

THE MEANING OF MOTHERHOOD: ADOLESCENT CHILDBEARING AND ITS
SIGNIFICANCE FOR POOR DOMINICAN HAITIAN WOMEN

BY

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THESIS

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ABSTRACT

This article looks at how a group of marginalized young women, in the Dominican Republic, understand and conceptualize the experience of becoming a mother at an early age. The dominant discourse on adolescent motherhood frames the phenomenon as problematic. Adolescent motherhood is typically associated with poor economic and educational outcomes, despite flaws in research used to support this point. Little research exists examining the voices of young mothers themselves. This article aims to contribute to a better understanding of how a disenfranchised group of young females narrate the experience of motherhood and its significance. The study utilizes a qualitative design and consists of 21 semi-structured in-depth interviews. Adolescent mothers narrate four common themes in the experience of early motherhood: life before pregnancy, feelings surrounding pregnancy, challenges to motherhood and benefits to motherhood. Participants narrate that they face formidable obstacles to obtaining secondary and post secondary education as well as financial security, independent of motherhood. Narratives suggest that adolescent motherhood may provide unconditional love, a sense of purpose in life, the hope for future financial support and an alternative pathway to adulthood for poor Dominican Haitian adolescent females. These findings contrast sharply with the prominent discourse on adolescent motherhood. I recommend that researchers, policy makers and interventionists need to look at local understandings and conceptualizations of adolescent motherhood before stigmatizing this experience.

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CHAPTER 1: INTRODUCTION

Adolescent motherhood is a global phenomenon (Bearinger et al., 2007; Berthoud & Robson, 2001; Nunez, 2001; UNPDF, 2009). The United Nations defines adolescence as occurring between the ages of 10 and 19 (UNFPA, 2006). Worldwide adolescent girls represent an increasing percentage of mothers (Demographic Health Survey, 2001).

While attitudes and practices regarding sexual initiation and pregnancy vary across cultural contexts, the dominant discourse surrounding adolescent motherhood frames this phenomenon as an issue of concern (Bearinger et al., 2007; Cherrington & Breheny, 2005). Such conversations present young motherhood as an international issue for medical and socio-economic reasons (Berthoud & Robson, 2001). Specifically, literature and policy discourse argues that young mothers and their children confront higher maternal and child mortality compared to adult women (Bearinger et al., 2007; UNFDP, 2009). Current research suggests that medical risks only increase for females under the age of 16 at the time of childbirth (Lawlor, D., Shaw, M., 2002). Literature on adolescent motherhood rarely grapples with defining the mechanisms, social, biological or cognitive, that define adolescence. Nor does the literature look closely at how this process may differ across settings.

A second component to the mainstream discourse on early motherhood involves educational and economic outcomes. It is argued that in many cultural contexts, young mothers also face lower education, higher unemployment and lower income compared to adult mothers (Berthoud & Robson, 2001; Florez & Nunez, 2001; UNFDP, 2009). Frequently such studies do not compare outcomes of young mothers to control groups with similar social/economic backgrounds, confounding results (Duncan, 2007). The

discussion about the economic consequences of adolescent motherhood exists within a Western neo-liberal framework that privileges the income-producing worker (Cherrington & Breheny, 2005). If a young woman becomes pregnant at an early age she is less likely to finish secondary education, successfully enter the workforce and therefore become a „productive’ member of society. This logic does not take into account the fact that many adolescent mothers already find themselves disenfranchised from the formal educational and social and employment systems (Furstenburg, 2007). The few studies that do look at educational and economic outcomes of poor women using comparison groups from the same communities suggest that early motherhood does not put women and their children at any greater risk for long term poverty than comparison groups who delay pregnancy. For example, Furstenburg (2007) conducted a 30 year longitudinal study in Baltimore and found that poor African American Adolescent mothers had similar economic and education outcomes as poor African American women who delayed pregnancy. A dearth of literature exists examining the long-term economic and educational consequences of early motherhood outside of Western countries.

Historically, the voices of young mothers have been absent in the discourse on early motherhood. A nascent body of work looking at how young women experience and make meaning of early motherhood has recently emerged in the West. Edin & Kefalas (2005) conducted qualitative research on early motherhood in three Philadelphia communities. They found that women placed high value on early motherhood and generally believed that early childbirth did not prove an insurmountable obstacle to attaining education. Yet little research exists exploring how young women come into motherhood and how *they* make meaning of this experience in the context of developing

nations.

The Dominican Republic (DR) provides fertile ground to explore the above issues. The Dominican Republic is at a global crossroads. This country intimately connected to the United States. It relies on remittances, tourism, and free trade zones as the greatest contributors to its GDP (Department of State, 2010). Western values and policies (e.g. IMF, World Bank and WHO) greatly influence the construction of social issues, like adolescent pregnancy, and interventions to address said issues. For example, the Global Gag Rule instated by George W. Bush Jr. in 2001, eliminated USAID funding for any reproductive health agency that provided post abortion care. As a result, Profamilia, the largest reproductive health agency in the Dominican Republic had to restrict its services to maintain funding lines. This makes the issue of early motherhood particularly salient within the Dominican Republic (DR). Given the delayed completion of secondary education and high rates of poverty in the Dominican Republic, it would seem that socially prescribed consequences of early motherhood suggested in Western geopolitical contexts would also emerge in the DR.

In the Dominican Republic, political and economic oppression (e.g. the denial of citizenship and literacy) has been used as a tool for members of an elite class to maintain political, economic and social power over certain portions of the population, like Dominicans of Haitian descent (Martinez, 1995; Plant, 1987). This systematic oppression has had dire effects on marginalized segments of the population (Farmer, 2005). Much like the historical impact of slavery in the U.S., which has had long-term consequences for the health, wellbeing and economic mobility of African Americans, structural oppression in the Dominican Republic has resulted in negative outcomes in these

domains for Haitian migrant workers and their descendents living in the DR (Wucker, 1999; Human Rights Watch, 2002).

Within the DR, Haitian migrant workers have crossed the border for over a century with the express purpose of working on sugar plantations originally owned by U.S. interests (Martinez, 1995; Moya Pons, 2005). Dominicans consider the cutting of cane to be the lowest form of labor and generally refuse to perform this task within sugar production (Martinez, 1995). Because of the political strife and poor economy that existed and continues to exist in Haiti, some seasonal workers have chosen to permanently settle in the DR. Today, descendents of these migrant workers, Dominican Haitians, live in segregated communities, called bateyes, originally designed to temporarily house migrant cane laborers (Jesuit Refugee Services, 2004; Martinez, 1995). The Dominican sugar industry gained momentum at the end of the 19th century. By the second decade of the 20th century sugar became the largest contributor to the Dominican Republic's gross domestic product (Moya Pons, 1995). Since its inception the Dominican sugar industry has depended heavily on seasonal Haitian labor. Official government contracts between the Haitian and Dominican governments allowed for Haitian seasonal laborers to work in the cane harvest (Moya Pons, 1995). As seasonal laborers have permanently settled in the bateyes of the DR, their descendents find themselves subjected to discriminatory social and political practices. Dominicans of Haitian descent are frequently denied birth certificates, access to public education and access to basic health services that are afforded to other Dominicans (Human Rights Watch, 2002; Jesuit Refugee Services, 2004)

Systematic discrimination towards Haitians and their descendents in the

Dominican Republic has been maintained by two primary methods. One method of exclusion involves denying Dominican Haitians birth certificates (Jesuit Refugee Services 2004; Moya Pons 1995). Individuals without a birth certificate do not have the right to attend public schools, access public medical and social services or fully participate in civic life (Human Rights Watch, 2002; Jesuit Refugee Services, 2004). Institutionalized discrimination impacts key areas of life and has long-term implications for health, education and social, as well as economic, mobility. The second method of exclusion involves the physical segregation of Dominican Haitians into communities called bateyes. Haitians and Dominican Haitians living in the bateyes deal with chronic hunger, poor sanitation and inadequate housing (Jesuit Refugee Services, 2004). Haitians who migrate to the Dominican Republic and their descendents occupy the lowest economic social stratum, which has resulted in generational cycles of illiteracy among Dominican Haitians.

