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**A critical discussion upon the relationship between the Psychoanalytical perspective of developmental psychology and its adaptation to educating teenage mothers**

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**Abstract**

This paper will critically explore elements of the psychoanalytic paradigm of developmental psychology in relation to the professional practice of working with teenage mothers in an educational setting.

Particular focus will be given to the psychosexual and psychosocial staged theories of development. The framework for this critical analysis will examine each stage of psychosexual and psychosocial theory in relation to teenage motherhood. These perspectives have been specifically chosen due to the explicit links between staged childhood experience and adult behaviour in relation to sexual and social aspects of development, both aspects having fundamental links to teenage parenthood.

Four case study examples are used to demonstrate how psychoanalytical theory may relate to this cohort. These are taken from my past professional work as a teenage parent programme lead. The examples are given to shed light on the impact of each psychosocial and psychosexual stage of development.

This article concludes that whilst both the psychosocial and psychosexual models of development are useful in giving educators a perspective into behaviours that are displayed in adolescence, they are but one of many perspectives that should be taken into account when working with this cohort.

**Keywords**

Teenage pregnancy; teenage parents; Freud; Erikson; risky sexual behaviour, psychosocial, psychosexual.

**Introduction**

This paper will discuss the psychosexual and psychosocial theories of development as a viewpoint when working with teenage mothers. Whilst I acknowledge that the theories have some flaws, it is hoped that this paper demonstrates that behaviour and its manifestations may have many influencing factors. This paper hopes to demonstrate to educators that work with this cohort in an educational setting is complex and many avenues, perspectives and approaches need to be considered.

Many theories within developmental psychology are centred around the debate of whether development is innate or is determined by outside factors (Woolfe, 1998). This was influenced, according to Gianoutsos (2006) and Morris (1996), by the work of 18th century philosophers Locke and Rousseau. Locke asserted that a child was a 'blank slate' in which development is influenced by environment. In opposition to this, Rousseau proposed that a child is born 'inherently good' with

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pre-determined stages of development. It is this basis which formed the 'nature versus nurture' debate. This debate can be linked directly to the professional practice of working with teenage parents (DeJong, 2003; Dean, Ducey and Malik, 1998; Andrews and Brewin, 2000). Teenage sexuality from a 'nature' perspective recognises that sexual urges to reproduce at this stage in development are a natural part of human progression (Phoenix, 1991; Arai, 2009; Moore and Rosenthal, 1993). From a 'nurture' perspective, teenage sexuality and reproduction is viewed as nurture based, and in view of the psychoanalytic paradigm, closely related to childhood experiences (Freud, 1905; Erikson, 1963 and 1993).

Freud is acknowledged as the founder of psychoanalytic theory. In the late 19th century Freud proposed the concept of psychosexual development, based upon staged development from childhood to adulthood. Successful completion, Freud asserted, is dependent upon the correct amount of gratification given at each stage. If over, or under, stimulation is received at one of the stages then 'fixations' upon the stage can occur and become repressed in the unconscious, becoming apparent in behaviours displayed in later years. Linking into psychosexual development, Freud also proposed the division of the human psyche into three components: the Id, the ego and the super ego. It is the ego that restrains the Id's urges, by satisfying primal impulses by socially acceptable means. The super-ego operates as the moral and ethical component of the psyche and is often referred to as the 'conscience', regulating the ego via feelings of guilt and moral awareness (Freud, 1905; Garcia, 1995). Freud also introduced the concept of transference, where the influences and experiences of childhood, and the feelings they created, are unconsciously redirected and 'projected' upon individuals in later years. Kapelovitz describes transference as:

The inappropriate repetition in the present of a relationship that was important in person's childhood.

(Kapelovitz, 1987:66)

Reality is distorted in transference by the unconscious which is influenced by past experiences and future aspirations (Plaut, 2005; Jung, 1981). Despite their widespread influence, Freud's theories have come under much criticism.

Freud's theoretical work was based upon limited case studies, dependent upon the interpretations of both Freud and his patients. Criticisms of his generalisations to a universal theory based upon this double hermeneutic, raise validity concerns (Eysenck, 2004). Freud's methodologies appear to lack scientific and empirical rigour and positivistic nature which is required to make generalisations. Eysenck highlights this stating that: '...the points [Freud] makes must be judged in terms of their factual relevance and logical consistency' (Eysenck, 2004, p.12).

