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5 **In Dialogue with Self and the World: Cape Verdean Migrant Pregnancy in**
6 **Portugal**

7 **Abstract**

8 The voices of Cape Verdean migrant student mothers in Portugal are examined
9 in the light of Archer's (2003) theory on the 'inner dialogue'. The article frames the
10 mothers as complex social actors who respond to the uncertainties surrounding
11 unplanned pregnancy through self-reflection and dialogue with and about the world,
12 turning the disorientation of unexpected motherhood into a meaningful project. The
13 analysis reveals how the women's agency is located within the wider influences of
14 kinship and gender norms and how these are already negotiated in the case of
15 unconfirmed pregnancy.

16
17 **Key words** Cape Verde; Motherhood; Migration; Students; Subjectivity; Empowerment

18 **Introduction**

19 Mothering is a contested practice. It is constantly called into question through
20 expert advice, consumer culture and alternative practices which become particularly
21 salient for women within migration contexts. The theme of this special issue is to
22 examine the impact of migration on the experiences and practices of mothering. Yet, a
23 dominant focus on how mothers care for their children – either directly or at a distance -
24 may reduce the mothers to ‘objects of children’s needs or conduits of cultural values,’
25 instead of recognizing them as ‘complex actors’ (Barlow and Chapin, 2010:327-8) in
26 their own right.

27 The aim of this article is to contribute to the debate on migrant mothering from a
28 complementary perspective which examines how the transition to motherhood and the
29 embodied experience of suspected pregnancy impact upon the lives of migrant women.
30 Placing actual and imagined motherhood within the same analytical framework helps to
31 view migrant women as complex actors. The article examines a specific group of
32 migrant student mothers from Cape Verde whose unexpected transition to motherhood
33 occurred at a time when their main aim was to pursue education in Portugal.
34 Motherhood was thus experienced as an unexpected ‘bodily and biographical *situation*’
35 (Thomson et al, 2011:6) that caused them to reconfigure plans, relationships and
36 identities. This case study consequently provides an important contribution to the
37 recognition of migrant mothers as subjects in their own right. Nonetheless, reproduction
38 cannot be dissociated from kinship and gender relations and these, together with the
39 issues of contraception and abortion, constitute the main themes addressed. How did
40 kinship and gender relations influence their attitudes towards contraception and
41 abortion? What factors influenced their decisions to proceed with or terminate their

42 pregnancies? How did they respond to the (potential) moral judgments of others? Did
43 the women feel empowered or disempowered by their experiences?

44 These last two questions raise the thorny issue of agency. Keanne (2003) and
45 Warren (1990) critique the tendency (in anthropology) to locate agency within a free-
46 standing subjectivity of pre-existing individuals who are up against oppressive
47 structural forces. They argue that subjectivity should be seen as located within, rather
48 than separate from wider structures. To approach migrant mothers as subjects
49 consequently entails addressing the debate on the relationship between structure and
50 agency. The article does this through a discussion of Archer's (2000, 2003) theory of
51 the mediating role of the 'inner conversation'.

52 Archer argues that it is the capacity of individuals to reflect upon their
53 involuntary placement in the world and to construct their own personal projects in the
54 light of the external factors that affect them that provides the key to understanding
55 agency (2003:93). Structures do not impact directly upon individuals; this would be
56 determinism. Rather, they are reflexively mediated via each individual's subjective
57 concerns. These concerns are often in conflict with each other and so decisions are
58 made, separating primary from secondary concerns. This decision making process takes
59 place in the 'inner conversation' (2003:132-139) which is also influenced by social
60 interaction (Mead, 1934). Although direct access to the private workings of the Cape
61 Verdean women's inner conversations is not possible, the sharing of their thought
62 processes in interviews and in informal conversations provided a window into how the
63 women made their decisions.

64 The case study also provides an original contribution to the debates in the
65 literature on adolescent pregnancy by giving voice to both adolescent and older student
66 mothers in order to elucidate factors beyond that of young age which may render the

67 transition to motherhood problematic (Kane et al, 2013). It also provides an original
68 contribution to the literature on migrant motherhood and transnational mothering which
69 tends to take motherhood for granted as a relatively stable self-identity from which to
70 negotiate other issues. These include integration, citizenship (Castañeda, 2008; Erel,
71 2011), the provision of culturally sensitive care (Liamputtong, 2007; Moro et al, 2008;
72 Griffith, 2015), migrant and transnational care relations and the socially defined
73 moralities underlying public narratives of ‘good mothering’. (Parreñas, 2005; Akesson
74 et al, 2012; Drotbohm, 2013; Locke et al, 2015). Madianou (2012) has addressed the
75 issue of how maternal ambivalence (Parker, 1995) may be accentuated through
76 migration, as women are pulled between their roles as mothers and their identities as
77 women. By focusing on the uncertainties created by unexpected pregnancy, this article
78 draws attention to another aspect of migrant women’s experiences which is under
79 researched in the literature: how women themselves feel about the unexpected transition
80 to motherhood within the context of migration.

