

CICRED'S SEMINAR

Poverty, social vulnerability and adolescent pregnancy in Mexico : a qualitative analysis

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Introduction

Adolescent pregnancy and its related problems have appeared prominently in the international agenda of reproductive health issues for more than a decade. A varied but significant and oftentimes growing proportion of births occur amongst adolescent girls in many developing countries, and a number of important population, health and other individual, family and social problems are imputed to this phenomenon (United Nations, 1989; The Alan Guttmacher Institute, 1990; Bongaarts, J. and Cohen, 1998). Consequently, multinational and international organizations, national governments, and many NGO's are devoting increasing efforts and resources to try to grapple with the issues involved.

However, as it has been suggested by various authors (Nathanson, 1991; Luker, 1996); and as we have argued elsewhere (Stern and García, 2001), there is a need for a different approach to this question. On the one hand, adolescent pregnancy needs to be placed and understood within the processes of social and cultural change that are taking place in specific countries and social contexts (Safe Passages to Adulthood, 2001; The Alan Guttmacher Institute, 2001). On the other hand, instead of assuming what the needs of adolescents are in terms of their sexual and reproductive health, we have to get closer to their concrete lives, their beliefs, attitudes and values, their interaction with their parents, peers and partners, their objective opportunities and subjective aspirations, in order to be able to assess their needs and, starting from them and from accumulated knowledge regarding successful policies and programs, gauge what kind of actions could and should be taken in order to improve their sexual and reproductive health (Population Reports, 1995; Mensch *et al.*, 1998).

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To illustrate the first argument indicated above, research and publications linking the issue of adolescent pregnancy and childbirth to social inequality and with poverty, have been slow to develop, particularly in the more industrialized countries (for some exceptions, see Luker, 1996; Singh, 2001; and Selman, 2002). Lack of information and little access to contraception have been emphasized as two of the foremost factors leading to early pregnancies and childbirth, but only rarely is it acknowledged that poor women have oftentimes no other option but to become mothers early in their lives, both in order to acquire respect and social status and in order to secure their livelihood for the future, linking their life with that of a man. Information on reproductive matters and access to contraception will have little meaning for these women unless opportunities arise for them to envisage a different future. Only then will it be meaningful for them to postpone pregnancy and childbirth.

In terms of research strategies, it is necessary to get involved in qualitative research, in order to have a better understanding of the way in which family and individual factors interact in the process of a young girl getting -or not getting- pregnant early in her life. And this research needs to be comparative, so that we understand why some populations or sectors of a population tend to experience early pregnancies in different degrees.

The knowledge derived from this qualitative research can then be used to improve both social policy and programmatic interventions directed to prevent early pregnancies, as well as to design better instruments for quantitative research.

Objectives

During the long period of preliminary analyses of a number of in-depth interviews with adolescents and youngsters, which form part of a research project on adolescent pregnancy in which I have been working over the last three years, it became clear to me that what I later came to name 'social vulnerability' was an outstanding factor underlying the occurrence of early pregnancies. I realised that what appear in the literature as variables which determine or influence adolescent pregnancies (Hayes, C., 1987; OPS, 1988; Silber, *et al.*, 1995) do not operate in isolation or in the same way in different social contexts, but that it is the combination and interaction between several elements and circumstances which 'explain' why there tend to be a greater number of adolescent pregnancies in

some social sectors than in others (Geldstein and Pantelides, 2001a). I thought that the term 'social vulnerability' could well express this combination of factors and decided to start by illustrating what I meant, which is the main objective of this paper.

I also realised that this social vulnerability to early pregnancies was related to poverty, an argument put forward by various authors (Luker, 1996; Singh *et al.*, 2001; Selman, 2002) and which I myself had proposed in earlier publications (Stern, 1997), and also sensed that this was not a one to one relationship, but a complex one which deserved further reflection and analysis.

I surmised that the invitation to this seminar, given its background and objectives, would be a good opportunity to try to begin to put some of my thoughts and insights together in a written form, which is the latent objective of this paper.

Stated in more impersonal terms, the objective of the paper is to throw some light on how poverty and social vulnerability are related amongst themselves and how they are linked to early pregnancies in Mexico.⁴ An effort will be made to identify some of the components of social vulnerability and to illustrate their nature and impact on early pregnancy, based on the results of the afore mentioned project.

The components of social vulnerability which are identified will be then proposed as variables to be used in further studies aimed at looking more systematically at the relationships between poverty, social vulnerability, and adolescent pregnancy. Possible indicators for these variables will also be proposed, as well as some thoughts on how the results of our analysis can bear upon social policies and programs.

I know of no studies in which an attempt such as the one I have described have been undertaken. In that sense, this analysis should be considered as preliminary and exploratory.

⁴ I am conscious about the importance of childbearing, abortion, and other questions related to early pregnancies, and think that they can also be analysed under the proposed scheme, but have decided to limit this paper to the question of the occurrence or not of an early pregnancy in view of the space limitations and the preliminary character of his paper. I am also conscious of the importance of considering the male population in terms of these questions, but decided to exclude it from this analysis, for the same reasons.

Poverty and social vulnerability

Taking a simple definition, poverty means not to have the necessary means to satisfy basic needs, such as feeding, housing, access to basic education and health services. A family is poor if it does not have the means to satisfy these needs. To be vulnerable, on the other hand means -according to the dictionary- to be susceptible to become hurt, to receive a blow, physically or morally. Social vulnerability implies that this susceptibility is not individually, but socially determined.

Social vulnerability in an ample sense is a complex concept. It involves the interaction of structural and conjunctural conditions or situations, consists of different dimensions: economic, social, cultural; and is manifest at various levels: objective and subjective.⁵

Let us look at two situations in order to illustrate the diversity, complexity, and multidimensionality of conditions of vulnerability:

a) If a potential pregnancy is linked with the lack of opportunity for a sector of the population to attend school or to remain in school long enough to get sexuality education, as well as lack of opportunity to have access to other existing means of information, such as health clinics which provide reproductive health services, etc., that sector is socially vulnerable to the possibility of unwanted and unwelcome early pregnancies.

b) If a family does not have any social support in case the breadwinner has an accident and dies or is temporarily or permanently disabled, such an event can lead to a series of situations which can become translated into serious blows to some family members' welfare and future opportunities. For instance, a young daughter might have to leave school in order to interrupt her studies and help her mother in order to earn a subsistence. These facts, together with the blow implied by her father's death or disability, as well as the lesser presence of her mother, might lead her to get involved with a young man and become pregnant.

⁵ I realise that the definition of social vulnerability needs to be stated more precisely, but that goes beyond my present purpose and possibilities. I know only of one other conceptual definition of social vulnerability, in terms of individuals, families or social sectors susceptible of downward social mobility or which have little proclivity to improve their condition (see Filgueira, 2001, p.9).

If such a family would have been under some kind of a social security scheme which would have provided temporary income or support for the girl, the series of events mentioned would probably not have occurred. It is in these terms that I mean that the mentioned family, and particularly a 15 year old girl in a family such as that, is socially vulnerable to an early and probably unwanted pregnancy.

It is true, as a matter of fact, that social vulnerability is closely associated empirically with poverty in most cases, but the relationship is a contingent and not a necessary one. There are ways in which vulnerability can be minimized even within poverty. Universal access to basic health services, basic education, and social security is one. Developing or strengthening "social safety nets" is another, amongst others.

Furthermore, social vulnerability is not restricted to the poorer sectors of the population. In terms of our issue of interest, women, particularly adolescent women, but male adolescents also, are often socially vulnerable to becoming involved in unprotected sexual relationships and therefore in adolescent pregnancy and childbirth (Population Reports, 2001). In many parts of the world single adolescents are not supposed to get involved in sex. Therefore, they do not get the necessary and timely education and information regarding these questions. But the truth is that a variable but substantial proportion of these adolescents do get involved in sex -oftentimes not voluntarily or ignorant about possible outcomes- and do not have the necessary tools and skills to negotiate the relationship with their partner or to prevent unwanted consequences.

