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Abstract

Using discourses on "lone mothers" as a case study, this research paper explores some of the dilemmas of conducting health policy research focused on particular social groups. The paper highlights the importance of health research that takes a reflexive stance towards the role of researchers in creating and augmenting negative and stigmatizing social classifications.

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Introduction

Among health policy researchers, it is widely recognized that health inequalities often overlap with inequalities based on race, gender, class, and other social divisions. As a result, recent years have seen a proliferation of health studies focused on particular social groups. In many cases, researchers are motivated by a desire to understand how best to devise policies that are more conducive to health equalities among particular populations. While few would dispute the merits of this goal, it is important to consider some of the pitfalls of focusing on particular social classifications as the subjects of health policy research. In this paper, I explore how the label "lone mother" entered policy discourse, and show that the term is laden with a history based on notions of deviance, dangerousness, and moral opprobrium. This exploration suggests that analysts interested in conducting policy-relevant research conducive to greater health equalities must grapple with how to avoid reinforcing stigmatizing discourses in their research.

The Birth of the "Lone Mother"

Historical analyses demonstrate that all-encompassing labels such as "lone mother," "single mother," and "single parent," are relatively new developments (Brush, 1990; Kiernan et al, 1998: 111; Lessa, 2003; Murray, 2004; Reekie, 1998: 159; Song, 1996). These terms encompass what used to be considered distinct social problems, such as the unwed, deserted, divorced, separated, or widowed mother. Over the course of the twentieth century, these classifications became salient political phenomena in various ways and at different historical moments in relation to the expansion and later retrenchment of social programs.

During most of the nineteenth century, predominant social norms equated motherhood with dependency on the husband-father; mothers who fell outside of this framework were largely left to their own devices, and social resources were not targeted explicitly toward mothers who did not fit into the mainstream ideal. However, toward the end of the century, public concern about mothers deviating from the norm began to grow: no where was this more apparent than in the increasing attention directed towards "unwed mothers."

Until the latter part of the century, an "illegitimate" birth, although a legally defined category, was considered a private matter to be dealt with by the individual unwed mothers facing the predicament. At that time, new discourses and practices began to emerge in the context of industrialization and the expansion of urban populations.

Unprecedented numbers of female workers were flocking to the city for work, moving far from traditions of rural and family life, and single and pregnant female city dwellers underscored the sweeping socio-economic changes underway. But as dramatic as these signs of social change were, they could not compete with the fear and anxiety brought about by impoverished unwed mothers, or unwed mothers cast aside by their families, whose visibility in the urban core appeared to foretell catastrophic consequences for the moral order and for the nation at large. Of course there were also those higher up the social ladder facing the unenviable situation of an "illegitimate" pregnancy, but they could afford to conceal their pregnancies, and secure private adoptions. Such privileges were not available to poor unwed mothers, or those denied familial support, and it was these unwed mothers whose private quandary was thrust into the light of public scrutiny (Murray, 2004; Ladd-Taylor & Umanski, 1998).

Initially, religious leaders led the quest to stave off the dangers posed by the spectre of unwed mothers, but political authorities, who lavished public praise and dollars on religious officials' efforts to set up maternity homes, supported them. Unwed mothers, who might have previously become desperate enough to commit infanticide, found a modicum of assistance at these homes. Yet, the primary goal was not to provide comfort to "inmates," but rather to reclaim the lost souls of fallen women in order to reorient them toward accepted social norms and conventions. In other words, unwed mothers became a public issue not because of an emerging beneficent spirit, but because of a primal fear that unwed mothers threatened the patriarchal family ideal and the norms of sexual conduct embodied within it. Professional social workers extended and augmented these negative images in the development of case work with unwed mothers after the 1920s. A consistent thread remained intact: unwed mothers constituted a deviant social group that required surveillance and judicious interventions to guide them towards "right" ways of living and being (Murray, 2004).

