounding teenage pregnancy in South Africa. In this chapter, I have explored how these governmental tactics are installed in the everyday lives of teenagers and their families through the technical mechanisms of security deployed in the technologies of intervention at a regional hospital. In the final chapter of this thesis, I tie the various themes explored by analysing the powerful effects of the governmentality of teenage pregnancy in terms of the gendering effects, and the legitimisation of the intervention of the expert. This is followed by an analysis of how the feminist post-structural approach utilised in the thesis differs from the feminist discourses in evidence in the teenage pregnancy literature, and the contributions that the former approach can make to our understanding of the power relations surrounding teenage pregnancy.
CHAPTER 11

CONCLUSION

I began this thesis with three quotes from the South African literature on teenage pregnancy. I repeat them here, and ask the reader to reflect on how, having read this thesis, s/he reads them differently from the first reading:

The tragedy of teenage pregnancy is fast gaining catastrophic proportions - prevention and proper care are the corner-stones of management. ... Adolescent pregnancy, or teenage pregnancy as it is more commonly called, is the premier social evil of the Third World (Van Coeverden de Groot, 1991, p. 1379).

The need for an investigation into some of the factors associated with unplanned and often unwanted pregnancies among urban Zulu schoolgirls arose from the concern expressed by a number of medical, educational and community authorities. The problem was seen to be self-destructive to the youngsters involved, medically contraindicated and socially disruptive (Craig & Richter-Strydom, 1983, p. 452).

May the international trends not suggest that we are looking at the situation [of black teenage pregnancy] from the wrong perspective - a perspective based on a Western (and in this country, an essentially white) middle-class morality which, at bottom, judges the births to be the result of lax sexual morals and which fails to see that other standards may be admissible in running one's life (Preston-Whyte, 1991, p.37).

In the introductory section of this thesis I indicated that, despite coming from different political positions, these three quotes make two fundamental assumptions, viz. (1) that teenage pregnancy is a real, historically and culturally invariant category, and (2) that the expert may legitimately intervene, firstly, to assist pregnant teenagers and their families, and, secondly, to prevent non-pregnant teenagers from becoming pregnant. These assumptions underlie the scientific literature and professional practice surrounding teenage pregnancy in South Africa. Wetherell & Potter (1992) indicate that 'one way to undermine a "truth" is not to counterpose it with another "truth" but to examine the discursive process by which true and false statements become distinguished' (p. 67). This thesis has essentially been about examining the discursive events of knowledge and health and welfare production surrounding adolescents and their sexual and reproductive behaviour, and how these events, through which a positive knowledge of the pregnant teenager and her non-pregnant counterpart is collected and distributed throughout the social network of
power relations, participate in the various governmental tactics described in broad outline in this thesis. My aim has not been to counterpose the ‘truth’ generated in this process of knowledge and health and welfare production concerning teenage pregnancy with another ‘truth’ which more ‘accurately’ reflects the nature of teenage pregnancy in the late 20th century, but rather to indicate that the construction of this truth is intimately connected to professionalised, gendered, racial and class power relations. The analytics of power and governmentality employed in this thesis create the conditions in which the simple reading of adolescent pregnancy as a social problem which requires expert investigation and intervention (or, alternatively, of teenage pregnancy as a rational decision for teenagers in disadvantaged circumstances, as the revisionists would have it) is no longer possible. It challenges the idea that, given sufficient investigation, the ‘reality’ of teenage pregnancy, its causes and consequences, will emerge, replacing this idea with the notion that the ‘reality’ of teenage pregnancy is a constructed one, something attached, as indicated by Arney & Bergen (1984), to specific historical and social circumstances. It undermines the assumption that, given sufficient knowledge (gained from investigation), appropriate interventions can be instituted to reduce the rate of teenage pregnancy, and to improve the outcomes for the adolescent mother and her child. This is not to say that sexuality and reproductive health programmes do not have effects. The emphasis shifts, however, from the effects of these programmes on, for example, the rates of unprotected sexual intercourse or pregnancy, or the outcomes of adolescent reproduction etc., to the gendering, racialising and class-based effects that the professionalisation of early reproduction has.

By way of concluding this thesis, I wish to achieve three things in this chapter, viz. to examine how (1) the assumption of the ‘reality’ of teenage pregnancy may be undermined; (2) expertise concerning teenage pregnancy is linked to the government of adolescents and their families; and (3) a post-structuralist feminist theoretical framework contributes to understanding the gendering effects of the knowledge and health and welfare production surrounding adolescents and their sexual and reproductive behaviour. Finally, I discuss some of the criticisms that may be made with respect to my work, attempting to answer these, at least partially.
The ‘reality’ of teenage pregnancy

There are two avenues open in the deconstruction of a notion such as ‘teenage pregnancy’. The first is to indicate the historical and social specificity of the concept, viz. to show that the category is not a self-evident, historically invariant one. This task has been carried out by Arney and Bergen (1984), and is not repeated in this thesis. Arney and Bergen discuss how the term ‘teenage pregnancy’, which emerged in the late 1960s and early 1970s, provided the scientifically neutral term required to replace the morally loaded concepts of ‘unwed mother’ and ‘illegitimate child’. The emergence of this term allowed for the scientist to include women who had children early in life in the discourse of scientific investigation and measurement. The scientist does not make moral pronouncements concerning the object of study; instead s/he attempts, through efficacious method, to reveal her underlying nature, her true essence, her internal being, as well as the external factors impinging on her thoughts, emotions, and behaviour. Power has shifted from moral ostracisation to scientific and professional incorporation of the pregnant or mothering teenager in the disciplinary web of surveillance, confession, training of the body and the self, and normalisation.