Adolescent pregnancy and poverty in Mexico

The rate of adolescent pregnancy in Mexico has been diminishing over the last 20 years but is still relatively high, at 81 per thousand (Menkes and Suárez, 2002).⁶ It is estimated that approximately 40% of these pregnancies are unwanted. There is evidence of great differences between social classes, strata, or groups in the incidence of adolescent pregnancy, but these differences have not been systematically analysed.

⁶ Data about trends in adolescent pregnancy are usually reported in terms of fertility, i.e. childbirth, since it has been questions of population and health which have been at the centre of preoccupations. Very seldom, as is the case of the paper here quoted, are data reported in terms of **pregnancies**. Rates of fertility of adolescents in Mexico have decreased even more than pregnancy rates. (See Welti, 2000; Zúñiga, 2000, among other sources).

To give an example: in 1997 the fertility rate for 15-19 year old adolescents by educational level (often used as a proxy of socio-economic status) was 213.6 among women no schooling, 158.6 for women with less than primary education, 122.3 among those with complete primary education, 87.8 among those with secondary education, and only 27.1 per thousand among women with preparatory and university education.⁷ (INEGI, 2002; see also CONAPO, 2000; Welte, 2000, and Menkes and Suárez, 2002).

In terms of poverty, it is estimated that more than 60% of the Mexican population suffer from this condition, in different degrees (Boltvinik, 2001; SEDESOL, 2002).

Now, what is it about poverty that leads to a greater incidence of adolescent pregnancy and childbearing? Why are the poorer sectors of the population more vulnerable to become pregnant early in life compared to non-poor sectors?

The study: background and methods

I have been undertaking over the last years a fairly large qualitative research project directed to uncover the meaning which adolescent pregnancies have in different social sectors of the Mexican population, the mechanisms involved in determining or influencing the occurrence or not of adolescent pregnancies in each of them, as well as in determining and influencing the outcomes of such pregnancies.⁸

This research project, of which field work was undertaken between the years 1998-2001, involved extended ethnographic research which comprised: periodic visits to the communities studied, including observation, interviews with key informants as well as with youngsters and their parents, and the collection of secondary data; group interviews with male and female youngsters; and in-depth interviews with two to four male youngsters and two to four female youngsters in each of five different socio-cultural contexts of the Mexican population.

⁷ In Mexico schooling is divided into primary (6-11 years old), secondary (12-15), preparatory (16-18) and university (19 and beyond).

⁸ The research project is entitled "The meaning and implications of adolescent pregnancy in different socio-cultural contexts in Mexico" and is partially funded by the Mexican National Council of Science and Technology (Project 26089-S) and the Special Programme of Research, Development and Research Training in Human Reproduction of the World Health Organisation (Project 98127BSDA).

Criteria for selecting the five contexts include basically socio-economic considerations, but also some cultural ones. We wanted to have a partial sample of the diversity of social classes, sectors or strata of the Mexican population in order to test our hypothesis that the meaning and implications of adolescent pregnancy differed amply among them (see Stern, 1995b). We included the following sectors: a "traditional" rural community in the State of Oaxaca; a "marginal" urban sector in Mexico City; urban "popular" sectors in two different large cities: Tonalá, Jalisco, with a traditional handicraft industry and Matamoros, Tamaulipas, a city with modern assembly type industries on the border with the U.S.A.; and an upper-middle class sector in Mexico City.

For the purpose of this paper we will basically consider materials from the in-depth interviews undertaken with the young women of three of the contexts: the urban "marginal", the urban "popular" in Matamoros, and the upper-middle class sector. In general terms one can say that these three sectors "represent" three different strata of the population. Roughly speaking, if we divide the Mexican population into five strata: 1. Indigent, 2. Very poor, 3. Poor, 4. Lower middle-class, and 5. Upper-middle and upper class, our analysis would illustrate the conditions of the second, third, and fifth of these strata. In other words, one can say that our three contexts reflect different degrees of poverty in Mexico: a very poor context, a poor context, and a non-poor context. (For a recent analysis of poverty and social stratification in Mexico, see Boltvinik, 1994).

The selection of informants for these interviews was made with the purpose of understanding and illustrating the different types of situations existing in each social group studied in terms of the occurrence or not of adolescent pregnancy, childbirth, and their respective sequels, as well as the nature of other variables related to them, such as family characteristics and permanence in school. The interviews were unstructured and were made in the form of autobiographic narratives. Most took two or three sessions of 2-3 hours each. They were recorded, transcribed and synthesized in the form of individual reports. Integrated reports synthesizing the results of the three methodological approaches used in each site were prepared. The qualitative results reported in this paper were basically taken from the integrated reports.

Adolescence and youth.

The conception of adolescence underlying the study is a socio-culturally relative one (Irvine, 1994, Ch. 1, Nauhardt, M., 1997). As a period of life between "childhood" and "adulthood", "adolescence" and "youth" are highly variable concepts. In some cultures and sectors of the population of contemporary individual countries adolescence it is not recognized as different from "youth", and the concept of adolescence might not be recognized as such (Feixa, 1998, Ch. 1). In our project we tried to approach the question of how this portion of the life-course was defined in each of the settings studied (see below).

Furthermore, although the period of life we were interested in was precisely that between childhood and adulthood, we decided to interview individuals who were more or less beyond that period and who could therefore tell us what takes place in the corresponding group or what happened in their personal life during that period, in terms of the themes of interest for the project, such as family background and relations, schooling, relations with peers, heterosexual relations, aspirations, etc.

What we tried to do was to adapt our methodological approach to each setting and set the ages of our informants for the group and individual interviews within the limits defined by the groups themselves, according to what we learned during our extensive ethnographic work. In overall terms, the ages of the adolescents and youngsters we interviewed ranged from age 15 to 24. In the urban marginal setting, where childhood comes to an end fairly early, at ages 12-13, we interviewed youngsters between 15-21. At the other extreme of the social scale, in the upper-middle class, where "adolescence" extends well beyond the second decade of life we interviewed youngsters who were between 17 and 23 years old.⁹ The ages of our informants in the urban popular sector of the population were between 16 and 19.

⁹ In Mexico youngsters from the upper-middle class are economically dependent and stay in their parents' house throughout their undergraduate and graduate studies, oftentimes beyond their 25th birthday.

Results

a) Characteristics of the social contexts and study cases in each

The urban-marginal context

Hornos, the marginal community included in our study, has approximately 8,500 inhabitants. It is located in the south of Mexico City, in the midst of now highly urbanized neighborhoods and large public apartment buildings.

Its origins stem from the 1950s, when a number of families dedicated to the manufacture of bricks settled there and slowly obtained the rights of property of their lots. Since then, other waves of settlers have followed the same procedure of invading public land and then fighting for its property.

As most other urban-marginal communities in large cities such as Mexico City, Hornos is characterized by the following traits: a) precarious sanitary infrastructure (few paved streets, precarious housing, scarce sewage, no in-house running water); unstable employment, mostly in the informal sector; low schooling (an average of less than 6 years); scarcity of public services (schools, health clinics, sports facilities); high visibility of youngsters in the streets; alcoholism, drugs as part of the public image; many "incomplete" families and feminine-headed households.

Children and youngsters spend most of their time in the streets of the community, which makes their behaviour highly visible to others. The major part of adult women are in their households most of the time. Men are in and out of the community depending on their having or not having payed work to do.

The life-cycle is short: childhood ends at 11, when many children are led into alcohol and drugs; "adolescence" (not named as such) ends at 15-16, when most kids have left school; boys work intermittently and become relatively independent from their families (though for the most part still live with them) and most girls do domestic work at home and take care of their younger siblings. Life histories tend often to be dramatic. As we illustrate below, the insecurity, vulnerability and precariousness of life stand out in many of them.