For Dominican Haitian adolescent females, a marginalized group in the Dominican Republic, early pregnancy is even more probable because of structural barriers towards other forms of social and community participation. Early pregnancy must be understood in the context of Haitian and Dominican Haitian marginalization in the DR. The construction of early pregnancy may contribute to the ongoing cycle of economic and social oppression. Given the paucity of personal narratives in the research on early motherhood, pursuing research on how young women understand and make meaning of motherhood can provide insight into how this experience may facilitate purpose and/or a sense of meaning in the lives of extremely disenfranchised young women.

Understanding how young, female Dominican Haitians make meaning of

procreation, particularly given the context of discrimination, will provide an important foundation for creating effective educational and health programming for adolescent girls. Currently, local non-profit organizations, funded by international health agencies, do provide reproductive health workshops, directed at reducing unwanted pregnancy, sexually transmitted infections and increasing knowledge about women's health. Whether these workshops have any impact on Dominican Haitian adolescent girls' knowledge, attitudes and practices (KAP) regarding sex and child bearing remains unknown. This study explores the local understanding of young Dominican Haitian girls' experiences with motherhood. The researcher used in-depth interviews and field observations as a window to understand what it means to be an adolescent mother in two disenfranchised batee communities. By elucidating local construction of culturally sanctioned practices for young women the aid community, including local non-profit organizations, USAID and Planned Family International, can begin to better understand the expressed needs of this population. Additionally, this data will aid in understanding similarities between this community and other oppressed communities, and whether adolescent pregnancy is a symptom of larger issues regarding structural discrimination. If so, programs geared toward increasing educational and work opportunities as well as other opportunities for social participation might prove more effective interventions to delaying young motherhood, rather than focusing exclusively on contraceptive education.

CHAPTER 2: METHODS

Ethical Approval

The Institutional Review Board at the University of Illinois Champaign-Urbana approved of the proposed study procedures.

Participants and Recruitment

The study was conducted in two bateyes, San Isidro and Naranjo. San Isidro and Naranjo are batey communities located an hour drive east of the Dominican Republic's capital city, Santo Domingo. The two bateyes are approximately a 30-minute drive apart. San Isidro is the more urban of the two communities. It is located at the edges of a military town; the border between San Isidro and the military town is indistinct. Naranjo is geographically much more isolated than San Isidro. Open fields surround the community for at least a mile in each direction.

The primary investigator's involvement in San Isidro and Naranjo has evolved over nine years. The primary investigator first entered batey San Isidro and batey Naranjo in the capacity of an adult literacy facilitator working with community members to address limited educational opportunities. The personal relationships that the principal investigator developed with community members between 2002 and 2006, while working as a literacy facilitator and coordinator, helped facilitate access to participants for the current research project.

The investigator first conducted five exploratory, open ended interviews in two bateyes during January 2008. These initial interviews served as a tool to identify broad issues of concern within batey communities. The investigator's main question of interest

during this initial inquiry was “what are the biggest issues of concern that you have for your community and/or family?” The themes that emerged in all of the interviews include lack of documentation, lack of work, access to education and adolescent pregnancy. Based on participant responses the investigator decided to focus on the issue of early motherhood. While the focus of the investigation involves early motherhood, issues of citizenship, educational access and economic mobility are inextricably bound to the principle phenomenon and therefore receive attention in interviews and analysis.

Between June and August 2009, the investigator returned to batey San Isidro and batey Naranjo to conduct in depth interviews and field observations with adolescent girls who experienced a pregnancy in the last three years. All participants either had at least one child under the age of three years or were pregnant at the time of the interview and field observation. The study excluded young mothers who only speak Haitian Creole. The investigator stipulated to key informants that I could only interview Spanish speaking mothers. As a result, the investigator was only presented to one potential participant that was mono lingual Creole speaker, representing .045% of the total sample. Recruitment involved snowball sampling. Initially the investigator approached four key informants with whom she had a relationship. These key informants provided introductions to participants. After providing interviews, some participants provided the names of additional young mothers to interview in the communities. Twenty-one women between the ages of 13-21 were interviewed. The average participant age at the time of interview was 17.29 years and the average participant age at time at first child’s birth was 15.43 years. The investigator conducted field observations with a sub sample of six participants. The investigator invited interview participants to partake in field observations based on

her sense of each interviewee's comfort level with the investigator and time availability. Factors that contributed to this decision included the following: whether the interviewee worked outside of the batey on a regular basis and whether the interviewee resided outside of the community during the week.

Data Collection

A total of 21 in-depth interviews were collected over the two month period. Data collection of in-depth interviews took place either in the participant's home, or at the request of the participant, in the home of a friend or family member. All participants were advised during the consent process that they could interview alone with the investigator, or have a trusted person present. The majority of participants interviewed with their infant or toddler present. Approximately half of the participants chose to have a friend or sibling present at the interview.

In-depth interviews were semi structured. The sequence of questions varied, in some interviews additional questions unfolded based on the types of disclosures made by respondents. The interviewer began each interview by asking a series of demographic questions and then asking the respondent to describe her daily routine before becoming pregnant for the first time. Eventually, the investigator asked the respondent to describe how she met the father of her child and how their romantic relationship began. Additional topics included: knowledge about contraceptives, beliefs about ideal age onset for motherhood, aspirations for self and aspirations for children's future. All interviews were conducted in Spanish. In-depth interviews were digitally recorded with the consent of the participant. Interviews were then transported back to the United States and transcribed by

the investigator and research assistants. The length of each interview ranges from 31 minutes to 1 hour and 30 minutes.

Field observations took place over the course of six weeks. The investigator spent at least six days observing each household of the six participants in the field observations. At a minimum the investigator would spend four hours a day following the field observation participant in her daily routine. The maximum amount of time spent observing a participant during any one session was six hours. The investigator tried to vary the times during the day when she observed each participant. The investigator did not observe any participants after 7:00 p.m. because of transportation limitations in and out of the communities at night. In two cases this was not possible because the participant in field observations specifically requested that the investigator come to her household during the same time frame each day. While the investigator did try to shadow the field observation participant as unobtrusively as possible, she did engage in household activities like hanging laundry, washing dishes or holding a distressed child when the field observation participant was otherwise occupied. The investigator came to the conclusion that helping with small household tasks would provide the most culturally sensitive and respectful way to observe.

Analysis

The investigator conducted all analysis in Spanish. After the transcription of audio recordings, the investigator developed a codebook based on thematic coding of a sample of seven interviews. The investigator chose the sample of interviews based on the openness of each interviewee and the depth of responses during interviews. Additional codes emerged and were integrated into the codebook after the remaining 15 transcripts

were thematically coded. The investigator utilized Atlas-Ti software to code all transcripts.