Freudian theory also appears to be based upon Victorian gender ideologies that were apparent at the time of his writings, Slipp reflects this view stating:

Freud's views on female psychology were erroneous because they...reflected and perpetuated the Victorian bias against women.

(Slipp, 1993:1).

It is this apparent gender bias that has called Freud's theories into question when adapting them to contemporary culture. Many of Freud's concepts were based around the individual and how they are influenced in relation to gender and sexuality and did not acknowledge social influences on development.

Erikson built upon Freud's theory by introducing a social element to the ideas in psychosexual theory by means of an eight stage psychosocial Model (Erikson, 1963 and 1993). Psychosocial development has conflicts in each stage that need to be completed with balance, in chronological order, for individuals to reach full developmental potential. Erikson discusses the need for balance within each stage stating:

...What the child acquires at a given stage is a certain ratio between the positive and negative, which if the balance is toward the positive, will help him to meet later crises with a better chance for unimpaired total development...

(Erikson,1993:61)

Despite adding the social element to developmental theory the Psychosocial theory does come under criticism. Much of Erikson's work was based around males, therefore the application of the psychosocial theory to females as a generalisation to both genders appears to question validity (Friedan, 1963; Greer, 1970). Psychosocial theory incorporates perspectives from morality, philosophy and ethics, which are by nature subjective and ambiguous, making it adverse to rigorous testing and empirical measurement (Boa, 2004). It can also be argued that staged theories of this nature are too prescriptive, not acknowledging cultural and social variations (Curtis and Pettigrew, 2009).

Both the psychosexual and psychosocial theories incorporate the importance of adolescence, linking to experiences that teenage parents have around sexuality and identity. It is important, when viewing both theories in this context, to recognise the impact that the previous stages of development have upon teenage parenthood.

### **Research in the area**

This section will examine research in the area of teenage parents and education and critically discuss some of the findings in relation to working with teenage parents in an educational setting. An individualistic approach to the adolescent parent's needs, taking into account differentiation and the additional needs of parenthood, may help form positive teacher / student relationships. Knowledge of 'transference' and also 'counter transference', when past experiences of a teacher may impact upon the relationship, is also useful when examining differentiated learning and approaches, using reflection to examine projective behaviours (Jung, 1981; Curtis and Pettigrew, 2009). By positive achievement and raised feelings of self-worth a young parent may also gain raised aspiration for the future. Various research studies have shown that young parents view parenthood as a means to progress, rather than as an inhibitor, viewing education as a way to achieve progression (see Duncan, Edwards and Alldred, 2008; Duncan, 2007; Macvarish and Billings, 2008).

Macvarish and Billings (2008) conducted a qualitative study where the complex behaviours of thirty five teenage parents were examined through in-depth interviews, positive regard for education was found to have emerged as a direct link from parenthood. Part of The Millennium Cohort study (Hawkes, 2008) used the quantitative data of 2831 teenage parents to examine the impact of parenthood in adolescence. The study found that many of the young parents came from disadvantaged backgrounds, with pregnancy having no major impact upon the disadvantage already experienced (Hawkes, 2008). The study concludes that teenage parenthood alone is not a direct indicator for poor outcomes; it is social inequality and lack of opportunity which are the influencing factors in negative outcomes for adolescents (Hawkes, 2008).

A study from the Institute for Fiscal Studies found that negative life chances, as a direct result of teenage parenthood, are relatively small in relation to other factors such as socio-economic status

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(Daguerra, 2006). The Baltimore Study (1972), cited in Schofield (1994), was a longitudinal study carried out over 17 years, that found many teenage mothers 'stage a recovery' after pregnancy, with the only differences in educational and financial outcomes being sequential in life events and a renewed positivity towards employment and education.

**Links to teenage parenthood**

This paper will now go on to discuss how the psychosocial and psychosexual theories may give one of many perspectives of teenage parents and their behaviours (summarised in table 1). Case study examples, from my previous professional practice will be used to illustrate the points made.

