Attitudes and behaviours of teenage Indigenous women in Townsville, Australia, with respect to relationships and pregnancy: the “U Mob Yarn Up” Young Parents’ Project

Thesis submitted by
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in the School of Medicine and the School of Indigenous Australian Studies,
James Cook University
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STATEMENT ON THE CONTRIBUTION OF OTHERS

This thesis has been made possible through the support of many people as follows:

Supervisors:
Professor Craig Veitch, Rural Health Research Unit, School of Medicine
Associate Professor Sue McGinty, School of Indigenous Australian Studies
Dr Shona Wynd, then from the School of Medicine was also part of the supervisory panel initially

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DECLARATION ON ETHICS

The research presented and reported in this thesis was conducted within the guidelines for research ethics outlined in the *National Statement on Ethical Conduct in Research Involving Humans* (1999), the *Joint NHMRC/AVCC Statement and Guidelines on Research Practice* (1997), the *James Cook University Policy on Experimentation Ethics. Standard Practices and Guidelines* (2001), and the *James Cook University Statement and Guidelines on Research Practice* (2001). The research methodology outlined here received clearance from the James Cook University Human Research Ethics Committee (approval number H1459).

______________________________________________  1st August 2007
Sarah Larkins  Date
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Thank you.
ABSTRACT

Becoming a mother during the teenage years is considerably more common among young Aboriginal and Torres Strait Islander women than in the general community. Little is known about the issues facing pregnant and parenting young Indigenous women, yet 21% of Indigenous births are to teenagers, both nationally and locally. Despite falling teenage birth rates overall, rates are rising in some disadvantaged subgroups. Teenage motherhood is generally problematised in the community, although there is debate about whether poorer socioeconomic and educational outcomes are related to the birth itself, or to pre-existing disadvantage. Some have suggested that giving birth as a young woman may be an adaptive response to an extremely limited set of circumstances and options. Initially, the literature about the epidemiology and associations of teenage pregnancy in Australia and globally is reviewed, and then policies and programs and their effectiveness are briefly considered.

This project focuses on how young Aboriginal and Torres Strait Islander women in Townsville “story” their past, current and future lives, in particular in terms of sexual relationships and the transition to motherhood, but also in the broader context of current lived experience, family background, and hopes and aspirations. The approach to the analysis of the data is largely data driven. However, it draws heavily on “storying the future” as an approach that fits well with the “insider” views that were central to this study, and an Indigenous worldview that emphasises networking, family responsibilities and belonging. Young people have a certain amount of agency in terms of creating their own stories, and a fierce desire to exert that agency fully and enthusiastically, however they are limited in several respects. In particular social structures such as socioeconomic status, educational disadvantage, race and racism, and gender inequality, as well as a lack of family material and sociocultural resources may limit the range of stories available to young women. A critical approach was taken, drawing on youth marginalisation theory and a “storying the future” approach to privilege the voices of the young people involved and paint a picture of how they are creating their futures in the face of the structural obstacles they face.

Innovative consultative methodology was used, with a Young Mums’ Group operating on a participatory action model serving to design the project, act as key participants and peer interviewers and as a social support group. Ethical principles of consultation, reciprocity and ownership were fundamental to the design and conduct. A multi-method design was chosen, with an inductive qualitative approach based on feminist
principles. Data collection involved semi-structured interviews (individual and small-group) and a multimedia computer-assisted self-administered survey (CASI) with peer assistance, involving 186 students from 3 high schools and a homeless youth shelter, and 10 further young mothers. Emerging findings were reported back to participants and discussed with the Young Mums’ Group on an ongoing basis.

Findings from the electronic survey and small group discussions present a picture of young Indigenous people in schools and a homeless youth shelter in terms of their educational and employment aspirations, their health, relationships, sexual practices and contraceptive use, and their views about teenage pregnancy and parenthood. Many students have high educational aspirations, as do their parents, but most students have few mentors or role models, and little clear information about pathways and transitions. They feel limited by low expectations of them at school, and frequently experience racist and oppressive behaviour at school, and overcrowding and other problems at home. Like other young people, they are embarking on sexual relationships, but these are firmly enmeshed in traditional discourses about romance and appropriate feminine and masculine behaviour, with coercion towards sexual intercourse and gender-based power imbalances very prevalent and reputation being a precious commodity. Despite adequate knowledge, contraceptive use is inconsistent, although very few young people want to become pregnant as a teenager. However, if they were to become pregnant, most young people believe they would receive family support, and would not consider options other than continuing with the pregnancy. Thus in terms of these young people, young parenthood may not be so much an active choice, as a lack of alternative options, with different consequences in terms of lost opportunity or social disapproval compared to non-Indigenous young people.

