Healthy Families: Combatting Stereotypes and Stigmas of Teen Pregnancy

Alexa DeCarlo & Julie Leventhal, Ph.D., CFLE Department of Educational Psychology – University of North Texas

Introduction & Review of Literature

Teen pregnancy (giving birth between the ages of 10 and 19) accounts for approximately 700,000 births per year in the United States (Zer et al., 2019). Becoming a teen mother is often attached with negative social stigmas and biases related to age, decision-making, and ability to care for a child. These biases may internally lead to negative perceptions of self and externally lead to discrimination in access to prenatal care (Jones et al., 2019).

Teen pregnancy is a societal concern that is associated with poverty, lack of education, and stereotyping. Teen mothers may feel judged for a variety of reasons such as their age, marital status, and presumed substance abuse and are often deemed lazy, irresponsible, promiscuous, and unfit to be parents (Herrman, 2007). These widespread negative beliefs may influence a teenager's levels of self-esteem, thus dissuading them from utilizing necessary prenatal services which may then also lead to increased risk of experiencing ongoing negative outcomes (i.e., pre-term delivery, actual substance use, persistent self-esteem issues) (Tilghman & Lovette, 2008; Wiemann et al., 2005). Furthermore, pregnant teenagers face high levels of social vulnerability, meaning they are unable to withstand the impacts of the ongoing negative external stressors placed upon them (Yee et al., 2019). For example, they often face discrimination in both education and work, as only about half of all teen mothers earn a high school diploma by the age of 22 and they are more likely to face long-term diminished salary and job satisfaction (leading to increased risk of long-term poverty and dependence on welfare services; Comlossy, 2014). This indicates that while many of the negative outcomes associated with teen pregnancy directly affect the family unit (i.e., mother and newborn), there are societal implications tied to teenage pregnancy as well.

As a result of social vulnerability, teen mothers may be less likely or unwilling to participate in necessary prenatal services even though they are the most likely to adverse pregnancy outcomes (Fong et al, 2016). Positive outcomes associated with receiving prenatal care include receiving guidelines for maternal nutrition, mental and physical health support for mothers, reduced risk of health issues (i.e., anemia, hemorrhage, hypertension), opportunity for learning about developmental outcomes for proper prenatal growth, and having an opportunity to ask questions regarding their experiences or address various personal and pregnancy concerns (Ahmed & Manzoor, 2019: Chartre et al., 2013).

Purpose and Research Questions

While previous research on teen motherhood has focused on demographics and outcomes, there has been little research regarding perceptions of teen mothers and the influence of stigmas on access to prenatal care. Therefore, the purpose of this study was to explore the experiences of teen mothers in order to understand how social perceptions of teen pregnancy influence a young mother's ability to access prenatal care and that impact on maternal and fetal health and development. The following research questions were addressed:

- 1) How do social perceptions influence a teen mother's beliefs about themselves?
- 2) How do social perceptions associated with teen pregnancy influence access to prenatal care?

Theoretical Perspective

To better contextualize the various influences on teen pregnancy, it is imperative to explore the intersectionality of individuals, community factors, and society when examining access to prenatal care. According to Systems Theory, a system is a set of parts, that when combined together, form a whole. Within this framework, the interworking parts of each system have specific roles that help the overall system function. If and when there is a ripple affect among parts, it is likely to impact every other system (Broderick, 1993). Individual experiences of pregnancy (i.e., perceptions of the pregnancy), social barriers (i.e., stigmas, stereotypes), and access to prenatal care all impact each other. As a result of the changes they experience during pregnancy, teen mothers face many stigmas and stereotypes that prevent them from receiving adequate prenatal care. This lack of prenatal care may then result in higher instances of birth complications and later negative outcomes for mother and child.

Teen Pregnancy Physical changes, feelings of inadequacy, lack of preterm delivery, fetal growth peer and parental support, homelessness, leaving school. Lack of Prenatal Care Preterm delivery, depression, maternal depression, maternal obesity, infant developmental issues, risk taking and later delinquency, long-term poverty.