The second avenue of deconstruction of the ‘reality’ of teenage pregnancy is to open up the concept to reveal the range of absent traces on which it relies for its meaning. This is a Derridian project. As discussed in Chapter 2, Derrida’s concept of différance encapsulates the notions of difference and deferral. Applied in the context of teenage pregnancy, deferral would refer to the manner in which the notion of teenage pregnancy in the present may only be read through the past concepts of the ‘illegitimate child’ and ‘unwed mother’. The ‘illegitimate child’ and ‘unwed mother’ have largely disappeared as objects of scientific investigation. However, we have seen in Chapter 7 how the silent signifier ‘unwed’ pervades the theorising on teenage pregnancy. There is a constant slippage between the terms ‘teenage pregnancy’ and ‘unwed pregnancy’, with early reproduction within the conjugal context being relegated to the category of ‘socially desirable’. Thus, the moralising signifiers ‘illegitimate’ and ‘unwed’, while rendered silent (for the most part), continue to inhabit the neutralised signifier ‘teenage pregnancy’. What the shift from ‘unwed mother’ and ‘illegitimate child’ to ‘teenage pregnancy’ achieves, as with other scientifically ‘neutral’ terms, is the apparent wresting of ‘judgments [of human difference] from
a sphere of values, prejudice, or rule of thumb to the sphere of human truths, equality of standards, cogently justifiable choices, and objective criteria of efficacy’ (Rose, 1992, p. 359). Analysing how the term ‘teenage pregnancy’ is deferred is, however, chiefly a genealogical enterprise, which was beyond the scope of this thesis. Readers are referred to Arney and Bergen (1984) in this regard.

The ‘difference’ part of differance refers to language existing as a system of differences. However, to maintain the illusion of stability, one term of a binary opposition is privileged, creating the impression of essential or intrinsic significance to the term. The production of a positive knowledge of teenage pregnancy relies on the chimera of this knowledge as containing an essentialised meaning, as rendering the world of the young woman ultimately sensible. Part of the aim of this thesis has been to disrupt the seeming stability - the unproblematised presence - of the expert’s discourse on teenage pregnancy. This task is in line with the analytics of power and governmentality outlined in the theoretical chapter. Dean (1999) specifies, for example, that ‘An analytics of government attempts to show that our taken-for-granted ways of doing things and how we think about and question them are not entirely self-evident or necessary’ (p. 21). Thus, a discourse of ‘teenage pregnancy’ is constrained by and constrains the discourses which act as the absent traces, the taken-for-granted assumptions which inhabit it. For example, ‘teenage pregnancy’ stands in assumed opposition to notions such as reasoned reproduction and childhood innocence. It relies on the absent trace of images regarding the proper nature and timing of mothering, the correct formation of the family, and the appropriate context for sex and reproduction. Each of these, in turn, is inhabited by differance. For instance, ‘mothering’ relies on the absent trace of ‘fathering’. Fathering is seldom mentioned in the literature on teenage pregnancy, and where it does feature, it is depicted as different from mothering. The public, custodial role assigned to fathering serves to define and interpenetrate the essentialised private, primary care-giving nature of mothering.

The teenager operates, in Derridian terms, as an undecidable. She disrupts the child/adult dualism; she is not child and not adult, but simultaneously child and adult. She is saturated with adult sexuality, but also devoid thereof. She has a child’s innocence, but at the same time an adult’s knowledge of sexual matters. Being an undecidable renders her open to closer scrutiny.
and investigation. Instead of being consigned to the nether regions of undecidability, like the zombie, the teenager becomes like the virus, endlessly researched and monitored. Substantial efforts are made to render her knowable, to understand her true essence, so that she can finally be ‘decided’. What these efforts achieve, paradoxically, is to deepen her undecidability. As the ‘properties’ of adolescence and adolescent sexuality are mapped in finer detail, so the not-adult/not-child-but-simultaneously-adult-and-child status of the teenager, the contradictions of her undecidability, become more clearly etched. Take, for example, the female adolescent, who is simultaneously included and excluded from the discourse of adolescent emotional turmoil and experimentation. She is included on the basis that she is an adolescent, but excluded because the tenets of this discourse are in opposition to the discourse of femininity. Thus, she becomes simultaneously active (experimenting, albeit obliquely) and passive (as a recipient of external influences).

**Expertise and governmentality**

The authors of the various articles, theses and research reports used as data in this thesis may respond to my comments on the discursive constructions appearing in their work by stating that they were reporting on the ‘facts’ which emerged in the course of their investigations. Using the research instruments available to them at this point in time, they could argue, they reported as accurately as possible on the phenomena which they observed in the course of their research. This would be the standard view of scientific method, one which dominates scientific thought, and which legitimates scientific activity. The service providers could respond by stating that they are employing the best known techniques of medical, psychological and pedagogical science to assist the pregnant teenager as well as her non-pregnant counterpart. Indeed, it is through this image of progress at work (viz. that we are getting closer and closer to the truth, and that this may be used to assist the individual and society) that medicalised, psychologised and pedagogy discourses gain their power. The anatomical lesion becomes whole; the individual attains a state of health and well-being; the community accomplishes wholesome living; people achieve emotional and psychological healing through understanding themselves, others and the essential principles of the world. The expert is presented either as the neutral scientist - the unbiased observer who merely creates the conditions under which the pregnant (or non-pregnant) teenager
reveals herself - or as the beneficent helper - the facilitator under whose guidance the natural progress of healing and transformation of the self takes place. In the words of Parker (1989), this image of progress ‘promises to release us from modern times while actually shackling us to them’ (p. 12). This shackling is achieved through: (1) the assumption that the language used to describe the pregnant or mothering teenager reflects in a neutral way a social or personal reality which pre-exists its description; (2) the use of what Rose (1992) calls rationality and efficacious technique; (3) rendering the pregnant or mothering teenager (as well as her non-pregnant counterpart) the object of government by providing the language needed to describe her and the grids of visibility to bring her into the plane of sight; (4) simultaneously converting this object into a subject of self-government who monitors and regulates herself, and renders herself audible to the expert via the confession. Each of these is discussed in more depth below.

