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Fear of a Black (and Working-class) Planet: Young Women and the Racialization of Reproductive Politics

Christine GRIFFIN

While heterosexuality is compulsory for young women, this process is racialized and class specific as well as gendered. This is particularly clear when heterosexuality is related to reproduction, as in the panic over 'teenage pregnancy' in the USA (Phoenix, 1991; Griffin, in press). There is a considerable academic literature which is addressed to the incidence and antecedents of 'premarital adolescent heterosexual intercourse' (PAHI), paying particular attention to the activities of young working-class women and (especially in the USA) to young women of colour (Hofferth et al., 1987).

During the 1980s, the pages of news journals and academic texts in the USA reverberated with debates over the so-called 'Black underclass'. Concern over the high unemployment rates among young African-American men and other young men of colour coincided with discussions about the demise of 'the Black family' (Hare and Hare, 1984). Many radical Black scholars argued that the 'Black underclass' debate shifted attention away from the disastrous effects of Reaganomics: increasing poverty, homelessness, ill health and unemployment, which affected young African-Americans to a disproportionate extent. Some exponents of the 'Black underclass' theory, however, laid the blame for these harsh economic and social conditions at the door of young working-class women and men of colour, especially young African-American women. Apparently, the ravages of Reagan's economic policies can be attributed to the incidence of 'unplanned teenage pregnancies' among this group of young women (see Malveux, 1988 for a critique).

From a traditional (hetero)patriarchal standpoint, *any* 'teenage pregnancy' is constructed as a problem, especially if the young woman is not married. Some 'teenage pregnancies' are less acceptable than others, regardless of whether they are 'unplanned'. Hence the emphasis on the need for educational initiatives on 'pregnancy avoidance' and 'planned parenthood' which focus on young working-class women and young women of colour, since these are the groups which are presumed to constitute 'the problem of the (hetero)sexually active teenager' (Neinstein and Shapiro, 1986).

One recent US study examined the medical records of 60 young women for evidence that paediatricians had asked questions (or at least recorded information) about these young women's sexual histories during medical consultations (Hunt et

al., 1988). All of these young women (aged between 12 and 20) had been admitted to emergency or casualty departments with acute abdominal pains. Paediatricians were far more likely to ask working-class African-American and Chicana young women questions about heterosexual experiences, contraceptive use and possible pregnancy compared to their white and middle-class peers. This study exemplifies the practical implications of the racialized, class-specific and gendered nature of heterosexuality for young women within the clinical domain.

The panic over 'unplanned teenage pregnancy' addresses itself to the heterosexual and reproductive activities of young women. In the USA, these debates have long moved past the point of crisis, with arson attacks, bombings, burglaries, hate mail and vandalistic attacks on abortion providers, laws demanding parental consent for young women seeking abortions in some US states and national cutbacks of Medicaid funding for abortion (Petchesky, 1990; Fried, 1990). Women of all ages are increasingly likely to be constructed as baby receptacles through the ideology of foetal rights, which anti-abortion campaigners have mobilized to present their position as a 'pro-life' stance.

Such developments reinforce a set of assumptions which construct women as responsible for the health of their offspring, conveniently obscuring the potential effects of poverty and oppression (Phoenix, 1991). The ideology of foetal rights as used in anti-abortion arguments represents the life of a pregnant woman as in direct opposition to that of her foetus (usually represented as male) in a sort of competition for 'life' and 'rights' (Petchesky, 1990). Assumptions about women's 'responsibility' for the health and well-being of their offspring are brought forward to the moment of conception. The ideology of adolescence constructs all young people as inherently prone to 'irresponsibility', especially if they are female, working-class and Black. There are no prizes for guessing which group of young women is particularly likely to be positioned as 'irresponsible mothers' in this ideological arena.