81 Fathers were less available for interview; especially those who had become
82 estranged from the mothers. Another difficulty encountered in the research was that of
83 making systematic comparisons between the women’s experiences. This was because
84 the fieldwork was carried out during different periods of time in the mothers’ lives.
85 Whilst in some cases it was easy for me to stay in contact and register the changes that
86 occurred in the women’s biographies, in other cases the women ‘disappeared’ so that I
87 never knew, for example, if they had completed their studies. Their constant changing
88 of telephone numbers to take advantage of free promotions added to the difficulty of
89 staying in contact. Having retained my number, I am still sometimes surprised by
90 mothers who contact me after several years of ‘silence’. The recent changes in their
91 lives, referred to when appropriate, have brought to light the contingent nature of their

92 experiences and the provisional nature of conclusions that may be drawn in relation to
93 any single case.

94 The following sections discuss the research context and methodological
95 challenges. This is followed by an examination of how the women dealt with the
96 uncertainty of unexpected pregnancy through a quantitative view of the data, followed
97 by an analysis of narrative extracts by addressing the issues of abortion, gender and
98 empowerment. The next section elucidates how the issues discussed bear on the
99 women's decision-making processes through an examination of the embodied
100 experience of suspected pregnancy. The article concludes with suggestions for future
101 research.

102 **The Research Context and Methods**

103 Cape Verde, situated off the west coast of Africa, gained political independence
104 from Portugal in 1975. Its poor natural resource base and arid climate have contributed
105 to the islands' long history of migration which dates back to the colonial period and
106 continues to the present day. Although, traditionally, it was mostly unskilled male
107 labourers who emigrated, in the last few decades, growing numbers of women began to
108 migrate, especially to Southern Europe. Cleaning jobs, caring for children or the elderly
109 have constituted the main outlets of work (Grassi and Évora, 2007), as well as working
110 in restaurants and cafés.

111 Portugal was also a destination for the Cape Verdean elite during the late
112 colonial period to pursue higher education. Following independence, the signing of bi-
113 lateral agreements made it possible for more Cape Verdeans to study in Portuguese
114 universities and, from 1995 onwards, male and female students also came to acquire
115 technical qualifications in Portuguese tertiary vocational colleges. Between 2009 and
116 2012 nearly 3600 vocational college students came to study across different regions in

117 Portugal¹. Some local councils in Cape Verde responsible for sending these students
118 required the women to take pregnancy tests; if they were positive, the women stayed
119 behind. This questionable measure – given the sexual and reproductive rights issues it
120 raises – emerged from a context of high rates of teenage pregnancy in Cape Verde and
121 government measures to reduce them.

122 In the latest nationwide study on reproductive health in Cape Verde which
123 covers the period 2003-5, the fertility rate for adolescent women between fifteen and
124 nineteen-years-old was 9,2% (INE, 2008:46) compared to that of 1,95% for women of
125 the same age group in the same period in Portugal (INE, 2005:20; 2007:75). Lack of
126 knowledge about contraception does not offer a satisfactory explanation for these rates,
127 since the study on reproductive health claims that nearly 100% of the women
128 interviewed had knowledge of at least one method of contraception. Yet only 22,6%
129 claimed to be using or planning to use contraception in the future (INE, 2008:59-60).

130 In Cape Verde abortion has been legal since 1986. Yet, clandestine abortions,
131 especially amongst young women, are common, estimated in a study commissioned by
132 the association for the protection of the family, VerdeFam, to be between 7000 - 7500
133 per year, seven times more than legal abortions. The reasons suggested include shame,
134 the moralizing attitudes of health professionals and lack of trust in the confidentiality of
135 health services (Afrosondagem, 2012).

136 In the school year 2001-2, the government passed a controversial measure to
137 temporarily suspend pregnant pupils from secondary school. The effects have been
138 criticized in a study which found that between 2002 and 2008, nearly 68% of the cases
139 of suspension due to pregnancy resulted in school dropout or failure (ICIEG, 2010:42).

¹ Data obtained during interviews in local councils in Cape Verde in 2012 and in the Cape Verdean embassy in Lisbon in 2013.

