SOCIAL CONSTRUCTION OF MEANINGS ABOUT PREGNANCY-MOTHERHOOD AMONG ADOLESCENTS

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ABSTRACT: This study aimed to comprehend the social construction of meanings about pregnancy-motherhood among pregnant adolescents. An explicative study, conducted in 2014, with 12 adolescents, using individual and group interview, local context observation, consultation of documents and precepts of Fairclough’s Critical Discourse Analysis. The meaning of compatibility between pregnancy and adolescence was found, and the contraposition to the dominant discourse of adolescent pregnancy as a problem. The event answered that to which teenagers projected for themselves, in a restricted context of social opportunities. They valued it as a social ideal of maternity and family constitution, foreseeing social recognition, evidence of femininity and greater power and autonomy. However, these gains showed themselves crossed by difficulties seen, such as confronting the family evaluation and the “painful” parity. The comprehension contextualized of these meanings and of the social and ideological content is essential to the development of a higher degree of autonomy-accountability of adolescents.


CONSTRUÇÃO SOCIAL DE SENTIDOS SOBRE A GRAVIDEZ-MATERNIDADE ENTRE ADOLESCENTES

RESUMO: Buscou-se compreender a construção social de sentidos sobre a gravidez-maternidade entre adolescentes grávidas. Estudo explicativo, realizado em 2014, com 12 adolescentes, por meio de entrevista individual e grupal, observação do contexto local, consulta a documentos e preceitos da Análise de Discurso Crítica de Fairclough. Encontrou-se o sentido de compatibilidade entre a gravidez e a adolescência e de contraposição ao discurso dominante de gravidez adolescente como um problema. O evento respondia ao que as adolescentes projetavam para si, em um contexto restrito de oportunidades sociais. Valorizavam-no com base em um ideal social de maternidade e de constituição familiar, prevendo reconhecimento social, comprovação da feminilidade e maior poder e autonomia. Contudo, esses ganhos mostraram-se atravessados por dificuldades percebidas, tais como enfrentar o crivo familiar e a “dolorosa” parturição. A compreensão contextualizada desses sentidos e de seu conteúdo social e ideológico é essencial ao desenvolvimento de maior grau de autonomia-responsabilização das adolescentes.


CONSTRUCCIÓN SOCIAL DE SENTIDOS SOBRE LA EMBARAZO-MATERNIDAD ENTRE ADOLESCENTES

RESUMEN: Se buscó comprender la construcción social de sentidos sobre embarazo-maternidad entre adolescentes embarazadas. Estudio explicativo, realizado en 2014, con 12 adolescentes, por medio de entrevista individual y grupal, observación del contexto local, consulta a documentos y preceptos de Análisis de Discurso Crítica de Fairclough. Se encontró el sentido de compatibilidad entre el embarazo y adolescencia y de contraposición al discurso dominante de embarazo como un problema. El evento respondía a que las adolescentes proyectaban para sí, en uno contexto restringido de oportunidades sociales. Lo valoran con base en un ideal social de maternidad y de constitución familiar, previendo reconocimiento social, comprobación de feminidad y mayor poder y autonomía. Sin embargo, esas ganancias se muestran atravesadas por dificultades percibidas, como enfrentar el juicio familiar y el “doloroso” parto. La comprensión contextualizada de estos sentidos y su contenido social e ideológico es esencial al desarrollo de mayor grado de autonomía-responsabilidad de adolescentes.

INTRODUCTION

Little space is commonly given during prenatal care to the experiences and perceptions of adolescents experiencing pregnancy and motherhood, denying the importance of these issues throughout the current pregnancy and also for the planning of a future pregnancy. The feelings of health workers overlap the teenagers’ sensitivity. Studies on prenatal care, conducted in various contexts, indicate the presence of mechanical actions, as well as imposing impersonal relations, in addition to moralizing behavior and accountability of the teenagers for their pregnancy, which is considered socially “improper” for the adolescent.

The need to change these practices requires, among other things, the comprehension of the subjectivity involved when one is dealing with her own fertility. The understanding and the contextualization of the lifestyle and the way teenagers feel about their lives, pregnancy experience and motherhood is also required, as it is intrinsically linked to how teens make those decisions, how they plan their future, and how they develop self-care practices.

