Structure and content of the maternal representations of Mexican teenagers during their first pregnancy

Julieta Armida Franco-Ramírez ¹  
https://orcid.org/0000-0002-9944-3498

Carlos Enrique Cabrera-Pivaral ²  
https://orcid.org/0000-0002-5246-4160

Gabriel Zárate-Guerrero ³  
https://orcid.org/0000-0003-2075-5526

Sergio Alberto Franco-Chávez ⁴  
https://orcid.org/0000-0002-9302-6474

María de los Ángeles Covarrubias-Bermúdez ⁵  
https://orcid.org/0000-0002-4419-0091

Marco Antonio Zavala-González ⁶  
https://orcid.org/0000-0002-1753-0353

¹, ³, ⁴ Centro de Ciencias de la Salud. Universidad de Guadalajara. Guadalajara, Jalisco, México.
², ⁵, ⁶ División de Disciplinas para el Desarrollo, Promoción y Preservación de la Salud. Departamento de Salud Pública. Sierra Mojada 930, Puerta 1 Edificio “N”, Planta alta. Colonia Lomas de Independencia. Guadalajara, Jalisco 44240, México. E-mail: angelescovarrubias@hotmail.com

Abstract

Objectives: understand the structure and content of the maternal representations of Mexican teenagers during their first pregnancy.

Methods: a study was carried out with qualitative methodology based on the concept of maternal representation and the theory of social representations with 30 adolescents who attended prenatal control at the Civil Hospital of Guadalajara “Fray Antonio Alcalde”, in Jalisco, Mexico. The participants were interviewed with the consent of their tutors. Classical content analysis techniques were used to obtain codes and thematic categories to develop a conceptual map that explains maternal representations.

Results: the maternal representation was identified: “Pregnant but reunited, a legitimated bad decision”, which was composed of social meanings towards adolescent pregnancy, family dynamics, expectations towards motherhood, and the feelings experienced by the adolescent during the pregnancy. The content of the representations was heterogeneous for most of the identified categories; however, it is identified that the desire for pregnancy guides the expectations of the adolescent about her future way of being as a mother.

Conclusions: the desire of women for pregnancy, the level of participation of the couple, and the social meanings of adolescent pregnancy, have an outstanding role in the development of models of maternal representations.

Key words Pregnancy in adolescence, Maternal-fetal relations, Qualitative research
Introduction

According to national registers from Mexico, the percentage of newborns with mother minor than 19 years during 2010 and 2017 was 16,4 and 17,5 respectively; like adolescent pregnant prevalence from Kenia during 2014 that was 18%. The adolescent pregnancy is an international public health problem because during this life stage, the pregnancy affects negatively the adolescent and newborn health.

With the objective of influence in this problem, diverse studies show the social and individual variables which are related to the pregnancies increase during the adolescence. To social level, in occidental countries is identify pronatalism as cultural discourses which promote the mortality as a process that is part of woman’s life, and the foment of practices and beliefs which idealize the maternity, in Brazil as social causes is recognized the contexts restricted of labor and educative opportunities, in Spain the intra-family violence and violent couple relationships, and in Colombia the perpetuation of conventional family (heterosexual couple with sons) as a social basic unit. As individual elements, in African countries is recognized the lack contact with communication means, low socioeconomic level, and couple relationships since early age, while that in Spain mentions the necessity of adolescents for reach personal realization and feel-self socially important and loved.

The causes and motivations of adolescent pregnancy are related to the shape as the adolescent interprets your pregnancy, aspect that guide yours, practices and beliefs towards maternity and model part of your identity as a woman. This aspect results important for understand upbringing styles adopted by adolescent mothers. Studies from the USA show that depressive symptoms, neurotic personality and violent events with the couple are aspects related to a confused maternity style in which the woman try unlinked as mother.