Case studies

We interviewed four youngsters from the marginal context; two of them have babies: Elisa, 17, and Guadalupe, 16. The other two, Susana, 16, and Cristina, 19, are single. Elisa only finished primary school; Guadalupe left school when she was in second grade of secondary school; Susana finished her secondary education, and Cristina is in preparatory school and plans to go to the university, which is quite exceptional in this context. (We included Cristina precisely because she appeared very different from most girls in Hornos).

Elisa, 17, is a single mother of a 2 month-old girl and lives with a second foster family. She left her paternal house in Oaxaca (a poor State in the South of Mexico) when she was 6 years old, due to constant fights between her parents, and went to live with her uncles. When she was 13 she had problems with her cousin and went to live in Hornos with a young couple who adopted her.

Elisa only finished primary school; for her, working is more important than school: "*I already knew how to read, write and count*", she said. She used to work in a dyer's shop until she got pregnant, and then worked as a domestic servant.

Elisa had her sexual debut at 14, with one of her boyfriends. She then had a relationship with two other men before getting pregnant. When her stepmother told Elisa's partner about her pregnancy, he at first didn't believe it was his child and then said that he would accept it if it was a boy (which it wasn't). Elisa wanted to have a child after marrying; now, she said, "*I have a daughter but not a husband*".

Guadalupe, 16, has a one year old son and lives with her partner in a room in her father-in-law's house. She couldn't attend school regularly when she was in second-grade of secondary-school, because her father –with whom she had a very good relationship- was involved in an accident, disappeared for several weeks, and Guadalupe was asked by her mother to go with her to search for him. Though the director of the school said they would help her to recover what she had lost in school (she said that she was not a bad student), they didn't help her, she didn't present her exams, and quit her schooling.

While her father was away, she met a boy on the way to school and became his girlfriend. She soon realized that she was pregnant but only told her partner after three months, after which he informed her parents about it and about his intention to live with her.

Susana, 16, is conscious of the economic scarcity in which she lives, sharing with another 6 persons in the house. She said that her father is an alcoholic. Her parents separated because of her father's violence toward her mother (which he justifies in terms of her wife not having been a virgin when they got together). Both have other partners but live in the same house. Susana feels supported by both, but she wonders whether her mother will go with her partner and take her with her, or what will become of her if her mother leaves the house.

Susana finished her secondary education, but didn't continue. She is very sociable and has had several boyfriends and pretenders, but remains a virgin. She said that she didn't go to bed with one of her boyfriends because *"she didn't want to be held as one of those other whores with whom that boy was going out."* She has an idealized view of the way she wants her sexual initiation to take place and keeps her virginity as a form of exchange capital. About a year ago she wanted to have a baby, even without a father, but now she has changed her opinion, because, she says, *"I would lose my independence, as has happened with other friends of mine in Hornos"*.

Cristina, 19, is single. Her parents separated when she was 3 years old and she went to live with her mother and sisters to Puebla for 8 years, after which they came back to Hornos, where she presently lives with her mother and two sisters. Her father, an alcoholic, lives with a son in another house but visits and stays to sleep in her house on Sundays. There are constant fights between her parents.

Cristina is in preparatory school and plans to continue her studies at the university. She also works, presently at a chain department store, because she said: *"my mother cannot give me any money for myself"*.

Cristina had several boyfriends while in secondary and preparatory school. The fourth (30 years old) was her teacher in prep-school; she had sexual relations with him. He used to take her to cultural activities. She likes him and they still go out sometimes, but he confessed that he lives in free

union and has two children. Now she has a formal boyfriend, who studies at the university, but she wants to finish her studies before getting married. Cristina likes to read and buy books: she's a fan of García Márquez. She has few friends in Hornos, and doesn't want to be like them: "*poor, marginalized, without expectations to improve.*"

The urban-popular context

In contrast with the marginal communities, popular sector settlements, which in Mexican large cities encompass the greatest percentage of the population, count with most urban and sanitary services (sewage, running water, schools, health clinics, police, parks and sports grounds); houses are more sturdy; families tend to own various household appliances such as a vacuum cleaner, a laundry machine, etc.; some families own an automobile; the nuclear family is probably the most common type of family; strong value tends to be placed in the family. Parents often completed their primary education, their children usually complete secondary school, some continue into preparatory school and a few carry on to the university. Many girls work before marriage and most marry after they are 20.

The Colonia Mariano Matamoros, in the capital of the state of Tamaulipas, which we chose as the urban-popular social context to be taken for this paper, has approximately 5,000 inhabitants. It was built mostly in the 1960's, for the settlement of primary and secondary school teachers. The Colonia has its own park, community center and sports grounds. Employment, particularly for women, expanded significantly in the 1960's and 1970's through the *maquiladoras* (assembly factories). There is also some employment for both men and women across the border. Young girls aspire to work in a *maquiladora* for some years, in order to have their own money for buying clothes and beauty products, and then marry and have children. Some aspire to study a career such as pedagogy, pediatrics, etc.

Case studies

We interviewed four young girls belonging to the urban popular sector. Two of them have babies: Norma, 19, and Natalia, also 19; the other two, María, 18, and Martha, 16, are single. Norma left school when she was in the third grade of secondary school; Natalia finished preparatory school but

then preferred to work; María is studying at a university. Martha only finished secondary school and is neither studying nor working. She is known to be a drifter. We chose to interview her precisely because her apparently exceptional situation in the popular sector neighbourhood we studied.

Norma, 19, is the youngest of 9 siblings. She has a 3 year-old son and lives with her partner. Her father died during her early adolescence. Her mother has a weak character. After her father's death one of her older brothers, "*her bad brother*", assumed authority over the family and a very conflicting relationship developed between him and Norma. Due to the domestic violence prevailing at home, she went away with her boyfriend at 16, when she was studying 3d. grade of secondary school. She doesn't regret having left school; she said: "*I didn't need a secondary school diploma to get employed at the assembly plant (in which she works)*". School mattered in terms of being able to socialize and to be free from the control of his brother; she often skipped school in order to go with her friends, as her elder sister had done before getting pregnant herself.

Norma started having sexual relations at 16, with her boyfriend, who was 19. They never used contraceptives; she said "*I didn't know how they looked or where to buy them*". She only realized that she was pregnant four months after the interruption of her menses; she thought they were only delays in her menstruation.

Natalia, 19, has a one year-old son and lives with her partner in her parents' house. She comes from an integrated nuclear family and is the youngest of four siblings. Her brothers are married and live elsewhere. There's a tense situation between her parents. Her father drinks and is jealous because his spouse works outside from home. The possibility of a rupture between them afflicts her.

Natalia finished preparatory-school and did not have any expectations to study beyond that. Her mother offered her that possibility, but she preferred to work at an assembly plant. While in secondary school she was an outstanding student, a fact for which she is proud, but then she started to go to dancing parties and other places with her peers, and began to see school more as a place to socialize than as a place to learn.

Natalia had several boyfriends in secondary and preparatory-school, but says that it was different when, at 17, she met the boy who is now her partner, who very soon met her family and

slowly earned their confidence. She had her first sexual intercourse with him, in her house, after more than a year of going steady. (They were taking care through *coitus interruptus*). They were already planning to marry after he finished preparatory-school, but she got pregnant and her partner came to live with her in her family's house while he finished his schooling and they could save some money to get married.

María, 18, is single and lives with her mother and two brothers. She takes care of her youngest brother while her mother works at an assembly plant. The mother also leases rooms in their house. Her father lives near-by and visits them; she wishes he would devote more time to her. In spite of her parents' separation, *María* has sorted the situation quite well; she has other masculine figures in her extended family, who live nearby and with whom she has a good relationship.