Several studies describe and discuss the experiences and perceptions of the group, especially women, about the process of teen pregnancy. They deal with different aspects of the issue - the onset and consequences of pregnancy and motherhood, the activities and plans made by adolescents, the sources of support, among others - in different times and different situations of the reproductive process or otherwise, favoring contexts that are sometimes less vulnerable, sometimes more vulnerable. The perceptions adopted in each one of the contexts are diverse and make important contributions to the comprehension of this issue, but even though some studies are focused on the social and relational nature of the experience and the meanings assigned by teenagers, most of the investigations emphasize the negative aspects of the phenomenon.

Given this characteristic of the scientific literature, this study considers as its object the specific way that teenagers signify the experience of their ongoing pregnancy, through the analysis of social meanings identified in their statements, highlighting ideological aspects.

As established by the social theory of discourse, meanings are interpreted as socio-political constructs. It is assumed that the meanings conveyed by the statements concern the way of perceiving, classifying and acting in the world, becoming changeable and negotiable social constructs in interaction and communication, integrated into power relationships, according to the context. The statements reveal how people position themselves in the world and compete against or assist with building different meanings for the phenomenon.

Even when expressed by a single interlocutor, the entirety of a statement represents multiple voices (polyphony) in integration and/or confrontation, that is, in social struggle for discursive supremacy, in order to guarantee the hegemony of ideas. This property of statements - filled with fragments of other texts or voices that can appear clearly or merged and mixed with others, assimilating, echoing ironically, among other things - is a characteristic related to the hegemony, since the voices represent different interests and powers.

In the struggle for discursive supremacy, ideology is essential. The statements, as ideological practices, embody meanings that provide permanence and/or the reorganization of relationships of domination. Therefore, it is particularly effective when one naturalizes some ideas that achieve a status of common sense.

The discourse production occurs from the individual and social heritage from people/groups in different contexts. In this study, we highlight the existential context that locates the interlocutor in the world – his/her life story, peers, gender issues, social condition, age, and so on - in a particular time and space. This scenario triggers the intertextual network and controls the articulation of other backgrounds.

Considering this theoretical perspective, the study aimed to understand the constitution of the meanings of pregnancy and motherhood among pregnant adolescents living in poor areas of Cuiabá, Mato Grosso, using the distinction of the various voices that made up the statements, the perspective of domination, and the overcoming that incorporates these themes.

METHODS

The study has a qualitative and explanatory design. Twelve adolescents enrolled in prenatal care in the Family Health Units (FHU) in the Southern Region of Cuiabá, Mato Grosso, participated in the study. We considered as desirable attributes for the participants: a maximum of 28 weeks of gestation (so that data collection did not coincide
with the time of delivery); 15 to 18 years of age (assuming a certain homogeneity of this stage of adolescence); attending at least two prenatal care consultations (to capture their perceptions on prenatal care); residence in the vicinity of the selected FHU (to include teenagers with a similar life context). The definition of the total number of participants considered the data sufficiency (saturation criteria) based on the thematic classification of the material.

Given the number of participants, the inclusion of four FHU in the southern region of the city was enough for data sufficiency. These FHU met the following criteria: located in an urban area; prenatal care performed by a medical doctor and a nurse; at least five teenagers enrolled in this type of care. The last two criteria were considered to assess the medical and nursing consultations as tools for the adolescents to build meaning. At least two teenagers per FHU participated in the study.

The empirical and analytical activities took place from April to September of 2014. The study was approved by the Research Ethics Committee (process 624671/2014) and obtained the permission of the participants and their legal guardians through the Agreement Form and Terms of Free and Informed Consent, respectively. The standards of 466/2012 Law from the Health National Council were followed. Fictitious names were assigned to the participants.

The absorption of the statements of teenagers about pregnancy and motherhood was performed using individual and in-groups interviews. First, in each unit that was part of the research, two group meetings were held, of one hour each: 1) to build trust between the participants and to share their life stories; and 2) to explore their ideas on the topic of interest. For this purpose, we used four specific dynamics. These interviews included two to four teenagers, in addition to the researcher. The small number favored the participation of all teenagers, the integration among themselves, and the exchange of experiences related to the investigated subject. The individual interview was conducted after the analysis of the materials that resulted from the group activities. The individual interviews allowed the researchers to deepen, confirm and clarify issues that emerged in the group meetings and from the analysis of the corresponding material.