140 The study suggests a number of reasons for high teenage pregnancy rates.
141 Firstly, motherhood was valued as a meaningful life project in response to the failure of
142 schools to encourage future life projects for their pupils, faced with high youth
143 unemployment rates - 32.1% in 2012 for people under 24. (INE, 2012:32). Secondly,
144 unequal gender relations made it hard for young women to negotiate with their sexual
145 partners. Other reasons include the shortcomings of public policies on sexual and
146 reproductive health in Cape Verde and the influence of their local cultural context. Most
147 of the school board members interviewed in the study viewed adolescent pregnancy as a
148 problem, perceiving adolescent women as incapable of embracing motherhood
149 mentally, physically, emotionally and economically. (ICIEG, 2010:19, 45-6). It is
150 within this context that the local councils which sent pupils to study in vocational
151 colleges in Portugal obliged the women to take pregnancy tests before their departure.
152 Some women arrived in Portugal already unknowingly pregnant, undetected by the
153 tests.

154 The degree to which teenage pregnancy lessens the educational prospects and
155 economic opportunities for young women has been the subject of much debate, in
156 academic and policy studies (Brady, 2014; Salusky, 2013; Kane et al, 2013; Coyne and
157 D'Onofrio, 2012; WHO, 2011; Edin and Kefalas, 2005). Salusky (2013) claims that
158 there is a dominant global discourse on the negative educational and economic
159 outcomes of adolescent motherhood and very little research has been carried out on the
160 mothers' own perspectives. Her analysis of the narratives of marginalized adolescent
161 mothers in the Dominican Republic elucidates the benefits of young motherhood as a
162 meaningful life project. A statistical study of the consequences of adolescent
163 motherhood on educational outcome in the United States also draws attention to how
164 focusing exclusively on women who become pregnant as teenagers conditions the

165 sample, by failing to provide comparative data on the years of education lost by their
166 peers for other reasons. Teenage pregnancy is consequently artificially isolated from a
167 range of other factors that influence educational outcomes. The authors also question
168 how they should conceptualize 'early motherhood': 'Is a "teen" birth, in and of itself,
169 problematic? Or, is simply transitioning to motherhood before the normative age at first
170 birth consequential for young women?' (Kane et al, 2013:2147). By drawing attention
171 to how life stages are normalized and institutionalized (Johnson-Hanks, 2005), this is a
172 very significant question which, for the purposes of this article, could be altered to
173 asking whether it is transitioning to motherhood before completing education, rather
174 than their actual age, that is consequential for young Cape Verdean women studying in
175 Portugal.

176 The data analysed in this article derives from intermittent periods of fieldwork
177 that span over three years in the northern city of Porto (from July 2008 to September
178 2011) and one year in a smaller northern town which I shall call Maminha (from April
179 2012 to May 2013). The method of snowball sampling was used to identify Cape
180 Verdean mothers. The fieldwork consisted of interviewing and accompanying pregnant
181 women and young mothers to their appointments with doctors, nurses, social workers
182 and other state officials. These appointments are discussed elsewhere (XXXXXX 2012a).
183 Informal interview techniques were also used, such as chatting with women in the
184 waiting rooms of health centres, hospitals and at birthday parties. I introduced myself as
185 a researcher interested in what it was like to be a Cape Verdean student mother in
186 Portugal. The ways women introduced me to each other revealed different unspoken
187 assumptions regarding my role and the expectations that these created. In some cases,
188 they were not interested and unavailable. For others, I was a welcome companion so
189 women did not have to go alone to medical appointments. At times, this also created

190 high expectations which then led to frustration when I was unable to make their
191 appointments. I have discussed at length elsewhere the implications of my ambiguous
192 position which I describe as one of ‘estranged intimacy’ (XXXXXX 2012b), since I
193 became intimately involved with women with whom I did not have a close relationship.

194 All of the interviews were open-ended, beginning with a simple invitation for the
195 women to tell their story, starting before they left Cape Verde. In the majority of cases, I
196 did not need to ask many questions. Similar to the research conducted on the pregnancy
197 of first time mothers in the UK, the women’s experiences were ‘already “storied” prior
198 to the interview’ (Thomson et al, 2011:27) as part of a personal process of making
199 meaning.

200 **The Making of Meaning**

201 Research which engages with subjects at a personal level faces the challenge of
202 reconciling intimate engagement with the academic distance required for making
203 contextual sense of the data. If, on the one hand, submersion into the subject’s
204 phenomenology may produce too close a focus on the individual and thus obscure the
205 wider context, on the other hand, the ‘external gaze’ risks distortion (Bourdieu, 1990)
206 and/or betrayal. Keane argues that, when analyses of power turn away from self-
207 interpretation towards larger forces to be ‘captured by an observer’s independent
208 categories of analysis’ (2003:238), the meanings social actors attribute to events are
209 stripped of any material or causal value. In other words, the researcher only appreciates
210 self-interpretation out of an aesthetic interest and the result is to deny the individual any
211 agency or exercise of power. This brings us back to the need to engage with people’s
212 subjectivities. Indeed, Keane argues that understanding personal experience requires a
213 constant shifting between ‘epistemologies of intimacy and of estrangement’ (2003:238).
214 Crucial to Keane’s argument is that estrangement does not always have to result in

215 betrayal or reification, since objectification results from the human capacity for self-
216 reflection and is not, in itself, inherently alienating (2003:239).