María has had three boyfriends, the first two only for a brief period (three months). The third one she met at a family party outside their neighbourhood. It was love at first sight. She took the initiative and kissed him first. They have been going out for a month.

María is quite determined in what she wants. She didn't like the preparatory-school in which her parents had registered her, so she confronted her parents, stayed one year out of school, and then registered at another school of her liking. She entered the university and recently started to work at an assembly factory in order to save money to be able to register at a private university.

Martha, 16, has a history of great family instability. Since her parents broke-up due to the infidelity of her mother, when she was 1-2 years old, she has not had a permanent home. She has lived with various members of her extended family, with stepfathers and stepmothers. Her relationship with her father is closer than that with her mother, but very superficial. Her mother's partner beats her mother and is unfaithful to her. *Martha* has conflicts with her because of that.

Martha finished secondary school and registered in preparatory-school, but very soon she quit. She was not very motivated to continue and her mother wanted her to contribute to her expenses. The affective remoteness of her parents probably contributed to the little interest they had for her. *Martha* worked helping her father in selling clothes when she was younger (12) and later again, but she

became fed-up with that. She has no motivation to work. Shortly ago she started working at a law firm, but *“there were too many men coming in and I left.”*

Not working and not in school, Martha drifts on the streets of her neighbourhood.

The upper middle-class context

Upper-middle class sectors in Mexico constitute a small proportion (probably less than 10%) of the population. The contrasts between their living standards and those of the rest of the population are tremendous. In large cities such as Mexico City they tend to live in well protected neighborhoods, with security guards at the entrance and various servants -choffeur, maids, gardner- who tend to make it practically impossible for an unknown to reach the family¹⁰.

Upper-middle class families tend to live in large -four-to-five bedroom- houses, with garden. They usually own another week-end or vacation house. They often own several recent-model automobiles, as well as TV sets, video-cassettes, computers, etc. Male adults own business enterprises, or work in the high echelons of large corporations or in high posts in the government. Many adult women also work, mostly part-time, as independent or salaried professionals, or in service activities of their own -travel agencies, art-schools, counselling, etc. Oftentimes children have little contact with their parents and are tended by third persons in the household.

The period of adolescence, encompassing the teen-age years, is clearly recognized by this population. Practically all youngsters are in school during this period and most go on to university studies well beyond their twenties. They spend little time at home. After school, many take artistic, cultural and/or sports classes. Socialization takes place mostly in school and in large commercial or other centers with all kinds of facilities -movie-theaters, cafés, restaurants, boutiques, to which adolescents are specifically drawn by consumer-industry artifices.

¹⁰ For our group and individual interviews we wanted to work in a territorially defined and delimited upper-middle class neighbourhood in the South of Mexico City, in which we had already done our ethnographic work, but had to renounce and

Case studies

We interviewed four young girls of the upper-middle class: Virginia, 22, Laura, 21, Angélica, 21, and Cynthia, 18. They are all single and in school, which is the typical situation of upper-middle class youngsters of these ages. All of them study at private universities.

Virginia, 22, lives by herself, with a maid, in her family's house in Mexico City, where she came back after many years in order to pursue her university studies. She has three elder sisters who finished their university studies. When Virginia was a child, her father got a job in Cancún, took the family to live in Guadalajara, where his own family was from, and left for three years, after which he sent for Virginia to stay with him in Cancún. These changes in her family's situation also involved great changes in her social environment, by first moving to a very conservative city (Guadalajara) and then to a coastal tourist city (Cancún) with a much more liberal environment. These changes have deeply marked her life, which is full of ambivalences in terms of her heterosexual relations.

Virginia had her first boyfriend in Cancún, at 16. They had a very romantic relationship "*kissing on the beach under the moonlight*"; however, it was shortlived, because she didn't accept having sexual relationships with him. She now has a relationship with a handsome, intelligent, "*spiritual*", but difficult young man.

Virginia looks at sex as sinful and shameful. She has no interest in having sex "*only because of having it*". She perceives physical contact as submission by the woman; as offensive.

Laura, 21, lives with her parents and with an older sister in a condominium house complex. Both her parents are physicians. Her family is quite privileged, she said: "*they have worked hard to get to their present social standing*". She studies at a private university, has a car, has travelled, doesn't have to work. Her family is very stable, a home without problems. Laura mentioned the limited presence of her parents at home, due to their working obligations, but she claims that she has always had their support, in spite of some difficulty in communicating with them.

work through contacting adolescents from these families in schools known to belong to this population sector, because we couldn't get access to families in their households.

Laura had a bicycle accident while in Europe as an exchange student when she was in preparatory school and went through a depression after it. During her convalescence she went to a psychiatrist and afterwards felt that *"all I have done in my life I have done because of a sense of obligation (in order to be accepted)"*. She now tries to rebel against that and to become more self-assured and assertive.

Laura has had two sweetheart relationships of short duration -a couple of months. In the first one her partner got in love but she didn't; she always imposed her will and got bored. In the second the opposite occurred: she looked for him but he paid no attention. Since he was older and supposedly more experienced than herself, she expected a more intimate contact. However, she could not make her interest explicit, because she *"didn't want to appear as a 'zorra' (sly person, harlot)"*.

Laura sees heterosexual relationships as power relations, as resistance, as a *"let us see who yields first and how much"*, and not as love. She has not had sexual relationships; she's afraid of sex and quite ambiguous about it.

Angélica, 21, lives in the house of her uncles and cousins in Mexico City, where she came three years ago from Oaxaca in order to study at a private university. Her father died in an automobile accident when she was 12 years old. He was an engineer. Her mother has a BA in pedagogy. Her family was quite well-to-do but after the accident had to adjust. Marisa's mother had to work and they couldn't afford to pay for the private school where she was studying, so she moved her to an aunt's school where she didn't have to pay.

Angélica felt abandoned when her father died and her mother started to work, although a woman friend of her mother's stayed every day with her and her brother. This woman became an important figure for Angélica; she also accompanied her to Mexico City to show her how to get around in the city.

Angélica had her first sexual experience when she was 17. Her boyfriend in Oaxaca convinced her to have sex before she came to Mexico City. She thought that in that way she would not put their relationship in doubt. She doesn't repent, but thinks that she wasn't ready yet and that she couldn't

negotiate. The second time they confided in her rhythm, but she was worried of the possibility of an unwanted pregnancy. She said that there would have been a strong moral condemnation toward her family in the conservative context of Oaxaca and, furthermore, she would have had to truncate her plans to come to Mexico City to study. When she finishes her university studies she wants to travel to Europe, start studies for an MA diploma, work at an advertising agency, start an agency of her own, have success and a lot of money.

Cynthia is 18 and lives with her father and a younger brother. Her father comes from a higher social stratum than her mother. They separated two years ago. The mother went to live elsewhere and they didn't see her for a time, but now she visits them. *Cynthia* finds her warmer, simpler, more understanding and joyous than her father, whom she finds authoritarian and conservative. She doesn't get along well with him and resents the unequal treatment given to her in comparison with her brother who, though younger, gets permission to use the car. She also resents her father being away on week-ends, probably with another woman. *Cynthia* blames her mother for not having separated before.

Cynthia went to public primary and secondary schools but studies now at a private university. She's sociable, has many friends, and likes to go to parties and drink beer. She has had several boyfriends but only one important one, whom she knows since primary school and who is a year younger than herself. The relationship has continued, with several interruptions. She feels like "*magic*", "*tickling*", when she's with him, but he doesn't form part of her future plans.