The investigator utilized both a-priori and in-vivo codes. The investigator outlined a series of a-priori codes before initiating code analysis. These a-priori codes emerged from readings on adolescent motherhood and ecological frameworks and involved the hypothesis that romantic love would influence adolescent girls' decisions to engage in unprotected sex and that lack of educational opportunities preceded onset of first pregnancy. The investigator selected additional a-priori codes based on initial impressions formulated while conducting interviews for this study. Outlining a-prior codes allowed the investigator to monitor any predisposition to focus on certain experiences and issues. In-vivo codes emerged inductively from the transcripts and are named using the language of transcripts. Once the investigator identified all codes, she assigned definitions to each code. The investigator coded each interview at least twice to ensure continuity in the coding process. Finally, the investigator assigned all codes to four overarching themes that she identified within the transcripts. These themes include: life before becoming pregnant, feelings about pregnancy, challenges to motherhood and benefits of motherhood.

CHAPTER 3: RESULTS

Below, key findings from the interview portion of this study are presented. These findings highlight the complex gender and social hierarchies young Dominican Haitian mothers in the Dominican Republic must navigate and the role motherhood plays in this process.

Life Before Becoming Pregnant

A number of factors converge for the majority of young mothers that contribute to the onset of pregnancy. Participants discussed family dynamics, stage of involvement with romantic partner and love as influences in their decision to engage in unprotected sex that eventually resulted in pregnancy. All but two participants describe at least one of the following issues associated with family discord as a factor in becoming sexually involved with a partner and eventually becoming pregnant: desire for greater freedom, desire to live in an environment where less verbal and physical fighting takes place, and the death of primary caregivers and siblings.

Several young mothers (10) indicate that a desire for more autonomy and freedom from primary caregiver's household played a key role in the decision to enter common law marriages with boyfriends at early ages. A common law marriage refers to co-habitation. No participants were legally married at the time of interview. Autonomy and freedom refer to either a desire/wish or taking action to gain greater control over one's finances, physical movement, responsibilities and or interpersonal relationships. Once engaged in these marriages pregnancy frequently follows. Anabel nicely illustrates her

desire for independence from her parents, which resulted in her decision to marry at age 13.

P6: Yo me casé con él porque a mi no me dejaban a salir. Todo el tiempo me tenían cómo que cómo que yo estaba presó. No me dejaba salir. No me dejaba compartir con mis amigas

I: ¿Sus padres?

P6: Sí. Me por eso yo me casé. Porque me cansé estar cerrada. (Pausa en la conversación por la niña llorando). Y por eso yo me casé. Y me peleaba cada rato.

I: ¿Entonces tú elegiste a casar?

P6: Sí.

P6: I married him because they [mother and father] didn't let me go out. They always had me like, like I was a prisoner. They didn't let me spend time with my friends.

I: Your parents?

P6: Yes. That's why I married. Because I got tired of being shut in. That's why I married. And they [parents] would fight with me all the time.

I: So you chose to marry?

P6: Yes.

Seven participants also described either verbal or physical punishment on the part of primary caregivers as a motivating factor in trying to seek greater autonomy and independence by establishing a relationship with a romantic partner. Gloria explains how verbal assaults by her step-father played a key role in her decision to marry at age 15 and leave her mother's household. This relationship would eventually result in the birth of two children before age 20.

I: ¿Es verdad? OK. ¿Y entonces cuéntame antes que usted se casó, cuando usted salió con su novio, háblame un poco sobre la situación en su casa, con sus padres? Antes que usted se casó con él.

P19: Yo vivía nada más con mi mama porque mi papa se murió.

I: ¿Y no tiene hermanos?

P19: No. Vivíamos nada más nosotros tres. Y después que mi papa se murió yo tenía una hermana en San Luis. Después que mi papa se murió vivimos nosotras dos.

I: OK.

P19: Después se agarró y se casó con un hombre.

I: Uh ha.

P19: Y el hombre no me caía bien. Porque bebía mucho y decía muchísima cosa

I: Uh ha.

P19: E yo le dije a ella ya bueno si tú quiere seguir viviendo con él no sé que voy hacer porque yo no a él yo no quiero en la casa.

I: ¿Cuánto años usted tenía cuando su mama se casó con este hombre?

P19: Teniendo amores como con el marido con el novio mío como a los 15 o 14 igual.

I: 14 o 15 anos. OK. OK. Entonces usted dijo a su mama que no le caía bien el novio.

P19: Uh ha.

I: ¿Y como ella reaccionó su mama?

P19: Ella me dijo di que no que él es así cuando bebe. Y él a veces me decía mal muchísima cosa.

I: Entonces usted no sentía muy cómoda en la casa. ¿Y usted piensa que eso se influyó su decisión a salir con el novio y mudarse con él o no tanto?

P19: Sí. Porque a veces él le daba, ella le daba la razón a su marido. A veces el marido le decía que yo hacía muchísima cosa y ella sin preguntarme le daba golpe.

I: ¿Es verdad?

P19: Sí.

I: Really? And, OK, tell me, before you married, when you started dating your boyfriend, tell me a little about the situation at home with your parents. Before you married him.

P19: I only lived with my mother because my father died.

I: You don't have siblings?

P19: No. Only the three of us lived together. And after my father died I had a sister that lived in San Luis. After my father died the two of us lived together.

I: OK.

P19: After that she [mother] met and married a man.

I: Uh ha.

P19: And I didn't get along with that man. Because he drank a lot and said a lot of things.

I: Uh ha.

P19: And I told her [mother] enough. If you're going to continue living with him I don't know what I will do because I don't, I don't want him in the house.

I: How old were you when your mother married that man?

P19: I fell in love with my husband, with my boyfriend at 14 or 15, the same.

I: 14 or 15 years. OK. OK. So you told your mother that you did not like her boyfriend.

P19: Uh ha.

I: And how did your mom react?

P19: She told me that, she said no, he's like that when he drinks. And sometimes he said really bad things to me.

I: So you didn't feel very comfortable in the house. Do you think that influenced your decision to go out with your boyfriend and move in with him, or not so much?

P19: Yes. Because sometimes he [stepfather] would hit me, and she [mother] gave justification to her husband. Sometimes the husband said I did many things and she [mother] without asking me would hit me.

Deanna directly states how frustration and perceived inadequacy of parenting motivated her to enter a common law marriage, which soon resulted in pregnancy. After repeated punishment and criticism by her grandmother, Deanna married and became pregnant at age 15.

P17: Si no que a veces hay madres que no no tiene capacidad. No que no tiene la capacidad no que nunca tiene tiempo

I: Uh ha

P17: para practicar con sus hijos, para aconsejarla y decirle algo. Porque yo no me creí con mi mama.

I: Uh ha. ¿Con quién tu?

P17: Mi abuela.

I: Su abuela. OK. ¿Y cuanta gente estaba en la casa de su abuela en aquel tiempo?

P17: Mi tío, mis tres hermanos e yo.

I: ¿Y entonces cómo estaba en la casa, la cosa allí?

P17: Si me mandará, si me mandaba como a comprar algo tenía que venir antes, menos de un segundo no me daba. Si duraba más de tres minutos afuera me daba golpe, me pegaba fuerte. De esto día me dijeron que salir de su casa y me fui y me casé con él.

P17: Sometimes mothers don't, don't have the capacity. Not that they don't have the capacity, rather they never have the time.

I: Uh ha.

P: 17: To practice with their children, they give them advice and tell them things. Because my mother didn't raise me.

I: Uh ha. With whom were you?

P17: With my grandmother.

I: Your grandmother. OK. And how many people were in your grandmother's house at that time?

P17: My uncle, my three brothers and me.

I: And so how was it in the house, things there?

P17: If she sent me, sent me to buy something, I had to come before; she didn't give me even an extra second. If I spent more than three minutes outside she would hit me, hit me hard. One day she told me to get out of her house and I went and I married him.