**Table 1.** Table of psychosocial and psychosexual development in relation to teenage parents.

Age range	Stages of Psychosocial Development	Stages of Psychosexual Development	Traits associated with this stage	Links to teenage parenthood
Birth to 1	TRUST vs. MISTRUST	ORAL STAGE	Linked to social experiences and relationships with the main caregiver. If a balance is not achieved through lack of nurture this may manifest itself in teenage years. Pleasure gained from sucking and operating upon the 'pleasure principle' and is based around the immediate pleasure and gratification of impulsive drives.	If balance is unsuccessful then 'mistrust' can occur, manifesting in over dependant or aggressive behaviours in adolescence which are related to transference of 'mistrust' upon others. Individuals may be wary of others intentions and project a lack of trust for peers, partners and support workers. aggression and dependency may manifest itself within the parents' relationships with their children creating a perpetual cycle
1-3/4 years	AUTONOMY vs SHAME and DOUBT	ANAL STAGE	To gain balance, independence needs to be nurtured by the caregiver. This stage links to the anal stage, the second in the psychosexual model, where the focus is upon the control of bowel movements and the sense of independence gained from this. If bowel movements are not managed by the caregiver adequately this can impact upon personality in succeeding years. Negative traits may become transferred to adolescent relationships, projected via risky sexual behaviours	'Shame' may become apparent in adolescents' parenting styles, manifesting in a lack of adequate responsibility and erratic, defensive and over-zealous opinions about parenting. Destructive or obsessive behaviours relating to risky sexual behaviour may be apparent as a direct link from a lack of balance. These behaviours may also be exaggerated by the Id's impulsive behaviours resulting in destructive behaviour due to the under development of the ego.
3-6 years	INITIATIVE vs GUILT	PHALLIC STAGE	At this stage a caregiver should encourage and support a child to explore their environment and balance is achieved through feelings of accomplishment. If balance is not achieved, impacts of this may manifest themselves in adolescence as unmotivated behaviours towards education and passivity in risky sexual relationships. Within the phallic stage the Oedipus complex emerges, with males fearing emasculation by their father as a result of desire for their mother. The feminine oedipal attitude also emerges with females assuming castration by their mother as a result	Teenage parent behaviours as a result of 'guilt' may be apparent in a lack of future planning, empathy, motivation and insensitivity to the needs of a baby. If an adequate relationship with the same sex parent is not achieved this can impact upon transference behaviours displayed in adolescence, projecting past fears of rejection upon relationships possibly resulting in risky sexual behaviour

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			of desire for their father. This results in both sexes identifying with the same sex parent, influencing development of the super-ego.	
6-onset of puberty	INDUSTRY vs INFERIORITY	LATENCY STAGE	Related to self-perception in comparison to peers. Failure to achieve the same status of peers can cause imbalance, resulting in low self-esteem and poor self-concept. Many factors depend upon peer rejection and acceptance, which are based within social, emotional and cultural norms. If these factors do not fit within the majority then peer rejection might ensue, resulting in feelings of 'inferiority' becoming dominant. Within psychosexual development this stage links directly to the 'latent stage', in which sexually related motivations lie dormant due to the need to fit, and adjust, to societal norms, reinforcing the importance of identifying with peers.	If 'industry' is not achieved within 'latency' then this can generate feelings of incompetence and hopelessness within adolescence. This may result in a desire for self-worth potentially manifesting itself in pregnancy and parenthood
12-20 years	IDENTITY vs CONFUSION	GENITAL STAGE	Relates to the emergence and examination of self and personal identity in relation to experiences in the earlier stages. If negative outcomes occurred in previous stages 'Identity' could be compromised. Genital stage relates to individuals developing sexuality and seeking out sexual partners	If positive identity, through successful completion of the previous stage, is not achieved then relationships in the Genital Stage may become detrimental to the individual, resulting in risky sexual behaviours

The first stage of the psychosocial theory occurs from 0-1 years where 'trust vs. mistrust' are in conflict. These are linked to social experiences and relationships with the main caregiver. If a balance is not achieved through lack of nurture this may manifest itself in teenage years (DeJong, 2003; Young, Dearthoff, Ozer, and Lahiff, 2011). The first stage in psychosexual development also occurs at this point, referred to as the oral stage, where pleasure and trust is gained from sucking. This is linked to the 'Id', which is inherent from birth, operating upon the 'pleasure principle' and is based around the immediate pleasure and gratification of impulsive drives (Freud, 1905; Garcia, 1995). If balance is unsuccessful then 'mistrust' can occur, manifesting in over dependant or aggressive behaviours in adolescence which are related to transference of 'mistrust' upon others. Individuals may be wary of others intentions and project a lack of trust for peers, partners and support workers. (DeJong, 2003; Andrews and Brewin, 2000). In the professional context of working with teenage parents mistrust, aggression and dependency may manifest itself within the parents' relationships with their children creating a perpetual cycle (DeJong, 2003; Dean et al, 1998). As an illustration of this I present Case study 1, a young woman with whom I worked for a number of months in an educational setting:

Case study 1  
 Student 'A', a fifteen year old female with a child aged six months, displayed aggression towards support workers, over dependence upon her partner and a lack of attention to her child. 'A' was in the care system from age six months due to parental neglect.