In this sense exist an important effort for to know the social and individual elements which have relation with positive development of maternity in the pregnant adolescent. About this, studies from Latin America show that the family (specially the mother) is a key point for the adolescent since it represent the greatest social support, is a referent about your first experiences as a mother and also an emotional refuge from social judgment and the abandonment by the couple when it occurs. The emotivity during the adolescent pregnancy is heterogeneous, has been describe uncertainty about the future, and anger and guilt for acquiring an unplanned responsibility, but also fear of the abortion and the confirmation of your femininity and the joyfulness for the possible family independence. In clinical psychology these perspectives during pregnancy are denominated “maternal representations” and are the psychological reaction of the mothers started during the first trimester of pregnancy, that is basic in the adoption of infant care style and contribute to complement the woman’s identity as such and model your link mother-son.

In the last three decades, Mexico has been strong social changes which has been permeated the context of adolescents, allowing them greater access to communication means, and working and scholar spaces, and to witness the participation of feminist community in the sexual health promotion. In this sense, refresh the knowledge about maternal representations of pregnant adolescents result necessary for understanding your current situation and identify new research lines.

Under the above, the objective of this study was to understand the content and structure of maternal representation that have Mexican pregnant adolescents in your first pregnancy who attended to prenatal health care in the Civil Hospital from Guadalajara, Jalisco, Mexico.

Methods

We made a qualitative study based on social representations theory because this one to permit, explain the maternity since an omic perspective. The study unit was pregnant adolescents who attended prenatal health care in the Guadalajara’s Civil Hospital “Fray Antonio Alcalde” during 2015, and the analysis unit was the speeches of adolescents.

As to the theoretical base of study, we consider these theoretical principles: a) The representations are thinking shapes which show how the individuals re-reproduce objects and ideas, since these are not only a reflection of reality, but they combine meanings and symbolisms individuals and collectives, and b) The representations serve to individuals in understanding your reality, construct part of your identity, orient your conduct and justify your attitudes and actions. Likewise, the maternal representations were defined as psychological notions made from life’s experiences of pregnant women, which are related to the way your plain and imagine exercising your maternity.

Based on the above, we development these questions to guide the analysis of speeches for the pregnancy adolescents: 1) What type of maternal repre-
sentations appears in the speeches from adolescents about your maternity? 2) Which elements are related to the maternal representations from participants, and 3) How the elements of representations influence in maternity shape?

With relation to target population, during 2015 it’s reported attention of 3,756 women, minors than 19 years in prenatal health care in the Guadalajara’s Civil Hospital “Fray Antonio Alcalde”, and from this population we selected a propositive sample non-randomized of 30 adolescents. The participants eligibility criteria were: 1) Age from 10 to 19 years, 2) Attended in prenatal control in Guadalajara’s Civil Hospital “Fray Antonio Alcalde” during the first trimester of 2015, 3) To have your first pregnancy, and 4) To be in the third pregnancy trimester. The criteria for non-eligibility were: 1) Interview not agreed by parents or tutors in case of mother minors than 18 years, and 2) To present diagnosis of psychopathology disease.

For contact with possible participants, we transact special permission to work with personal from Guadalajara’s Civil Hospital “Fray Antonio Alcalde”. The researchers attended in gineco-obstetrician area to contact and invite adolescents whom we find accompanied by any of your tutors. During a scheduled appointment, we informed with detail about the study and in the case of accepting, the tutors signed the informed consent enabling the interview. The interviews were made in the hospital and had duration from 24 to 46 minutes, each one was audio-recorded, occasionally in the presence of any tutor of the adolescent when she not had inconvenient of this happening.

The interview’s guide was designed with base in the sections of the “Interview of Maternal Representations during Pregnancy – Revised Version” (IRMAG-R),\(^{16}\) that inspect the influence of different events from woman’s context about the future upbringing of your son and the link mother-son that she develops during your pregnancy. The exploration axes were six: 1) Wish by the pregnancy, 2) Emotions developed during the pregnancy, 3) Changes in the life style, 4) Perceptions and fantasies towards the infant, 5) Expectations toward mother’s life style, and 6) Influence of the personal story in the representations of maternity.