217 For a health professional to tell a pregnant girl that she was irresponsible is very
218 different to Linda, for example, a 21 year old vocational college student mother telling
219 me, during the course of a prolonged conversation, ‘I was irresponsible’. In this
220 instance, we may be catching a glimpse of self-objectification at work, in the ‘inner
221 conversation’ (Archer 2000, 2003). However, processes of self-reflection always occur
222 in dialogue with and about the world. It could be argued that Linda was reproducing a
223 dominant ideology regarding irresponsible sexual behaviour, evident in the ways in
224 which some Portuguese social workers spoke to the mothers (XXXXXXXXXX, 2012a).
225 Yet, ideologies are not imposed upon passive individuals as meanings. They only
226 become meaningful for individuals once they have been selected, reproduced and
227 articulated in such a way that they fit in with individuals’ worldviews (Warren
228 1990:602-3) which are themselves also constantly subject to review. As Blumer
229 (1986:5) points out, meanings are social products or ‘creations that are formed through
230 the defining activities of people as they interact.’

231 Yet, individuals may also hold genuine inner conversations with themselves
232 (Archer, 2003:121). Consider the following statement made to me by Isandra: ‘I cried a
233 lot during the pregnancy because it wasn’t what I had expected. Then I asked myself,
234 “Where is that strong, motivated, talented Isandra?”’ Here we see an example of Isandra
235 engaging in an epistemology of estrangement, objectifying herself and asking after the
236 past self that she once knew herself to be. Self-objectification may, in this case, be
237 interpreted as a strategy for self-empowerment.

238 **Dealing with the Uncertainty of Unexpected Pregnancy**

239 None of the women interviewed claimed to have become intentionally pregnant.
240 The causes of unplanned pregnancy reported were forgetting to take the pill, the
241 bursting of a condom, use of the withdrawal method and taking a risk in the belief that
242 nothing would happen. ‘We don’t lack information’, said one mother, ‘accidents
243 happen.’ ‘It was just one of those things that young people do”, explained another
244 mother.

245 Access to contraception in Portugal was generally deemed easier than in Cape
246 Verde, due to the anonymity of the services provided, far from the gossip of their local
247 communities. Separation from family and local communities was experienced, in this
248 respect as enabling, since it granted them more sexual freedom. Abortion, on the other
249 hand, had only recently been legalized in Portugal in 2007, following a referendum.

250 The decision of whether to proceed with an unexpected pregnancy in Portugal
251 was affected by a number of inter-related factors, including: the degree of support
252 received from or pressure exerted by family, professionals and boyfriends; religious or
253 moral concerns; the illegality of abortion and its associated health risks and the
254 revelation of the baby’s sex through ultrasound scans. References to studies, to financial
255 difficulties and to a general feeling of not being prepared for motherhood were made by
256 many women. Despite this, the data discussed below reveals how most of the women
257 interviewed were able to turn the uncertainty and disorientation of unexpected
258 motherhood into a meaningful project.

259 Global Overview of the Data

260 The data refers to a total number of thirty-four women, twenty-four of which
261 were interviewed whose names have been changed and whose ages ranged between
262 nineteen and twenty-six. Ten were university students and sixteen were vocational

263 college students in Porto and the remaining eight women were vocational college
264 students in the district of Viana do Castelo. Interviews were also recorded with four
265 fathers, all of whom were university students in Porto.

266 Abortion is a difficult topic to broach and in most cases I consequently only
267 addressed the issue if the women themselves brought it up. Five of the women claimed
268 to have been put under pressure to abort; two when abortion was illegal in Portugal,
269 before 2007, by a mother and by the father of the child, and three when it was legal, by
270 an older sister (in France where abortion was also legal). The last two cases claimed to
271 have been put under pressure to abort by vocational college staff². Three openly claimed
272 to have tried to abort before 2007. The number of those who attempted or at least
273 considered abortion before 2007 is likely to be higher, as triangulation through the
274 observation of casual conversations revealed.

275 Three out of the university students claimed that the financial support they
276 received from their fathers in Cape Verde was cut off or reduced as a form of
277 punishment whilst they were pregnant. The vocational college students were entitled to
278 small subsidies for subsistence, accommodation and transport and so the majority did
279 not receive much if any money from their parents. The angry family responses they
280 reported, also common amongst the university students, included the refusal to talk over
281 the phone, often for many months. In nearly all of the cases, financial, emotional and
282 moral support was re-established at some point after the baby was born. This temporary
283 suspension of support reflects a traditional practice that has continued in some areas of

² Although I did not pursue this matter in any depth, I was aware that this was a serious allegation especially since the two women claimed that a number of students had committed abortion due to the influence of vocational college staff.