The majority of interview participants (19) clearly describe feelings of love towards a romantic partner as one reason for engaging in unprotected intercourse, which could result in pregnancy. The role of love in sexual engagement varied among participants. In some cases the belief that a young woman's partner was in love with her allowed a sense of security when engaging in unprotected sex. Sixteen young women discuss not intentionally becoming pregnant, but understanding that the risk existed and believing that their sexual partner would provide emotional and financial support in the event of pregnancy. Gloria discusses an explicit understanding that she and her first sexual partner had. If she became pregnant they would move in together and become common law spouses. Such an agreement largely nullified the need to consistently use contraception. Trust and power dynamics also seem to play a role in many couples' decisions to not consistently use contraceptives.

I: OK y usted 19. OK. Entiendo. Entonces ustedes comenzaron tener relaciones, sin tener conversación, sin protegerse. ¿Y después, después que ustedes comenzaron tener relaciones alguna vez hablaba de que pudiera salir embarazada o como protegerse?

P19: Sí, yo lo decía y él me decía „bueno si tú sale embarazada aunque no sale embarazada yo te quiero. Me caso contigo.’

I: ¿Entonces usted inició esta conversación con él después?

P19: Sí.

I: ¿Y que usted dijo? ¿Usted recuerde?

P19: Em sí. Que yo le dije como bueno yo le dije a él bueno ya yo te quiero pero si salgo embarazada, normal, nos caso. Y él me decía que sí.

I: OK. ¿Entonces la conversación que ustedes tenían, usted dijo que usted pudiera salir embarazada?

P19: Um hmm

I: ¿pero usted no hablaba de cómo prevenir el embarazo?

P19: No.

I: ¿Solo hablaba de lo que sucedería si usted salió embarazada?

P19: Y a veces yo le decía cuando teníamos conversaciones yo le decía que te protegiera, que lo ponga la cosa y él me dijo que no.

I: ¿Y por qué? ¿Por qué el dijo no?

P19: Porque él me decía que yo que él fue que mi primer novio

I: Uh ha.

P19: y que yo fue su primera novia, como aquí, y que no.

I: OK and you were 19. OK. I understand. So you stated to have relations, without having a conversation, without protection. And after, after you started to have relations, was there a time that you talked about the possibility that you could get pregnant or about how to protect yourselves?

P19: Yes, I talked to him and he told me, „well if you get pregnant or if you don't get pregnant I still want you. I'll marry you.

I: So you initiated this conversation with him after?

P19: Yes.

I: And what did you say? Do you remember?

P19: Em yes. I told him that, well I told him that he's good, that I want him, but if I get pregnant, we marry, normal. And he told me yes.

I: OK. So the conversation that you had, did you say that you might get pregnant?

P19: Um hmm.

I: But you didn't talk about how to prevent a pregnancy?

P19: No.

I: You only talked about what would happen if you got pregnant?

P19: And sometimes I would tell him when we had conversations, I would say that he needed to protect himself, that he should put on the thing [condom] and he told me no.

I: And why? Why did he say no?

P19: Because he told me that he was my first, my first boyfriend.

I: Uh ha.

P19: and that I was his first girlfriend, and here, and that no.

The interviewer did not directly probe participants about whether they felt pressured to engage in unprotected sex or not. In 19 interviews participants independently discussed their willingness to engage in unprotected sex. Twenty out of 21 of the respondents indicated that they had at least enough knowledge about contraceptives and family planning to request either the use of condoms or that a sexual partner purchase contraceptive pills. More than half of participants indicated that they did not feel they had sufficient understanding of reproductive health at the time of first pregnancy to effectively protect themselves against pregnancy, or that substantial barriers exist to consistently and effectively utilizing family planning methods. Participants identified trust as one potential barrier to utilizing contraceptives, even when a desire to prevent pregnancy exists. Caroline discusses trusting the father of her child as one barrier to using condoms.

I: ¿Y que cual que paso? ¿Cuál fue el paso que no paso para no usar condones? ¿Por qué por que...

P2: Porque dice como dice mi como dice cuando yo estoy en las charlas de VIH. Dice que en la confianza es que es el peligro.

I: Uh ha.

P2: Entonces y tenia me ten tenía demasiado confianza para tener que usar condones.

I: And what, which, what happened? What step didn't happen to use condoms? Why why...

P2: Because they say, it's like they say when I go to the HIV workshops. They say that trust is the danger.

I: Uh ha.

P2: So I had, I had too much trust to use condoms.

Young women living in the households of primary caregivers also expressed fear over having contraceptives discovered by parents or grandparents. Caroline goes on to articulate this concern when she states:

I: OK. ¿Y tampoco no pensaste en usar como no se otro tipo como pastillas, algo que tu pudiera controlar?

P2: No

I: ¿Y por qué?

P2: No por por nada. Porque si yo lo usaba yo tenía demasiado temor, miedo

I: Uh ha.

P2: y no quería como relacionarme tanto con esas cosas, pero yo se que si no me relacionaba con esas cosas como quiera iba a salir embarazada.

I: ¿Y por qué no quisiera relacionarse con esas cosas?

P2: En ese tiempo por miedo.

I: ¿De qué?

P2: Miedo de que mi mama me encontraba estas pastillas.

I: OK. And you also didn't think about using, like, I don't know, like pills, something that you could control?

P2: No.

I: Why?

P2: No, for no reason. Because if I used them, I had too much fear, scared.

I: Uh ha.

P2: I didn't want to associate so much with those things, but I knew that if I didn't associate with these things I would end up pregnant anyway.

I: And why didn't you want to associate with these things?

P2: At that time because of fear.

I: Of what?

P2: Fear that my mother would find the pills.

Fear was not limited to having a primary caregiver discover contraceptives. Participants also discuss limited contraceptive use because of concerns over one's ability to conceive children and believing that contraceptive use could have long term effects on an individual's ability to reproduce. Amanda's account suggests that as early as 16 she had concerns about her long term ability to conceive children and how contraceptive use might negatively impact this ability.

I: Entonces me dice que estaba pensando y estaba un poco preocupada por eso y sabía de algunos métodos a para cuidarse, pero nunca lo uso.

P18: No.

I: ¿Por qué?

P18: Porque yo tenía miedo, porque la gente dicen que cuando uno nunca ha parida y se pone beber pastillas después uno no puede tener un hijo.

I: So you say that you were thinking and you were a little worried, and so, and you knew about some methods to protect yourself but you never used them.

P18: No.

I: Why?

P18: Because I was really scared because people say that when you've never given birth and you start to drink pills [contraceptive], after you can't have a child.

In two interviews participants narrated accounts that indicate they had little negotiation power in deciding to engage in intercourse or use contraception. As a result, these young women did not have significant agency in determining when to have children, or even choose to risk pregnancy through unprotected sex. Nina recounted her mother essentially forcing into the household of a man when she was still a virgin. She became pregnant with her first child soon afterward.

Given the literature associating early pregnancy with school dropout and poor education outcomes, exploring the point of dropout proves particularly important. All but three participants experienced some interruption in their formal education by the time of interview. Young mothers describe a variety of reasons for exiting school. While some young mothers do directly attribute early school exit to pregnancy, seven interview participants either exited school before first pregnancy, or attribute not consistently participating in formal education to not having a Dominican birth certificate. One participant related her decision to stop attending secondary school not to pregnancy, but to a youthful mistake of wanting to spend as much time as possible with her husband whom she married at 16.

P4: Uh ha. Y lo planificamos, casemos y salí embarazada entonces.

I: Entonces, ¿ustedes estaba viviendo junto primer y después usted salió embarazada?

P4: Si.

I: OK. Y, ¿Por qué usted decidió a casarse desde 16 años?