In presenting the language which they use to describe their research and professional practice as the neutral description of an *a priori* object - the pregnant or mothering teenager - experts are engaged in the production of the power relations required to render teenage pregnancy a governable field. Language is seen as the vehicle which allows for the description of a ‘reality’ out there - one may argue about the nature of the ‘reality’, but the ‘fact’ of the ‘reality’ remains constant. A post-structuralist approach undermines this assumption concerning language. In Chapter 2, we saw how Saussure rejected the idea that words gain their meaning through being direct representations of things. Instead, language, he stated, is formed through a system of differences, with constant shifts and slippages occurring between the signifier and signified. Thus, for example, the signifier ‘woman’ does not articulate the signified in a direct word/object association. Instead, ‘woman’, as a signifier, is defined through a dynamic process of difference in relation to other signifiers, such as ‘man’, ‘lady’, ‘girl’, ‘mother’, ‘human’, ‘animal’, etc. This view of language has allowed post-structuralists to explore the constructive effects of discourses: discourse is viewed as simultaneously constructing and restricting what can be said, known, or experienced at a particular socio-historical moment, as well as producing and undermining power relations. An aim of this thesis has been to use an undermining discourse (for example in the deconstruction described above) to expose the power relations immanent in scientific and professionalised discourse concerning teenage pregnancy.

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Social sciences have achieved a privileged knowledge position by claiming to reveal the truth about ourselves through rationality and efficacious method - truths that can only be understood by expert interpreters. While these sciences claim an externality to the workings of power, they are actually part of the deployment of power. Gergen (1992), for example, illustrates how the modernist or structuralist assumptions within mainstream psychology (viz. a basic, knowable subject exists; there are universal psychological processes that can be discovered; research is progressive; correct method provides a guarantee of truth) underlie its ‘imprisoning effects’ (p. 23). Thus, the rationality and efficacious method of psycho-medical experts promise to: (1) reveal the truth of the pregnant and mothering teenager, viz. the consequences and the causes of her problem; (2) uncover the basic medical, psychological and pedagogical processes underlying the issue, which then can be used in efficacious techniques of prevention and reform; and (3) provide the research questions, instruments, and methods of analysis required to perform the above.

Through the use of rationality and efficacious method, the expert renders the pregnant teenager an object of government. Government requires ways of knowing the population, of rendering it calculable, and open to dissection and analysis. Through the operation of practices of research and intervention (investigation, observation, listening, measurement, evaluation, codification, analysis, and representation), the world of events (sexual activity, pregnancies, births, abortions, and parent-child interactions) are made cognizable as a positive knowledge of the nature of adolescence, adolescent sexuality, adolescent reproduction and adolescent parenting. As Rose (1993) puts it ‘Knowledge ... is an apparatus for the production, circulation, accumulation, authorization and realization of truth. And truth is a technical matter - it is the “know how” that promises to make government possible’ (p. 291). Once the object of government is known - her nature ascertained - then programmes of prevention and reform can be instituted to ensure not only her well-being, but also to secure the common good. In the case of teenage pregnancy, the expert investigates the pregnant teenager, intricately following the events leading up to the conception, events occurring during, as well as her approach to, her pregnancy, and finally her relationship with her child, together with the behaviour, emotions and learning achievements of the child. This knowledge is then presented as the unassailable truth concerning teenage pregnancy as it was gathered through scientific method. Although there may be contradictions
and debate in the scientific literature on teenage pregnancy, certain dominant discourses, as elucidated in this thesis, are produced and re-produced. Part of the function of these dominant discourses is to legitimate the intervention of the expert, as truth purveyor and humanitarian caregiver. Experts act on the lives of teenagers and their families, who, in turn, act on their own lives in accordance with the tenets of the knowledge gleaned by the experts. Power is installed in teenager’s lives in a number of ways. As we saw in Chapter 10, health care professionals utilise a range of governmental techniques in their interactions with adolescents and their families. ‘Patients’ are guided, cared for, cajoled into agreeing to certain things, shamed, warned, told the ‘facts’, incited to be true to themselves and to exercise self-vigilance over their actions and emotions, obliged to be free, instructed, denied access to certain things, etc. What underlies all of these techniques is the expert as the ‘truth-teller’, as somebody who knows the fundamental nature of adolescence and adolescent pregnancy.

As the investigator of the human condition, the expert is portrayed as able to ‘see’ things that are not visible to the ordinary person. Thus, the clinical gaze reveals the inner workings of the body of the pregnant teenager, ascertaining her nutritional status, the balance of her blood, the competence of her pelvis to deliver the baby, the amount of amniotic fluid, the orientation of the baby, etc. This gaze judges the adequacy of the pregnant teenager’s body, finding, mostly, that it falls short of the expected. That this supposedly most neutral and scientific of gazes is circumscribed by normalised judgement is evidenced in: (1) the automatic referral of teenagers to the high risk clinic, and (2) extracts quoted in Chapter 8 which took the ‘white’ woman’s anatomical identity and reproductive capacity as the standard against which ‘black’ women’s insufficiency was judged. The psychological gaze monitors the inner workings of the mind, emotions and psyche of the person. Thus, the teenager’s unconscious conflicts, underlying motivations, personality difficulties, etc. are brought to the level of visibility, rendering them open to analysis and dissection. The sociological or anthropological gaze brings social, cultural and population-based tendencies to the plane of sight. As noted, statistics allowed experts to view previously invisible regularities in the population. This gaze permits the characterisation of whole groups of people as displaying certain traits. Thus, for example, ‘black’ people are ‘seen’ to be caught between a traditional and a modern life-style, with ‘black’ teenagers being more prone to conceiving at a young age than ‘white’ teenagers. The pedagogical gaze allows
for the viewing of the processes of learning. It circumscribes how intervention strategies aimed
at the prevention of pregnancy as well as at the remediation of error are designed, and monitors
whether the required learning and assumed associated behavioural change are taking place. All
of these areas (the interior of the body, the person’s psychological make-up, the tendencies of the
population, the act of learning) are sites hidden to non-expert people. This expert gaze is not,
however, merely a perceptual or intellectual skill. It brings things to the surface, giving them an
interpretive gloss, and rendering them audible as discourse. Just as discourse simultaneously
constructs and restricts meaning, so the expert gaze allows and limits what the expert can see.