Cynthia hasn't initiated sexual relations because she doesn't feel prepared yet and because she fears a pregnancy, which would cut short her independence, friendships, and studies. In case of a pregnancy, she wouldn't expect understanding from her father; she thinks he might even throw her out from the house.

b) Vulnerability and early pregnancy in the different social contexts

The marginal context

The cases of Elisa and Guadalupe appear to be quite illustrative of the kind of situations through which young girls who get pregnant go through in marginal communities in Mexico. Guadalupe got pregnant at 15 and Elisa at 17. Both experienced dramatic events in their childhood or early adolescence, Elisa having grown without her parents and having lived with various adoptive families; Guadalupe having experienced the disappearance of her father when she was 15. Both cut their education short, Elisa because she had to work and didn't find school important for that purpose; Guadalupe as an indirect consequence of her father's disappearance.

Both are amazingly ignorant about sexual and reproductive matters and got involved very early in their lives with young men. In the case of Elisa, her candidness and probable unconscious search for affection led to her involvement, in rapid succession, with three men who were probably only looking for sex. In the case of Guadalupe, the vulnerable situation in which she found herself after the disappearance of her father led to her involvement with a young man who made her pregnant.

Elisa, at 17, had a two month-old girl and remained a single mother at the time of the survey. Guadalupe, at 16, had a one year-old son and lived with her partner in a room in her father-in-law's house.

The third case studied in this social context, that of Susana, also illustrates, in my opinion, what can be interpreted as the vulnerability of young girls of this social sector to early pregnancy. Although she is a virgin at 16, Susana's objective and subjective situation might lead her to get into a relationship in which she could easily get pregnant, most probably before she is 18 or 19¹¹: out of school, with conflicting parents, working in order to have money for her dressing and appearance, having an idealized image of a first sexual encounter (in a hotel on the beach), as well as having already manifested a desire for motherhood during her early adolescence (see Marques & Simons, 2001).

The case of Cristina, on the other hand, is quite exceptional for her social milieu. Though perhaps not as poor as other families in Hornos, her situation involves several characteristics which ought to have made her vulnerable to an early pregnancy: her parents separated when she was still a child; her father is an alcoholic and exerted violence over her mother, etc. However, she shows a great deal of resilience: is self assured, has her own strong interests (literature) and has personal aspirations for a university career; accepts her sexual desires and has had sexual relations. In spite of conditions which speak about possible social vulnerability, her case shows that there are other – protective- factors to be taken into account, which possibly have to do both with her mothers' and her own personal characteristics.

Deviant cases -in terms of their social context- such as that of Cristina, deserve greater study in order to gain a better understanding of protective factors, upon some of which it might be possible to act in order to help prevent early pregnancies in contexts such as Hornos. (see Kotliarenko *et al.*, 1997 and OPS, 1999).

The popular context

The four young women we took as case studies from the popular context illustrate four quite different situations. The case of Natalia, 19, with a one year old son illustrates, in my own view, one of the prototypical situations confronting young girls in this social context, where girls tend to come from relatively poor families, where parents have relatively low educational levels and have to work hard in order to barely maintain their family.

Youngsters with these backgrounds have greater opportunities than their parents to reach higher levels of education, but most are out of school by age 18 or 19 and wish to work, make some money of their own and, particularly in the case of girls, to find a partner with whom to marry. When these youngsters find a suitable partner, they tend to formalise their relationship, to make their situation known to the respective families, and to slowly gain the confidence of the girls' parents to

¹¹ An age which corresponds to the actual social norm in this group to become pregnant or get into a union, but at which a pregnancy would be considered as an early pregnancy (an "adolescent pregnancy") by the more hegemonic sectors of the population, including physicians, population specialists, and policy-makers.

allow the girl some independence, for example as to going out alone with her fiancé, a situation which can easily propitiate greater opportunities for a sexual encounter.

Given the combination of existing gender stereotypes (see Pantelides *et al.* 1995), an element of mutual confidence in each other (which in this social context implies that she takes care of herself in order not to get pregnant and/or that he will “respond” –i.e. accept the responsibility and act in consequence- in case she does get pregnant) (see Stern *et al.*, 2001), and, in many cases, lack of adequate information regarding reproduction (see the amazing degree of ignorance which exists in Mexico with regard to this in Menkes and Suárez, 2002; see also Blanc, A. and Way, A., 1998, for an international appraisal), it is not difficult for a pregnancy to take place. Whether this pregnancy takes place when the girl is supposedly still an adolescent -18-19- or a young adult -20-22, doesn't make too much of a difference.

These pregnancies are rather unproblematic in terms of the present and future of the couple involved: both youngsters have finished or are on the verge of finishing the cycle of studies to which they aspired; their aspirations did not involve postponing marriage and paternity for long; they were ready to get married rather sooner than later; they usually have the support of their respective parents, who were probably looking forward to their not too distant marriage.

The consequences of such “adolescent” pregnancies, which in this sector tend to occur in late adolescence, involve the precipitation of events which would have come about anyway, and perhaps a short period of unanticipated pressures, such as, for the male, having to make money to take care of the baby, live in the house of her partner's family, etc., but all in all small matters compared with the consequences of other types of adolescent pregnancies (compare this with the case of Norma, below).

The cases of Norma (19, with a 3 year-old son) and of Martha (16, single but in a highly problematic situation familywise), illustrate types of situations which also occur in this social context, but that are not typical of the situation of young girls who live in it.

In Norma's case one can see how several factors combined to make her highly vulnerable to an early pregnancy: her father's death when she was very young; her mother's weakly character; her

"bad brother's" domineering and violent authority over the family after the father's death; the example of her older sister skipping school, running from home and getting pregnant in her adolescence.

Martha, 16 and single, meets many characteristics of social vulnerability. The probabilities of her getting involved in heterosexual relations and of getting pregnant relatively soon seem to be quite high, but cases such as hers are probably quite infrequent in this social sector.

The upper-middle class context

One of the elements which stand out in the four cases belonging to the upper-middle class is the great force exerted by the social environment in which the youngsters live, in terms of their finishing a university career and maintaining their social class status. It is not a coincidence that the four girls (Virginia, 22, Laura, 21, Angélica, 22, and Cynthia, 18) are single and still studying, all of them at the university level. That is the case of most girls of this social class. None of them has gone through a pregnancy and apparently only one of them has had sexual relationships.

One cannot say that there is no vulnerability for early pregnancies in this sector of the population, as the case of Angélica, whose father died when she was 12 and who had unprotected sexual relations at 17, illustrates, and as the family situation of Cynthia, whose parents separated when she was 16, shows, but one can see how these families have the means and the social capital to sort out their difficulties.

Angélica had a mentor with a professional status to look after her, supervise her school work, etc., when her mother had to go to work after her father's death. (Compare this situation with that of Guadalupe of the marginal sector, who had to accompany her mother to look for her father and as a consequence neglected her studies, had no support to finish her secondary education, etc.).

Cynthia, in spite of living with her father after her parents separated, has a close and warm relationship with her mother, who is allowed to come and see her at her father's house. (Compare this situation with that of Martha, of the popular sector, whose parents practically abandoned her and who, at 16, drifts on the streets without either work or study).

Or take the example of Laura, who went through a depression after her bicycle accident but who had the support of a psychiatrist and of her family for her recovery and for going on with her studies.

Virginia, who also went through a virtual separation of her parents when still a child, and who underwent extreme changes in her cultural environment, going abruptly from a very conservative milieu in Guadalajara to a very liberal -if not licentious- one in Cancún, and who experimented with drugs and alcohol in an apparently risky surrounding, maintained her virginity, in this case probably due to the strength of her earlier conservative upbringing, to the point of repressing her sexuality and sublimating it in the form of intellectual and spiritual passions. But she also had great aspirations to continue with her university studies and a family which could support her in order to fulfill these aspirations.

