Psychic development of adolescent mothers: a winnicottian view

O desenvolvimento psíquico de adolescentes mães: uma visão winnicottiana

Desarrollo psíquico de madres adolescentes: una visión winnicottiana

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This is a qualitative study carried out in 2017 and aims to understand the dependence-independence and maturity-immaturity relationship for Winnicott based on affective support received or not by women who went through a teenage pregnancy. A semi-structured interview was carried out with 10 women (who were pregnant during adolescence). With the content analysis, five categories emerged: feelings during pregnancy, emotional support from family to the teenager, father of the baby, friends and changes caused by pregnancy. The predominant feeling was fear of not standing the environment, especially family, associated with regressive dependence and psychological immaturity. Most teenagers receive family support, the same does not always happen with friends, after the difficulty of identifying with a pregnant adolescent. The abrupt change in development has led adolescents to develop maturity. Observe the need for public policies for adolescents, seen as vulnerable to their psychological and social development.

Descriptors: Pregnancy in adolescence; Sexuality; Adolescent; Psychoanalysis.

Este é um estudo qualitativo realizado em 2017 e tem por objetivo compreender a relação dependência-independência e a maturidade-imaturidade para Winnicott com base no suporte afetivo recebido ou não por mulheres que tiveram gestação na adolescência. Foi realizada uma entrevista semiestruturada com 10 mulheres (que foram gestantes na adolescência). Utilizou-se análise de conteúdo e cinco categorias emergiram: sentimentos na gravidez, suporte afetivo da família à adolescente, do pai do bebê, dos amigos e mudanças provocadas pela gestação. O sentimento predominante foi o medo de não suportar o ambiente, especialmente familiar, associado a dependência regressiva e a imaturidade psicológica. A maioria das adolescentes receberam suporte familiar, o mesmo não ocorre sempre com companheiros e amigos supostamente pela dificuldade de se identificarem com a adolescente gestante. A mudança abrupta do desenvolvimento faz com que as adolescentes desenvolvam falsa maturidade. Observa-se a necessidade de políticas públicas para as adolescentes, visto a vulnerabilidade para o desenvolvimento psíquico e social delas.

Descritores: Gravidez na adolescência; Sexualidade; Adolescente; Psicanálise.

Este es un estudio cualitativo realizado en 2017 y tiene por objeto comprender la relación dependencia-independencia y madurez-inmadurez para Winnicott basada en el soporte afectivo que reciben o no las mujeres que han tenido un embarazo en la adolescencia. Se realizó una entrevista semiestrustrurada a 10 mujeres (que estuvieron embarazadas durante la adolescência). Se utilizó el análisis de contenido y surgieron cinco categorías: los sentimientos en el embarazo, el apoyo afectivo de la familia a la adolescente, del padre del bebé, de los amigos y los cambios causados por el embarazo. El sentimiento predominante fue el temor a la falta de apoyo del entorno, especialmente de la familia, asociado a la dependencia regresiva y a la inmadurez psicológica. La mayoría de las adolescentes recibieron apoyo de la familia, lo que no ocurrió con los compañeros y amigos supuestamente debido a la dificultad de identificarse con la adolescente embarazada. El cambio abrupto en el desarrollo hizo que las adolescentes desarrollasen una falsa madurez. Se observa la necesidad de políticas públicas para las adolescentes, dada su vulnerabilidad al desarrollo psíquico y social.

Descriptores: Embarazo en adolescência; Sexualidad; Adolescente; Psicoanálisis.

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INTRODUCTION

Adolescence is a stage of the life cycle marked by transition from childhood to adulthood. In this stage of life, biological, physical, cognitive, affective and social changes occur in the search for structuring of identity that affect the behavior of adolescents. In this respect, sexual behavior stands out.

Identity is a construction that occurs throughout life, starting with identification with the mother, then the father, people from extended family, friends. In this process, healthier adolescents want to be independent from their parents and seek identifications outside the family group, with the peer group being an important space in this phase of life.

The transformations of adolescence occur in progressive and regressive fluctuation movements, with secondary processes predominating for the former, abstract thinking and verbal communication, and in the latter predominating the emergence of primary processes, defensive realization of thought and resumption of non-verbal levels of communication. The fluctuation of these moments can generate turbulence, and one of the present aspects is the reactivation of children's conflicts with the aim of psychological maturation that lead to adult management of dealing with everyday situations.

