Teenage Pregnancy Essay, Research Paper

The Truth About Teen Pregnancy

Although the rate of teenage pregnancy in the United States has declined greatly

within the past few years, it is still an enormous problem that needs to be addressed.

These rates are still higher in the 1990’s than they were only a decade ago. The United

State’s teenage birthrate exceeds that of most other industrialized nations, even though

American teenagers are no more sexually active than teenagers are in Canada or Europe.

(Gormly 348)

Recent statistics concerning the teen birthrates are alarming. About 560,000

teenage girls give birth each year. Almost one-sixth of all births in the United States are to

teenage women are to teenage women. Eight in ten of these births resulted from

unintended pregnancies. (Gormly 347) By the age of eighteen, one out of four teenage

girls will have become pregnant. (Newman 679)

Although the onset of pregnancy may occur in any teenager, some teens are at

higher risk for unplanned pregnancy than others. Teenagers who become sexually active

at an earlier age are at a greater risk primarily because young teenagers are less likely to

use birthcontrol. African-American and Hispanic teenagers are twice as likely to give birth

as are white teenagers. Whites are more likely to have abortions. Teenagers who come

from poor neighborhoods and attend segregated schools are at a high risk for pregnancy.

Also, teenagers who are doing poorly in school and have few plans for the future are more

likely to become parents than those who are doing well and have high educationsl and

occupational expectations. Although the rate of teenage pregnancy is higher among low-

income African-Americans and Hispanics, especially those in inner city ghettoes, the

number of births to teenagers is highest among white, nonpoor young women who live in

small cities and towns. (Calhoun 309)

In addition to the question of which teenagers become pregnant, interest is shown

in the social consequences of early parenthood. Adolescent parents (mostly mothers) may

find that they have a “lost or limited opportunity for education.” (Johnson 4) The

higher a woman’s level of education, the more likely she is to postpone marriage and

childbearing. Adolescents with little schooling are often twice as likely as those with more

education to have a baby bafore their twentieth birthday. Some 58% of young women in

the United States who receive less than a high school education give birth by the time they

are twenty years old, compared with 13% of young women who complete at least twelve

years of schooling. (Tunick 11) Teens who become pregnant during high school are

more likely to drop out. (Calhoun 310) A teen mother leaves school because she cannot

manage the task of caring for a baby and studying, and a teen father usually chooses a job

over school so that he can pay bills and provide for his child. (Johnson 4) Teen mothers

usually have fewer resources than older mothers because they have had less time to gather

savings or build up their “productivity” through work experience, education, or training.

(Planned Parenthood 1) Because of this, teen mothers are generally poor and are

dependent on government support. (Newman 679) The welfare system is usually the

only support a teen parent will receive. Welfare benefits are higher for families with

absent fathers or dependent children. (Calhoun 309) In some cases, teen mothers may

also receive help like Medicaid, Food Stamps, and “Aid to Families with Dependent

Children” (AFDC). (Newman 679)

Besides educational and financial problems, teenage mothers may face a great deal

of emotional strain and may become very stressed. Teen mothers may have limited social

contacts and friendships because they do not have time for anything other than their baby.

Lack of a social life and time for herself may cause the teenage mother to become

depressed or have severe mental anxiety. (Johnson 5) Depression may become worse for

a teenage mother because she usually does not know much about child development or

about how to care for their children. Children who are born to teenage mothers usually

suffer from poor parenting. (Berk 188) Also, children of teenage parents start being

sexually active before their peers and they are more likely to become teenage parents

themselves. These children may also suffer from financial difficulties similar to that of

their parents. “Children whose mothers are age seventeen or younger are three times as

likely as their peers to be poor, and are likely to stay poor for a longer period of time.”

(Calhoun 311) The children born to teenage mothers sometimes score lower on

development tests than the children of older mothers. It seems that “rather than declining

over time, educational deficits increase in severity and the children show lower academic

achievement, higher drop out rates, and are more likely to be held back in school.”

(Calhoun 310)

Teenage pregnancy comes with not only a child, but also many consequences.

Teen mothers face greater health risks than older mothers, such as anemia, pregnancy

induced hypertension, toxemia, premature delivery, cervical trauma, and even death.

Many of these health risks are due to inadequate prenatal care and support, rather than

physical immaturity. The teenage mother is more likely to be undernourished and suffer

premature and prolonged labor. (Calhoun 311) The death rate from pregnancy

complications are much higher among girls who give birth under age fifteen. (Gormly

347) Poor eating habits, smoking, alcohol and drugs increase the risk of having a baby

with health problems. (Johnson 3) The younger the teenage mother is, the higher the

chances are that she and her baby will have health problems. This is mainly due to late

prenatal care (if any) and poor nutrition. (Planned Parenthood 1) An adolescent mother

and her baby may not get enough nutrients and, because the mother’s body is not fully

mature, she may have many complications throughout the duration of the pregnancy.