One can see that, for one reason or another, most young girls of the upper-middle class (or at least the ones included as case studies in our project) manage either not to initiate their sexual relationships during adolescence or not to get pregnant when they are sexually active^{12, 13}

Apparently, as also concluded by Luker (1996) for the United States of America, there are two types of trajectories in the careers of women: the lower classes tend to have limited schooling and to have children early in their lives, while the middle and upper classes can support their children during their extensive period of education and tend to have children well advanced in their lives, a process which tends to maintain the degree of social inequality, which is itself a factor which propitiates high rates of adolescent pregnancy (see The Alan Guttmacher Institute, 2001).

Conclusion and discussion

¹² Though even in the upper-middle class it appears that in the great majority of cases adolescents don't use contraceptives in their first sexual experience, many appear to do so in subsequent ones.

¹³ It ought to be mentioned, however, that, though not illustrated by the four case studies presented, there is a different kind of situation occurring in the more liberal sector of this social class, which in a certain sense is going through a "sexual revolution" similar to that which took place in the U.S. in the 1970's., and where pregnancies during adolescence are not as uncommon as it could be inferred from the cases presented. Apparently a growing proportion of young girls (15-17) have unprotected relations with their peers and become pregnant. Most of these pregnancies, however, are "dealt with" through abortions and remain private affairs.

I have tried to show both the promissory character of the concept of social vulnerability for understanding adolescent pregnancy and to illustrate how this social vulnerability is related to the relative poverty manifest in the three social contexts studied.

Although there is certainly a need for greater conceptual clarification and analysis, I think the cases presented show, on the one hand, that poverty and social vulnerability, although related to each other, are not equivalent or synonymous and, on the other hand, that both are associated, to a high degree, to adolescent pregnancy.

It is my impression that there are various levels of social vulnerability to early pregnancy and that the various elements or dimensions of this construct do not operate independently but through their interaction and accumulation. For instance, youngsters, and particularly young girls living in incomplete or "dysfunctional" families, are known to be more vulnerable to having early sex and to becoming pregnant than girls living with their father and mother (see Hayes, 1987; Atkin *et al.*, 1996).¹⁴ But this vulnerability (as probably many others) is compounded when added to the vulnerability implied by being poor in most countries.

Thus, probably several kinds or levels of vulnerability ought to be distinguished and analysed in their relationships. Being poor, plus living in an incomplete family, plus having many siblings, plus living with a stepfather, plus being female in a patriarchal society, plus having little education, plus being underage; all add to each other and are compounded in terms of social vulnerability to becoming pregnant while young, on the one hand, and to the consequences of this fact (maternal and child health problems, early childbirth, high fertility, obstacles to overcome poverty, etc.), on the other.¹⁵

Some specific elements of the analysis undertaken which in my opinion deserve special mention are the following:

¹⁴ The question of whether or to what extent "vulnerabilities" pertaining to families or to individuals are social is an open and perhaps an empirical question. Are dysfunctional families or girls with low self-esteem (both known as "variables" related to the "risk" of early sex and early pregnancies) evenly or hazardly distributed among the various strata of the population, or are they disproportionately concentrated in the poorest sectors?

¹⁵ There are other factors in Mexican society, such as living in a rural area with little access to health services, or the cultural exclusion implied by not speaking the official language (being Indian), which would add to this social vulnerability. We

- The protective factor of remaining in school throughout the period of adolescence and of having aspirations for life which include and give importance to personal development beyond that of being a wife and a mother (see Stupp and Cáceres, 2001).

- The apparent great importance of stable and trusty support nets in determining the greater or lesser vulnerability of young girls to becoming pregnant early in their lives. Alcoholism, death or abandonment of a parent, family violence, migration (estrangement from original social nets) seem to be frequent, probably more so in contexts of extreme poverty, but also in other social contexts. In the absence of community or State supports, there is probably a greater propensity to the deterioration or rupture of these nets, particularly in contexts of extreme poverty.

- The incidence of domestic violence as a factor which drives many young girls to distance themselves from their parents or to get away from home, placing them in a situation of vulnerability (see Román, 2000).

- The apparent importance of the element of “confidence” (in the partner), in leading to unprotected sexual relations. This element extends also to the “confidence” of the girls’ parents in her “right” behaviour and the “confidence” they have in the partner when they know who he is, which tend to propitiate the sexual involvement of the girl with her partner (see Román, 2000, Ch. V). Apparently these factors operate across social classes, although in qualitatively different ways.

Suggestions for further research

In my opinion, many of the considerations made above deserve further research. At a conceptual level, we need to clarify the concepts of social vulnerability and of poverty, as well as their dimensions or components. There is also a need to explore more systematically the relationships between the two.

On a more empirical level, one could think of both re-analysing existing studies of determinants of adolescent pregnancy looking for social vulnerability as here described, and of engaging in

have not included them in this list because we didn’t include the rural-indian community which we studied for the analysis undertaken in this paper, but they ought to be added to the other factors mentioned in further analyses.

qualitative studies specifically designed for that purpose, preferably comparing different groups of a population in terms of their relative poverty or social standing.

In terms of exploring some of these relationships quantitatively, some of the elements of social vulnerability that can be inferred from the description and analysis presented above, for which measurable indicators could be sought in existing surveys, and which could be used for modelling and for quantitative analyses are the following:

Family structure and context. It is well known in the literature about adolescent pregnancy that youngsters who live in a context of incomplete families or of highly conflicting parental relationships are more prone to become pregnant than those who live in complete and non-conflicting family environments. Various factors might operate in such situations, such as: lack of attention and/or affection; lesser capability of supervision; etc. Indicators which can be used include: living with or without father and mother, separation or divorce of parents, or death of father or mother, during childhood or adolescence; existence or degree of family violence, both between the parents and between each parent and their children; as well as degree and quality of communication between parents and between the youngster and her mother and father. Another indicator, either by itself or in combination with some of the afore-mentioned ones might be the number of siblings, which is also related to the capability of giving affection and attention to each child.

Social security. In Mexico roughly 50% of the population is covered by one of the systems of social security, which include access to medical services; pensions for temporary or permanent incapacity and for old age and retirement; maternity leave; as well as access to many other social services and amenities, including in most cases sports grounds, cultural and educational activities.¹⁶ Being or not covered by one of these systems could be an indicator of social vulnerability.

Occupational opportunities. Many women have very few opportunities in life but to be wives and mothers. They have few opportunities to remain in school beyond primary education and, except for domestic and family work, either in their own houses or in those of others, they have very few

¹⁶ The two more important social security systems are the IMSS (Instituto Mexicano del Seguro Social), for workers of the private sector, and the ISSSTE (Instituto de Seguridad y Servicios Sociales para los Trabajadores del Estado), for workers of the public sector. The Armed Forces and the National Petroleum Company (PEMEX) have separate systems.

employment opportunities. In such cases, early maternity is practically the only option available and functions as a passage to social recognition and to adulthood. Indicators of this situation of vulnerability would be: at the individual level, level of education and aspirations (maternity versus education, occupation, etc.); at the collective level, occupations held by women of a determined stratum or social class can serve as an indicator of opportunities available for a girl belonging to that stratum.

Ignorance. Ignoring basic facts about sexuality and reproduction makes young women vulnerable to an early pregnancy. Indicators that can be used include level of education (reproduction, sexuality, and gender issues are only brought into the school curriculum in secondary school)¹⁷, as well as access to family planning or reproductive health services. Since most surveys do not include information as specific as this, information regarding the use of medical services in general and about the degree of knowledge about reproduction and contraception could be used instead.

Gender power. Unequal power relations between males and females is another factor which might translate into vulnerability to early pregnancy. Cultural definitions of gendered behaviour (how a girl is supposed to behave *visavie* boys, etc.), going through the degree to which a double morality is ascribed to the genders in each social group, to the degree of gender violence, and of sexual coercion and abuse existing in each of them, are possible dimensions of this factor. (See Geldstein and Pantelides, 2001b).¹⁸

Policy implications

The implications of these results in terms of policy, interventions and services for adolescents deserve a detailed analysis which lies beyond the purpose and possibilities of this paper, but for which we can draw some preliminary outlines.