Expertise operates, in part, through the process of normalisation. In order for the pregnant
tenager to be depicted as having low self-esteem, certain conceptualisations of normal self-
estee are necessary. The consideration of the normal is made possible in the case of teenage
pregnancy through (1) the assumption that it is possible to measure human behaviour and
emotions, and (2) the underlying theme of developmentalism. In the first instance, comparisons
and relative calibrations are made, with those behavioural, psychological and emotional features
falling outside of the ‘normal’ range rendered pathological. In the literature on teenage
pregnancy, it is the pathological that is foregrounded. Teenage pregnancy becomes the
pathological presence, with the process of normalisation being obscured. Part of the role of this
thesis has been to highlight the normalising absent trace on which the pathologisation of the
pregnant teenager and her family rely. In the second case (developmentalism), certain bodily and
emotional functions, and behaviour patterns are defined as occurring within the normal range of
development. Development is depicted as something independent of the social and political
context, as something happening to the individual. It is presented as a process which will unfold
naturally given the correct circumstances. This obscures the power relations implicit the process
of normalisation. To repeat Burman’s (1997) statement: ‘[T]he project of development becomes
a tautology, self-serving and self-maintaining: if the more developed possess what the less
developed lack, then not only do those in power define what development is, they also obscure
the exercise of such power within the naturalizing language of development’ (p. 140).

Government operates, in large part, by transforming the object, which it has rendered visible,
audible and cognizable, into a subject. Thus, surveillance turns to self-surveillance, regulation
to self-regulation, monitoring to self-monitoring. The teenager is not only an object of scientific investigation and professional practice, but also a subject, an individual who labours to understand herself, to become a certain type of person, to behave in certain ways, to control her sexual urges, to patrol access to her body, to make herself attractive to males, to attend to her own health and welfare, and to achieve particular educational, career and social goals. In Chapter 10, we saw how the teenager is incited by experts in the self-technologies of despotism, epistemology and attentiveness. This process is referred to by Dean (1994b) as governmental self-formation.

The operation of power or government in form of governmental self-formation is rendered possible through the creation of the public-private split, as well as through the construction of the individual as an autonomous agent. The portrayal of the private as a domain separate from the public allows for the masking of the effects of power. Ostensibly the events which take place within the private space are outside of the formal scope of public powers. However, the public/private split is spurious, because, as Foucault (1978) shows so succinctly with sexuality, the supposedly private becomes intensely public and political through the plethora of texts, both professional and popular, concerning the private conduct of life. In Rose’s (1992) words ‘The Janus face of expertise enables it to operate as a relay between government and privacy - their claims to truth and efficacy appealing, on the one hand, to governments ... and, on the other hand, to those ... attempting to manage their own private affairs efficaciously’. Thus, for example, the mother’s labours in the supposedly private domain are circumscribed by professionalised images of infant development and good mothering practices, images which infiltrate the ‘private’ realm in a variety of ways (as Burman (1994) indicates, through (1) direct intervention in women’s lives - e.g. advice from nurses; (2) women’s subscription to psychological accounts presented in the popular media, child-care books, etc.; and (3) the impact developmental psychology has on the cultural climate and provision of services for mothers and their children). Within the private realm, the person is constructed as autonomous, free to choose or decide on the basis of individualised motives, needs and aspirations. However, in the modern age, psycho-medical expertise ‘tabulates and regulates a population of already modern subjects schooled to anticipate and understand themselves in psychological texts’ (Parker, 1996, p. 143). Thus, the technologies of psycho-medical expertise promise to ‘sustain, respect and restore selfhood’ (Rose, 1992, p. 367) and as such participate in the production and regulation of the individual. This is not to say
that psycho-medical expertise determines forms of subjectivity, but rather that it is successful as a form of government to the extent that individuals come to experience themselves according to the psychological types, behaviours, characteristics and qualities attributed to them by psycho-medical discourse.

Part of the power of expertise has been the loosening of its domain of operation from the laboratory, the clinical examination room and the expert’s office. Expertise is no longer just about making the sick better or the recalcitrant conform. It has extended its surveillance to everybody, and everybody becomes ensnared in the net of health and welfare production and maintenance. Every detail of people’s lives is monitored, not only by experts, but by people themselves. The clinical gaze, which constructed the body of the individual, is augmented to include surveillance of the each aspect of the human condition, and, eventually, self-surveillance, the gaze which disciplines the self. In the service of this extension of the expert’s gaze, the community is invoked as the vehicle of intervention. A discourse of participation, and the homogenising effect of the use of the words ‘community’ and ‘peer group’ allow the expert to exercise power in an oblique fashion. S/he no longer instructs or directs, but rather facilitates naturally occurring processes - processes which the expert understands. The ‘community’ is incited to become its own overseer, monitoring whether the actions of its members are in keeping with the tenets of well-being as laid out by the expert.

Expertise becomes a self-legitimating exercise, with the dominant discourses that appear in the scientific literature and that are invoked by service providers justifying the continued investigation and intervention into pregnant and non-pregnant teenagers’ lives. Throughout the thesis I have indicated how the various discourses and governmental tactics discussed act as legitimating tools. Examples include:

- The ‘adolescence as a transitional phase’ discourse which enables the expert, as an adult, to be positioned as ‘rational’ and ‘emotionally mature’, as opposed to the teenager who is in a phase of cognitive development and emotional turmoil.
- The ‘skill’ discourse of mothering which, in defining mothering as a requiring a set of basic skills, allows for the intervention of the expert through the process of pedagogisation of mothering ‘skills’.

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The familialisation of alliance which, in presenting the family as a natural phenomenon that is culturally and historically invariable, allows experts to scrutinise family formation and function and to make pronouncements concerning beneficial relations of alliance.

The traditionalisation and culturalisation of ‘black’ people, which exoticises them and renders them the pathologised presence, while at the same time obscuring the normalised absence - the ‘rational’, ‘white’ expert, who describes, understands and tolerates the traditions and cultural peculiarities of ‘black’ people.

The economisation of activity which enables the positioning of the pregnant teenager as fracturing economised security, and creates the impetus for the intervention of the expert for the common good, as well for the health and welfare of the individual teenager.