The characterization of the existential context of the adolescents was based on direct observation of the local reality and the family living conditions, as well as the consultation of demographic information of the chosen FHU areas. The characteristics of each adolescent were drawn from the medical record of the prenatal care and also collected in individual and group interviews.

Data analysis was based on some precepts of critical discourse analysis. We used a division in the diversity of dimensions proposed by critical discourse analysis: discursive practice and social practice. The interpretive work was guided by the following questions: 1) which issues, ideas and practices related to pregnancy and motherhood were present in the statements? Which meanings were reflected in the relationship with the teenager’s existential context? Which discursive communities and voices were represented in their statements? Which ideological positions and arguments are materialized in their statements?

For the analytical work we organized the analysis corpus; repeated the corpus reading; highlighted the statements and other information of interest; classified findings based on inference; and articulated the empirical and theoretical material. This last step was guided by the articulation of the dimensions: 1) discursive practice and 2) social practice; and their respective categories: 1) inter-discourses (polyphony), social meanings, existential context; and 2) ideology and hegemony. The findings presented below were organized into two sets: Existential context and individual characteristics of adolescents; and Social meanings of pregnancy and motherhood among adolescents.

RESULTS AND DISCUSSION

Existential context and individual characteristics of adolescents

The adolescents in this study were living in remote locations in the urban area of Cuiabá, Mato Grosso. Although there was some diversity of social conditions observed in these areas, they all had poor social conditions.

All adolescents that participated in the study depended on public health and educational services, lived in simple dwellings, depended

* In the occasion, a maximum of ten adolescents were found enrolled in pre-natal care in the FHU in the city, considering that part of them could not correspond to the defined attributes or would not want to be part of the study.
financially on their partner or family, and they were responsible for home tasks. Some sociodemographic and health characteristics are summarized below (Table 1).

Table 1 - Sociodemographic and health profile of the adolescents

<table>
<thead>
<tr>
<th>Teenager</th>
<th>Marital status</th>
<th>Age</th>
<th>With whom does the teen live?</th>
<th>Education</th>
<th>Reproductive history</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ana</td>
<td>Single</td>
<td>17</td>
<td>Father</td>
<td>Completed secondary school</td>
<td>First pregnancy</td>
</tr>
<tr>
<td>Bia</td>
<td>Single</td>
<td>15</td>
<td>Boyfriend</td>
<td>Enrolled in first year of secondary school</td>
<td>First pregnancy</td>
</tr>
<tr>
<td>Carla</td>
<td>Married</td>
<td>17</td>
<td>Husband</td>
<td>Enrolled in second year of secondary school</td>
<td>Second pregnancy (1 neonatal death)</td>
</tr>
<tr>
<td>Diana</td>
<td>Single</td>
<td>18</td>
<td>Mother, father and daughter</td>
<td>Withdrew from first year of secondary school</td>
<td>Second Pregnancy (1 daughter)</td>
</tr>
<tr>
<td>Elen</td>
<td>Single</td>
<td>15</td>
<td>Boyfriend</td>
<td>Withdrew from the first year of secondary school</td>
<td>First pregnancy</td>
</tr>
<tr>
<td>Fabi</td>
<td>Single</td>
<td>16</td>
<td>Mother, father and sister</td>
<td>Withdrew from the first year of secondary school</td>
<td>First pregnancy</td>
</tr>
<tr>
<td>Gabi</td>
<td>Single</td>
<td>16</td>
<td>Mother, stepfather and sister</td>
<td>Withdrew from the first year of secondary school</td>
<td>Second pregnancy (1 miscarriage)</td>
</tr>
<tr>
<td>Helena</td>
<td>Single</td>
<td>15</td>
<td>Boyfriend</td>
<td>Withdrew from the sixth year</td>
<td>First pregnancy</td>
</tr>
<tr>
<td>Ingrid</td>
<td>Single</td>
<td>16</td>
<td>Boyfriend</td>
<td>Enrolled in the first year of secondary school</td>
<td>Second pregnancy (1 miscarriage)</td>
</tr>
<tr>
<td>Julia</td>
<td>Single</td>
<td>16</td>
<td>Boyfriend</td>
<td>Withdrew from the first year of secondary school</td>
<td>First pregnancy</td>
</tr>
<tr>
<td>Katia</td>
<td>Single</td>
<td>18</td>
<td>Boyfriend and daughter</td>
<td>Withdrew from the second year of secondary school</td>
<td>Third pregnancy (1 miscarriage &amp; 1 daughter)</td>
</tr>
<tr>
<td>Laura</td>
<td>Married</td>
<td>17</td>
<td>Husband and parents-in-law</td>
<td>Enrolled in the third year of secondary school</td>
<td>First pregnancy</td>
</tr>
</tbody>
</table>

