

THINKING SPACE [3]



Risk and resilience: exploring the necessity and (im)possibility of being a critical and feminist youth worker in neo-liberal times.

Ali Hanbury and Ali Ronan

THINKING SPACE offers practitioners a place to explore contradictions and tensions in our work and this paper has grown out of collaboration between feminist youth work practitioners and academic/post-doctoral researchers in Youth Studies. We want to develop a preliminary discussion of the emerging discourse of ‘resilience’ which is fast becoming *en vogue* in both youth and community policy and practice, and seems to describe a response by young people which is rather compliant and docile. We do this through two reflections on stories from practice experience within sexual health in order to interrogate the structural ‘everydayness’ of power and expectations of how it may operate in the lives of young women. We want to rethink and revise such terms as ‘resilience’, with its related concepts of ‘resistance’ and ‘success’, by using examples from youth work practice from the authors’ experience in sexual health settings. Instigating debates about the notion of resilience appears to question the unquestionable from a ‘common-sense’ neo-liberal perspective.

The current political imaginary defines resilience as possessing the capacity to ‘bounce back’ from adversity whether in the public or the private sphere (Harrison, 2013). The central narratives that frame this discourse are significant because they emerge concomitantly with neo-liberal ideas about individual responsibility and ‘active citizenship’ (Harrison 2013). It is not surprising that ‘Keep calm and carry on’ has (again) become the mantra of the moment while the very notion of resilience has become crucial to the creation of a political ‘happiness’ agenda.

The deployment of this resilience discourse is a significant and politically valuable strategy. It creates a politics of anticipation, which in turn links systemic and organisational resilience to

ideas of personal resilience. Harrison (2013) suggests that this shift towards valorising personal resilience is problematic for several reasons; not only does it support normative value judgements but it may also overemphasize the ability of people to ‘bounce back’. It occludes questions of gendered, classed and raced inequalities and becomes part of a wider neo-liberal agenda that shifts responsibility for dealing with crisis away from the public sphere and onto the individual.

The scripting of young women’s (hetero)sexuality: the ‘dangerous’ jigsaw of adolescence

We argue that the notion of problematic adolescent lives still shapes contemporary policy discourses of targeted interventions. Some of the evidence for our debate comes from the authors’ experiences and reflections of practice within a sexual health organisation in which practitioners are ‘concerned’ by the ways in which young women’s lives are assumed to be lived in relation to (hetero)sexual activity. We argue that young women’s sexuality is still seen as problematic and/or dangerous. The Family Planning Association (FPA) link this explicitly to notions of resilience (2012) suggesting that:

Resilience and competency building are central to helping young people navigate adolescence in healthy ways. Building on some previously published models of resilience work, [we explore] how to work with excluded, looked-after and targeted young people to nurture their resilience, maintain their sexual health and wellbeing and minimise their involvement in risk taking behaviours potentially damaging to themselves and others.

We question the ways in which the language of resilience plays out through targeted, policy driven interventions that are designed to provide contraception to young women but which are based on measurable outputs and with outcomes linked explicitly to financial reward through payment by results within commissioned services. We ask what the relationship is between current notions of resilience to those examples of young women resisting the very means by which they are supposed (or expected) to be resilient and compliant i.e. through accepting prescribed contraceptive methods to prevent pregnancy.

Reflection one

A young woman taking the progesterone-only pill asked a youth worker whether this could be affecting her sex drive as she was less interested in having sex than before. The youth worker relayed this query to a sexual health nurse at a local clinic who stated that it could affect libido but that they usually don’t tell the young women this because they might stop taking it and ‘end up pregnant’.

The young woman in this situation was displaying behaviours which we view as agentic and

engaged with her sexual responsibility and sexual relationships. Yet the response was to silence her concerns by bringing in the ‘expertise’ of the nurse. This leads us to ask, ‘Are youth workers unknowingly colluding with a regime of silencing young people’s debates and resilient behaviours despite an apparent commitment to participation and youth voice agendas?’ If so, the focus on young peoples’ resilience has become a well-used trope for youth workers as their work has shifted to increasingly focus on developing young peoples’ individual capacity to resist what is perceived as behaviour that threatens the hegemonic and political notion of active citizenship.

In our example, the nurse is positioned as holding an ‘expert’ view; as someone who ‘knows best’ and is simultaneously a professional who unwittingly but effectively silences the experiences and concerns of the young woman. The sexual ‘interest’ of the young woman is pitted against the common-sense Government commitment to reducing teenage conception rates so that sexual pleasure is side-lined and the young woman must accept that sacrifice for the greater good i.e. to comply with the aim of reducing teenage pregnancies.

Young women’s bodies as a potential battleground for competing ideologies

In relation to contemporary feminist work with young women, we believe there is no doubt that the female body continues to be made public, visible and problematic. The female, sexualised body has become a ‘battleground’ (borrowing from Barbara Kruger) for legislation, Government initiatives and intervention, and media imagery. Dominant and hegemonic discourses create an essentialist view of women’s bodies as a legitimate site for intervention and experimentation. The female body becomes paradoxically ‘disembodied’, in need of procedures, processes and prescriptions to make it docile and malleable. We ask of the readers, ‘What forces are at play and what are the stakes if we take the view that contraceptive implants are safe and effective bodily interventions carried out by experts yet bodily events managed and controlled by the young woman herself are viewed as deviant and disgusting?’ (Tyler, 2008).