The data analysis we made in two phases. In the first phase, the narrations were classified in two groups: a) Planned pregnancy, and b) Unplanned pregnancy. In the second phase, the narrations were codified with the software Atlas.\(^{21}\) uses the classic strategy of content’s analysis\(^{21}\): a) Coding, b) Categorization, and c) Inference. The first step of analysis, the coding, consisted in identifying paragraphs or lines significant in each one of interviews paying special attention to those which had substantives, verbs, adverbs and adjectives, and to these text portions we assign them a key word or phrase that describe with the highest fidelity possible the meaning that the researchers we interpreted of your reading. The categorization involved the classification and hierarchy of codes for each theme. And finally, the inference or interpretation were researchers’ reflections about the relation between categories and how these relations to could answer to the research questions.

As to ethic considerations of the research, the study’s protocol was authorized by the Ethic in Research Committee of the Guadalajara’s Civil Hospital “Fray Antonio Alcalde” according to the specifications of the Regulation of Health General Law in Matters of Health Research\(^{22}\) from Mexico.

**Results**

With respect to participants’ characteristics we find that mean age was 16,8 years (interval 13 to 19), that 11 (36,7 %) were single, 5 (16,7 %) married and 14 (46,7 %) were in free union, and also that the mean of pregnancy weeks were 33,1 (interval 24 to 41). In Table 1 we described all characteristics.

The interviews analysis allowed us to identify 193 codes grouped in 29 subcategories, and these into eight categories that conform the structure of the maternal representation named: “Pregnant but paired, a bad decision legitimized”. The categories were: 1) Expectations about the personality of the son, 2) Perspectives about maternal practices, 3) Emotions experimented during the pregnancy, 4) Personal meaning of pregnancy, 5) Activities during the pregnancy that encourage the mother-son link, 6) Interaction with the family and sentimental couple, 7) Interaction with the maternal figure, and 8) Interaction with the paternal figure. Each category and subcategory are described, then, and likewise, in the Table 2 it’s described fragments of interviews to participants of the study.

**Expectations about the personality of the son**

We identified four subcategories: 1) Born healthy, 2) Be a quiet infant, 3) Be like to parents, and 4) Be different. These subcategories were related to different worries of adolescent mothers about the future physical and social development of your sons. An aspiration common for 18 adolescents was a son without diseases because for 25 adolescents the pregnancy was unplanned and they didn’t have
previous preparation, for example, folic acid consumption. With relation to the category “be a quiet infant”, 17 women described your tension about the possibility of having important demands of postnatal cares or a son with a bad personality, for example, referring to the common belief of that infants cry much. The category “be like for parents”, corresponded to the wish expressed by 14 women of to observe similarities between features and personality from the father or mother of the infant. In contrast, the category “be different”, signalize the expectative of 4 women about an appearance totally different of the son, with the wish of that he/she to be better that your parents in diverse aspects.

Perspectives about maternal practices
This category frames the beliefs of the participants about your future personality toward your sons, and we identified three subcategories: 1) Loving-patient, 2) Overprotective, and 3) Neurotic. For the adolescents were common to aspire to be loving and patients what was linked with a persistent, stay with your sons, 15 of them mentioned this way of being. Other 12 referred the possibility of to be overprotective what was understandable as difficult to leave the child in the care of someone else. Finally, a small group of 3 adolescent mothers described a combination of characteristics that they could be classified negatively, for example, to be angry [Woman 13] or screaming.

Emotions experimented during the pregnancy
The emotions referred it’s divided into five subcategories with 10, 9, 5, 2 and 2 codes, respectively: 1) “Happiness for fetal movements”, that was described by the women to the feel the activity of product inside the belly that they caused contentment or joy, by feel that the son “is alive, who desire to live” [Woman 29]; 2) “Sadness for hindered plans”, was a subcategory that included all circumstances in which women described tension about the possibility of to have a son with a bad personality, for example, referring to the common belief of that infants cry much or to have an appearance totally different of the son, with the wish of that he/she to be better that your parents in diverse aspects.