P4: Hay tu sabe a el amor hace mucha cosa.

I: ¿Cómo?

P4: Como... vuelve a veces loca, dejar sus estudio.

I: Entonces, ¿estaba estudiando?

P4: Si yo estaba en octavo cuando eso y me lo hizo la prueba nacionales.

I: ¿Y tú lo dejaste?

P4: Y yo deje

I: Para casarse o para-

P4: Si.

I: ...para tener un bebe

P4: Para casarme

P4: Uh ha. I was using contraception, we married and then I got pregnant.

I: So, you were living together first and then you got pregnant?

P4: Yes.

I: OK. And why did you decide to get married at age 16?

P4: Oh, you know love makes you do a lot of things.

I: How so?

P4: Like... sometimes it makes you crazy, you leave your studies.

I: So you were studying?

P4: Yes. I was in eighth grade when this and I took the national exam.

I: And you left?

P4: I left.

I: To marry or to

P4: To marry.

Feelings surrounding Pregnancy and the Birth of First Child

Participants express complex emotions surrounding pregnancy and the birth of children. While all participants expressed pride after the birth of their first child, emotional reactions to discovering first pregnancy often involve joy, worry and regret. Participants express that while motherhood is a mark of pride, discovering pregnancy can also prove an embarrassment if pregnancy occurs while living in a parent's or primary caregiver's home. Many participants discuss pregnancy and motherhood as a blessing while at the same time discussing their worries about continuing with academic studies. Anabel explains that at 13 she knew she was quite young and felt unsure about her academic future as a result of pregnancy.

I: Entonces ¿Cómo tú sentiste cuando tú te daba cuenta que...

P6: ¿Que yo estaba embarazada? Bueno me sentí muy mal.

I: ¿Cómo mal y cómo bien?

P6: Mal porque estaba muy joven para tener muchachos ahora y dejar los estudios. Me sentí muy muy me sentí bien porque iba a tener una niña y eso son los regalos que dios le da uno sus hijos. Eso es su familia.

I: So how did you feel when you realized that...?

P6: That I was pregnant? Well I felt really really bad.

I: Bad how and good how?

P6: Bad because I was young to have a child right then and leave my studies. I felt very very, I felt good because I was going to have a girl and this is a gift that god gives someone, their children. That's your family.

While a young woman might experience positive emotions surrounding the prospect of motherhood, participants consistently indicate that becoming pregnant while living in a primary caregiver's home would cause feelings of shame. Seventeen participants became pregnant while living within a primary caregiver's household. Of these participants, (9) were living in a primary caregiver's household at the point of interview.

A small minority of participants (3) expressed that they only experienced sadness and regret during their first pregnancy. Despite not having any expressed desire to have a child, all three young women made a decision to not try and abort their fetuses. Legal abortion does not exist in the Dominican Republic, but illegal abortions do take place. These three participants discuss how after the birth of their child their feelings began to shift. These mothers discuss feelings of pride and love after the births of their first child. Nina expressed profound disappointment after being forced into a common law marriage and becoming pregnant. After her son's birth she discusses a shift in her emotions:

I: ¿Cómo sentía cuando viste ese bebe, la primera vez? ¿Cuándo nació?

P5: Me sentía orgullosa.

I: ¿Es verdad?

P5: Porque mi primer bebe.

I: Uh ha.

P5: Nunca pensaba si yo iba tenerlo porque tampoco yo no lo quería. Pero yo lo cogí porque la cosa es así. Después que yo lo cogí me sentía orgullosa y familia lo cogieron que yo tengo hijo. Y después yo dije „yo no voy a parir ahora. Me voy a planificar, proteger.”

I: How did you feel when you saw your baby the first time? When he was born?

P5: I felt proud.

I: Really?

P5: Because it's my first baby.

I: Uh ha.

P5: I never thought that I would have him because I didn't want him either. But I took him because that's the way things are. After I took him I felt proud and my family took him, that I have a son. And after I said, „I am not going to give birth now. I am going to get contraceptives, to protect.”

Challenges to Motherhood: The Ideal Time for Motherhood that Rarely Exists

All interviewed participants clearly linked economic stability and educational attainment to the most opportune time to begin procreation. Participants clearly outlined a need to have the economic resources to provide shelter, adequate food and education as necessary to be considered a “good mother.” All participants identified that they themselves had not achieved this standard at the point of first pregnancy. When asked about the best time to have a child all interview participants listed an age older than their own at first pregnancy. Typically participants responded that a young woman should be in her early to mid-twenties when she has her first child. When probed about what a young woman has achieved at this age that prepares her for motherhood, participants listed completion of secondary and higher education, securing a steady job, having financial stability and an independent household from parents or primary caregivers as accomplishments that ready a young woman for motherhood. These are standards that few achieve at any age in the bateyes. Sara talks about the expense of caring a newborn

and explained that she would want her own children to first have the financial wherewithal to comfortably manage these expenses.

I: ¿...pero que debe lograr una mujer antes que tiene su hijo, por ejemplo? Desde su punto de vista.

P22: ¿Desde mi punto de vista? Bueno. Antes que tener hijos tiene que prepararse.

I: ¿Cómo qué? ¿Qué significa eso para usted? A prepararse.

P22: Tener un buen trabajo. Tú sabe que los niños necesitan mucha leche

I: Sí.

P22: los pampers, a veces se enferma y necesita comprar vitamina y todo es caro.

I: Uh ha. OK. Entonces estar preparado en el sentido económico. ¿Qué más?

P22: Para mí eso ya.

I: But what should a woman have achieved before she has children for example? From your point of view?

P22: From my point of view? Well. Before they have children they need to be prepared.

I: How. What does it mean to be prepared? To prepare.

P22: To have a good job. You know children need a lot of milk.

I: Yes.

P22: Pampers, sometimes they get sick and you need to buy vitamins and everything is expensive.

I: Uh ha. OK. So to be prepared in the economic sense. What else?

P22: For me that's all.

The vast majority of participants (17) discussed their belief that having completed at least secondary and ideally post secondary studies was key preparation for motherhood. No participant discussed structural barriers to poor Dominican Haitian females from completing secondary and post secondary education. Rather, these participants identified potential economic benefits associated with education achievement as key to preparing a young woman for motherhood. These women also placed the burden of achieving academic goals solely on themselves.

P2: Tanto sacrificio, tanto trabajo que paso con mi mama. No importo eso. Pero yo pienso diferente porque yo puedo trabajar, estudiar y cuidar a mi hija. Pero ella no tenía esa oportunidad. Solamente trabajo.

I: ¿Y por que ella no tenía esa oportunidad?

P2: Porque tenía diferente cosas que hacer y no ella no estaba tanto, no tenía la mente tan desarrollada. Como ahora muchas jóvenes tiene...

I: ¿Ella no estaba, su madre por ejemplo no estaba pensando tanto en los estudios?

P2: No estaba pensando tanto porque si ella se lo pusiera ella lograría lo que ella quería.

P2: So much sacrifice, so much work that my mother had. This didn't matter to me. But I think differently, because I can work, study and take care of my daughter. But she didn't have that opportunity. She only worked.

I: And why didn't she have this opportunity.

P2: Because she had different things to do and she didn't, she wasn't so much; she didn't have her mind as developed. Like now many young people have...

I: She wasn't, your mother for example wasn't thinking so much in her studies?

P2: She wasn't thinking because if she put herself she would have accomplished what she wanted.