At this point in life (adolescence) there is an ambivalent feeling between rebellious independence and regressive dependence on parents, the environment and society. The adolescent expresses independence and refusal of parental care and the environment plays an important role in continuing environmental provision. It is the environment that will sustain the oscillation, facing and reacting actively to rebellion, welcoming moments of dependence and allowing the adolescent to experience their growing autonomy. Parents or reference adults play a very important role, insofar as they are willing to be used as objects of confrontation and containment, without retaliation or sentimentality.

The experiences of adolescence compose a moment of immaturity in the sense of acting on impulse and not being prepared to take responsibility the consequences of their actions and, for Winnicott:

*Immaturity is a precious part of adolescence. It contains the most exciting aspects of creative thinking, new and different feelings, ideas for a new life. Society needs to be shaken by the aspirations of those who are not responsible.* (P. 198)

The facilitating environment will allow adolescents to experience immaturity, and maturity will come gradually over time during this period adult support is required. If this support does not occur, the adolescent may show false maturity early. This false maturity costs adolescents the fact of losing the activity and imaginative efforts of immaturity, being a representative of what is established. Teenage pregnancy can be one of these situations in which false maturity manifests itself, causing the adolescent to assume the position of an adult, without being able to experience it.

Teenage (adolescent) pregnancy has been a recurring phenomenon in the world. It is estimated that around 16 million young people between 15 and 19 years of age are pregnant, of which 2 million are under 15 years of age. Buratto, Kretzer, Freias, Traebert and Nunes carried out a study on temporal trends in teenage pregnancy, and they report that the proportion of live births to teenage mothers in Brazil varies from 2006 with 21.4% and from 18.1% in 2015, denoting a fall in the live births of teenage mothers.

Despite this drop in percentage terms, the number of pregnant teenagers is high, which can be thought of as a vulnerability factor for the development of adolescent maturity, requiring support from adults around them so that their development can follow more healthy as possible. A study of Pontes, Barcelos, Tácigibana and Aiello-Vasberg carried out on adolescents' imagination, through the drawing-the-history procedure, showed that teenage pregnancy is a theme present in 13 productions, and shows that pregnancy would correspond to a punishment of the girl for having had sexual intercourse and that would be abandoned by her parents or her partner. Through this process the adolescent needs to change, and remodel. Her position in
the family context is resized as she needs to develop skills and take responsibilities related to
the care of the baby and herself7.

Another investigation pointed out that some adolescents stated that they had the desire
to become pregnant, and justified that desire because they like children, because they want to
start a family, desire to be adults or to have company, but when talking about their feelings
about pregnancy, showed a low involvement with reality, which will probably be forced to
change soon after the child’s birth, since the young women were in process of formation, no
longer had the naivety of a child, nor the maturity of an adult, either from a biological as well as
a psychological point of view8.

A whirlwind of feelings begins for the adolescents and their families, it is the beginning of
a process in which various conflicts will arise in their lives, the plans outlined for the future of
the adolescents take paths different from what was planned, being difficult to accept the
situation, mainly when parents are aware that they have advised their daughters about
preventing pregnancy and sexually transmitted diseases (STDs) in different ways and through
different means, but it still happened. For parents, grandparents and other family members, the
news ends up being a shock, a scare, "horrible news"9.

The subject of teenage pregnancy for society and family is an event that inevitably and
negatively affects a young mother’s life, bringing great challenges to her life from then on, and
everyone who shares these difficult moments, during pregnancy, in moment of childbirth and
after the birth of a child. They need to face new changes in their routine, breaking with
developments naturally expected in search of independence, sudden change of plans for the
adolescent and her family can generate conflicts both internally and externally.

The pregnant teenager seeks to reframe herself and questions the child’s meaning in her
life. It is clear that young mothers need attention from family and friends as well as specialized
care through a multidisciplinary team to minimize the possible negative aspects that unplanned
teenage pregnancies can bring10, since when they experience pregnancy in adolescence, they
need take responsibilities that they didn’t have before.

The present study aims to understand the dependence-independence relationship and
maturity-immaturity for Winnicott, based on the affective support received or not by women
who were pregnant during adolescence.

METHOD

This research was approved by the Research Ethics Committee of Universidade Paulista
- (UNIP) under the number CAAAE 67685817.5.0000 and opinion 2,113,642 of June 12, 2017.
It is a descriptive study with a qualitative methodology. The study was carried out from July to
September of 2017 in the city of Ribeirão Preto, in the state of São Paulo.