The question of adolescent pregnancy needs to be analysed within its more encompassing parameters, such as the demographic transition, social inequality and poverty, the political

¹⁷ An introduction to basic biological facts about reproduction are included in 5th and 6th grade of primary school, but studies have shown that the information thus provided is of little practical use for adolescents in terms of preparing them for safe sex.

environment, and ongoing processes of social and cultural change, in order to have a realistic understanding of both the reasons (causes, determinants) for it and the limits of possible interventions.

The needs of adolescents in terms of their sexual and reproductive health, as well as the possibilities for interventions which can realistically bring changes in the desired directions -for instance, in preventing unwanted pregnancies or delaying childbirth- vary substantially for different groups of the population. The implication of this is that policies and programs ought to be designed taking into account these different needs and possibilities.¹⁹

Some other reflections regarding policies and programs directed to prevent unwanted early pregnancies and delaying childbirth can be made taking into account both our results and other existing recommendations.

There is little doubt that in countries such as Mexico poverty breeds much of existing adolescent pregnancies. But it has been proven very difficult, if not impossible, to eradicate poverty and, under present world conditions, even to diminish its degree and extension. According to various estimates and official figures. If perhaps little can be done in terms of decreasing poverty itself, what can be done in order to ameliorate some of the vulnerabilities associated with early pregnancies? What recommendations can we make based on the results of the preliminary analysis we have made here?

One immediate recommendation would be to help families keep girls in school as long as possible, which implies not only offering free schooling at all levels for youngsters who cannot afford to pay, but also to give economic support to poor families so that their children can continue in school and do not have to work in order to contribute to the family subsistence.^{20, 21}

¹⁸ We will shortly engage in analyses of some recent surveys undertaken in Mexico in order to explore some of the relationships between social stratification, vulnerability, as here understood, and adolescent pregnancy rates.

¹⁹ This does not mean that specific policies and programs should be designed for each group of the population –which would be impossible and would run counter to the generality implied, by definition, by social policies-, but it does imply that the emphasis of certain policies, when applied to specific groups, should be different, and that the selection of programs to be applied should be made in terms of the actual needs and possibilities of each group. In other words, while policies and programs can be general, the mixture of policies and programs applied to each group would have to be different.

²⁰ There is at least one study I know of which has clearly shown that permanence in school, more than level of education, is the protective factor for early pregnancies in the “education factor” (Stupp and Cáceres, 2001). Other authors have also insisted on the importance of girls' schooling for delaying early pregnancies (Mensch *et al.*, 1998). The Mexican government is providing scholarships for children of the poorest families in order for them to stay in school at least until

Another recommendation would be to stimulate and support the organization of collective activities for young girls, particularly for out-of-school girls, combining vocational training, income generating activities, and sexual and reproductive counselling. Aside from offering young girls a space for meeting and exchanging their thoughts, preoccupations, etc., with other girls (something of which they are usually excluded in poor communities), this would enhance the realisation and actualisation of aspirations other than early maternity as well as the means to achieve them (see Mensch *et al.*, 1998; Kirby, 2001).²²

A third recommendation would be to establish a universal social security emergency subsidy for families which undergo catastrophic events in which their very subsistence is put at risk, including the sudden death or disability of the breadwinner, independently of his or her employment condition.²³

A fourth suggestion would be to entertain the possibility of instituting some kind of basic support or social security for adolescents of poor families themselves, since the assumed premise that they depend on their parents for the continuation of their studies, amongst other aspects, is oftentimes untrue.

At a different level, although I didn't have the space to stress the point in the specific analysis here undertaken, there are two underlying cultural factors which in my view are hindering in many different ways the possibilities for preventing unwanted early pregnancies, particularly in the not-so-poor sectors of the population: the non-acceptance of pre-marital sexual relations (or the non-acceptance of their possible occurrence even when the aim is to prevent them), and the wide gender inequalities which still pervade in Mexican society, particularly in the sphere of heterosexual relations (double standards for males and for females, sexual coercion and abuse, etc.).

The best way to deal with these factors, in my opinion, is through influencing mass communication media, by enhancing, supporting, and implementing programs which, with due respect

they finish their secondary education. The stipends are greater for female than for male children, a policy which seems to be in the right direction.

²¹ An obvious complementary recommendation would be to improve the contents of gender, sexuality and reproductive health education being given in primary and secondary school and, particularly, the training of teachers for that purpose.

²² Health clinics do not seem to be an effective means to provide sexuality and family planning information to single adolescents, who usually do not attend these clinics unless they are already pregnant (see Stern and Reartes, 2001).

to the various beliefs and moral norms of different sectors of the population, push in a direction of a more realistic openness to questions related to the sexuality of adolescents, and for a more respectful and supportive attitude towards their rights in this sphere of behaviour, so that all sectors of society can little by little contribute to the cultural change needed in order to be able to really help our youngsters to prevent unwanted early pregnancies and births. Mexican society is moving in that direction, but much could be done in order to improve the situation (see Stern, 2001).

To finish, let me repeat what I have said elsewhere (see Stern, 1995a, 1997, 1998) and which is implied in this paper: most existing policy and programs aimed at improving the information which adolescents have of matters related to reproduction and prevention, and/or their access to contraceptive methods, fall incredibly short in terms of the needs of the different sectors of the population to postpone childbirth or to prevent unwanted pregnancies. I hope that this paper contributes to making this clear and to our collective reflection about possible means for improving the sexual and reproductive health of our youngsters.

References

- Atkin, L., Ehrenfeld, N. and Pick, S. (1996), "Sexualidad y fecundidad adolescente". In Langer, A. and Tolbert, K. *Mujer: Sexualidad y Salud Reproductiva en México*. Edamex, México, The Population Council.
- Blanc, A. and Way, A. (1998), "Sexual behavior and contraceptive knowledge and use among adolescents in developing countries", *Studies in Family Planning*, Vol. 29, No. 2, June, pp. 106-116.
- Boltvinik, J. (1994), *Pobreza y estratificación social en México*. Aguascalientes, México, Instituto Nacional de Estadística, Geografía e Informática.
- Boltvinik, J. (2001), "Dinámica y características de la pobreza en México", in Gómez de León, G. and Rabell, C. (coords.), *La población de México. Tendencias y perspectivas sociodemográficas hacia el siglo XXI*. México, Consejo Nacional de Población y Fondo de Cultura Económica: 950-998.
- Bongaarts, J. And Cohen, B. (eds)(1998), Adolescent Reproductive Behavior in the Developing World. *Studies in Family Planning*, Vol. 29, No. 2, June.
- Conapo (2000). *Situación actual de los y las jóvenes en México. Diagnóstico sociodemográfico*. México, Consejo Nacional de Población.
- Feixa, C. (1998), *El reloj de arena. Culturas juveniles en México*. México, Causa Joven, Centro de Investigación y Estudios sobre Juventud.

²³ Such a subsidy has been proposed by the present Minister of Health of the Mexican Government as part of a universal basic health social security program.