The deployment of a variety of governmental techniques by the service provider strengthens his/her position of power vis-à-vis the teenager and her family. When one strategy is not producing the desired result, another may be used. Thus, if incitement to the self technology of control proves ineffective, warning and fact-telling or castigation and shaming can be brought in. If the incitement to the self technology of epistemology with regard to the termination of pregnancy decisions does not work, then sovereign-like decisions concerning who may terminate and who may not, and who should be served first may be taken by the service providers. While the expert is relatively powerful vis-à-vis the teenager, s/he is also subject to panoptical surveillance. S/he is incited to exercise vigilance over his/her conduct, comparing his/her professional actions with those of the ideal image of the competent, caring professional. This is reinforced by a rhetoric of ethics which positions the expert as making decisions concerning correct and beneficial practice, and which, therefore, is able to discipline members of the psycho-medical profession through the simple play of awards (e.g. feelings of achievement at having maintained high ethical standards), and, in the final, instance through censure.
Feminist post-structuralism and the gendering effects of knowledge and health production regarding teenage pregnancy

Ann Oakley (1981) states, ‘[H]ow reproduction is managed and controlled is inseparable from how women are managed and controlled’ (p. 206). In this thesis, I have indicated how young women are governed through the investigation and representation of, and intervention regarding, their reproductive behaviour. That this is not just about young women but about women in general, however, is evidenced in the reliance of a discourse of teenage pregnancy on the absent trace of normal adulthood (which has gendered connotations with the ‘normal’ adult who represents the ideal endpoint of successful development being, to a large extent, coterminous with the rational, ‘white’, middle-class male), good mothering, marriage as the appropriate setting for child-bearing, etc. Thus, the topic of ‘teenage pregnancy’ is incontrovertibly a feminist issue as it is essentially about gendered relations not only with regard to young women but also with regard to women in general. Although related topics, such as mothering and the lone female parent, have received a fair amount of attention in feminist circles, teenage pregnancy itself seems largely to have been ignored (isolated examples of feminist writings on the topic include Chilman (1985), Fine (1988) and Phoenix (1994)).

In Chapter 2, I delineated a feminist approach aligned to a Foucauldian post-structuralism - what Sawicki (1991) calls radically plural feminisms. I indicated that some feminists are critical of Foucauldian analytics. In this section of the concluding chapter, I shall attempt to explicate the contribution such an approach can make in the broad feminist endeavour with regard to the field of teenage pregnancy. I shall do this by comparing what has proceeded with the odd instances of feminist discourse evidenced in the South African literature on teenage pregnancy.

A feminist discourse appears in the writings of only a few authors in the South African teenage pregnancy literature. It is the language through which the gendered nature of teenage pregnancy is foregrounded. It provides the rhetoric for resistance to the dominant discourses surrounding gendered sexual relations. Words such as ‘power differentials, inequities and double standards’ (Wood, Maforah & Jewkes, 1996, p. 7), ‘empower’ (Wood et al., 1996, p. 1), ‘unequal gender-
based interaction’ (Preston-Whyte & Zondi, 1991, p. 1393), and ‘sexist attitude’ (Setiloane, 1990, p. 9) characterise the feminist discourse in the teenage pregnancy literature. The major theme that emerges is the issue of control. Consider the following extract:

This report presents the findings of a Medical Research Council study conducted among Xhosa-speaking adolescent women which revealed pervasive male control over almost every aspect of their early sexual experiences, and the male enactment of this in part through violent and coercive practices during sexual encounters. In discussing the findings the authors argue that violence against women has been widely neglected in health research and intervention, and more especially so in the adolescent sexuality arena. There is an urgent need to open up new avenues for intervention in the area of adolescent sexuality, in particular focussing on violence, if it is to be possible to create a space in which young women can empower themselves to control their sexuality, sexual experiences and reproductive health (Wood et al., 1996, p. 1).

In this extract, the authors’ feminist agenda is clear. However, they fall prey to similar basic assumptions of personhood and the nature of sexuality and power as is evident in the deployment of the other discourses discussed in this thesis. Power is seen as being possessed by individuals (or classes of individuals - in this case men); people are depicted as autonomous, rational creatures who would be able to seize power given the correct circumstances (in this case women who ‘empower themselves’). Sexuality is medicalised, individualised, and depicted as an arena which requires professional intervention (albeit with a feminist content); it is depicted as an activity over which an individual, given the motivation, can exercise complete control. All of these assumptions have been problematised in this thesis, and there is no need to repeat the critique here. However, what I do wish to emphasise is that the ‘how’ of the matter remains unanswered. How is it possible that men are able to engage in violent and coercive practices? What are the discursive events which allow violence against women to be neglected? I would argue that the answer to these questions is vital in terms of how the feminist project proceeds, and furthermore that a post-structural feminism can go a long way towards unravelling them. Grosz (1990) was quoted in Chapter 2 as saying that we need to take ‘strategically located strikes at power’s most vulnerable places’ (p. 92). If we are to pinpoint where to strategically strike, we need to be able to answer questions concerning the conditions of possibility of gendered power relations. By way of example, one could hypothesise that the gendered nature of the hydraulic thesis of sexuality (i.e. that men are more sexually driven than women), the hystericisation of women (i.e. their saturation with sexuality owing to their reproductive capacity), the positioning
of adolescent females as the passive recipients of external influences and the corresponding masculinisation of the discourse of adolescent experimentation and turmoil are some of the discursive conditions of possibility which naturalise coercive sexual relations among young people. An analysis of the discursive constructions available to young women indicates the double bind they are placed in with regard to sexualised interactions. We have seen, for example, how the positioning of the male as sexually driven incites females, on the one hand, to occupy the position of the object of the ‘male sex drive’ by, inter alia, making themselves attractive, and, on the other, to resist this positioning by curbing the male’s sexual advances. This double bind is coupled with a marginalisation of the one discourse which attributes agency to the female, which allows her to take up a subject position in (hetero)sexual relations, viz. the discourse of female sexual desire/pleasure. A post-structural feminism allows for a different set of ‘conclusions’ regarding what needs to be done concerning issues such as violent or coercive sexual interactions. Thus, for example, instead of designing interventions which instruct, encourage or cajole women to ‘empower themselves’ or ‘take control’ (all of which may be ineffective or even counterproductive because when violence is used to overcome resistance, the limits of power have been reached, as Foucault (1978) points out), a possibility would be to undermine, through a number of avenues, the discursive constructions which render coercive or violent sexual relations possible.

Assumptions concerning the nature of culture and the boundedness of categories of race are also in evidence in the feminist discourse of control appearing in the South African literature:

Paradoxically it is the black women who deliberately choose to have children in the absence of marriage who comes closest to her [sic] Western sister who refuses to bear children unless she wants them, in controlling her own reproduction (Preston-Whyte, 1991, p. 27).