And yet, evidence shows that not every variation of unwed mother was considered worthy of assistance. In fact, over time it would become clear that certain groups of unwed mothers – such as immigrants, non-white, or the "feeble-minded – were considered beyond reform or rehabilitation. Typically, expert attention focused on unwed mothers who could conform to white, middle-class expectations of sexual and family norms. Thus, long before the development of public programs, categories of deserving and

undeserving were taking shape in private social welfare activities directed towards unwed mothers (Murray, 2004).

Of course, unwed mothers were not the only ones deviating from the two-parent norm. There were also the "separated," the "deserted," the "widowed," and the "divorced," classifications that similarly labelled mothers according to their marital status. Maritalstatus classifications that designated mothers by the absence of the husband-father were important to the development of public programs, such as those in Ontario, that began with the creation of mothers' allowances in the early 1920s. Initially only widowed mothers, who lacked a husband-father through "no fault of their own," were deemed deserving of public aid (Gordon, 1994). Over time, entitlements were broadened to include other marital status categories, but unwed mothers, whose "extra-marital" sexual conduct rendered them the least deserving, were the last group to be included in such programs (Little, 1998). This slow expansion of entitlements hinged on the idea that mothers played an important social role by raising their children – a role that governments were increasingly willing to support through public aid, even to those who fell outside of the traditional family norm.

The broadening of entitlements to social assistance programs reduced the potency of marital status as the defining feature of mothers who fell outside of the traditional family ideal. Instead, greater emphasis was placed on their common economic plight and family structure; and mothers who did not have a husband-father counterpart often shared a similar economic status defined by poverty and disadvantage. This shift eroded one of the central rationales for labelling mothers by marital status and set the stage for the emergence of a new category – the one-parent family (Kiernan et al, 1998: 111).

The term one-parent family entered mainstream policy discussions in the early 1970s (Kiernan et al, 1998: 111; Lessa, 2003: 91; Murray, 2001; Song, 1996). In Canada this turn was marked by the publication of the Canadian Council on Social Development's (CCSD) *The One Parent Family: Report of an Inquiry on One-Parent Families in Canada*, and the Vanier Institute of the Family's (Vanier Institute) *The One-Parent Family in Canada* (CCSD, 1971; Guyatt, 1971). This new terminology, while perhaps appearing more progressive than earlier stigmatising discourses based on the marital status of mothers, continued to juxtapose one-parent families to the ideal two-parent heterosexual family norm. And even though these reports used

gender-neutral language, each focused primarily on the "problems" associated with the female-headed variants, no doubt reflecting the fact that, at roughly 80 percent, they constituted the overwhelming majority of such families (Statistics Canada, 1990, 87).

A host of issues threaded through these discourses on the femaleheaded household. On the one hand, these mothers were construed as having difficulty making rational choices concerning their sexual conduct, financial affairs, and parenting roles. On the other hand, their poverty was seen as a product of broader social and economic forces beyond their control. While government and research reports did not "normalize" the one-parent family, they nevertheless recognized the unpaid childcare responsibilities of mothers raising children "on their own." (Lessa, 2003: 95) Reflecting these competing constructions, solutions for dealing with these "problems" ranged from encouraging marriage or remarriage, creating rehabilitation programs, abolishing gendered wage disparities, and expanding state-funded programmes, such as introducing a guaranteed annual income and a national childcare program, increasing social assistance rates, retraining and education, enforcing the collection of maintenance payments, and increasing homemaker services (CCSD, 1971; Guyatt, 1971).

By the early 1980s, a new discursive turn occurred as the genderneutral language of the one-parent family gave way to discourses centred on "single mothers." This shift coincided with the elections of Ronald Reagan and Margaret Thatcher, who spearheaded attacks on government spending and social programs, attacks that emerged in Canada as well, although somewhat later. The idea that the vagaries of the market had to be balanced by public social programs gave way, as these same programs were now reconstrued as creating disincentives to employment, encouraging unemployment, laziness, and dependency. Social assistance recipients were defined as "nonworking" drains on the public purse, threats to taxpayers, to the proper functioning of the economy and government, and a danger to the traditional family (Bashevkin, 2002; Evans, 1996).