- Filgueira, C. (2001), *La actualidad de viejas temáticas: sobre los estudios de clase, estratificación y movilidad social en América Latina*. Cepal, División de Desarrollo Social, Santiago de Chile.
- Geldstein, R. and Pantelides, E. (2001a), *Riesgo Reproductivo en la Adolescencia. Desigualdad Social y Asimetría de Género*. UNICEF, Argentina, Cuadernos del UNICEF.
- Geldstein, R. and Pantelides, E. (2001b). *La iniciación sexual bajo coerción en el Área Metropolitana de Buenos Aires*. Centro de Estudios de Población, Buenos Aires, Argentina, Documento de Trabajo No. 2
- Hayes, Ch. (ed) (1987), *Risking the Future. Adolescent Sexuality, Pregnancy, and Childbearing*. National Academy Press, Washington, D.C.
- INEGI (2002), *Mujeres y Hombres*. Instituto Nacional de Estadística, Geografía e Informática. México, Aguascalientes.
- Irvine, J. (1994), "Cultural differences and adolescent sexualities", in Irvine, J. (ed), *Sexual Cultures and the Construction of Adolescent Sexualities*, Philadelphia, Temple University Press, pp. 3-28.
- Kirby, Douglas (2001), *Emerging answers. Research Findings on Programs to Reduce Teen Pregnancy*. The National Campaign to Prevent Teen Pregnancy. Washington, D.C.
- Kotliarenko, M.A, Cáceres, I. And Fontecilla, M. (1997). *Estado de Arte en Resiliencia*. Organización Panamericana de la Salud, Washington D.C.
- Luker, K. (1996), *Dubious conceptions. The politics of teenage pregnancy*. Harvard University Press, Cambridge, Mass., U.S.A.
- Marques, N.M. and Simons, J. (2001), "Motivational determinants of teenage pregnancy in a deprived area of Recife, Brazil". Paper presented at the IUSSP XXIV General Population Conference, Salvador, Bahia, Brazil, August 17-23.
- Menkes, C. and Suarez, L. (2002), "Determinants of pregnancy rates for adolescents in Mexico". Paper presented at the seventy-third annual meeting of the Pacific Sociological Association, Vancouver, British Columbia, Canada, April 18-21.
- Mensch, B., Bruce, J. and Greene, M.E. (1998), *The uncharted passage. Girls' adolescence in the developing world*. Population Council, New York.
- Mensch, B., and Lloyd, B. (1998), "Gender differences in the schooling experiences of adolescents in low-income countries: The case of Kenya". *Studies in Family Planning*, Vol. 29, No. 2, pp. 167-184.
- Nathanson, C. (1991), *Dangerous passage. The social control of sexuality in women's adolescence*. Temple University Press, Philadelphia, U.S.A.
- Nauhardt, M. (1997) "Construcciones y representaciones. El péndulo social en la construcción de la juventud". *Jóvenes. Revista de Estudios sobre Juventud*, Año 1, No. 3, pp. 36-47.
- OPS (1988), *Fecundidad en la Adolescencia. Causas, Riesgos y Opciones*. Organización Panamericana de la Salud. Washington, D.C., Cuaderno Técnico No. 12.
- OPS (1999), *Adolescencia al Día. Resiliencia*. Washington, D.C., Organización Panamericana de la Salud, Programa de Salud y Desarrollo del Adolescente. Reproducción de documentos, Vol. I.
- Pantelides, E., Geldstein, R., and Infesta D., G. (1995), *Imágenes de Género y Conducta Reproductiva en la Adolescencia*. Centro de Estudios de Población, Buenos Aires, Argentina.
- Population Reports (1995), *Meeting the Needs of Young Adults*. Vol. XXIII, No. 3.

- Population Reports (2001), "¿Por qué tan vulnerables?, in *Los jóvenes y el VIH/SIDA. ¿Podemos evitar una catástrofe?*. Vol. XXIX, No. 3:9-15.
- Román, R. (2000), *Del primer vals al primer bebé. Vivencias del embarazo en las jóvenes*. México, Instituto Mexicano de la Juventud, pp. 105-145.
- Safe Passages to Adulthood (2001), *Dynamic Contextual Analysis of Young People's Sexual Health*. Faculty of Social Sciences, University of Southampton, U.K.
- SEDESOL (2002), *Medición de la pobreza. Variantes metodológicas y estimación preliminar*. México, Secretaría de Desarrollo Social, Comité Técnico para la Medición de la Pobreza.
- Selman, P. (2002), "El embarazo en la adolescencia, la pobreza y el debate de la seguridad social en Europa y los Estados Unidos", in Rabell, C. and Zavala de Cosío, M.E. (eds.), *La Fecundidad en Condiciones de Pobreza: una visión internacional*. México, Instituto de Investigaciones Sociales, UNAM, pp. 315-341.
- Silber, T., Giorgiovich, A. and Munist, M. (1995), "El embarazo en la adolescencia". In Maddaleno, M. et al. (eds), *La Salud del Adolescente y del Joven*. Organización Panamericana de la Salud, Washington, D.C., Publicación Científica No. 552.
- Singh, S. et al. (2001) "Socioeconomic disadvantage and adolescent women's sexual and reproductive behavior: the case of five developed countries". *Family Planning Perspectives*, Vol. 33, No. 6, Nov./Dec.
- Stern, C. (1995a), "La protección de la salud reproductiva de nuestros jóvenes requiere de políticas innovadoras y decididas". *Carta sobre Población*. Vol. 1, No. 3, pp. 1-6. [México, Grupo Académico de Apoyo a Programas de Población].
- Stern, C. (1995b), "Embarazo adolescente. Significado e implicaciones para diferentes sectores sociales", in *Demos. Carta demográfica sobre México*. No. 8: 11-12.
- Stern, C. (1997), "El embarazo en la adolescencia como problema público: una visión crítica". *Salud Pública de México*, Vol. 39, No.2, Marzo, pp. 137-143.
- Stern, C. (1998), "Embarazo en la adolescencia: el problema y las políticas para afrontarlo". In COMEXANI (Colectivo Mexicano de Apoyo a la Niñez), *Los hechos se burlan de los derechos*. IV Informe sobre los derechos y la situación de la infancia en México, 1994-1997. México, D.F., pp. 79-89.
- Stern, C. and García, E. (2001a), "Hacia un nuevo enfoque en el campo del embarazo adolescente", in C. Stern and J. G. Figueroa (coords.), *Sexualidad y salud reproductiva. Avances y retos para la investigación*. México, El Colegio de México: 331-358.
- Stern, C. and Reartes, D. (2001), "Estudio de caso. Programas de salud reproductiva para adolescentes en México, D.F.", in Gogna, M. (coord.), *Programas de salud reproductiva para adolescentes. Los casos de Buenos Aires, México, D.F. y San Pablo*. Centro de Estudios de Estado y Sociedad, Buenos Aires, Argentina, pp. 117-194.
- Stern, C., et al. (2001b). "Gender stereotypes, sexual relations, and adolescent pregnancy in the lives of youngsters of different socio-cultural groups in Mexico". Paper presented at the IUSSP XXIV General Population Conference, Salvador, Bahia, Brazil, August 17-23.
- Stern, C. (2001c), "Los jóvenes, la sexualidad y los embarazos tempranos". In De Maria y Campos, M. and Sánchez, G. *¿Estamos Unidos Mexicanos? Los límites de la cohesión social en México*. México, Editorial Planeta, pp. 297-319.
- Stupp, P. and Cáceres, J.M. (2001), "The relationship between age at completion of schooling and age at first birth in El Salvador". Paper presented at the IUSSP XXIV General Population Conference, Salvador, Bahía, Brazil, August 17-23.

The Alan Guttmacher Institute (1990), *Today's Adolescents, Tomorrow's Parents. A Portrait of the Americas*. New York, N.Y.

The Alan Guttmacher Institute (2001). *Can more progress be made? Teenage sexual and reproductive behavior in developed countries*. New York, N.Y.

United Nations, (1989), *Adolescent Reproductive Behaviour. Evidence from Developing Countries*, Vol. II. Department of International Economic and Social Affairs. Population Studies. New York, N.Y.

Walti, C. (2000), "Análisis demográfico de la fecundidad adolescente en México". *Papeles de Población*, Año 6, No. 26, pp. 43-87.

Zúñiga H, E. (2000), "Tendencias recientes del embarazo adolescente en México". Comisión Nacional de la Mujer, *Foro Embarazo en Adolescentes, Avances y Retos*. México, Secretaría de Gobernación, pp. 18-27.