At the time of data collection, eight teenagers were in a long-term relationship and lived with their partners, two were legally married; four were single and lived with their parents, and three of them maintained a relationship with the father of their babies. The length of relationship between the adolescents and their partners/boyfriends, prior to the current pregnancy, ranged from three months to six years. The mean age of partners/boyfriends was 24 years (20-29 years). With regard to the families of teenagers, four had parents living together and four had divorced parents, two had one deceased parent, and one did not know who the father was, and had not reported this information.

All the teenagers were regularly attending prenatal care at the FHU. They began this during the first trimester, with the exception of one who began attending during her second trimester. None of the teenagers had a history of previous medical problems or problems with the current pregnancy.

Social meaning of pregnancy and motherhood among adolescents

Pregnancy and motherhood as a desired or accepted experience, and the gains attributed to it

In regard to the current pregnancy, adolescents highlighted the gains and strongly reflected the incorporation of an idealized motherhood, revealed as happy, fulfilled and the giving-receiving of love. Pregnancy and motherhood enabled them to experience certain emotions of pleasure, giving love, affection and friendship to the child; the ability to take care of someone who belongs to “them”, as mothers, through touch, breast-feeding; and feelings of joy, peace, partnership and
completeness of life, as pregnancy was manifested in her child’s life.

Ellen, 15 years, first pregnancy, wrote something about her own pregnancy and read it to the group, with a broad smile and bright eyes: [...] maternity, child, sex [of the baby]; breastfeeding; the love I’ll feel for him/her; I do not know what it is - if it’s a boy or girl - taking care, giving affection, love, joy, health, touching; I’m very anxious to know what it is.

Meanings such as these are linked particularly to the social demarcations of a woman’s place in family and society, and the feminine constitution - as sociocultural, political and historical constructions, mediated by the practice of communication and built upon the integration, disputes and power struggles around ideas.

In Western societies, prior to the eighteenth century, women, motherhood and children were not socially valued. Political and religious statements of that time reinforced this insignificance. This changed at the end of that century, with the growing need of a workforce for the expansion of industry. In order to supply it, the state invested in living conditions and childcare, therefore providing a certain power to women. The social role of childcare was attributed to women, and ideologically this was linked to the idea of maternal love and to a state of happiness and gender equality.

In modern times this ideal was strengthened with the use of bio-power technology, a tool to manage human life, especially through the strong influence coming from the State and from medicine. The woman acquired greater power over the domestic space and maternity was consolidated as an experience related to the essence of femininity.

The medical field constructed and reinforced the idea that women had specific features in their bodies that determined an inexorable vocation for maternity. Common sense, and scientific and moral discourses, among others, reaffirm this judgment, naturalizing this idealized concept.

Between 1960 and 1980, this discourse was confronted by the feminist movement which considered the ideology of motherhood – commonly seen as a need and a destination for happiness in a woman – to be, in fact, the outcome of the domination of one gender over the other. In the subsequent gender discourse, the cultural approaches built around motherhood are highlighted and related to unequal social values between males and females and to the resulting concentration of power and domination.

In contemporary times, the meanings conveyed by these discourses are gaining ground through different sources of communication - media, education, debates and others. Many women and men fail to defend traditional ideas about pregnancy and motherhood, postpone this experience, and fall into a new political project which presupposes pregnancy and motherhood as a rational and optional plan, even within marriage, favoring other life projects.