Finally, more than half of the interview participants stated that a young woman should have established a household outside of her primary caregivers before having children. Participants very clearly identified having a child in a primary caregiver's home as problematic because of the financial burden it can present for biological family members. Participants also explain that the community script for ideal motherhood and womanhood involves a woman having a child within in a household separate from her parents. Amanda discusses the shame associated with becoming pregnant and having her first child within her mother's home. She discusses how community members advised her to seek out family planning methods after the birth of her son, so she would not shame herself and her family by having another child while living in her mother's home.

Challenges to Motherhood: It's not all fun

While participants clearly outline benefits to motherhood, they do describe challenges associated with the experience. Although most participants identified financial and material needs as a concern before the onset of first pregnancy, money continued to prove a considerable challenge for young mothers. All participants discussed some degree of financial limitations as a barrier to providing their child with desired care. Respondents indicate an interconnection between financial needs, exiting school and childcare. While a significant number of participants exit secondary school before becoming pregnant with their first child, over half of the remaining young mothers interviewed at least partially attribute exiting school to pregnancy and childbirth. When Massiel discusses her motivations for having children and how motherhood creates challenges, her principal concern and regret involve having to leave school to financially provide for her two daughters.

I: OK. OK. Entonces, la situación en la casa no estaba muy buena, me parece, ¿entonces, eso tenía que ver con su decisión o a tener un novio que se yo?

P12: Sí porque yo en este tiempo pensaba que con yo tener relaciones y tener las hijas mía que yo lo hace daño a mi mamá.

I: Uh huh.

P12: Y en realidad el daño era mío que yo estaba haciendo.

I: ¿Cómo?

P12: Claro, porque después que yo salió embarazada yo tuvo que dejar a estudiar y mi vida cambió. Ya yo no puedo pensar en mí, tengo que pensar en mis hijos.

I: OK. OK. So, the situation at home was not very good, I see. So did this influence your decision to have a boyfriend or I don't know?

P12: Yes, because at this time I thought that by having relations and having my daughters that I was hurting my mother.

I: Uh ha.

P12: But in reality I was hurting myself.

I: How?

P12: Because after I got pregnant I had to stop studying and my life changed. Now I can't think about myself, I have to think about my children.

Participants also discuss childcare as a serious challenge to working and continuing formal education. Most interview participants cited someone, typically a family member, who could provide some level of assistance with childcare. Nonetheless, participants consistently stated that the need to provide childcare played a contributing factor to not attending school and in fewer cases to not having the ability to work consistently. Amber's story nicely illustrates this tension. When asked in the interview who would care for her newborn son when she returned to night school, Amber stated that her mother-in-law would assist. In field observations, Amber's mother-in-law repeatedly threatened to withhold childcare. Months after the initial interview Amber reported to the investigator that she indeed did enroll in night classes, but could not attend as often as she would like because of childcare issues with her mother-in-law. At the time of interview only eight participants were enrolled in secondary school and none had received her high school diploma. Participants discuss how family and community members are more reliable for temporary childcare. When a mother is sick, needs to run errands or attend to other family member's illnesses, family or friends usually step in to provide respite childcare.

Meeting even basic needs can prove challenging in the bateyes. This is no exception for young mothers. Interview participants all express a desire for their children to study, have enough food, sufficient healthcare and the ability to take part in social or leisure activities, but all participants indicate that their main concern for children involves the ability to secure such things. Nina struggles to provide her Dominican born sons

something as basic as birth certificates, which would entitle them the right to attend public school.

I: Y el otro día tu estaba hablando conmigo sobre su documento que tu quiere sacarlo

P5: Si

I: para que ellos pueden tener. ¿Y tú ves que en el futuro eso puede ser problema para ellos porque ellos no tiene su acta?

P5: Es un problema para ellos que no tenga.

I: ¿Por qué? ¿Por qué es un problema?

P5: Porque yo no tengo cedula para declararlos.

I: ¿Pero por que es una problema que ellos no tiene? ¿Por qué puede ser?

P5: Porque se gasta mucho dinero para tenerlos para ello.

I: ¿Pero si ellos no tenga, cual es el problema? ¿Qué no tiene documento?

P5: Hay que declararlo, buscar alguien que lo decla pa que tenga acta.

I: ¿Pero si que ellos nunca tiene papeles por que eso es un problema? ¿Po qué? ¿Qué pasa si no tiene papeles?

P5: Nada. No puede estudiar. No puede hacer nada. El profesión que ellos necesitaran hacer no puede hacerlo sin documento.

I: OK.

P5: Tiene que tener documento.

I: And the other day you talked with me about your documents and that you want to solicit them

P5: Yes.

I: so they [children] can have them. Do you see that in the future it could be a problem for them because they don't have birth certificates?

P5: It's a problem for them [children] not to it [birth certificates].

I: Why? Why is it a problem?

P5: Because I do not have an identity card to declare them.

I: But why is it a problem if they don't have it? What could be?

P5: Because it costs a lot of money to have it [birth certificates] for them.

I: But if they don't have it [birth certificate] what's the problem? That they don't have

documents?

P5: You have to declare them, find someone that, someone that will declare them so they have their birth certificate.

I: But if they never have papers why is this a problem? Why? What happens if they don't have papers?

P5: Nothing. They can't study. They can't do anything. A profession that they need to have, they can't have without documents.

Interview participants more typically describe a struggle to consistently provide basics like sufficient food for children. Massiel had a full time job at the time of interview. Nonetheless, she had to send one daughter to live with a paternal grandmother because Massiel's financial resources did not allow her to provide for the basic needs of two children. She repeatedly expressed that she hoped to reunite her daughters and that she did not want her children to live outside her household. Rather, Massiel felt that given her economic condition sending her eldest daughter to live with a less financially strapped relative provided the most responsible parental choice.

I: ... ¿Tiene una hija a donde la abuela ahora?

P12: Uh huh donde la mama donde la mama, donde la mama de papa de ella.

I: Y ¿por qué la deajo ella a donde la abuela?

P12: Porque en realidad yo no la pudo tener las dos porque yo vivo sola.

I: Uh ha.

P12: Entonces en lo que yo gano no me alcanza tener las dos.

I: OK.

P12: Yo nada más tenga la más pequeña.

I: ¿Y usted está trabajando ahora?

P12: Si.

I: En que trabaja

P12: En, en un restaurante de comida rápida.

I: ... You have a daughter with your grandmother now?

P12: Uh huh, where the mother where the mother, where the mother of her [daughter] father.

I: And why did you leave her with her grandmother?

P12: Because in reality I can't have both of them [daughters] because I live alone.

I: Uh ha.

P12: So what I earn doesn't give me enough to have both.

I: OK.

P12: I only have the youngest.

I: And you work now?

P12: Yes.

I: What do you work?

P12: In, in a fast food restaurant.

The majority of participants discussed making substantial sacrifices for the benefit of their children. These sacrifices range from postponing education (13) to leaving family and community to work in domestic service and send money back to support children (2). In the most extreme case one participant discussed engaging in sex for monetary exchange during a period of extreme financial difficulty.

P11: Entonces, nada, yo cuando el niño se le acababa la leche, yo salí a pedir, a mis, a la gente que conocía que me ayudaran, y me reunía así, y un día me di la necesidad yo tenía un muchacho él a mi me, me, me enamoraba, pero yo nunca había estado enamorado de él.

I: Aha

P: Pero por la situación que yo estaba yo tuve que tener relaciones sexuales para que me diera dinero.

I: OK

P11: Para comprarle la leche al niño.

I: Wow.

P11: Si, entonces el... el me dio 500 pesos y yo le compre la leche al niño, le compre Pamper.

P11: So, nothing, when the baby drank all the milk, I went out to ask, my the people I knew for help and I gathered money this way and one day, I had the need, I had a friend. He, he,

he was in love with me, but I was never in love with him.