Table 1
Characteristics of pregnant adolescents. Guadalajara’s Civil Hospital "Fray Antonio Alcalde", 2015.

| Identification code | Age  | Married status | Gestation’s week | Wish by pregnancy       |
|---------------------|------|----------------|------------------|-------------------------|
| Woman 1             | 17   | Single         | 32               | Unplanned – desired     |
| Woman 2             | 17   | Single         | 40               | Unplanned – undesired   |
| Woman 3             | 17   | Single         | 31               | Unplanned – desired     |
| Woman 4             | 16   | Single         | 40               | Unplanned – undesired   |
| Woman 5             | 16   | Single         | 41               | Unplanned – undesired   |
| Woman 6             | 17   | Free union     | 35               | Planned – desired       |
| Woman 7             | 17   | Single         | 28               | Unplanned – desired     |
| Woman 8             | 19   | Married        | 28               | Unplanned – desired     |
| Woman 9             | 19   | Single         | 35               | Unplanned – desired     |
| Woman 10            | 17   | Free union     | 36               | Unplanned – desired     |
| Woman 11            | 15   | Single         | 28               | Unplanned – desired     |
| Woman 12            | 19   | Free union     | 30               | Unplanned – desired     |
| Woman 13            | 18   | Married        | 36               | Unplanned – desired     |
| Woman 14            | 18   | Married        | 31               | Unplanned – desired     |
| Woman 15            | 15   | Single         | 28               | Unplanned – desired     |
| Woman 16            | 15   | Free union     | 36               | Unplanned – desired     |
| Woman 17            | 17   | Single         | 33               | Unplanned – desired     |
| Woman 18            | 18   | Free union     | 38               | Unplanned – undesired   |
| Woman 19            | 15   | Free union     | 34               | Unplanned – desired     |
| Woman 20            | 18   | Married        | 31               | Unplanned – desired     |
| Woman 21            | 18   | Married        | 32               | Planned – desired       |
| Woman 22            | 15   | Free union     | 38               | Unplanned – desired     |
| Woman 23            | 18   | Single         | 28               | Unplanned – undesired   |
| Woman 24            | 16   | Free union     | 37               | Unplanned – desired     |
| Woman 25            | 15   | Free union     | 32               | Planned – desired       |
| Woman 26            | 17   | Free union     | 33               | Planned – desired       |
| Woman 27            | 17   | Single         | 36               | Planned – desired       |
| Woman 28            | 13   | Free union     | 35               | Unplanned – desired     |
| Woman 29            | 19   | Free union     | 37               | Unplanned – desired     |
| Woman 30            | 17   | Free union     | 38               | Unplanned – desired     |
Table 2

Categories, subcategories and citations identified in the speech of pregnant adolescents. Guadalajara’s Civil Hospital “Fray Antonio Alcalde”, 2015.