When taking the psychosocial and psychosexual perspectives 'A's' behaviours may be linked to a lack of balance achieved at the first stage in psychosocial development, and due to neglect between 0-1 years old 'trust' and 'pleasure' was not gained from the nature of the feeding relationship, manifesting in behaviours in later years. Viewing teenage parents from this psychoanalytical perspective alone can be too focused upon the impacts that oral gratification and nurture, in this timeframe, has upon teenage parents and their offspring. Appearing dismissive of other factors such as cognitive development and eco-systemic influences of the succeeding years (Moore and Rosenthal, 1993; Curtis and Pettigrew, 2009; Freud, 1905).

The second stage of Erikson's model refers to 'autonomy versus shame', occurring in early childhood, and is linked to social reactions to events in which the individual has an element of control. To gain balance, independence needs to be nurtured by the caregiver. This stage links to the anal stage, the second in the psychosexual model, where the focus is upon the control of bowel movements and the sense of independence gained from this (Freud, 1905). If bowel movements are not managed by the caregiver adequately this can impact upon personality in succeeding years. Negative traits may become transferred to adolescent relationships, projected via risky sexual behaviours (DeJong, 2003; Erikson, 1963 and 1993). 'Shame' may become apparent in adolescents' parenting styles, manifesting in a lack of adequate responsibility and erratic, defensive and over-zealous opinions about parenting (DeJong, 2003). Destructive or obsessive behaviours relating to risky sexual behaviour may be apparent as a direct link from a lack of balance (Adams, Slater and Muir, 2000; Andrews and Brewin, 2000). These behaviours may also be exaggerated by the Id's impulsive behaviours resulting in destructive behaviour due to the under development of the ego (Boa, 2004; Garcia, 1995).

Parents displaying domineering personalities may influence this stage, resulting in feelings of 'shame' (DeJong, 2003). Case study 2 illustrates how this may impact upon behaviour, again, this was a student of mine in an educational setting:

#### **Case study 2**

Student 'B', a sixteen year old female with a one year old child, had many sexual partners making it difficult to identify the child's biological father. This display of a lack of self-discipline and risky sexual behaviours may have stemmed from 'B's' own authoritarian parents. 'B' had strict parents and was not praised for achievements, influencing this stage of development within the psychosocial and psychosexual models. 'B' appeared to lack self-esteem and adaptability which are useful to successful parenting. 'B' was excluded from school aged 14.

It may be suggested, in B's case, that from a psychoanalytical perspective this may be linked to the under development of the ego, displaying the impulsivity of the 'Id' (Freud, 1905). Dean (1998) discusses the influence that parenting can have upon the identity of the adolescent, stating that caregiver-child relationships act as templates for interpretations of the world. For teenage parents these influences may impact upon parenting styles, with the adolescent displaying the same behaviours to their offspring as their parents did to them. Whilst it is apparent that parenting styles may influence how children eventually parent, this is not prescriptive, and varies dependent upon outside influences and the resilience and emotional intelligence of an individual (Goleman, 1996; Lewis, 1999; Garcia, 1995; Hoffman and Maynard, 2008).

In pre-school years, the third stage of psychosocial theory, 'initiative versus guilt' are in conflict. It is at this developmental point where a caregiver should encourage and support a child to explore their environment and balance is achieved through feelings of accomplishment (DeJong, 2003). If balance

is not achieved, impacts of this may manifest themselves in adolescence as unmotivated behaviours towards education and passivity in risky sexual relationships (Erikson, 1963 and 1993; Arai, 2009). Teenage parent behaviours as a result of 'guilt' may be apparent in a lack of future planning, empathy, motivation and insensitivity to the needs of a baby (Dean et al, 1998). This stage also relates to the third stage in psychosexual development, the phallic stage. Within the phallic stage the oedipus complex emerges, with males fearing emasculation by their father as a result of desire for their mother. The feminine oedipal attitude also emerges with females assuming castration by their mother as a result of desire for their father. This results in both sexes identifying with the same sex parent and adopting their values and actions, in an effort to gain their acceptance, influencing the development of the super-ego (Freud, 1905; Garcia, 1995; Dean et al, 1998). If an adequate relationship with the same sex parent is not achieved this can impact upon transference behaviours displayed in adolescence, projecting past fears of rejection upon relationships possibly resulting in risky sexual behaviour (Freud, 1905; Garcia, 1995).