284 rural Cape Verde, where pregnant daughters are temporarily thrown out of their parents'
285 home.

286 Twenty-eight out of the thirty-four women were in relationships with the fathers
287 of their children, all of whom were Cape Verdean, when they became pregnant. After
288 the baby was born, only eleven lived together and seventeen lived apart, either because
289 their partners were living in Cape Verde or elsewhere in Portugal or because the women
290 couldn't afford to leave their joint accommodation with other students. Fellow female
291 students were also more likely to help with childcare.

292 To quantify and compare the degree and continuity of the fathers' support for
293 their children is too complex to capture in numbers since circumstances kept changing.
294 Maria for example, who became pregnant through a casual encounter, claimed that 'For
295 nine months he went missing in terms of giving any emotional support. He needed time
296 to digest things and reach his own conclusions.' They were now living together as a
297 family and in 2015 are expecting their second child. Katia's partner, on the other hand,
298 who provided intense support during the pregnancy and birth in 2007 and first four
299 years of their daughter's life, began a relationship with another Cape Verdean woman
300 and Katia eventually returned alone to Cape Verde with her daughter in 2013 without
301 completing her studies.

302 The following sections address the issues of abortion, gender and empowerment
303 through an analysis of extracts from the interviews conducted.

304

305 The Issue of Abortion

306 Whilst religious/moral values were important for some women, they were drawn
307 upon selectively in the women's decision making processes and could not be separated

308 from other issues, the most influential of which was their kinship relations. Abortion
309 was not an individual decision.

310 Nineteen-year-old Jasmine, a vocational college student, attempted to abort
311 before 2007. The father of the baby, also a vocational college student, was working in
312 France at the time, staying with family during the holidays. Her account below
313 demonstrates how she altered her intentions in accordance with changing circumstances:

314 I didn't want to have the baby, I wasn't ready and the father didn't want it either.
315 So I decided to have an abortion; only abortion wasn't legal then. I bought a pill
316 from the Angolans, it cost me fifty Euros. I went with a friend. We tried; hers
317 came out and mine didn't ... I was in a lot of pain. When I went to the hospital
318 they asked me why I wanted to abort and then they said I should have the baby
319 and then I could give it up for adoption. I thought, "If I had managed to ...
320 continue with the pregnancy ... I wasn't going to inform God that I let the child go
321 after nine months in my tummy. I wasn't going to give it away to someone else. I
322 would look after my child". Then I had an ultrasound scan and they told me it was
323 a boy ... it was always my dream to have a boy – everything changed.

324 Jasmine's moral reasoning indicates how abortion was more acceptable to her
325 than giving up the baby for adoption. Several mothers exclaimed that 'it was not the
326 baby's fault' that they had become pregnant. The two mothers, who claimed to have
327 been put under pressure to abort by college staff, after the 2007 legalization in Portugal,
328 consulted their mothers and one also made reference to her religious values. Yet, as
329 shall become apparent below, the embodied experience of suspected pregnancy could
330 also change religious or moral attitudes towards abortion. In another case, it was the
331 student's own mother who put pressure on her to abort. The student mother claimed

332 their relationship was never the same since. This contrasts with the experience of
333 Jasmine whose mother transformed the news into a welcome act of kinship-making that
334 contributed to the family tree:

335 She told me not to cry because it was a most natural thing to happen at my age.
336 My mother started earlier, she became pregnant at sixteen ... she only had three
337 children. Diogo was the extra son she always wanted to have.

338 The importance of the family as ‘a site of belonging’ (Chamberlain and
339 Leydesdorff, 2004:233) and the discovery of the foetus’ sex as determining factors are
340 elucidated in the case of Elsa, a twenty-year-old university student mother of two
341 children:

342 When Luís broke the news of to his mother [resident in Lisbon], she told us to
343 keep the baby because it was her first grandchild and she had lost her husband not
344 so long ago ... my mother [resident in Cape Verde] wanted me to keep the baby
345 and she said if I couldn’t ... then I could send it to her. My mother doesn’t have
346 any more children, just me ... Then when I was four months pregnant, Luis knew,
347 but he was a bit annoyed, because he didn’t want [another baby], “No, I’ve
348 already got one, it is not possible and with college as well it is difficult” [he was
349 studying and working part time]. I knew it was difficult, but even so I was
350 stubborn and said “no, I want to keep my baby because I am sure it is a girl”.

351 Elsa’s account challenges traditional Cape Verdean gender relations that are
352 governed by performances of hegemonic masculinity (Connell, 1995), in which men
353 assert their authority over women. It contrasts with the following claim, made by a male
354 student: ‘At the beginning, I thought it was not possible, with me as a student, but then,
355 when I found out it was a girl; it was me who decided that we would keep the baby.’