Using the specific example of prescribed contraception use, we have also noted the seemingly unproblematic, ‘everydayness’ and casual celebratory nature of women’s access to hormonal contraceptive methods (both prophylactic and ‘emergency’).

Reflection two

A youth worker was concerned about a number of working class white young women attending an alternative education programme, who were sexually active but not currently using a prescribed method of contraception. The young women were stating that they did not use contraceptive methods, as they did not want to be ‘putting drugs’ into their bodies. They appeared very clear in their argument that adults were always telling them not to use/

take/put drugs into their bodies and were therefore mobilising this as an argument for not using hormonal contraceptives. The youth worker here was exasperated and wanted the local sexual health service to come to convince the young women that hormonal contraception was a legitimate 'drug' that was safe to use.

We suggest that the young women in this situation were having an active and 'savvy' debate which, as feminist youth and community workers we advocate and promote. Yet here the response was to silence their concerns by bringing in the 'expert'! If we view this situation from a core youth work principle of encouraging discussion, debate and challenging norms, we can see how the young women's actual resilience to the assumption of the benefits of using hormonal contraceptive methods becomes a deviant act.

The increasing individualised neo-liberal agenda towards young women and their bodies often removes them from the wider social context of feminist campaigning for safer woman-led reproductive behaviours. There is a central paradox for feminists, who demand on the one hand access to free and effective contraception and abortion choices, and on the other hand that chemical – and hormonal-based reproductive technologies should be free from harmful side effects. However, competing political discourses about adolescence often view young women in disembodied and disempowering ways, with rafts of strategies and implementation plans which strive to reduce teenage pregnancies, limit involvement in gangs, encourage the 'fight' against obesity and so on. These policy interventions seek to make some young lives/bodies not only docile but also unresisting and unproblematic.

There is another central paradox for feminist youth workers highlighted when researching resilience. Many studies focus on the unquestionable markers of success in relation to the positive psychological development and economic accomplishment of individuals, families and communities (Masten, 2009; Ungar, 2008), a perspective that youth workers in general would endorse. These studies often focus on the capacity of individuals to become resilient by generating individualised narratives that illustrate the possibility of 'learning' or 'building' resilience. However, there is a troubling possibility that youth work interventions that are implemented from within a resilience framework create 'resilience against resistance' and furthermore, ignore the societal and political inequalities that impact upon the capacity for 'success' in narrow terms. In contemporary politics, resilience encourages acquiescence not resistance.

In this second practice example youth work becomes a vehicle for teaching young people to acquiesce in adult-led expert agendas. What we would like to put forward is a call for youth and community workers to unpack and comment on a politically current and powerful rhetoric. Let us reflect upon the degree to which we are delivering the work with young women around the importance of consent, the ability to negotiate relationships, an awareness of their body and the significance of sexual pleasure.

Conclusion: The need for critique and debate in feminist youth work

While this specific discussion of resilience and young people looks at the ways in which young women, who engage in heterosexual practice, are encouraged to make ‘choices’ about their contraceptive use it also uses feminist youth work as its wider context. Therein lies another paradox; while feminist youth work seeks to challenge gendered inequalities by giving young women both confidence and self-belief, it can unwittingly play into the hands of a subtle and pervasive neoliberal agenda. Words like ‘resilience’, ‘choice’ and ‘empowerment’ create the appearance of feminism that simultaneously privileges individual effort and triumph and in doing so ignores structural and gendered injustice. We think there is an emergence of a new gender regime, creating a space where the politics of meaning and imagery become inextricably linked with wider issues of choice and political economy. In this way, we argue that the visible mark of the sub-dermal contraceptive implant becomes a signifier, a marker of maturity and sexual activity. It becomes part of a common sense approach to (hetero)sexuality’s rites of passage.

There are other contradictions; it is undeniably important that young people feel sufficiently resilient and equipped to handle their lived situations. Working with young people to develop their resilience in sexual health can help them understand how to negotiate the complexities of consent, to understand the breadth and scope of women’s rights and what wider support is available to them. Many feminists in the 1970s mobilised themselves, as part of the broader women’s health movement, to question and critique the medicalising of women’s bodies. They drew attention to the powerful and potent drugs used as contraceptives as well as the raced and classed arguments about contraception use and the eugenicists’ vision of controlling the population. It appears that over forty years later we are in a situation where youth workers, women’s health advocates and in some instances young women, are no longer critiquing the use of hormonal contraceptives but instead are celebrating and hailing the fact that such a ‘simple’ and free intervention can prevent (unintended?) pregnancies.

There remains a need for a space for the core youth work principles and practice of encouraging discussion, debate and challenging ‘norms’. We continue to reflect upon the (im)possibility of being a critical feminist youth worker in neo-liberal times and we ask; what is the role of professional youth and community work in creating a critical and feminist site for exploration?

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