In forefronting the issue of control in women’s lives, the author is alluding to a feminist agenda. However, she re-produces the tactic of racialisation we have evidenced in the rest of the teenage pregnancy literature, albeit in a different form. The governmental tactic of racialisation allows for ‘black’ women to be cast as more deviant than their ‘white’ counterparts. We saw in this thesis, for example, how: the anatomical identity of the ‘black’ woman is defined as inadequate in comparison with the ‘white’ woman; her psychological make-up is seen as in need of
explanation; her actions are exoticized through the labels of ‘traditional’ and ‘cultural’ which render her open to further investigation and analysis; the image of the breakdown of tradition places her as an empty vessel open to negative outside influences; the thesis of ‘acculturation’ is utilised to explain her participation in social problems such as teenage pregnancy. The ‘black’ woman represents the Other in the teenage pregnancy literature with ‘whiteness’ as the obscured absent trace. She may become ‘westernised’ or ‘urbanised’ but not ‘western’ or ‘urban’. Whether intentionally or not, the ‘Western sister’ is held up in the above passage as the epitome of feminist control over reproduction. The ‘black’ woman is contrasted to her and found to nearly reach her level (‘comes closest’). The author reinforces a particular reading of what ‘control’ means (in this case refusing to have children) by appearing somewhat quizzical (the use of the word ‘paradoxically’) at the suggestion that actually having children may represent control.

The aim of Chapter 8 of this thesis was to undermine this type of usage of racialised categories, exposing how they rely on a privileging of the taken-for-granted characteristics of the normalised absent ‘white’ trace. A post-structuralist feminism allows for the deconstruction not only of gendered power relations, but for an analysis of how racialised, class-based and gendered power relations intersect, and mutually reinforce each other.

The explanatory framework utilised in the instances of feminist discourse in evidence in the South African literature on teenage pregnancy tends to draw on socialisation theory. Consider the following excerpt:

South Africa is, in general a male oriented society; a society that socialises both boys and girls into believing that males have more sexual ‘rights’ than females. However, this sexist attitude may have a detrimental effect on the society as a whole, in that it may erode the male’s sense of sexual responsibility. ... Sex education programmes need to beware that they do not perpetuate the stereotypic and sexist view of contraceptives as a female responsibility (Setiloane, 1990, p. 9).

Gendered relations are seen in this extract to reside in ‘beliefs’. These beliefs are somewhere out in society and they, somehow, get inside the individual. Apart from leaving the individual/society divide intact (Henriques et al., 1984), socialisation theory used in this context glosses over the issue of power. The notion of ‘belief’ (which allows a space for the opposite - ‘facts’, which are what experts specialise in) implies that (1) corrective action can be taken to replace the faulty belief with the correct one, viz. through a process of pedagogisation, as
suggested in the passage, and that (2) power relations and actions are categories separate from
the cognitive activity undergirding belief (they are seen as separate categories that ‘influence’
each other). The interwovenness of power relations and knowledge remains untheorised in this
approach. A post-structural feminism is able to overcome the individual/society divide by
indicating how subjectivity may be formed around investment in particular discourses (this has
not been a focus of this thesis, but the reader is referred to Henriques et al. (1984) in this regard).
Furthermore, it provides a tool for reflexivity concerning expert interventions, and how these may
be used to achieve powerful effects.

A reading of this thesis indicates the intensity of the gendering effects of the governmental tactics
deployed in the scientific literature and professional practice regarding teenage pregnancy.
Several taken-for-granted assumptions and governmental strategies (regarding the nature of
adolescence, mothering, the family, racialisation, economisation, etc.) intersect around the notion
of teenage pregnancy, creating a self-perpetuating and self-reinforcing domain of gendered
governmentality. In the following, I give a brief summary of the gendering effects highlighted
in the thesis.

Pregnancy is an occurrence which takes place within a male-female relationship. It is saturated
with gendered relations. However, in the literature on teenage pregnancy, as well as in the
literature concerning reproduction in general, it is the female who is foregrounded. The male
remains essentially invisible, surfacing to the level of visibility in oblique ways (for example, as
seen in this thesis, as an older male preying on the younger woman’s need for financial support,
as a victim of the ensnaring female, as the financial supporter). When the male is rendered
visible, it is in relation to a female. The female brings him into the plane of sight. However, the
female stands on her own in the literature and in professional discourse. She is observed and
calibrated as if her actions were not performed within gendered relations; her biological
capacities, learning potential, behaviour, and psychological and emotional state are closely
monitored, rendering her visible and audible to the expert, and hence open to intervention. The
emphasis on the gendered relation when the male is foregrounded, and the de-emphasis thereof
in the intricate machinations concerning the teenage female has strong gendering effects. The
young woman is rendered simultaneously innocent and deviant, but ultimately culpable for the
social dilemma of teenage pregnancy. It is she who is ignorant concerning sexuality and reproduction (as opposed to the male); she is the one who does not use contraceptives adequately (as opposed to the male); she is responsible for patrolling the timing and suitability of sexual contact (as opposed to the male); her decisions regarding the outcome of the pregnancy and child-care arrangements affects the future of the child (as opposed to the male’s); her ability to parent is called into question (as opposed to the male’s); and so it goes on.

Turning to the construction of adolescence, we have seen how part of the discourse of adolescence as a ‘transitional’ phase is the notion of emotional turmoil and experimentation. This generalised definition of adolescence finds foothold in the teenage pregnancy literature, but with contradictions. Because the adolescent spoken about is female, and because the tenets of femininity are, to a large extent, contradictory to the experimenting adolescent, the female adolescent enters the domain of the experimenter in oblique ways (for example, by being ‘uncertain’ rather than ‘restless’ or seeking ‘clarification’ rather than ‘experimenting’). Her major positioning is the opposite of the masculinised experimenter, viz. the passive recipient of external influences. As such, the female is depicted as being open to a variety of negative external impressions, including the messages gained from peers, poor communication from parents, and male sexual advances, depictions which assist in her pathologisation for engaging in behaviour which leads to pregnancy.