Many feminist critiques of the phallic stage have been made since its introduction; Horney (1994) challenged Freud's views that these were representative of women's envy of male dominated society rather than acceptance of castration. Within feminist critique Freud's ideas were seen to be representative of misogynistic repression, creating images of the passivity and inadequacy of women (Friedan, 1963; Greer, 1970; Slipp, 1993).

Robinson reflects this view stating:

The theory condemned women to perpetual inferiority (because "anatomy is destiny"), representing them as castrated males whose lives were dominated by efforts to compensate for this fundamental defect.

(Robinson, 1993:13).

Criticisms of the psychosexual theory also incorporate the positivistic nature of research that precedes generalisations. Horney (1994) questioned Freud's methodology stating his premise was based upon the recall of 'neurotic' patients rather than controlled empirical research. This lack of empirical rigour appears subjective and prescriptive, when considering risky sexual behaviour and pregnancy in adolescence. This view would make no acknowledgement of the eco-systemic and contextual influences that also impact upon early sexual debut (Eysenck, 2004; Dean, 1998; Andrews and Brewin, 2000).

In the fourth stage of psychosocial theory 'industry vs. inferiority' are in conflict. This takes place within the school years and can be related to self-perception in comparison to peers (Erikson, 1963 and 1993). Failure to achieve the same status and outcomes of peers can cause imbalance, resulting in low self-esteem and poor self-concept (DeJong, 2003). Many factors depend upon peer rejection and acceptance, which are based within social, emotional and cultural norms (Curtis and Pettigrew, 2009; Adams et al, 2000). If these factors do not fit within the majority then peer rejection might ensue, resulting in feelings of 'inferiority' becoming dominant (Freud, 1905; Dean et al, 1998). Within psychosexual development this stage links directly to the 'latent stage', in which sexually related motivations lie dormant due to the need to fit, and adjust, to societal norms, reinforcing the importance of identifying with peers (Freud, 1905; Garcia, 1995). If 'industry' is not achieved within 'latency' then this can generate feelings of incompetence and hopelessness within adolescence. This may result in a desire for self-worth potentially manifesting itself in pregnancy and parenthood (Musick, 1993). Case study 3, a young woman who I worked with for a number of months, below illustrates how this stage may relate to behaviour:



**Case study 3**

Student 'C' was raped at 13, and as a result was disbelieved and rejected by peers, as this occurred within the latency, 'industry vs. inferiority' stages, when acceptance by peers is crucial to psychological development, a negative impact on self-esteem and self-image ensued. 'C' went on to have 3 children by age 18.

Within the psychosexual and psychosocial models, it may be supposed that 'C' gained bodily worth and psychological inclusion from pregnancy. 'C's situation cannot be assessed by stage development alone and account needs to be taken of the impacts that rape and subsequent sexual behaviour has within individual and cultural contexts. Poor self-concept at this stage may not only be related to peers in this bracketed age group but to historical, eco-systemic influences, taking into account individual emotional intelligence and resilience that form perceptions of self (Ashley, Jackson, Davies, 2008; Boyer and Fine, 1992; Berenson, San Miguel, Wilkinson, 1992; Boyer and Fine, 1992; Roosa, Tein, Reinholtz, and Angelini; 1997; DeJong, 2003)

The fifth stage in Erikson's developmental model, 'identity vs. role confusion', occurs between 12-20 years old and relates to the emergence and examination of self and personal identity in relation to experiences in the earlier stages. If negative outcomes occurred in previous stages 'Identity' could be compromised (Erikson, 1963 and 1993). The genital Stage of the psychosexual model also begins in adolescence, with individuals developing sexuality and seeking out sexual partners. Garcia refers to the Genital Stage as a:

...self-directed synthesis of the creative sexual instincts into meaningful, self-enhancing, and societally contributing adult life endeavours

(Garcia, 1998:500).