I: Aha.

P11: But because of the situation that I was in I had to have sexual relations with him so that he would give me money.

I: OK.

P11: To buy milk for my son.

I: Wow.

P11: Yes, so he... he gave me 500 pesos and I bought milk for the baby, I bought diapers.

I: Aha.

In addition to financial sacrifices a mother makes, participants also discuss emotional sacrifices implicit to motherhood. Often times these emotional sacrifices indirectly involve childbearing and childrearing and more directly involve relationships with romantic partners that result in pregnancy. At the point of interview seven participants no longer lived with the father of their first child. Of the remaining 15, four described the marital relationship as extremely strained. Caroline offers insight into her personal struggle to make peace with the fact that the father of her child and her common law husband has another family.

P2: Si. Pero ya la con tanta experiencia, con tantas cosas ya que había pasado, ya como mi vida de persona adulta. Ya yo no yo no soy una niña yo soy una mujer.

I: ¿Ahora se siente como una mujer?

P2: Si.

I: ¿Y por qué?

P2: Porque ya no es igual como yo pensaba no pienso ahora.

I: Ah ha.

P2: Y ahora como mujer hay tengo mis defectos, tengo mis criaturas, Yo también sufro. Se sufre porque como prácticamente yo tenida que... el tenía su esposa. Hay muchas cosas que yo me sentía muy mal porque ya yo te dije.

P2: Yes. But with so many experiences with so many things that have happened, now I have an adults life. Now I am not, I am not a little girl, I am a woman.

I: Now you feel like a woman.

P2: Yes.

I: And why?

P2: Because now it's not the same, how I think it's not the same now.

I: Ah ha.

P2: And now as a woman I have my defects, my silly ways. I also suffer. I suffer because I practically had... he had his wife. There are many things that I felt very bad about, because I already told you.

The Benefits of Motherhood

Interview participants express a variety of concerns surrounding their children's wellbeing and future. Motherhood is not absent of significant challenges for young Dominican Haitian women living in the bateyes. The vast majority of participants indicate that the benefits of motherhood ultimately outweigh such challenges. Most prominently unconditional love, a sense of pride and self-efficacy as well as hope for future security mark benefits of early motherhood for adolescent females living in these communities. When asked about the best part of being a mother almost all mothers stated that the love and bond between mother and child has immeasurable worth. Participants discuss the affection children display towards mothers as well as the positive emotions mothers themselves feel towards their children.

P4: Le quiero mucho no vivir más de tres minutos sin ella.

I: ¿Eh verdad?

P4: Mmhm. Cuando yo salgo si ella no está conmigo me siento mal.

P4: I love her so much, can't live more than three minutes without her.

I: Is that right?

P4: Mmhm. When I go out if she is not with me I feel bad.

I: ¿Que le gusta más de ser madre? De todo

P13: ¿A mí?

I: Si.

P13: OK, bueno con la primera vez me gusto que muy cariñosa

I: Aha.

P13: A mí me gusta los niños cariñosos.

I: What do you like about being a mother? Out of everything.

P13: Me?

I: Yes.

P13: OK, well with the first time I liked that very affectionate.

I: Aha.

P13: I like children that are affectionate.

Interview participants almost unanimously stated that children represent the best promise for future financial security. Participants discuss the belief that children will care for their parents in old age and that children may lift their parents out of poverty by achieving financial success as adults. In a social and economic environment with few viable opportunities for unskilled labor and little hope of stable and non-exploitive wages where employment opportunities do exist, participants express that children provide the best option for financial security in old age or in sickness.

P17: E yo digo que los quiero tenerlos porque el día mañana que no hay nadie que solamente son mis hijos y que yo este enferma que son ellos que me bañan que me den cariño

P17: Uh, I say that I want to have them [children] because tomorrow there may not be anyone, only my children and if I'm sick they'll bath me and give me affection.

Interview respondents also indicate that children represent hope for the future. Specifically, children provide mothers with the strength to struggle against formidable social and environmental obstacles. Participants discuss feeling like children give them more purpose and direction in life.

I: OK. ¿Um antes que tú embarazaste tú sentía que tenía su camino en la vida, tenía cómo razón para vivir?

P3: Sí

I: ¿Y ahora siente igual o cómo que tú tienes más camino, menos camino... más razón a vivir?

P3: Yo hallo que tengo más razón de vivir.

I: Uh ha.

P3: Porque tengo un bebé que tengo que enseñar de la vida.

I: Sí.

P3: Cómo es la vida. Tengo que ayudarlo porque necesitas de mí.

I: OK. Um, before you got pregnant did you feel that you had a path in life, that you had a reason to live?

P3: Yes.

I: And now do you feel the same or like you have more of a path, less of a path... more reason to live?

P3: I believe that I have more reason to live.

I: Uh ha.

P3: Because I have a baby that I have to teach about life.

I: Yes.

P3: How is life. I have to help because he needs me.

I: ¿Y ahora siente que tiene, mas futuro, menos futuro, lo mismo?

P8: ¡Mas!

I: Mas futuro, ¿y por qué?

P8: Porque ahora, tengo por quien salir adelante.

I: And now do you feel like you have more of a future, less of a future or the same future?

P8: More future!

I: More future. And why?

P8: Because now, I have someone to move forward for.

Participants also discussed motherhood as a catalyst in their desire to return to school. For the seven participants that dropped out of school before the onset of first pregnancy all discuss the belief that having children gives them even more incentive to try and attain education, despite economic barriers. Likewise, young mothers express the hope that children will realize idealized goals such as completion of post secondary education, attainment of a stable and good paying job as well as home ownership.

P4: Entonces, para ella quiero, quiero que ella cría bien, bien sana, quiero que nunca se enferma, los niños se enferma mucho, pero, quiero que crezca bien sana y quiero que sigue estudiando que estudie bien aunque no le puede darle lo que tendría que darle pero que, estudia por lo menos en un lugar decente y para que aprenda bien y mucho. Porque me ha yo, llegué a octavo pero yo aprendí muy pocito de lo que debido.

I: Mmhm

P4: Si. Quiero que ella hecha pa delante. Pero como yo no pudo llegar más que ella algún día hecha pa delante para ayudar a mí.

P4: So for her I want, I want her to grow up well, grow up healthy, very healthy, I don't want her to ever be sick, children get sick a lot, but I want to grow up very healthy and I want her to continue studying, that she study well even though I can't give her what I have to give her but that she study at least to a decent place and that she learns a lot. Because me, I got to eighth grade but I learned very little of what I should have.

I: Mmhm.

P4: Yes. I want her to move forward. But even though I couldn't go further that she one day goes further to help me.

Ultimately, interview participants discuss understanding motherhood as an identity transition from childhood to adulthood. These young women describe self-sacrifice, perseverance and establishing separate households from primary caregivers as key components in their transition to adulthood.

I: ¿Um y cómo sería su vida si nunca había tenido ese bebe?

P3: Bueno se he hubiese seguido la vida de niño.

I: de niño OK. ¿Y tú extrañas esta vida o no?

P3: ¿Cómo?

I: ¿Tú extrañas esta vida?

P3: No no tanto no.

I: OK

P3: Algunas cosas sí.

I: ¿Por ejemplo?

P3: Cómo estar libre así.

I: Um and how would your life be if you had never had this baby?

P3: Well I would have continued to have the life of a child.

I: A child. OK. Do you miss that life or no?

P3: What?

I: Do you miss that life?

P3: No, no, not much.

I: OK.

P3: Some things yes.

I: For example?

P3: To be free.