With this new biopolitics, teenage pregnancy becomes a social problem, as opposed to the proposed rationality. In Brazil, the hegemonic biomedical statements and scientific-political arguments certify adolescent pregnancy as a public health problem, based on possible adverse effects on adolescents and their children, from the social, economic, and psycho-emotional point of view.

In the opposite direction, the adolescents in this study reaffirm the old ideal of motherhood, considering it to be a gain for their lives, while Diana, 18, in her second pregnancy, has also expressed the need for control over her own reproductive life: things were happening... [the first pregnancy]. I had this dream of working, buying a car for my dad and stuff like that. But then [the dream] did not happen. I was careless! If I was more responsible I could have achieved that.

The lack of ability to manage her reproductive life is associated with sexual behavior that is considered careless, with the same meaning affirmed by society, namely. from a risk perspective. From an ideological point of view, Diana’s perception reiterates naturalization or social suppression of this issue.

Diana initially “plans” to obtain professional success and to have access to material goods as a result. But teenagers with adverse social conditions, similar to her, live in a setting that reduces their ability to think and achieve certain social projects, such as professional and economic success.

In the absence of conditions that allow teenagers to set or extend their life projects, the desire to become a mother wins the leading place in their subjective process. Even those teenagers who had an unplanned pregnancy ultimately represent it as ideal one. Pregnancy and motherhood, as an alternative for adolescents, especially in unfavorable living conditions, is a finding that has been evidenced in other studies.

The fact that teenagers have a life story with problems that pushed in certain directions was an aspect that contributes to this logic. Katia and
Laura, for example, faced sexual violence in childhood. Helena, Ingrid, Julia, Katia and Laura lived with family adversity. Gabi had been in a childcare center and the father of her baby was imprisoned. Fabi and Helena left school before their pregnancy, and secondary school was the highest for almost all of them.

The construction of the teenagers’ subjectivity is linked to both possible projects, such as stereotypes, statements and life stories shared from childhood in their respective social groups. In this study, the importance given to motherhood reflects a form of subjectivity in a context of limited social opportunities, as well as traditional values that were built on the social role of women. Similarly, it suggests resistance to a rational and planned design for late motherhood, as socially proposed.

The preference for other life projects proved to be something far from the reality of adolescents in this investigation. They sought possibilities closer to their reality, as an example, they thought about how to succeed in a new family life - differing from the family of origin. Laura, 17, married, living with her in-laws, said: oh, I wanted to marry. [...] I always wanted to have my family, my husband, my home, my son. [...] You know, to take care of my things. And so it is different from what my father and my mother did with me.

This direction is consistent with the ideal of the modern family, characterized by tenderness and intimacy between parents and children, and structured in the nucleus composed by the husband, wife and children. Since the eighteenth century, the couple is expected to be responsible for achieving happiness, founded on the idea of love. This new format included a greater social value for women. That is the family model expressed in the discourse of adolescents, defended among others and embodied socially.

The designed family background could also be related to the need for protection, care, survival or reproduction of their own lives. In addition to marriage or living together, the life plan designed by Gabi, Laura and Diana also had the expectation of certain material goods, such as having a home and belongings for themselves.

The creation of their own nuclear family and the specific conditions proved to be a way, in the thoughts of these teenagers, of becoming the leading actors in their history rather than repeating the original family plot. However, with this projection, they distanced themselves from the concrete context of reduced opportunities for economic and financial achievements they faced, just as with their partners.

With the establishment of a new family, teenagers such as Carla and Ingrid saw the possibility of obtaining greater autonomy and independence from their family unit and the ability to live other experiences and learn new things. Carla, 17, who has lived with her partner since she was 15 years old, said, let’s say, it happened all of a sudden. Because suddenly I was living with him; and suddenly, I was married. [...] Then I got used to... [...] But, you know, it was not planned. [...] My mother did not want me to leave her house [...]. But even so, I left. Because when you stay with your mother, you have the curiosity to know what life is like out there [...].

Within the family unit, each member has a place according to the way this institution is organized and establishes relations. Socially, the familial hierarchical structure defines greater power and authority with the parents, and the children manifest behaviors of submission and/or defiance.

One of the reasons why Ingrid, 16, married and left home was the authority and oppression from her mother, as perceived by her, who had greater power in the family. According to her statement: she [mother] was a pain in the ass and she determined all I had to do; and I could not go out, I could not do anything, not even go out to have fun. Huh? Living with her meant deprivation of liberty.