In a recent review essay on the politics of abortion and reproductive freedom in the US feminist news journal *Off Our Backs*, Felicia Kornbluh identified 'teen sexuality' as one of six key areas for feminist activism in this domain (Kornbluh, 1991). By 'teen sexuality', of course, she was referring to *heterosexuality*. Debates over 'unplanned teenage pregnancy' are not only concerned with the availability of abortion: they are fundamentally about power and control in the politics of heterosexuality and reproduction. While access to abortion is becoming increasingly restricted for young women who demand one, the picture can be very different for young women to want to give birth, especially if they are living outside, or on the margins of, the affluent 'First World', and if they are likely to be constructed as 'irresponsible mothers'. The main problem for the latter groups is more likely to be enforced sterilization than access to abortion, but these different positions are part of the same political equation. Enforced sterilization may appear in the guise of 'genetic counselling' for young women with disabilities; sterilization without the woman's explicit consent during other gynaecological operations; or the various 'family planning' initiatives carried out by the World Health Organization which offer financial or other incentives to 'Third World' men (or women) who 'consent' to be sterilized. In the latter case, the pressures of poverty undermine any notion of 'free choice'. The key issue in all of these different contexts is *control* and who must be given the power to make decisions about young women's heterosexual relations and reproductive activities.

The case of the first young woman in Alabama, USA, to seek a 'judicial bypass' around the parental consent required before she could have an abortion exemplifies the powerful juxtaposition of ideologies around femininity, adolescence and heterosexuality in this area. The judge found that 'Kathy' was not mature enough to make her own decision about abortion, and in an interview four months after the court hearing, he described the criteria on which he based this decision as follows: 'I based it on her looks . . . just something that comes across when you talk to her . . . her credibility' (Fried, 1990: 101). As Felicity Kornbluh argued in her review of Margaret Gerber Fried's book, if a young white woman seeking an abortion without parental consent can be treated in this way 'then none of us is safe' (Kornbluh, 1991: 13). If you are reading this and asking yourself what age the young woman was, perhaps you need to consider what criteria *you* are using with reference to this case.

Feminists involved in reproductive politics from a disability rights perspective have set debates about abortion and sterilization in a broader context, and demanded a reassessment of the ideology of foetal rights. As they point out, access to abortion and the ideology of foetal rights are used selectively: under current legislation in England and Wales, foetuses defined by the medical profession as 'seriously handicapped' can be aborted at any time up to the moment of birth (Morris, 1991). Reproductive politics can then be set in the context of the ideological framework that informed the Nazi euthanasia programme, in which the murder of thousands of adults and children with disabilities was justified with recourse to arguments about 'mercy killing'.

Where the 'rights' of young women with disabilities who are, or who wish to become, pregnant are concerned, the arguments are somewhat different, but the effects can be all too familiar. In this context, eugenicist ideas about perfecting the population are mobilized alongside the assumption that *all* people with disabilities suffer an existence of unrelieved misery and inadequacy. While radical researchers and practitioners have developed more sophisticated understandings of the complex issues raised by debates over disability, heterosexuality and reproduction (e.g. Perkins, 1991), these analyses have as yet had little impact on mainstream arguments (Morris, 1991).

The legacy of eugenicist ideas lives on in assumptions about the inherent deficiencies of young working-class women, young women of colour and young women with disabilities as potential mothers. 'Race' and class are now more likely than in the early part of this century, to be represented as cultural, rather than as biological categories in western societies, but the prevailing definition of disability still revolves around physiological, hormonal or genetic 'deficiency'. Young women with disabilities — whatever their disabilities — are constructed as 'imperfect' examples of flawed femininity to whom the heterosexual dilemma should never apply. They are definitely not encouraged to have children.

All young women face pressures to move down the 'straight and narrow' path of heterosexuality, marriage and motherhood (in that order), but such pressures are experienced and negotiated in racialized and class-specific ways which also use notions of 'normality' and 'disability' to police the transition of adulthood. The voices of young women are seldom heard within the academic, clinical or judicio-legal literatures on 'premarital adolescent heterosexual intercourse', especially if they are working-class, Black and/or young women with disabilities. The voyeuristic gaze of

the adult researcher or clinician defines the boundaries of 'appropriate' heterosexual and reproductive activity. Yet despite the institutional, cultural and ideological force of such definitions, young women continue to 'deviate' from that straight and narrow path, to forge their own routes through the traps laid by heterosexuality, marriage and motherhood, to challenge and subvert 'common-sense' definitions of 'normality' and 'deviance'.

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