Participated 10 (ten) women of legal age and who experienced at least one pregnancy
during adolescence., For the recruitment of participants, the “snowball” methodology was used,
in which one interviewee indicated the other, until there were 10 participants who met the
inclusion criteria: being 18 years of age or older at the time of the interview, having their first
pregnancy in adolescence and having children born alive. Before the beginning of the
interviews, the participants signed the Free and Informed Consent Form.

The interviews were conducted at the participants’ residence in a reserved place,
following the semi-structured model, in which the script addressed the adolescent’s life before
pregnancy, the moment of discovery, communication of the pregnancy to family members, their
reaction to it, communication from pregnancy to the baby's father and his reaction, the reaction
of friends, feelings of the pregnant woman, family and father of the child during pregnancy, in
the puerperium and postpartum. All interviews were recorded in audio and transcribed in full.

The reports obtained in the interviews were analyzed qualitatively through content
analysis11 with categories defined later, having been grouped as follows: feelings and thoughts
during pregnancy, emotional support from the adolescent’s family, emotional support from the
baby's father, emotional support from friends and changes caused by pregnancy. The categories were analyzed based on the Winnicottian theory, especially regarding dependence-independence and maturity-immaturity.

RESULTS

Characteristics of participants

Participated in this research 10 (ten) women between the ages of 18 and 32 and who had their first pregnancy in adolescence (between 14 and 16 years old) and living in the metropolitan region of Ribeirão Preto. All had babies born alive and none reported episodes of miscarriage/abortion during their lives. As for education, half of them had incomplete high school (five), four with complete high school and one with incomplete elementary school. Four were housewives, two were salespeople, a buyer, a production assistant, a manicurist and a cashier. Regarding marital status at the time of the interview, four were married, one was cohabiting with partner, one was divorced and four were single.

The content analysis of the interviews produced five categories, namely: “feelings and thoughts during pregnancy”, “emotional support from family to the teenager”, “emotional support from the baby's father”, “affective support from friends” and “changes caused by pregnancy”.

Feelings and thoughts during pregnancy

Seven participants (E1, E3, E4, E7, E8, E9 and E10) reported fear of failure due to pregnancy, especially from the family:

[...] I was scared and afraid of having disappointed them, you know, especially my mother (E1).

I didn’t believe that, you know, even though I knew that this could be happening, I was very scared because of the reaction, my parents, my family, I was, “ichi”, I was worried, afraid, how their reaction was going to be, my mother’s (E3).

[...] I felt bad, I felt terrible, but in fact I think my biggest fear was my family’s reaction, I wanted to run away and even try to throw myself off the bridge (E4).

[...] they will never forgive me (in silence), I felt the worst person in the world. Difficult, you see (E9)

The participants also reported that they were very frightened by the changes caused by the new condition, but managed to reorganize in a second moment, showing feelings of ambivalence in the face of the new situation:

[...] I felt, sometimes I felt very happy, I wanted to buy all the clothes I saw in front of me, I thought a lot about the gender, the name, I was excited wanting it to be born soon to see its face, which was a son, a life inside of me, which I loved and all, and sometimes I hit a “low”, that I saw in the chances that I would no longer have, the things that I was going to lose, things like that (E4).

[...] I started crying, my mother had already seen the result. And I started crying and the first, first thought in my head that came was abortion [...] My first reaction was to use drugs, it was my first reaction, everything, cigarette, it was the first thing I did (E6).

Other feeling was shame for being a pregnant teenager:

[...] To be honest, I was a little embarrassed, you know, what I felt the most was shame. Like, for him, they all already knew, but by the fact my mom was critized a lot, I felt a lot of shame, you know. (E7)

One participant also mentions feeling alone:

[...] Emotionally I was shaken, but because there was no one from my family close to me, I felt alone, without support, sometimes I was desperate (silence), I remembered that I had no one to tell, I was thinking a lot of bad things, I was very afraid, I was imagined how the delivery would be without my mother around (silence) (E9)

Emotional support from the adolescent's family

Several interviewees (E1, E2, E4, E5, E6, E7, E8 and E10) reported that they had support from at least one person from the family of origin, which may be the mother, grandmother, sister, predominantly female figures:

My mother and grandmother really helped me (E4).

[...] I was ... Happy with my grandmother’s reaction, that she supported me a lot. My mother also, partly, my sister... (E6)

[...] The one who helped me the most, accompanied me, was my sister, who helped me (E10).
One did not have any support from the family of origin, but she had support from the family of the baby’s father.