Within this context, there was a redoubling of negative imagery relating to single mothers. In some circles, single mothers were depicted as flagrant abusers of their free choice, eschewing norms of traditional family life, and failing to take responsibility for their own social and economic security through paid employment (Evans, 1996; Evans and McIntyre, 1987; Kilkey, 2000; Lord, 1992; Nyberg, 2002). Moreover, the quality of mothering offered by single mothers

continued to be called into doubt, as studies began to suggest that their children suffered from various child development problems. The fact that poverty and single motherhood often go hand in hand was downplayed, even in social science research that maintained – despite evidence to the contrary – that family status was the strongest predictor of poor child development (Lipman et al, 1996).

Canadian governments increasingly sought to integrate single mothers into the paid workforce. For instance, several provinces lowered the threshold age of a single mother's youngest child, above which the mother would be expected to find employment (Evans and McIntyre, 1987). In Ontario, the Mike Harris government sought to force single mothers into mandatory workfare programs, in which they were required to engage in training or rehabilitation programs to be eligible for benefits. The attempt failed when it became starkly apparent that many lone mothers who were expected to participate in the plan did not have access to child care services that would make it possible for them to do so (Bashevkin, 2002: 4,9-10,16). Nevertheless, the emphasis on "including" single mothers in the paid labour force continued to be a primary concern.

Even though classifications lumped various types of "single mothers" under one category, some single mothers were targeted as particularly troublesome, such as the "teenage mother" and the "welfare mother" (Wong and Checkland, 1999; McCormack, 2004). Moreover, racial divisions were also important. Ricki Solinger's study of the different policy responses accorded black and white single mothers in the United States is particularly revealing in this regard. Solinger showed that white single mothers were encouraged to place their children for adoption, while black single mothers were expected to raise their own children (Solinger, 1992). Canadian analysts have paid far less attention to how issues of age and race overlap with problems associated with single motherhood, but clearly these are important questions to consider with respect to policies and programs.

The purpose of this brief history is to show how images relating to mothers falling outside the two-parent traditional family norm have emerged and been transformed since the late nineteenth century. What is particularly remarkable is that, despite variations over time, stigmatising and negative discourses have been a consistent feature of this genealogy. What is also clear is that these discourses are deeply political and rooted in major policy issues concerning the role and extent of government intervention in social and economic

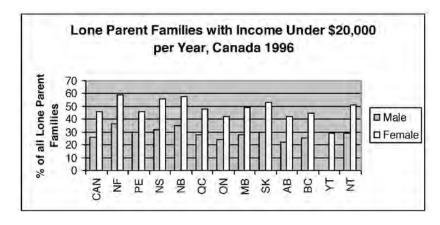
life, and that these issues dovetail with other issues relating to age, class, and race. "Single mothers" are not, in other words, a self-evident, natural category – they are an artefact of hierarchal power relations that regulate the lives of mothers in a manner that supports traditional white middle-class norms of family, sexuality, and paid employment.

The recognition that discourses on single mothers is problematic poses a challenge to health policy researchers who seek to avoid recreating stigmatising images. Some researchers have sought to avoid negative labels by using the term "lone mother," claiming that the label "single mother" focuses on marital status, and is therefore based on moralistic presuppositions concerning family status (Kilkey, 2000: 68-70). However, as Martha Fineman has pointed out, even the label "lone mother" signifies deviance from the two-parent heterosexual norm. No one speaks of "married mothers," because these mothers are deemed normal. The ideal is what lone mothers are not (1995: 219). Thus, policy researchers who seek to adopt more "acceptable" terms are still reinforcing notions of deviance and difference, thereby rendering certain individuals and groups as potential targets of derision (Kilkey, 2000: 68-70).