Young Mums’ Group discussions and interviews with young mothers paint a vivid picture of disadvantaged young women struggling with high mobility, family dysfunction and abuse within their families-of-origin, disengaged from a schooling system that was not meeting their needs and drifting in terms of hopes or plans for the future. In this context they often became involved with abusing substances and entered relationships marked by coercion and manipulation. Their pregnancies, although unplanned, were not entirely unwanted, and the birth of their children was the stimulus for a major reorganisation of their life. They viewed their children as a transformative gift, often empowering them to make a series of positive changes in their lives. However, they continued to face difficulties due to inaccessible childcare, housing and education, ongoing relationship difficulties, poverty and stigma and judgement from others.
They are clearly asking for practical support to close the gap between their dreams for their family and the limited social realities.

Often in the media and scientific literature, high teenage pregnancy rates are sensationalised as a problem, “epidemic”, or crisis that must be fixed. However, this work suggests that our primary aim should not be reducing the rates of teenage pregnancy. Indeed it is morally questionable to pathologise and try to reduce a path which for some may be their only avenue to a maturity recognised in our society, and the only area of their lives over which they have some control, without providing a range of alternative means by which this state may be reached. Rather the emphasis must be on addressing underlying inequalities within society in terms of educational attainment, employment opportunities, and disparities on the grounds of ethnicity and gender, whilst simultaneously providing young people with information and access to a full range of health information and pathways, and empowering them in the area of actively constructing their own futures, and taking control of their reproductive health. At the same time support for young mothers must assist them in being the best mothers they can be, and building a future for themselves and their children.

Finally, the policy implications are discussed and some recommendations for further work and action are proposed.
**LIST OF ACRONYMS**

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tbody>
<tr>
<td>AHW</td>
<td>Aboriginal Health Worker</td>
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<tr>
<td>ASSPA</td>
<td>Aboriginal Student Support Parents’ Association (groups for parents of Indigenous students run within each secondary school – now defunct under new funding rules)</td>
</tr>
<tr>
<td>ATSI</td>
<td>Aboriginal and/or Torres Strait Islander</td>
</tr>
<tr>
<td>ATSIC</td>
<td>Aboriginal and Torres Strait Islander Commission (now disbanded)</td>
</tr>
<tr>
<td>CASI</td>
<td>Computer-assisted self interview – in our case using multimedia, sometimes referred to as M-CASI</td>
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<tr>
<td>CEC</td>
<td>Community Education Counsellor (Indigenous student support worker in secondary schools)</td>
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<tr>
<td>CEO</td>
<td>Chief Executive Officer</td>
</tr>
<tr>
<td>df</td>
<td>Degrees of freedom</td>
</tr>
<tr>
<td>DVO</td>
<td>Domestic Violence Order (also sometimes referred to as AVO)</td>
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<tr>
<td>FGD</td>
<td>Focus group discussion</td>
</tr>
<tr>
<td>GPET</td>
<td>General Practice Education and Training</td>
</tr>
<tr>
<td>IUGR</td>
<td>Intrauterine growth retardation (Babies born small for their gestational age)</td>
</tr>
<tr>
<td>JCU</td>
<td>James Cook University</td>
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<tr>
<td>NH&amp;MRC</td>
<td>National Health and Medical Research Council</td>
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<tr>
<td>OR</td>
<td>Odds Ratio</td>
</tr>
<tr>
<td>PHCREDS</td>
<td>Primary Health Care Research Education and Development Program</td>
</tr>
<tr>
<td>RR</td>
<td>Response rate</td>
</tr>
<tr>
<td>SD</td>
<td>Standard deviation</td>
</tr>
<tr>
<td>SES</td>
<td>Socioeconomic status</td>
</tr>
<tr>
<td>STI</td>
<td>Sexually transmitted infection</td>
</tr>
<tr>
<td>TAIHS</td>
<td>Townsville Aboriginal and Islander Health Services Ltd.</td>
</tr>
<tr>
<td>TSI</td>
<td>Torres Strait Islander</td>
</tr>
<tr>
<td>UK</td>
<td>United Kingdom</td>
</tr>
<tr>
<td>USA</td>
<td>United States of America</td>
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</tbody>
</table>
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