[...] My mother-in-law always helped me. Ah … For me it was very important, right! For having her help, for not knowing much, for not having my family, not having my mother helping me. For me, it was very important, this help that she gave me, yes, a mother’s help, it ended up meaning for me (she gets emotional and her eyes water). A very complete help that she gave me, not only in care, you know, in everything - she helped me in everything (E3).

Another interviewee mentioned not having family support at all:

[...] As I lived with my siblings, my older sister did not accept it, she didn’t speak to me for a long time, they were all very angry with me, and my brother advised me to get married as soon as possible… I didn’t have their participation, I went alone … (E9).

**Emotional support from the baby’s father**

Five interviewees (E1, E2, E3, E4 and E9) reported that they had the support of their baby’s fathers, and that it was very good:

[...] He went with me to do exams, to have an ultrasound, he helped a lot, after she was born too. The participation was good, it was even better than mine, because I was very scared and didn’t know how to face the situation properly (E2)

[...] I was able to count on him like this, since always. Since when we started dating. No, he didn’t abandon me, I told him too, I think he was a little scared at the time, right, he didn’t believe it, but later he accepted it. I always counted on him, always helped me, always supported me too, always, always helped me, never… Always participated too (…) We started living together at that same age, 15 years old, and then he accompanied me at all times, we were there together (E3)

[...] Everyone was against me, but I had my son’s father who was very responsible and supported myself in everything, I became more confident, soon we got married and went to live in another city. And then I went to get by with my son, my husband traveled and my son and I stayed (E9)

Another three mentioned that the father’s took the responsability of fatherhood, but not the emotional support:

[...] It was hard for me, because his father was aggressive, and we had only been dating for three months, and… I didn’t know, we didn’t know each other, so, I didn’t know how he it was […] I went to live with him there, I ate, I went to live with him and at his mother’s house, so I suffered a lot during pregnancy, he beat me, he beat his mother (E6).

[...] It was not good! (thoughtfully) In that part of my pregnancy, he didn’t help me much. (thoughtfully) He only helped financially. More emotionally not. Supportive, talking, these things, no. Yeah … Until he starts drinking a lot you know. He drank a lot. He, he didn’t come home anymore. He would go to work, he would leave for work at eight in the morning and come home at five in the afternoon. I took a shower and went out, came back five in the morning you know (E7).

[...] So he, as he sent the money, he didn’t accompany me on anything else, he just sent the money, because, we were separated, who was taking my prenatal care to my older sister (E10)

Another one (E5) said that the father gave no support at all:

[...] He wanted me to have an abortion […] But it is like saying emotionally, we are shaken, right, why do you think, (crying), you are pregnant and the person leaves you crying a lot (E5).

**Emotional support from friends**

An interviewee said she had no friends before the beginning of the pregnancy:

[...] “Ah, do you have any friends? That you hang out with?”, No, I don’t (E1).

Other two said that pregnancy strengthened friendship bonds:

[...] They got to know about it and strengthened us a lot more. Many helped, many kept asking if I needed anything, many went to my house to take their schoolwork. It was even better, because it strengthened a lot (E2).

[...] So, they got closer, you know. Yeah… The girls wanted to be the godmother, they wanted… She came home, you know, when we lived all there in the neighborhood. They came home, my colleagues sent messages, I sent photos. O, my ex-husband took me to the neighborhood, over at P. to see them you know, I stayed at their house, you know. So… It was legal support… I was not judged you know… So, none of them said, “Wow, you ruined your life, you got pregnant early”, no, you know… On the contrary, you know, they did “That everything”, that if I could, I could count on them, if I wanted to know, what I needed I could look for them, you know. It was very good (E7)

Another four (E3, E4, E5 and E8) said that with pregnancy they lost their bond with friends:

[...] I totally distanced myself from my friends […] I ended up going to live with my boyfriend at the time, so, I totally lost contact with my friends, I moved away, I even moved away from my family. More “ichi”, it was very difficult in the beginning, I missed it a lot, because it was all a quick start. More, I moved away from “ichi”, I moved away from everyone like that, which I knew, from school time too, from the neighbors, I moved away, I moved away a lot (E3).
[...] It was very rare, because even if I had the opportunity to leave, I left worried because I had left a child at home, and I always thought, you know, that I had to take care and not my family (E5).

[...] And go out a lot, I went for a walk, all this was over, I didn’t have any friendships anymore, because my friends wanted to go for a walk, to party and I couldn’t go. (E8).

From the interviews, two (E6 and E9) do not talk about the support of friends, but of family members, which makes us think that they either did not have friends before pregnancy or that they did not provide support.