The familisation of alliance is gendered both in terms of the functionalisation and formation of the family. The first of these is illustrated by the functional deviance of families being, in some part, attributed to women who work outside the home. The gendering of functions such as communication and emotional involvement with children means that the mother’s and not the father’s absence from the home is seen as contributing to the family failing to produce the affectively actualised, responsible citizen. In terms of the formation of families, the association of single parent or female-headed households with poverty (which is oft repeated in the general psychological literature, as well as in the literature on teenage pregnancy) has a number of gendering effects. Firstly, the female-headed and single parent association relies on the assumptions that (1) there needs to be a head of family, and (2) men are naturally the head of two-parent families. Male ‘headship’ is seldom mentioned, but remains the normalised absence.
Secondly, the female-headed household/lower socio-economic status association serves to pathologise women who are forced or choose to parent alone. Instead of the conditions of possibility under which single female parent families come to occupy positions of poverty being analysed, these women are depicted as contributing, through their actions, to poverty.

The depiction of mothering as a stable, inviolable category, which is culturally and historically invariant has important effects in woman’s lives. It allows for experts to make pronouncements concerning good mothering practices, and to declare the mothering abilities of teenagers inadequate. The various discourses concerning mothering appearing in the literature have gendering effects. The ‘skill’ discourse of mothering, for instance, has implications in terms of the regulation of women. Women monitor their parenting behaviour, adjusting their actions according to the principles laid out by nurses, child-care manuals, magazines etc.. The ‘motherhood as a pathway to womanhood’ discourse gives lie to the gendered assumption that the type of adulthood achieved by women is different from that achieved by men. Women are depicted as attaining adulthood through relationship with another, either a man (through marriage), or a child, whereas men are depicted as achieving this status through instrumental activity such as career building. The concentration on the mother-child dyad and the saturation of the literature with Bowlbyism leaves wider social, gendered and personal relations of power unanalysed, and allows for the splitting of the private (which is feminised) from the public (which is masculinised), a split that is spurious, as indicated, in terms of the operation of power. What the private/public split achieves is the rendering of marginal mothers such as teenage mothers as culpable for social problems, while at the same time depriving them of effective social influence.

Not only are women depicted as achieving adulthood through relationship with a man, but also they are accorded the right to conceive and bear children only within the conjugal relationship. I have indicated in this thesis how wed teenage pregnancy is relegated to the unproblematic (suddenly all concerns regarding obstetric difficulties, the teenager’s ability to mother etc. disappear), while at the same time ‘teenage pregnancy’ as a term assumes lack of a conjugal relationship - ‘unwed’ is the absent signifier which makes much of the pathologisation of teenage pregnancy possible. The governmental tactic of the conjugalisation of reproduction has
important regulating effects in women’s lives. Those forced or choosing to parent alone, or to leave an unsatisfactory relationship with a man are relegated to ‘single parent’ or ‘broken family’ status, with the attendant pathologisation. The husband-wife deployment of sexuality is ruptured in single female parent and ‘broken’ families, leaving the space open for the woman to be cast as a sexual deviant, and for her children to be cast either as illegitimate or as psychologically scarred.

The management of risk deployed at the interface between the teenager and service provider centres around gendered (and racialised) lines. Early fatherhood is not portrayed as being saturated with personalised or social risk in the same way that early motherhood is. The focus of preventive and ameliorative interventions is young women, with lip service being paid to extending these services to young men. A clear example of this is the encouragement of young women in (hetero)sexuality education and counselling to exercise the self technology of control with regard to sexual interactions with men. Patrolling access to the body, controlling sexual urges, and avoidance of particular sexualised situations and relations are firmly placed in the female rather than male mastery of the self.

The basic assumptions made in the economisation of activity, viz. that the individual engaging in economic activities is the ‘rational economic man’, and that activities invested with economic worth take place in the public sphere while those which have no economic worth are undertaken in the private domain, are heavily gendered. The masculinisation of the rational economic man allows women four potential positions in relation to this man, each of which has gendering effects. The dependent woman occupies the private sphere with the activities she performs in the home or outside the home relegated to the status of ‘not work’ and ‘unskilful’. The economic woman engages in economised activities in the public sphere, but only in her capacity as a woman, not as a mother. Female economic activity and child-bearing are depicted as mutually exclusive, with those women entering the public domain positioned as jeopardising their children’s futures. No such exclusion exists in terms of male economic activity. Indeed, greater economised gain for a man is depicted as bringing greater security for his children. The loose woman is portrayed as dangerous as she poses a threat to the tenets of the rational economic man through her use of private matters (viz. sex) for economised gain. The poor woman is one who
is unable to gain access to resources by being dependent, economic or loose. Statements which suggest that males are emasculated in conditions of poverty, and that poverty is feminised give lie to the underlying gendered assumptions of the economisation of activity.

The governmentality of teenage pregnancy utilises an ensemble of techniques, tactics, strategies, institutions and methods to achieve particular gendering effects, as specified above. Teenage pregnancy represents the intersection of a range of assumptions regarding the family, mothering, teen-age, sexuality, etc. As such, it is an over-specified domain. This, paradoxically, creates the conditions of possibility for more points of resistance both by service providers and teenagers. The pregnant teenager, for example, may refuse being medicalised by not attending ante-natal classes; she refuse being psychologised by deciding not to partake in the counselling offered her prior to a termination of pregnancy; she may fracture the tenets of feminised adolescence by acting in a particularly adult or masculinised manner; she may refuse her pathologisation as an inadequate mother by providing good child-care while at the same time continuing with her education; and so the list continues.