356 The influence of the sex of the foetus on the decision to abort or not testifies to the
357 importance of gender identifications in Cape Verdean society. The significance
358 attributed to gender was also corroborated in the claims made by two couples that the
359 parent who shared the same sex as the newborn baby would be the one to choose the
360 name.

361 Gender Issues

362 Fear of informing parents of their pregnancies constituted a common experience
363 for the women. The men's positions were easier since they were all supported by their
364 parents. João, a vocational college student told me that his parents reacted well and he
365 added that men's parents always react better. 'Of course,' replied Idalina his partner,
366 'because the responsibility falls upon the mother; if the father decides to go away then
367 she is left with the baby'. This reflects the experience of Jasmine whose partner arrived
368 back in Porto at the end of the summer to discover that she had not had an abortion.
369 Like the women, he too expressed concern regarding the reaction of his family:

370 When he saw me I already had a large tummy. He couldn't believe his eyes
371 because he thought I had had an abortion ... Then he said it wasn't his child. I said
372 we would prove that it was. That is when the fighting started. He said he couldn't
373 accept the child because his parents had separated and were helping him to study.
374 I told him my family may have been happy in part, but it wasn't what they wanted
375 for me either. Just as it hurts his family, it also hurts my family too, but that
376 doesn't mean he should run away from his responsibilities. And so that was when
377 he disappeared ... and I had the baby.

378 The situation of unexpected pregnancy precipitated the end of their relationship.
379 Conjugal relations in Cape Verde are far less stable than mother – child relations and

380 this is reflected in the way women usually refer to their partners as ‘father of child’ (*pai*
381 *di fidju*). The refusal to assume paternal responsibility with accusations of infidelity
382 could also intersect with racism³.

383 Linda, the twenty-one-year-old vocational college student referred to above, had
384 left Cape Verde on 28 September 2009, unknowingly pregnant, to study accountancy in
385 a vocational college in Porto. She complained, while we waited for an antenatal
386 appointment, that the baby’s father (aged forty-two) had stated that if the baby were
387 born black or born in May, then it could not be his son. Once the baby was born, she
388 would have to do a DNA test before registering the baby in his name. Linda stated she
389 would not do the test because she had no doubts. Linda explained that her partner was
390 nearly white: ‘He has Portuguese nationality. His father is from Portugal, his mother
391 from Cape Verde. He is more Portuguese than Cape Verdean’. ‘He is ignoring the
392 month of September in his calculations,’ she added. ‘When he said this I cried and cried
393 and cried. He has hurt me. He has no respect.’

394 Gender relations in Cape Verde are nonetheless changing as women’s increased
395 access to economic and educational opportunities also increases their negotiation power
396 (Massart, 2013). When I asked João and Idalina about this, João said men used to have
397 lots of women and now women would not accept this and Idalina commented that
398 women want their independence, they want to work too. Yet, as the following section
399 illustrates, the women’s sense of empowerment cannot be read from a detached analysis
400 of their circumstances.

401 Experiencing Empowerment

³ For a discussion of issues of race in Cape Verde see (Meintel 1984) and for Cape Verdean students in Portugal see (XXXXXXX 2012c).

402 Mothers expressed surprise, not only at their ability to cope but also, at how their
403 lives had been changed for the better, even though in some cases they had abandoned
404 their studies. A nineteen-year-old student, for example, who gave up her university
405 course after she became pregnant, claiming that she had never really liked it, moved in
406 with her twenty-four-year-old boyfriend who had finished his course and had started
407 working. Her father refused to talk to her and stopped sending money:

408 At first, I felt insecure. Am I ready for this? Will I be able to rise to the occasion?
409 I was full of fear. Now, a thousand wonders! I don't feel it was a mistake and I
410 don't feel limited.

411 Jasmine claimed that rather than interfering with her studies, becoming a mother
412 had turned her into a more conscientious student:

413 My life was worse, it wasn't better, as it is now. When I didn't have a child, my
414 life was just college, clubbing, and those kinds of things. Before, I didn't go to
415 college, I didn't care about exams. But afterwards, I thought more about me and
416 about my child. I studied more and my professors commented to me that I had
417 changed for the better, that I was more mature.

418 The women who felt empowered, tended to live with and/or have supportive
419 partners, or, as in the cases of Elsa and Jasmine, to have an extended network of female
420 friends who helped them with their mothering, such as by baby sitting, so that they
421 could attend classes. Some students also mentioned the help they had received from
422 vocational college and university staff, social workers, nannies and highlighted the
423 importance of the financial assistance in maternity and other benefits from the
424 Portuguese state. Other students stressed the hardship and isolation they experienced
425 when mothering without extended family support. One mother told me she missed lots

426 of classes because her baby was constantly sent home from the nursery ill and she kept
427 crying down the phone to her own mother in Cape Verde who eventually came to fetch
428 the baby.