If positive identity, through successful completion of the previous stage, is not achieved then relationships in the Genital Stage may become detrimental to the individual, resulting in risky sexual behaviours (Dean et al, 1998).

A quantitative study conducted by Musick (1993), found profound differences in the outlooks of teenage parents whose experiences in the previous stages of psychosocial and psychosexual development had negative outcomes. Musick's study found that adolescents who had positive outcomes were, at this stage, focused upon future prospects within employment and education. Adolescents who had negative experiences were questioning identity and searching for the means to raise their self-esteem and self-worth (Levison, 1986). Parenthood is often seen as the answer, meeting the need for worth and identity consciously and unconsciously, with risky sexual behaviours as a result of the negative staged outcomes prior to adolescence (Dean et al, 1998). The effect of this upon parenting in adolescence can be detrimental to both the adolescent and their child, as the adolescent may focus upon rectifying the negatives of past stages whilst the socialisation of adolescence is neglected (DeJong, 2003).

The genital stage is one that continues into adulthood and is resultant from experiences at the preceding stages. Anna Freud (1936) when discussing adolescence refers to this period in development as an important element in personality formation, with a focus upon the Id, super-ego and ego (Solnit, 1997). Freud (1936) states that adolescence is a time when the libido is triggered by the sexual physiological changes. These disturb the psychological balance of the latent stage resulting in inner conflicts between the Id, ego and super-ego when attempting to regain the balance of latency (Muuss, 1975). An example of this stage may be perceived in Case study 4, a young woman with whom I worked sporadically over a number of years:

**Case study 4**

Student 'D', a seventeen year old female with two children, consciously planned her children and had many sexual partners. Student 'D' had an erratic upbringing and throughout all of the previous stages and it may appear that balance was not achieved.

In the case of student 'D', from the psychosocial and psychosexual perspectives, it can be supposed, that the impulsivity of the Id may have over-ridden the constraints of the ego resulting in risky sexual behaviour driven by instinctive, primal urges, rather than socially acceptable behaviours. This 'override' may be as a result of improper progress through the previous stages of the psychosexual model with stunted development of the super-ego within the latent stage. This lack of progress may result from trust in the Id's impulses and the lack of ability to grasp abstract ideas and concepts, instead focusing upon concrete libidinal urges (Solnit, 1997; Midgley, 2012; Freud, 1905).

Jung (1981) disputed the existence of a purely biological unconscious, theorising that the human psyche is made up of components, from a variation of sources, incorporating the 'collective consciousness' of societal norms and morality (Jung, 1981). Foucault also rejected the supposition of unconscious drives:

It is a matter of pointing out on what kinds of assumptions, what kinds of familiar, unchallenged, unconsidered modes of thought the practices that we accept rest.  
(Foucault, 1988:155).

The assumptions that Foucault refers to relate to individuals that differ from expected developmental norms; and the familiar, unchallenged, unconsidered modes of thought refer to cultural ideologies upon which the unconscious drives are said to be based (Whitebook, 1999). In the case of teenage parents this would be evident in the assumptions that pregnancy in adolescence results from concrete libidinal drives, and the lack of abstract reason; implying developmental problems within prescribed stages, putting the 'problem' firmly within the individual due to their past experiences, neglecting other influences impacting upon societal perceptions of pregnancy in adolescence (Travell, 1999; Smith, 2006; Whitebook, 1999).

Whilst the final stage in the psychosexual model begins at adolescence, psychosocial development has three further stages; 'intimacy vs. isolation', 'generativity vs. stagnation' and 'ego Integrity vs. despair'. The support a teacher can give for the next stage of 'intimacy vs. isolation', which relates to ages 20-24 and examines individual relationships, can impact positively on the outcome of this stage, possibly combating the inferiority experienced through education in the fourth stage of development (DeJong, 2003; Young et al, 2011). A teacher displaying respect, consistency, sensitivity and acceptance in their approach to teenage parents is demonstrating positive relationship values, which, in turn, may become embedded in adolescent values (Curtis and Pettigrew, 2009). Relationships with teachers may become an effective positive tool which aids the learning process taking place, as individuals are more likely to learn when they feel at ease and comfortable in the learning environment (Noltemeyer, Bush, Patton, Bergen, 2012).