Concluding comments

I have attempted in this thesis to elucidate the governmentality of teenage pregnancy as evidenced in the scientific literature and professional practice which focus on young women and their sexuality and reproductive behaviour in South Africa. I have explored how the ensemble formed by research techniques, analysis and representation, youth health care institutions, and service provider intervention practices and discourses simultaneously draw on and contribute to various governmental tactics and taken-for-granted assumptions. I have indicated how these governmental tactics are installed in the everyday lives of teenagers. In my illustration of the governmental tactics surrounding teenage pregnancy I may have created the image of a seamless system of power relations. This is not my intention. I have noted various contradictions throughout the thesis (for example, how pregnant teenagers are simultaneously normalised and pathologised; how sexuality is portrayed as simultaneously contrary and natural to adolescents; how parents are simultaneously portrayed as the primary sex educators of their children and as
deficient in this regard). However, my focus on expertise may have created the impression that there is little room for manoeuvring for teenagers and their families. The strategies of resistance and the failure of governmental tactics are not focussed upon, and could possibly be topics of future research. At this point, it will have to suffice to quote the words of Miller and Rose (1993):

[S]uch attempts [at governmentality] are rarely implanted unscathed, and are seldom adjudged to have achieved what they set out to do. Whilst ‘governmentality’ is eternally optimistic, ‘government’ is a congenitally failing operation. The world of programmes is heterogeneous and rivalrous, and the solutions for one programme tend to be the problems for another. ‘Reality’ always escapes the theories that inform programmes and the ambitions that underpin them; it is too unruly to be captured by any perfect knowledge (p. 79).

Many research reports engage in the practice of making recommendations aimed either at policy makers or practitioners. In the area of teenage pregnancy this usually includes a call for more preventive action in the form of sex education and ready access to contraceptives, the training of service providers in how to deal with pregnant teenagers and their families, and the inclusion of peer and other community groups in interventions. The type of research engaged in in this thesis does not easily lend itself to firm, concrete recommendations. Nevertheless, this does not mean that there are no implications for practice, as is being recognised by post-structural authors in areas of practice such as psycho-therapy (see the collection of papers edited by Parker, 1999) and educational case conferences (Marks, E.Burman, L. Burman & Parker, 1995). However, as the theorisation of the object of study is a radical departure from theorisations underlying mainstream as well as revisionist practice, the starting point remains: (1) a deconstruction of the taken-for-granted assumptions that guide policy and practice and (2) an analysis of the historical and social location as well as the racialising, gendering and class-based effects of the policies and practices. In the end, the actual practices engaged in may look the same on the exterior. Sex education classes may still take place; teenagers wishing to terminate their pregnancies may still be counselled; researchers may still interview pregnant teenagers. However, these would be practised in a deconstructing manner. Emphasis would be placed on reflecting upon and undermining power relations within the service provision relationship as well as those impinging on the occurrence of the ‘problem’. Examples of the former would include an examination of
the status differentials between service provider and teenager forged by social markers such as age, possibly gender and race, and by institutional position and training. An example of the latter is the exploration in sex education programmes of dominant discourses concerning mothering and how these shape teenagers’ lives and the content of media messages regarding gender and sexual relations. The expert/teenager relationship would shift from a facilitative to a dialogical one, with the techniques of pastorship and liberal humanism and the incitement to the technologies of the self being replaced with a mutual exploration of empowering and disempowering discursive events impinging on both the service providers’ and teenagers’ lives. Interventions would focus on the intersection of the personal and political without reducing one to another. They would examine dominant discourses, attempting to undermine their (dominant discourses) racialising, gendering and class-based effects; marginalised discourses (e.g. the ‘female sexual desire’ discourse), absent traces (e.g. the father or ‘whiteness’ when discussing ‘black’ teenage pregnancy) and practices of resistance would be brought to the surface for scrutiny. Terms, such as ‘community’, ‘peer group’ and even ‘adolescent’ could no longer be used in their original form. Even if other terms do not take their place, they would be utilised in their deconstructed form. The contradictory nature of subjectivity and the complexity of the decision-making process would be recognised. In the words of Parker (1999), ‘deconstruction itself is an invisible friend that [can be] taken into the process of psychotherapy [or any other intervention] and [can] assist a progressive reworking of the encounter and the institution’ (p. 11). What is required is a process of getting to know this ‘friend’ and its potentialities. The responsibility for this lies with those in pedagogic positions in universities and other training centres.
REFERENCES


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4 The references in this list (international and South African) consist of those used in the text of the thesis. A separate list of data references (from which the data extracts in Chapters 5 to 9 were drawn) appears in Appendix 1.


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APPENDIX 1

Data references: South African literature on teenage pregnancy


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5 The references appearing in this list represent all the articles, chapters, dissertations and research reports used in the analysis of the scientific literature. Not all appear in the extracts of Chapters 5 to 9, but all were used in the body of data analysed.


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APPENDIX 2

Interview schedule with service providers

Statement of purpose of research: gain information on the understanding and experience of service providers with respect to teenage pregnancy.

Statement of confidentiality and right to refuse participation; permission to use audio-tape.

Questions

Describe your unit's involvement with teenage pregnancy.

What is your unit's approach to pregnant teenagers/teenage pregnancy?

Describe in concrete detail what it is that you personally do with regard to pregnant teenagers/teenage pregnancy.

Can you give me an example of the most difficult case with which you have dealt? How did you deal with the situation?

Would you deal with the case in any different way now?

Can you give me an example of the easiest case with which you have dealt? How did you deal with the situation?

What type of teenager do you have presenting at your unit?

What is it that teenagers gain from coming to your unit?
What recommendations would you make concerning the treatment of pregnant teenagers in your unit? How do you think things could be improved? What changes would you like to see?

What training did you receive with regards to teenage pregnancy?

Did the training equip you well in dealing with teenage pregnancy?

In the light of your experience, what changes should be brought about in the training of health professionals with respect to teenage pregnancy?

What other units or institutions are you aware of, both within the health sector and outside it, that are dealing with the issue of teenage pregnancy in some way?

Of these, which do you feel is dealing with the issue most effectively? What is it that they are doing that makes their intervention effective?

What additional services to you think are necessary with regards to teenage pregnancy?

Which services should be discontinued or cut back?

Who else should be involved with teenage pregnancy?

Who should not be involved?

What concerns you most about teenage pregnancy?

What concerns you least?

What do you think contributes to teenagers becoming pregnant?

What are the consequences of teenage pregnancy, in your view?
What is the community’s response to teenage pregnancy?

How do you think this should change?

There was a case last year reported in the newspaper where a headmaster of a school insisted that all female students in the school go for a pregnancy test (even if they had never had sexual intercourse). What would your comment be on this practice?

THANK YOU FOR YOUR PARTICIPATION