429 Sending babies back to be cared for by grandmothers or other carers was a
430 socially acceptable practice in the same way as emigrating and leaving children behind,
431 in order to increase children's access to economic welfare, is valued in Cape Verde
432 (Akesson, 2004:124). Leaving babies with family in Cape Verde was also a means of
433 preserving the women's newfound autonomy in Portugal. A mother whose twins, born
434 in Portugal, were cared for by her mother in Cape Verde, chose not to return at the end
435 of her course and was living in a friend's flat unemployed and looking for work in
436 Lisbon. She confided to me that she could no longer live under the controlling eye of
437 her father. Fortes (2011) reports similar findings of increased autonomy amidst Cape
438 Verdean university students in Lisbon.

439 **The Embodied Experience of Suspected Pregnancy**

440 Religious/moral issues, kinship and gender relations all exerted an influence
441 upon the women's decision making processes, producing both constraints and
442 enablements in different contexts and moments of time. Conducting interviews provided
443 a window into the nature of the mothers' 'inner conversations', engaging them in a
444 dialogue that reflected with hindsight upon their lives. The case discussed below
445 provided a rare opportunity to share in the spontaneous twists and turns of a young
446 woman's 'inner conversation' in response to suspected pregnancy and to the imagined
447 reactions of family and acquaintances. Her words elucidate how the issues discussed
448 above all come together to bear on the women's decision-making processes. The case
449 also demonstrates how the 'inner conversation' is influenced by an individual's real and
450 imagined interactions with others (Mead, 1934) and provides a good example of the

451 nature of the ‘body-self dialogue’ that develops in response to unexpected pregnancy
452 (Marck, 1994:99).

453 After accompanying Sara, an expectant mother, to a doctor’s appointment, we
454 returned to her flat in Porto. There was a frantic knocking at the door. Sara disappeared
455 and came back with a young woman, Ana, who followed her into the kitchen talking
456 enthusiastically. Upon seeing me, she stopped talking. We were introduced to each
457 other and, speaking in Portuguese, discovered that we had a mutual acquaintance:
458 another Cape Verdean mother who studied in Ana’s college. I joked that maybe one day
459 Ana would enter my study. She laughed loudly and said no, she couldn’t afford to be
460 pregnant! After discovering that I spoke Creole⁴, she opened herself up totally,
461 revealing she suspected she may actually be pregnant. Ana spoke loudly, passionately,
462 giving out cries, grasping my hands, my arm, laughing and then looking deadly serious.
463 Our words were not recorded, but since both women knew I was conducting research, I
464 openly scribbled down what I could.

465 The constant oscillating between rejecting and accepting the consequences of
466 Ana’s suspected pregnancy provides an ethnographic example of how structures are
467 reflexively mediated, through the ongoing evaluation and comparison of conflicting
468 subjective concerns. This process takes place in social interaction with real and
469 imaginary others. Whilst Ana weighed up the pros and cons, it was not society that
470 spoke through Ana – that would be determinism - but rather her ‘inner conversation’
471 that spoke *about* society (Archer, 2003:119):

472 I can’t afford to have a baby, I’m a student. I’m poor. To have a child I have to
473 give it everything. Imagine my child asking me to buy this and that and me not

⁴ Although Portuguese is the official language in Cape Verde, Creole is spoken in everyday social interactions.

474 being able to afford it! I'm desperate ... I'm going to have an abortion ... I'm
475 against abortion. I told a friend of mine who became pregnant in Lisbon that if
476 she had an abortion, I wouldn't speak to her again. I said "If you have one, you
477 can forget it because you are killing an innocent being". Now look; I am
478 thinking of having one. I am ashamed to talk to her.

479 Ana mentioned the memory of witnessing the end result of her cousin's abortion
480 practised at home in Cape Verde, which affected her profoundly. This was one of the
481 reasons, she told us, that she was against abortion. Yet, her fears of being unable to
482 correspond to Cape Verdean norms regarding a 'good' mother made her consider
483 abortion. The tension between Ana's moral values with regard to abortion and her fear
484 of taking on the responsibilities of motherhood surfaced through social interaction, not
485 only in conversation with Sara - who told her she should take responsibility for her
486 actions - but also in imagined dialogue with her family and with imagined others, whose
487 responses she began to anticipate:

488 If I have the baby my grandmother will die, my parents will separate. I'm a
489 catechist; everybody is going to talk about me. They help me in the Church. The
490 landlady is a very religious person, what will she say? No-body will believe it. My
491 father didn't want me to come and study because he said "You mustn't go because
492 you will become pregnant; that is what happens because you have no one to guide
493 you". My mum said "No she won't do that. She is sensible". I told my mother I
494 would finish my course first and then come back to Cape Verde with a baby and
495 my studies completed at the age of twenty-five.