| Categories                                      | Subcategories (frequency of related codes) |
|------------------------------------------------|--------------------------------------------|
| Expectations about the personality of the son (53) |                                             |
| Be born healthy (18)                            | “I say that as born but that come healthy, without diseases” [Woman 13] |
| To be calm (17)                                 | “calms, that don’t be crying, that don’t very restless” [Woman 8] |
| Similar to parents (14)                         | “that he/she be as us, my couple and me, but more calmed… as his family, equal in all good that are possible of personality” [Woman 29] |
| That be different (4)                           | “that don’t be womanized… that my son faces the consequences of your actions and don’t be like dad” [Woman 7] |
| Perspectives about maternal practices (31)      |                                             |
| Loving-patient (15)                             | “loving and attentive… don’t be a mother that abandoned to your sons by going to work, although it’s necessary… well” [Woman 7] |
| Overprotective (12)                             | “I’ll be as very overprotective, want to take care of it all time” [Woman 16] |
| Neurotic (3)                                    | “loving, angry, that I yelled him/her for everything” [Woman 13], “I belief that bad because I yelled him/her, hopefully not [Woman 5] |
| Emotions experimented during the pregnancy (28) |                                             |
| Happiness for fetal movements (10)              | “happiness, I felt fetal movements until to 6 months, he/she moves so much” [Woman 16] |
| Sadness for hindered plans (8)                  | “My pregnancy had consequences as sadness… at first I wanted study for to be and educator and I say: Oh! Well I’m going to put everything together!” [Woman 20] |
| Anger by pregnancy unplanned (6)               | “I feel emotions as anger, as impotence, I don’t know, I say, why did this happen to me? I didn’t see the consequences” [Woman 1] |
| Concern by son’s health (2)                     | “Each month I check me because my baby doesn’t move, I’m worried, I want it to be alright” [Woman 19] |
| Fear to labor pains (2)                         | “How painful! I when your see to your baby you forget all, well I say that no, the pain is the pain” [Woman 17] |
| Personal meaning of pregnancy (24)              |                                             |
| Postpone plans (13)                             | “I did everything for be well, and I didn’t want to lose everything I had for this (the pregnancy), but I had to, I had my job and now I can’t work neither make nothing” [Woman 17], “I’m not like before that I demanded many thing to my parents” [Woman 15] |
| Family discord (5)                              | “It’s not the same anymore, I don’t know, he like it grabbed him courage (to the baby), I’m not with him (the couple) anymore” [Woman 11] |
| Mission in the life (2)                         | “maybe he/she have a mission with me and me with he/she, for any reason he/she come to me now, I have the contraceptive, was impossible that I got pregnant, but the physician was amazed” [Woman 14] |
| Premature duty (2)                              | “I dream that they give me a baby, but I fall, I’m not ready yet” [Woman 10] |
| Rebellion and sexual need (2)                   | “He didn’t ask come to world, was by my fault, I didn’t say that was an error… it went through wanting with to be with someone, for not wanting to be alone” [Woman 16] |

The categories correspond to bold and italic text and add up 100%, the subcategories write with normal text add up the total respective to corresponding category.
Table 2

Categories, subcategories and citations identified in the speech of pregnant adolescents. Guadalajara’s Civil Hospital “Fray Antonio Alcalde”, 2015.

| Categories | Subcategories (frequency of related codes) | “Citations” [participant’s identification code] |
|------------|-------------------------------------------|-----------------------------------------------|
| Activities during the pregnancy that encourage the mother-son link (7) | Follow fetal movements (3) | “when I lay for sleep, I think that she accommodates” [Woman 26], “I started talking to him and he start to move more” [Woman 14] |
| | Buy belongings for the son (2) | “the diaper bag, your first change of cloth, and your cover and a small sheet” [Woman 13] |
| | Dream with the son (1) | “yesterday I dreamed that it gave birth and had a girl... as I dream her, I say: she already wants to be with me” [Woman 13] |
| | Medical care (1) | “Each month come to my medical cares, come to check me” [Woman 17] |
| Interaction with the family and sentimental couple (23) | Family that support (15) | “At first they took it wrong, but one month ago my family and me we were very close, and we go to the beach” [Woman 24] |
| | Irresponsible couple (5) | “I’ve thought about separating from my son’s dad... he didn’t take wrong the notice, but I felt him less attached to me since pregnancy” [Woman 18] |
| | Responsible couple (3) | “he hasn’t changed affectionately, well yes, is more loving because my belly grabs me... is closer to me, supporting me” [Woman 26] |
| Interaction with the maternal figure (20) | Loving and overprotective (10) | “My mom always supports me much, at first that she learned that I was pregnant got upset, but supports me much” [Woman 18] |
| | Absent and distant (6) | “the life with my mom didn’t was well, so closer, with my dad yes” [Woman 10] |
| | Strict (4) | “my mom is always who care us, is who work and was hard with us” [Woman 6] |
| Interaction with the paternal figure (7) | Absent and distant (4) | “with my dad never coexist, when I was girl my parents separated, I was very young” [Woman 29] |
| | Bad example (3) | “my dad was never with us, lived there but disappeared” [Woman 7] |