In turn, Katia, 18, saw pregnancy as a possibility to alleviate the suffering related to experiences and feelings of loneliness and maternal lack of protection. Marriage is the best thing. With the right person. [...] I thought about having children, not about getting married. I was afraid to share my son with my husband. [...] I always wanted to have the same experience of my mother. I wanted to understand why she did this to me [allowed the stepfather to molest her]. [...] [I wanted to see] if she had her reasons. [...]... if others would do the same, okay?

Teenage pregnancy as an ideation to meet an emotional need from childhood, or to resolve conflicts or fill experienced/interpreted loneliness is a practice also found among adolescents from other realities throughout the country.

Socially, the family is articulated around the safety and security of its members. Even when the bonds are not positive, the importance given to relatives is significant. When there is conflict or disruption in familial relationships, this is commonly felt as suffering. Thus, when it comes to
the living situations of this nature, teenagers see the constitution of their own family as a possibility to overcome or reduce suffering.

Another meaning for pregnancy revealed in the study group was the achievement of the status of a grown woman. For them, pregnancy is both followed by maturity, demanding new thoughts and behaviors, in addition to new experiences, decisions and responsibilities. Diana, 18, having her second child, said: well, if you look at the age I consider myself [a teenager]. [...] But my life, my thoughts ... they are those of a woman. [...] I have not thought anymore about ‘going to parties, going wild, to do this or that’. [...] Thus, everything changes [with the pregnancy]. [...] Mainly the thoughts. [...] To me, women are more mature, more experienced. Teenagers do not do that, teens are still getting to know what this is about. A woman is the one who knows more. [...] She is more in charge of things.

Although some teenagers were in the first months of pregnancy or experiencing their first pregnancy, they already saw themselves as women. Although the adolescents participating in the study did not consider their pregnancy to be a problem, their statements suggested, paradoxically, an incompatibility between pregnancy and motherhood and the lifestyle of a teenager. The expected changes during pregnancy are added to the adult world, to “being a mother” and “being a woman”.

The cultural concept of adolescence as a phase between childhood and adulthood, has its origin in the eighteenth century, in a context of social and capitalistic transformations.12 In a developmental perspective, it is understood that the young man seeks to affirm its identity and autonomy before the adult world, which commonly characterize them as unsafe, irresponsible, rebellious, impulsive.25 The adopted cultural perspective flattens the possibilities and trivializes adolescence. The specific characteristics to that life phase are replicated in the media discourse, inside families and schools, among others resources, circulating widely in society.

In this context, the adolescents in this study characterized adolescence as a phase of irresponsibility, immaturity, partying and enjoyment, reproducing the abovementioned pattern. Pregnancy was then enough to access the adult world, seen as a place of greater autonomy and social recognition, because the participants seem to understood that the pregnancy produced or required typical behaviors of this valued phase of adulthood, even when they miss the practice and possibilities granted to teenagers.

In this sense, Ingrid, 16, married, having her first child, said that pregnancy gave her greater power by proving her femininity, her ability to have a partner and to be a mother; to have something that others in the group had not yet achieved - with the consequent reverence of others. When talking about the pregnancy, she said, I felt beautiful, powerful. [...] The others are respecting me!!! [...] Because they [friends] said I would be a spinster, I’d be on the shelf. Once they saw my husband, after they learned that I was pregnant, they were jealous. [...] I said: ‘Die with envy! This is for those who can ’ [laughing].

Pregnancy and motherhood as a step toward adulthood, and the association with the achievement of greater social value and proof of femininity, are aspects that were added to the interpretation of the event as a gain perceived among adolescents in the study.

Pregnancy and motherhood as experiences leading to losses and difficult confrontations

Although the teenagers want, or accept, the pregnancy and affirm it as an event that promotes gains, they expressed ambivalent feelings about it, approaching social discourses that relate to certain losses and problems.