496 Ana's exaggerated claim that family members would separate or die to hear the
497 news of her pregnancy illustrates how important Ana's family was for her self-identity

498 and sense of belonging. Her account may be seen as a 'borrowed story' (Warren, 1990)
499 from her local cultural context where girls are expected to complete studies before
500 transitioning to motherhood:

501 We often see that these are, in fact, borrowed stories when we become
502 disillusioned with them; we find the story, along with its associated demands,
503 coercions ... and rewards, so constraining that we see that the lives that we
504 actually lead do not fit neatly with the roles through which we have defined our
505 self-identity. Only during such times of disorientation, even crisis, do we see the
506 extent to which our identities depend on the narratives others impose on us
507 (Warren, 1990:622).

508 It is significant how the thought of her own mother giving birth to her provided
509 Ana with a new trigger to reject abortion once more and to reproduce the traditional
510 gendered expectation that she alone would take responsibility for the baby:

511 I'm desperate. I'm going to have an abortion ... If I am pregnant I have already
512 lost my mother, I have already lost my father; I can't have this child, no ... If my
513 mother had had an abortion, I wouldn't be here now ... I love babies, holding
514 them in my arms, looking after them ... If I do keep the baby ... I will look after it
515 on my own. Its father ... he is no good for this. He is eighteen-years-old. He is
516 very childish. He won't accept it; his head is not ready for this. He likes his music,
517 his things.

518 The father of the baby was reduced to a foil to contrast with Ana's maturity and
519 capabilities. Yet, the suspicion of pregnancy also caused a questioning of self. Various

520 times throughout our conversation Ana asked: ‘Me, with a baby? Who/What am I⁵?’ In
521 her research on unexpected pregnancy, Marck (1994:99) talks of the transition from ‘a
522 daily communion between self and body that is understood and taken for granted to a
523 changing dialogue that is full of unknown possibilities between self and other.’

524 **Conclusion**

525 The experiences of unexpected pregnancy discussed in this article constituted
526 periods of transition, heightened reflexivity and decision-making, further intensified by
527 living away from home for the first time, when everything – self, body, society – was
528 called into question. My analysis of the women’s dialogues about self and the world
529 elucidate how the experience of unexpected pregnancy may result in both a
530 strengthening and a threat to the self (Marck, 1994). They also provide a window into
531 the women’s agency. Yet, agency is not a form of individualistic freedom. Abortion was
532 not an individual decision and empowerment was not a solitary achievement. The
533 dialogues reveal how the woman’s subjectivity was located within the influences of
534 wider structures. Their ‘inner conversations’ were not a looking inwards, but rather a
535 looking outwards into the world. Their maternal identity was affected in particular by
536 the norms and expectations embedded in kinship and gender relations, which included
537 ideas regarding the appropriate sequencing of the women’s life stages. Age, in this
538 respect, was less important than completing studies since the main responsibility for
539 childcare fell upon the women.

540 The data illustrates how the women’s sense of empowerment cannot be
541 adequately captured from an analysis of their external circumstances alone, since the

⁵ Ami ku bebé? Ami é kuzé? ‘Kuzé’ translates literally into ‘what’ which implies Ana experienced potential pregnancy as a sense of alienation ‘a state of physical awareness that estranges a woman from herself’ (Marck 1994:97).

542 meanings that they attributed to their transition to motherhood can only be understood
543 through intimate engagement. These meanings – which were also subject to change –
544 ranged from shame, self reproach, doubt and inadequacy to taking pride in their
545 maternal identity and mothering practices as evidence of increased maturity and
546 autonomy and of valued kinship making.

547 The women’s experiences of empowerment are relative and contingent upon
548 support from others. Parents and partners both gave and withdrew support according to
549 changing circumstances. Separation from family and local communities was also
550 experienced as both enabling (more autonomy) and constraining (lack of support in
551 childcare). Relevant here is the point made by Gedalof (2009:88) that the ‘question is
552 not only how migrant mothers are constrained by pre-existing structures in their agency,
553 but also, how can we understand both structures and agents of belonging as messy and
554 dynamic entanglements of constraint and enablement, being and becoming ...’ These
555 entanglements are evident in the narratives examined in this article which has focused
556 primarily on the processes of becoming, rather than being, a mother within the context
557 of migration. The data elucidates the influence of gender identifications in the decisions
558 to abort or not as well as the tensions that arise as gender norms are drawn upon and
559 challenged. It also draws attention to the central role that grandmothers play in the
560 women’s decision-making processes, especially in relation to abortion.

561 In the literature on transnational mothering the main focus on grandmothers has
562 been on their role as carers of minor-age grandchildren left behind. This article
563 highlights the significance of a less researched phenomenon: the long-distance
564 mothering that continues into the adult lives of migrant children when they themselves
565 become mothers. More research is needed on these chains of mothering across
566 generations within mobile life worlds.

567

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577

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