The categories correspond to bold and italic text and add up 100%, the subcategories write with normal text add up the total respective to corresponding category.

the teenager had to leave your studies, work or other aspirations to get involved in the care of a new life; 3) “Anger for unplanned pregnancy”, was integrated by sensations of frustration and tension in the face of the recognition of this as a consequence of a series of irresponsible actions; 4) “Worries by son’s health”, it’s referred to that for women the pregnancy occurred in a precarious situation in which no preventive measures were taken as folic acid consumption, and adequate diet and physical activity, so that manifested them worry by the future health of the son; and 5) “Fear of parturition pains”, that it’s referred to a women proportion which mentioned listen versions of a very painful parturition that scared them.

Personal meaning of pregnancy

This category was integrated by five subcategories: 1) “Postpone plans”, for 8 adolescents the pregnancy meant leaving your studies, work and your role as little daughter, for many a son turned them in adults, for others study it’s turned in a goal to long term, possible with yourself efforts, but also the pregnancy was a stage of physical and economic
dependence; 2) “Family discord”, for 5 women the pregnancy was motive of family discussions; 3) “Mission in life”, represented to 2 women for whose the pregnancy occurred despite using contraceptives but that this meant something positive that gave them a purpose; 4) “Premature duty”, represented to other 2 women that referred constants dreams and fears for your inexperience for care sons; and 5) “Rebellion and sexual need”, meaning that for any adolescents your maternity was a bad consequence for disobey the rules of your parents and for your wish for exploring your sexual life.

Activities during the pregnancy that encourage the mother-son link
We identified four subcategories: 1) “Feel fetal moves” it’s refer the first interaction among teenager and your fetus that is the perception of fetal moves as communication signs; 2) “Buy belongings for the son”, highlights the maternal interest for prepare the environment with the necessary utensils for care the newborn; 3) “To dream with the son” it’s referring the fantasies of pregnant, about the birth of your son and the physical characteristics and personality of this; and 4) “Medical care” grouped the comments related to the participation of the mother in monthly health care consults with purpose to look out your son’s health status.

Interaction with the family and sentimental couple
For the interaction with the family, we identified the subcategory “family that support” according to which for the teenager your family were furthermore of your parents, your uncles, aunts, grandmothers, grandfathers, brothers and sisters, which strengthen the meant of the pregnancy as an error but that finally always support to the teenager in your conversion process in the mother. While for a sentimental couple of the adolescents we identified 2 subcategories, which indicate opposing participations, the first was “irresponsible couple” that was the actions of the fetuses’ father that indicate dislike or disagreement with the pregnancy, and the second was “responsible couple” that indicate actions of support and loving toward the mother and fetus from the couple.

Interaction with the maternal figure
We identified 3 subcategories, which correspond to the personalities of the maternal figure of the adolescent: 1) “Loving and protector”, that described mothers that proportionate care toward the teenager and showed emotional support; 2) “Absent and distant”, were mothers which not gave sufficient cares during the teenager’s infancy and during the pregnancy of this which not present; and 3) “Strict”, were mothers which proportionate cares to adolescent and your brothers and sisters but are not emotionally close to the teenager.

Interaction with the paternal figure
We identified 2 subcategories which, correspond to 2 types of paternity practices: 1) “Absent and distant”, that describe fathers, which abandoned the home since age early of pregnant adolescents; and 2) “Bad example”, that describe fathers that lived with the teenagers but not participated in your upbringing.