Methodology

Utilizing a phenomenological approach, four semistructured Zoom interviews were conducted with women ranging from 23 to 41 who had previously given birth between the ages of 16 and 19. Participants were recruited through forum-based social media websites allowing for a variety of individuals to be reached, regardless of geographic location. The only limitation to participation was that participants were over the age of 18 and could not currently be pregnant. During each interview, participants were asked questions such as "Can you tell me about a time or experience where you felt judged as a teen mother?" and "What are some resources related to your pregnancy that you were aware of and utilized while you were pregnant?" allowing for participants to reflect on their own unique experiences. Each interview was transcribed and later analyzed for themes utilizing descriptive coding.

Preliminary Results and Discussion

While data collection for this study remains ongoing, preliminary coding and thematic analysis revealed various themes related to social perceptions and their influence on prenatal care. Regarding RQ1, the themes of self-isolation, unpreparedness, and lost goals were found in relation to social perceptions from others that internalized to self. Regarding self-perception, teen mothers felt that they were unable to relate to peers they had previously interacted with. Many also felt disappointed in themselves, noting they had previously been straight-A, heavily involved students. Finally, some mothers felt disappointed in their quick change in plans after having to place their goals on hold. While all participants noted negative interactions with other adolescents, none noted the experience as negatively influential to their self-esteem throughout pregnancy. Most of the negative perceptions of self stemmed from the internalization of stereotypes, thus leading to self disappointment and isolation.

Influence of Social Perceptions on Teen Pregnancy	
Theme	Quote
Self-	"You need b have like a new start I needed to take a step back and I really just needed to block everybody I've ever known from my previous life out. I don't know, that was that was really hard. I just needed to not feel sorry for myself It was just easier to not see and hear what everyone else was doing and saying."
Isolation	"H honestly isolted myself, which probably wasn't the best thing, but you need to take some time to yourself because you're going to have so many people giving their input. Social media, parents, teachers all of these people giving you what they think you should do."
Disappoint ment in	"I was extremely goody good in school. You knowI didn't hang out with the popular kids by choice Like, I've never been to a party. I've never I never really got in trouble I didn't want to be like that."
Self	"I was thinking about [teen pregnancy] and thinking that it was a really negative thing. I felt, I mean, you feel bad about yourself because other people look at it as a negative thing, too."
	"I wanted to be a neurosurgeon because I was obsessed with the brain. At no point was a family ever included in that dream."
Lost Goals	"I was really sad for a long time. And not even like because of how my family felt about [pregnany]. And I'm just very hard on myself in general, like you know, I wanted to do everything that I could."

Regarding RQ2, the themes of medical discrimination, interaction with older parents, and fear of telling others were found to influence access to prenatal care. Some participants experienced negative reactions from both doctors and other parents which explained their hesitation to reach out for additional assistance or support. Additionally, participants expressed a fear of telling others about their pregnancies to avoid discomfort.

Influence of Social Perceptions on Access to Prenatal Care		
Theme	Quote	
Medical Discrimi-	"I just felt on edge with the doctors, like I had to explain myself more to them than anyone else. And they didn't care."	
nation	"When I was going to the hospital for treatment for my prenatal care and every single time I went for an appointment they asked me if I was sure I wanted to keep the baby nobody should ever leave a prenatal appointment feeling bad about being pregnant."	
Other (older) Parents	Being a pregnant berage mom going into these birthing) classes with all these older people and their husbands was awful. To think about now and being there then. Awful." "I don't even remember how much older than me that they were. They must have only been like 10 years older than me, so it wasn't a huge difference, but I think because of my age, a lot of people just think they have a right to judge you and ask you questions and stuff."	
Fear of Telling Others	"Like, my morn was gonna kili me. I didn't have anyone to talk to. So, yeah, I mean, fear. It was just like "oh my gosh, what's gonna happen, I'm all alone." "Instead of telling people that I was pregnant, I told them that I got suspended and that I was going to be out of school for the rest of the semester. Part of me did that because I would rather tell people I was suspended. I was scared, I didn't even know if I was online to keen the shalv."	