In this sense, they understood that their pregnancy “imposed” certain changes - in the way they have fun, how they behave, how they relate to peers, how they feed themselves. These changes were controlled and confirmed by friends and/or by the family. Thus, they expressed acceptance and resistance to these issues and somehow understood that these changes were important to the child, but they had difficulty accepting or implementing them. Bia, 15, with her first pregnancy, answers the researcher’s question: but what your friends do that you cannot do? Oh boy! They go out, eat different things, they do things. I can’t do it, [they say] you have to be quiet, alone, in your own corner. [...] My mother tells me this, my grandmother, my uncle; they all say that I have to be more careful. Then you get scared.

Likewise, the pregnancy placed the teenagers in certain “difficult” confrontations related to two specific moments. The first occurred with the revelation of pregnancy to the family, partner,
friends and acquaintances. Teenagers who still lived with the family of origin were afraid of a possible negative reaction, especially from parents. In this sense, they reported the idea that teenage pregnancy was something improper. Diana, 18 years, stated: When I found out I was pregnant, the despair came. At the beginning... because I was very young and I thought a lot about my parents. What would they think? If they were going to kick me out of the house; if they were going to force me to marry [...] It was very difficult to tell them; I told my mom first and she helped me a lot.

Faced with expected criticism for the occurrence of teenage pregnancy, Carla, 17, married and having her second pregnancy, confronted them by reproducing ironically the collective ideas about inconvenience and the need to adopt preventive behavior [...] The criticism is huge... Everyone says, ‘Oh, you got pregnant now, so early, because you have not studied? Because you did this and that? [...] If we did not want to get pregnant, we have the possibility of using a condom, birth pills, I had everything! So, why have we not prevented it? This is the case, we wanted to get pregnant!

Among adolescents, the acceptance or lack of acceptance by family and those with whom they lived was reflected in the translation and materialization of pregnancy as a gain or a loss. Studies26-27 show that the discovery of a teenage pregnancy for the families results in different feelings. These feelings will vary from the meanings of the phenomenon constructed by the families, according to the embedded view about the role of women in society, adolescence and family formation, as previously presented.

In the statement of Diana, 16, we found fragments that revealed the dissenting senses about the consequences of teenage pregnancy, such as: a child does not interfere much in someone’s life... it is a blessing [reproducing the speech of her mother]. It was a shock to them, so young and already pregnant [suggesting gain and loss]. Because dad and mom always want the best for their daughter [suggesting that teen pregnancy produces losses]. These statements, among others, showed meanings full of compatibility and antagonism between pregnancy and adolescence, which express the different social views faced in our society.

Childbirth was a second moment of difficulty coping for adolescents. All participants associated delivery with pain and suffering. Katia, 18, with her third pregnancy, pregnant with her second son, said: I think the most difficult time of pregnancy, the hardest; it is when you’re reaching the time to have it [the birth of the baby]. [...] Because people, instead of helping us, say: ‘The pain is immense, pain is this, pain is that. It makes you fear!

Many women are afraid of childbirth, relating it to the inevitable occurrence of pain. This is a historical and well-settled view on how vaginal birth has been seen, especially in public health care. The media - movies and soap operas - have influenced the construction of this meaning considerably,28 but the idea also finds support in the reports of childbirth stories of women who experience suffering, due to the way the delivery was conducted in healthcare services.

**FINAL CONSIDERATIONS**

Against the hegemonic discourses, for the adolescents that participated in the study, pregnancy and motherhood responds to what they want for their lives, within a context of limited social opportunities. They value the experience based on a socially conveyed ideal of motherhood and family constitution. In addition, they related their experience with an expectation of greater social recognition, proof of their femininity, greater power and autonomy. Although pregnancy and motherhood results in gains that are appreciated, they also attribute certain difficulties to this event, manifested by single girls as having to reveal their pregnancy to the family and being “condemned” by relatives due to teen pregnancy; in addition to the association of delivery with an experience of suffering.

The contextualized understanding of the meanings that pregnancy acquires among adolescents is essential for the development of consistent care strategies, and criticism in which the development of increased autonomy and accountability of teenagers is included. It is also necessary to understand the ideological and potentially reproductive content of these meanings, mobilizing ideas that naturalize the process.

We suggest further studies to explore the meanings around certain reproductive practices of adolescents that were identified, but not explored in this study, such as abortion, contraception, and its inappropriate use. We also recommend studies to investigate the meanings and contexts of the families of these young people who are influential in both their thinking and in their lives.
REFERENCES