As for the content of maternal representation from adolescents about your first pregnancy it could be said that was heterogeneous, however, it’s visualized common aspects as marital status and life plan of the teenager, and the participation in sentimental couple in the process, of them which depends the wish by the pregnancy. In the Figure 1, that is read from right to left and on up to down, we synthesized the categories identified in the teenagers’ speech at the same time that we described how the wish by the pregnancy make a difference in the expectations of pregnant adolescent about your son, future personality as a mother, and your adaptation to a new social status as an adult, so that planned pregnancy it’s a better perspective of maternity that the unplanned pregnancy.

Discussion
This research represents an actualization of perspective from a group of pregnant adolescents about your future maternity. We identified the maternal representation named “Pregnant but paired, a bad decision legitimized”, according to which strengthens the idea about the role of adolescent father and the married status of pregnant adolescent as key points to re-signify the pregnancy in this population as a positive event that form part of the life of a heterosexual couple. The free union (be paired) is a shape of to legitimate the tenancy of son, regardless of whether be planned or unplanned.

Like that other refers, the adolescent pregnancy meant a dividing line among to be young and to be an adult, where is socially expected that the teenager “mature” during the son’s gestation process to adopt the role of the adult mother as if it didn’t exist a biological component.

The place where was made this research attends principally people of low socioeconomic resources,
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However, in the cases studied, the adolescents referred have that postpone your studies and works, what contrast with the situation of Brazilian teenagers in whom the lack of education and work opportunities they push to the adolescent toward pregnancy,5 or of African teenagers whom lack of communication means through which to receive sexual orientation,2 or of Spanish teenagers which quest social recognition,6 while Mexican teenagers pointed out belief that the pregnancy is a consequence of rebellion toward your parents, argument why possibility that many teenagers classified your pregnancy as desired in spite of be unplanned (maybe to ease his guilt), except when your couples were not present in your life. This information endorses the idea that the causes and motivations of pregnancy, they keep relation with the mother-son link, for example, between worst couple relationship with fetus’s father, the adolescents desired less that your son was similar to him, as an unlink shape of the father, also between more conflictive was the couple and family relation of the adolescents, they desired more silent sons on hold of that this decrease the burden of your care.

By other side, the majority of teenager wished to be mothers whom which reflected the better of your maternal figures, what went between loving and neurotic personality resorting to screams to discipline to your sons, aspects that highlight again as the mothers are first referenced for the upbringing of the sons at same that in the results of other published studies.5,11-14

The emotions during the adolescent pregnancy resulted have a complex spectrum to same that referred by other authors,16,17 that depend of social support received, your preoccupation by the newborn care, and the acceptation of your role as a mother, that is positive when the teenagers make actions as buy utensils for care your son or depending of your interpretation of fetal movements. The paternal figure in this group of adolescents was almost inexistent, the paternity seemed to follow a
common pattern where the responsible fathers is limited to be presented to can tell that “the infant have a father” what seems to be more valuable that only have a mother. This circumstance implies a social model that question the woman’s capacity to hold alone a family, in this sense, we confirmed Oswald’s posture who mentioned that family concept depends on legal aspects socially naturalized, since in Mexico the family of excellence continue being the formed by dad, mom and sons.

The resignation seems to be a key to enduring the social stigmata of adolescent pregnancy and the mourning by the difference between expected and real maternity, that highlight that mental health care should be a primordial aspect of this group since they present anxiety and depression.23-25

Finally, with respect to research’s temporality and validity, since the perspective of interpretative paradigm the knowledge obtained continue being useful until new information appears that refutes it.26 In this sense, this study brings cultural differences related to the motivations of adolescent pregnancy as well as point out the circumstances that in the Mexican context prevail as part of the problem of the upbringing styles of Mexican adolescents.

Author’s contribution

All authors participated in the conception and design of research, in the recollection and analysis of information, as well as in the preparation of the manuscript for research’s diffusion. Covarrubias-Bermúdez MA was responsible for the management of the editorial process and manuscript’s edition until your publication. All authors approved the final version of the article.

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