Chances caused by pregnancy

In this case, the interviewees unanimously described that they had to change their way of seeing the world and take on the responsibility of an adult they did not have before.

[...] I was happier, more fun, more playful, and then I couldn’t be that any more. I had to grow up really, really fast. I think the most pleasant phase of the young person who left, went to college, I skipped it, I skipped this step a lot, so I think it totally changed my way of thinking [...] I feel that I have a lot of things saved, a lot thing not lived, you know. I sometimes look at the people I work with, who are my age, I think, I feel, that I have not lived through a lot of things. Not that I regret not having lived, because, I love my daughter, it was worth it, but I think I missed a lot of steps, I think it stopped me in many fields of my life (I cry) (E1).

[...] It changed, for me it changed like that, it is, in the responsibility part, you know, why would I leave, I enjoyed everything with my friends, and after the child was born I had that responsibility that was mine, right, it wasn’t my mother’s, my father’s, nor my family’s, it was my responsibility, right, so, I started living more for her (E5).

[...] I go to work, for example, that I clean out, I do cleaning, then when I get money I go buy something for her, I go to the market, there is my daughter’s Nescau, I have to buy a cookie for my daughter, ah, “my daughter likes this Danone, this is what I’m going to buy”. Then I keep thinking and I? I don’t buy anything for me, it’s all her, my world is now her, my pink world (E10).

DISCUSSION

Adolescence is a stage that allows situations of ambiguity between rebellious independence and regressive dependence in relation to parents, the environment and society. Associated with the experience of egoic immaturity, there is a need to manage the environment, supporting the adolescent in times of turbulence, so that the ego does not fragment and/or split and so that the adolescent can make use of the secondary process, primarily.

The moment of discovery of pregnancy for adolescents is of great turbulence and consists of a regressive dependency movement and the use of a primary process. It was observed in the verbalization of the participants in this research and in other studies that the predominant feeling is fear of loss of emotional support from the environment, especially from parents and other family members of origin, who seem to occupy the role of parental figures.

Fear can be understood as a human affection whose experiences are closely related to its consequences (and as a result of them) the impact on psychic life and daily life is measured. Given the amount and degree of restrictions that are imposed in the face of situation that triggered the fear, there is a possibility of annihilation of the power of affection between the adolescent and the environment, which translates into mobilizations and immobilizations in people’s lives. Seen in this way it can be pointed out that the way the participants reported their feelings lived at the moment of discovery of pregnancy, seem to be linked to how much this event in adolescence can be fantasized by them as a possibility of annihilating the affectivity experienced with parental figures, since there is a fantasy that they will be rejected for not meeting parents’ expectations.

Another process experienced in adolescence and intensified when pregnancy occurs is regressive dependence, which requires the environment so that they can be sustained, thus, the management of the environment, experienced in early moments of the development of these women as daughters, in their relationship with their mothers.

The condition of the encounter between mother and baby, first and then being with other people, is that it makes the human being humanized, feels that they are part of the human group, it is being with someone who promotes integration so that they can to become a person.
adolescent’s fantasy of not being able to live the encounter, especially with parental figures, makes her feel that she cannot live her role as a daughter.

The fear presented by participants seems to be related to two aspects: regressive dependence and affective annihilation because they do not appear within the expectations of parents and can be punished for this through affective disruption. Such a hypothetical perspective can be sustained when the interviewees say that when communicating the pregnancy to family members, they felt calmer, especially those who received affective support from their family during the pregnancy. Family members offer them the possibility of necessary support so that there can be readaptation and review the directions of their daily life, starting from the new (the pregnancy) to develop.

In addition to family support, only one mentioned not receiving any support from the baby’s father, the others reported that they either received emotional and financial support and others only financial, so although some point to report that their partner had immature behaviors, they felt they could count with them. Some of them, throughout pregnancy, continued to offer only financial, but not emotional, support that could support the teenager as a pregnant woman and later as a mother, returning this to the support of the family of origin, which occurred with the mother, sister and grandmother, predominantly.

With regard to the group of friends, only two could count on such initial support, the distance from friends seems to be associated with the fact that the role of the group of equals in the construction of identity in adolescence is related to the perception of pregnancy as something negative, in which pregnancy is seen as a punishment for having had sexual relations and for this reason it must be abandoned by parents and partners. Winnicott points to the importance of support and care for pregnant women, whether by a partner, by the family or even by the State, because only in face of the “protective cover” will the woman be able to develop the “primary maternal concern” and be available to the baby and their needs. According to the author, “primary maternal concern” is a state that begins in the last months of pregnancy and lasts a few months after delivery, which allows the mother to capture all the needs that the baby needs to be met, enabling a process of healthy ripening.