**The implication for educators**

It is this renewed vigour for education that can be addressed within the educational establishment, by the positive support of the teacher, enhancing an adolescent's potential to contribute to society (Duncan, Edwards and Alldred, 2008; Duncan, 2007). This takes into account the 'generativity versus stagnation' stage of future development within the psychosocial model, with achievement gained within adolescence impacting upon the outcome of this conflict. As is similar with all teaching, empowering teenage parents within the learning environment by giving them ownership for

sessions and involvement in personal goal setting will give elements of control in potentially chaotic lifestyles, enhancing self-worth and self-esteem (Pheonix, 1991; Arai, 2009; Duncan, et al, 2008). Feelings of control foster responsibility and motivation, which impacts positively upon the development of autonomous initiatives which are contributing factors in successful parenting (Duncan et al, 2008; Schofield, 1994). Recognition of goals that have been achieved has an important role in promoting 'industriousness' and 'Identity' that may not have been achieved in previous stages due to poor educational and social experiences (Young et al, 2011). By addressing each stage via supportive teaching a positive impact may occur upon the conflicts of future stages of psychosocial development (Dean et al, 1998). By knowing which stages of psychosocial and psychosexual development were problematic for the students in the case studies I gained a new perspective to work with. This perspective, in addition to other approaches, can give a more rounded view of how to manage behaviour and enhance the learning experience, and increase positive outcomes for the individual student and their children. Teachers and teacher educators can take this example and adapt it to their own learning environments, giving a renewed and fresh standpoint on a particular issue with students.

Whilst a teacher's role when working with teenage parents is important to further development it is important to consider limitations and '...remember that teachers are not trained therapists' (DeJong, 2003, p.94). Underlying emotional issues that may relate to psychosocial and psychosexual developmental theories cannot be addressed solely by a teacher, yet recognition of support that can be given can be invaluable in the future development of an adolescent parent.

### **Conclusion**

Both the psychosexual and psychosocial developmental theories appear relevant when working with teenage parents. An examination of past life experiences, in view of transference and projection, can act as a useful tool in explaining behaviour traits and building upon areas where parenting skills may be lacking (Scott and Spencer, 1998; Dean, 1998). When working with teenage parents, it is important to acknowledge that these theories cannot be used alone, due to their prescriptive nature. Levison reflects the influencing factors of risky sexual behaviour that result in pregnancy stating:

In all cases it is necessary to understand that different girls have different motivations for being sexually active and may experience different obstacles (personal, behavioural, or environmental) in assuming responsibility for their sexual activity.

(Levison, 1986:367)

Each theory fails to account for environmental influences and differences in cognitive development. Many of the outcomes within the theory appear to be subjective, and based upon cultural, moralistic ideals. The psychosexual model appears to be linked to Christian moralistic ideologies of Victorian times; therefore validity for contemporary culture can be questioned. The Id and ego, given discussion, are subjective in nature and contextually based (Slipp, 1993).

From the perspective of the psychodynamic branch of psychology pregnancy is viewed as a means to gain worth through risky sexual behaviour, yet the 'problem' of teenage pregnancy appears to be a socially constructed phenomenon (Duncan et al, 2008; Daguerre and Nativel, 2006; Arai, 2009; Pheonix, 1991; Schofield, 1994). With Western ideologies of adolescence in mind, viewing teenage parenthood as a demonstration of failure to achieve balance in the stages of the psychosexual and psychosocial theories, is a small part in a much larger construction.

Upon critical exploration of the psychoanalytic psychological perspective, through the psychosocial and psychosexual models, it can be gathered that one perspective is not adequate in accounting for the diverse and contested nature of sexuality and parenthood within adolescence (Alldred and David, 2007; Moore and Rosenthal, 1993). When working with teenage parents account has to be taken of the 'nature vs. nurture' debate, and the impact that individual differences and the influence of various environmental factors have upon the actions of the adolescent (Hoffman and Maynard, 2008; Duncan, 2007). Whilst psychoanalytic theory, and in particular, the theories of psychosexual and psychosocial development are useful when working with teenage parents, care should be taken to recognise the constraints that these theories in isolation would bring to this professional practice. Use of an eclectic mix of approaches, to suit individuals, should be used alongside the knowledge of the underpinning theories that influence the social constructs surrounding teenage parents. Recognition should be given that this psychological perspective is one of many that can be used when working with, and examining the developmental influences of young parents.

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