(Johnson 4)

Along with the mother, the children of teenage parents too often become part of a

cycle of poor health, school failure, and poverty. Infants born to teenage mothers are at a

high risk of prematurity, fragile health, the need for intensive care, cerebral palsy, epilepsy,

and mental retardation. (Johnson 5) Low birth weight is the most immediate health

problem. Babies born to teenagers are often born too small, too soon. Low birthweight

babies may have immature organ systems (brain, lungs, and heart), difficulty controlling

body temperature and blood sugar levels, and a risk of dying in early infancy that is much

higher than that of normal weight babies (five and one-half pounds or more). (Calhoun

310) “The death rate for babies whose mothers are under fifteen years of age is double

that of babies whose mothers are twenty to thirty years old.” (Johnson 5)

Because of these extremely serious problems, many government, as well as local,

organizations are fighting to stop the occurence of teenage pregnancy by helping to

educate children of the risks involved and the consequences after. Some research

indicates that “the percentage of teenage birthrates has declined simply because fewer

teenagers are having sexual intercourse and more adolescents are using contraceptives.”

Researchers say that the recent trends in sexual activity and contraceptive use are the

result of a number of factors, including greater emphasis on abstinence, more conservative

attitudes about sex, fear of contracting sexually transmitted diseases, the popularity of

long-lasting birthcontrol methods such as the contraceptive implant (Norplant) and the

injectable (Depo-Provera), and even because of the economy. In addition, researchers say

that young people have become somewhat more conservative in their views about casual

sex and out-of-wedlock childbearing. Some attribute this change in attitude mainly to

concern about sexually transmitted diseases. Others say that it is because of the

involvement of conservative religious groups in the public debate over sexual behavior.

Many researchers believe that the strong economy and the increasing availability of jobs at

minimum wage have contributed to fewer births among teenagers. (Donovan 32)

Americans, however, seem to be against some of the methods used by these various

organizations to reduce the teen pregnancy rates. “The most controversial aspect of

adolescent pregnancy prevention is the growing movement to provide teenagers with easy

access to contraceptives.” Most Americans believe that giving teenagers birthcontrol pills

and/or condoms is the same as telling them that early sex is allowed. Some studies that

were conducted in Europe show that some clinics in Europe that distribute contraceptives

to teenagers have the same sexual activity rate as in the United States. However, in these

European studies, it is apparent that teen pregnancy, childbirth, and abortion rates are

much lower. (Berk 190)

Teenage pregnancy does cause many problems for the mother, child, and economy.

There are, however, some incidences where the mother overcomes this down-hill trend

and makes a successful life for her and her child. The outcome of teenage pregnancy turns

out better if the mother goes back to school after she has given birth. (Berk 190) Staying

in school may help to prevent teenage mothers from having a second pregnancy. (Planned

Parenthood 2) The outcome is also better if the mother continues to live with her

parents so that they can help to raise the child. Young, teen mothers need health care for

themselves as well as their children. An adolescent mother also needs a great deal of

encouragement to get her to remain in school. Single teenage mothers also need job

training so that they can get a good job to support themselves and their children. Teen

mothers need to be taught parenting and life-management skills and also need high quality

and affordable daycare for their children. Schools that provide daycare centers on campus

reduce the incidence of teenagers dropping out of school. These school programs also

decrease the likelihood that the teen mother will have more children. (Berk 189)

Because the government has begun to take action in preventing teen pregnancies,

the rate has continued to decline. The large numbers of young people in America–as well

as the values, health, education, skills they gain–will greatly affect the future of society.

Therefore, increased attention should be given to the well-being of adolescents. Since

greater care is being given to the young people, improvements are already occuring. The

level of education that young people receive is much higher than that of their parents, and

the “expectation that young people should obtain at least some secondary schooling” is

growing. The numbers of women who have a child during their teen years is declining,

and recognizing the impact of childbearing on education, parents and communities are

continuing to discourage sexual activity, marriage, and motherhood at a young age.

(Tunick 13) These recent trends, if continued, will more than likely educate the

adolescent population about the risks and consequences of teenage pregnancy and reduce

the incicence of teen pregnancy and childbirth altogether.

Berk, Laura E. Child Development. 4th ed. Boston: Allyn and Bacon, 1997.

Calhoun, C. et al. Sociology. New York: Glencoe-McGraw-Hill, 1995.

Donovan, Patricia. “Falling Teen Pregnancy, Birthrates: What’s Behind the Declines?”

The Guttmacher Report. 1.5 (Oct. 1998); 31-34.

Gormly, Anne V. Lifespan Human Development. 6th ed. Fort Worth: Harcourt Brace,

1997.

Johnson, Sherry. Teen Pregnancy: Too Much, Too Soon. Waco, TX: Health Edco.,

1995.

Newman, Philip R. and Barbara M. Newman. Childhood and Adolescence. Pacific

Grove: Brooks/Cole Publishing Co., 1997.

Planned Parenthood Federation of America. “Pregnancy and Childbearing Among U.S.

Teens.” Online. Internet. 29 Mar. 1999. Available

http://plannedparenthood.org/Library/teen-pregnancy/childbearing.htm

Tunick, Barbara. “Issues in Brief: Risks and Realities of Early Childbearing Worldwide.”

The Guttmacher Report. (Feb. 1997); 10-14.