The woman can only enter this special state if the environment around her gives her sufficient conditions to feel safe and protected. These characteristics can be understood for a non-adolescent woman, for the pregnant adolescent it is necessary that she can reorganize herself from the abrupt changes of the pregnancy and also prepare herself to be able to offer a facilitating and healthy environment for the development of her baby.

The support received from the families of pregnant adolescents seems to have contributed so that they could support the experience of changes and, despite the increase in concerns, problems, responsibilities, domestic tasks and attention directed to the baby, they take the responsibility of changing from daughter to mother and girlfriend for wife and they were able to experience the hope of restructuring themselves. This movement of initial anguish and subsequent restructuring occurs was also seen by Valila, Moraes, Dalbello, Vieira, Beretta and Dupas, at the time of adolescence and, emotional immaturity is observed, maturity is developing and when faced with pregnancy and the need to assume responsibilities is necessary to mature.

In the interviewees’ statements, it can be seen that some consider that such maturity has brought several negative aspects from a social point of view, such as having too much responsibility, not leaving, financial worries, abandoning studies, having less leisure time and
assuming a position of adult who, in their view, has more aspects related to responsibility and the experience of motherhood, data that are in line with other studies. Some of them report that there has been a change for the better, but that, as a mother, they are closer to their daughter so that she does not become pregnant in adolescence, which makes us think that in fact, in the view of women who were mothers in adolescence, they perceive the abrupt maturity as something negative and those that refer as positive do so as a defense mechanism of the ego.

In the interviewees' statements, only one reported having depression, in the others, no signs of psychopathology were observed and they seem to have managed to adapt to daily life within the standards of their social group, even at the cost of a false maturity. From the point of view of the stability of affective bonds, all the interviewees had their children, but here the emotional bond established with them was not investigated.

As for the bonds with the partners, some remain married, others preferred to remain single and others, still, separated, not showing a pattern of behavior. These differences may be associated with how one of the adolescents can experience the re-elaboration of pregnancy in adolescence, an event that made them need to change their way of seeing and relating to the environment and relating to it.

Addressing the issue of knowledge of emotional aspects can be of great importance for the management of health professionals, especially the psychologist, so that the adolescent mother can adapt to her new way of seeing the world, proposing actions that can lead to re-elaboration feelings, having an adequate safety net.

Thinking about the functioning of the adolescent mother and her feelings can contribute to the development of actions aimed at promoting mental health during pregnancy, contributing to a sufficiently good bond between mother and baby.

**CONCLUSION**

It was observed that the predominant feeling when these women surveyed learned about the pregnancy was fear for believing that the impact of the news of pregnancy could damage their relationships, especially with their families. The predominant damages were related to affective support, which seems to have triggered the experience of primitive aspects such as regressive dependence and use of primary resources.

By being supported by family care, they created resources for the development of maturity. Even though it cannot be said that it is a true maturity, there are signs of the development of a false maturity as a resource for the adaptation to the environment and the continuity of development, even with this failure. The support by parents, friends and the baby's father was carried out only for some interviews and, in these, there is an explanation of the importance of the family of origin.

All of them reported abrupt changes in the direction of development, showing that the fact of having become pregnant in adolescence led them to dream interruptions and to assume the responsibility of being a mother. This fact can bring social and financial consequences to these women and some of them deny this fact saying that pregnancy has brought gains, but there are signs that this is a mechanism of defense of the ego, to give continuity to daily life.

For future research, it is interesting to be able to work with action research with groups of teenage mothers and their affective support groups, making it possible to work on strengthening bonds.

This work presents as a limitation the fact that the data analysis focused on the memory that ten women have about the moment of pregnancy and how they perceive it today, after having lived motherhood, therefore it does not necessarily reflect what they would report if the interview was conducted during pregnancy, so that other investigations at the time of teenage pregnancy can show the moment lived.
It is essential that programs are made available to increase the means of information about sexuality and its ways of prevention in public policies for the care of adolescents, which can be the education network, an important resource for exchanging with this public.

It is also important to promote projects in communities and in social media, so that these adolescents are inserted and become active individuals and committed to their goals and plans, resignifying their context in this stage of life.

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CONTRIBUTIONS
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