One of the ultimate markers of this transition from childhood to adulthood involves the perception of having respect within the community. Over half the interview participants discussed how the way one cares for her child can increase the esteem community members hold for a young mother. Establishing a stable household is also described as a marker by which community members afford respect to young mothers.

P1: Um, para tener un hijo es una cosa más querida, más admirada.

I: Uh huh.

P1: A veces, las personas no no están miraban. No te querían. Y ahora que tiene un hijo te, te coge mas en cuenta.

I: Como, la gente en la comunidad, ¿le da ma valor o quien le da valor?

P1: Eh, todo el mundo.

I: ¿Es verdad? Tu sientes que la gente le trata usted con más respeto ahora o así...y, ¿Y por qué? ¿Por qué eso sucede piensa usted?

P1: Porque, um, ah...ah...

I: No sin vergüenza.

P1: Ehm, porque...ellos ven porque, ellos, porque nunca que pensaba que tu no podía ser madre o tener la familia estable.

I: Uh huh

P1: Porque muchas que se casan, tiene hijo, pero en fin no sale, no vive con el padre de su hijo.

I: Uh huh, entonces la gente en la comunidad piensa eso, que, o quien piensa eso...usted

P1: Yo pienso eso.

I: ¿Ah, usted pensaba que quizás no podría o otra gente no puede?

P1: Ellos pensaba porque hay muchos que llega al mitad del camino ya el padre ya no vive con su hijo

P1: Um, to have a child it's something very desired, very admired.

I: Uh huh.

P1: Sometimes people don't don't look at you, they don't like you. Now that you have a child they, they take more notice of you.

I: Like, the people in the community? They give you greater value, or who gives you more value?

P1: Eh, everyone.

I: Really? Do you feel like the people treat you with more respect now or like... and why? Why do you think this?

P1: Because, um, ah...ah...

I: No without shame.

P1: Ehm, because... they see because, they, because they never thought that you could be a mother or have a stable family.

I: Uh huh.

P1: Because many get married, have a child, but in the end it doesn't work, they don't live with the father of their child.

CHAPTER 4: DISCUSSION

While this study does begin to address a gap in the literature with regards to adolescent girls' understanding of young motherhood, questions remain. The current study does not look at the generational transmission of values and how those historical values might be shifting in bate communities due to migration patterns and globalization. Since the bateyes are inhabited by both Dominican and Haitian cultures, understanding traditional family structures and the traditionally sanctioned time to begin motherhood can shed further light on the seeming incongruence between the stated best time to begin childbearing and the community norm. Ethnographic research looking at Haitian family structure reveals that women often engage in repeated monogamous relationships with men that result in multiple offspring. (Maternowska, 2006). In the Haitian context the need for financial help from male partners to maintain a tenuous financial existence, combined with gender inequalities and a lack of negotiating power in family planning, results in women bearing many children (Maternowska, 2006). It is important to understand how migration to the DR and the confluence of multiple cultures impacts this trend. Future work should examine how parents of young mothers and other community elders construct the appropriate time and circumstances to enter motherhood. Additionally, understanding how global forces, though international aid and reproductive health policies as well as transmission of Western ideas through media and migration from the DR to the U.S. and back, may shed further light on the current local discourse with regards to early motherhood and any shift that discourse has undergone in the last 20 years.

This work has multi-pronged implications for interventions. On the one hand, interviews suggest that current reproductive health services are not adequate for these two batey communities. While young mothers discuss gaining knowledge about reproductive health from workshops sponsored by local and international agencies, this information does not translate into consistent changes in reproductive health practices. Many young mothers describe a desire to use contraceptives, while also discussing non-trivial barriers to doing so. Birth control pills do not afford a realistic option for adolescent girls living in the homes of primary caregivers because of fear that parents will discover contraceptives.

While the community health worker model affords many benefits and is highly praised internationally, in a small community young women may not seek out contraceptives from a community health worker for fear that the larger community may discover this information. Young women also discuss the financial cost of paying for bus fare and the subsidized fee for contraceptives as burdensome. Reproductive health agencies would benefit their target populations by considering these issues and talking with target populations to find realistic alternatives, like low cost injections that can be administered every three months. Regardless of the benefits having one child might garner, adolescent females need to have safe access to appropriate methods of contraceptives and the knowledge to use such methods effectively if they desire.

On another level, young mothers clearly articulate a desire for greater educational and vocational opportunities as well as childcare opportunities to make such educational endeavors possible. Working with communities to establish relationships with centers offering correspondence courses may provide one aid to young mothers who wish to complete secondary school. Working with young mothers to come up with a realistic

timetable to pursue academic work while balancing household, childcare and work for pay responsibilities will prove pivotal in successfully meeting the educational needs of this population. Finally, working with young mothers and community members to explore possible childcare options may assist young mothers in limiting further delay in academic and vocational training.

At a larger policy level the conversation on early motherhood needs to shift. Historically and currently, international policy makers (e.g. UNPF, WHO, UNICEF, USAID) all portray early motherhood as a black vortex from which few emerge. The larger issue surrounding early motherhood is poverty. Young women who are marginalized both because of their gender, economic and political status have few opportunities to assert themselves as valued and productive members of society. In contrast, motherhood provides one of the only opportunities to assert oneself as an adult in the community, receive community respect, experience unconditional love and at least the possibility of some financial security in old age. Instead of condemning one of the few opportunities young women have to assert themselves within society, policy and programming should endeavor to increase access opportunities for educational, economic and social mobility based on the expressed needs of young women. Providing additional pathways to community respect and future financial security, will ultimately allow adolescent females living in bateyes a choice for how to transition into an adult role within their communities.

CHAPTER 5: FUTURE DIRECTIONS

While this study does begin to address a gap in the literature with regards to adolescent girls' understanding of young motherhood, questions remain. The current study does not look at the generational transmission of values and how those historical values might be shifting in bate communities due to migration patterns and globalization. Since the bateyes are inhabited by both Dominican and Haitian cultures, understanding traditional family structures and the traditionally sanctioned time to begin motherhood can shed further light on the seeming incongruence between the stated best time to begin childbearing and the community norm. Ethnographic research looking at Haitian family structure reveals that women often engage in repeated monogamous relationships with men that result in multiple offspring. (Maternowska, 2006). In the Haitian context the need for financial help from male partners to maintain a tenuous financial existence, combined with gender inequalities and a lack of negotiating power in family planning, results in women bearing many children (Maternowska, 2006). It is important to understand how migration to the DR and the confluence of multiple cultures impacts this trend. Future work should examine how parents of young mothers and other community elders construct the appropriate time and circumstances to enter motherhood. Additionally, understanding how global forces, though international aid and reproductive health policies as well as transmission of Western ideas through media and migration from the DR to the U.S. and back, may shed further light on the current local discourse with regards to early motherhood and any shift that discourse has undergone in the last 20 years.

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APPENDIX A: PARTICIPANT DEMOGRAPHIC TABLE

Participant #	Participant age at Interview	Participant age at First Pregnancy	Age of First Child's Father at Time of Interview	Age Difference (years) between participant and father of first child
1	19	18	20	1
2	17	15	30	13
3	15	14	19	4
4	18	16	21	3
5	18	15	28	10
6	16	13	28	12
8	13	12	23	10
9	19	18	-	-
10	17	15	22	5
11	19	17	33	14
12	17	15	24	7
13	18	15	19	1
14	17	15	-	-
15	19	16	32	13
16	19	18	-	-
17	15	13	24	9
18	18	16	30	12
19	19	17	22	3
20	15	14	22	7
21	17	15	22	5
22	18	17	-	-