Discussion and Implications

Both internally and externally, teen mothers face numerous negative interactions regarding their pregnancies. Whether it be with doctors, with other parents, or with themselves, negative social stigmas directly impact they way a young woman perceives herself and her ability as both a parent and an adult.

Prenatal services, specifically for teen mothers, would ensure that these mothers take necessary steps and precautions for a healthy pregnancy. Many risks associated with teen pregnancy, such as postpartum depression and developmental delays could be prevented or reduced with screenings and proper prenatal care (Zer et al. 2019). Professionals who work with teen mothers can increase resiliency for teen mothers by including additional mental health resources, physical check-ups, and education programs to ensure proper care is being achieved for teen mothers and their children. The health of the infant child largely depends on the care received by the mother, so it is necessary for both teen mothers and professionals to work together to increase the likelihood of more positive outcomes. Families consisting of a teen mother and child, while vulnerable, are often resilient. Specialized services tailored to young mothers would promote healthy behaviors throughout pregnancy, fostering healthy relationships between mother and child, promoting a future secure attachment.

Objectives

- Describe how stereotypes associated with teen pregnancy impact access to prenatal care.
- Recognize the overlapping systems that impact maternal decision making.
- Discuss the relationship between stigmatization and a teen mother's perception of themselves.

Works Cited

Ahmed, H., & Manzoor, I. (2019). Knowledge about the importance of antenatal care among females of child bearing age living in a suburban community of Lahore. *Pakistan Journal of Medical Sciences*, 35(5), 1344-1348. https://doi.org/10.12669/pjms.35.5.1256

Broderick, C. B. (1993). Understanding Family Process: Basics of Family Systems Theory. Thousand Oaks, CA: Sage Publications.

Chartre, G., Gomez-Lobo, V., Damle, L., & Darolia, R. (2013). Centering prenatal care: Does group prenatal care improve adolescent pregnancy outcomes? *Journal of Pediatric and Adolescent Gynecology*, 26(2), e47-e48. https://doi.org/10.1016/j.jpag.2013.01.005

Comlossy, M. (2014). Delivering Good News. State Legislatures, 30(3), 30.

Fong, A., Yang, D., Zaki, M. N., Duffy, J., King, E., Pan, D., & Ogunyemi, D.A. (2016). Teen pregnancy, substandard access to prenatal care, and adverse pregnancy outcomes. *American Journal of Obstetrics and Gynecology, 214*(1), S222-S223. https://doi.org/10.1016/j.ajog.2015.10.445

Herrman J. W. (2008). Adolescent perceptions of teen births. *Journal of obstetric, gynecologic, and neonatal nursing: JOGNN, 37*(1), 42–50. https://doi.org/10.1111/j.1552-6909.2007.00201.x

Jones, C., Whitfield, C., Seymour, J., & Hayter, M. (2019). 'Other girls': A qualitative exploration of teenage mothers' views on teen pregnancy in contemporaries. *Sexuality & Culture*, 23(3), 760-773. https://doi.org/10.1007/s12119-019-09589-4

Tilghman, J., & Lovette, A. (2008). Prenatal care: The adolescent's perspective. *The Journal of Perinatal Education*, 17(2), 50–53. https://doi.org/10.1624/105812408X298390

Wiemann, C., Rickert, V., Berenson, A., & Volk, R. (2004). Are pregnant adolescents stigmatized by pregnancy? *Journal of Adolescent Health*, 36(2005), 352.e1–352.e7. https://doi.org/10.1016/j.jadohealth.2004.06.006

Yee, C. W., Cunningham, S. D., & Ickovics, J. R. (2019). Application of the social vulnerability index for identifying teen pregnancy intervention need in the united states. *Maternal and Child Health Journal*, 23(11), 1516-1524. https://doi.org/10.1007/s10995-019-02792-7

Zer, S., Wainstock, T., Walfisch, A., & Sheiner, E. (2019). Perinatal outcomes and long-term health in offspring of teenage mothers. *Journal of Pediatric and Adolescent Gynecology*, 32(6), 622-627. https://doi.org/10.1016/j.jpag.2019.08.003