Against this genealogical backdrop, the dilemma of targeting groups for health policy research is clear, as in doing so negative images and assumptions are augmented. And yet, it is also clear that people falling under the rubric of certain socially constructed classifications, such as single mothers, are often more likely to be socially and economically marginalized, and vulnerable to health inequalities. Statistics bear this point out. Figure 1 shows that, in 1996, 46 percent of Canadian lone-mother families had incomes of less than \$20,000 a year. Lone mothers in three of the four Atlantic provinces were even more likely to have incomes below this level, at 58 percent in

Figure 1

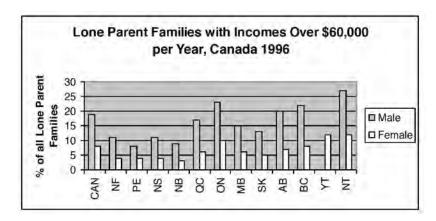
Source: Statistics Canada, 1996 Census, The Nation Series, CD-ROM, 93F0020XCB96004 ** Income figures for maleheaded lone parent families in Yukon were not available



New Brunswick, 59 percent in Newfoundland, and 56 percent in Nova Scotia. Only a very small percentage of lone mothers in Canada, at 8 percent, have incomes in excess of \$60,000, as evidenced in Figure 2.

Figure 2

Source: Statistics Canada, 1996 Census, The Nation Series, CD-ROM, 93F0020XCB96004 ** Income figures for maleheaded lone parent families in Yukon were not available



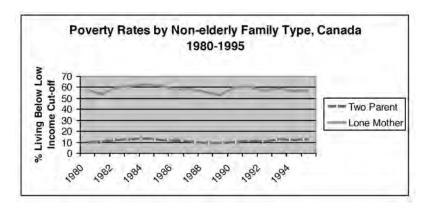
In fact, Figure 3 shows that in 1995 a majority, 56 percent, of Canadian lone mothers lived below the "poverty line" defined according to Statistics Canada's low income cut-off.

Figure 3

Source: See Statistics Canada, Income Distributions by Size in Canada, 1995, Catalogue #13-207-XPB.

** Estimates are based on the 1992 Statistics Canada Lowincome Cut-offs (LICOs), 1992

base. Prepared by the Canadian Council on Development.



Of course, the Low-income Cut-off (LICO) is a rather blunt instrument for measuring disadvantage. Lone mothers with earnings above the poverty line may still lack access to affordable childcare, housing, and other social supports. And statistics cannot reveal the many other complex ways that lone mothers might experience social and economic exclusion as a result of negative stereotypes. At the same time, it is important to bear in mind that poverty rates have been increasing for traditional two-parent families over the course of the last few decades, as is also indicated in Figure 3. The collection and analysis of statistics focused on lone mothers presupposes that there is something unique about their family

status that is co-related to poverty and disadvantage. While the association between poverty and lone motherhood is no doubt real and significant, focusing on income draws attention away from how broader social, economic, and political structures limit opportunities for all families to achieve a reasonable standard of living. Iris Marion Young makes this point in her *Making Single Motherhood Normal*, arguing that "Ignoring the myriad social conditions that affect families only enables the government and the public to escape responsibility for investing in ghettos, building new houses and schools, and creating the millions of decent jobs that we need to restore millions of people to dignity." (1994: 89)

While Young's point is an important one, a study that focuses attention on a particular social classification can serve as a device for studying how individuals internalize, challenge, or disrupt the assumptions and presuppositions inherent in various discursive practices. Such an approach might also expose how structures of power work against the health and well-being of particular individuals and groups. In doing so, more progressive and equitable policy responses to issues of disadvantage and marginalization might be exposed. The challenge for health policy analysts is to devise research methodologies that do not reinforce the very discourses that are woven through policies that contribute to health inequalities. The goal of this paper is not to suggest any one methodological tool; rather, the objective is to suggest that researchers interested in the intersections between gender and health inequalities take a reflexive and sophisticated stance towards their research in order to sidestep the problematic issue of defining social categories.

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