The Reasons Why Disadvantaged Teenage Girls Become Mothers

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Abstract

Many experts study teenage pregnancy and suggest that lack of education, resources, and preventive efforts are the reasons why disadvantaged teenage girls decide to become mothers. This approach tends to overlook the evolutionary, cultural and biological factors that may influence decisions of teenage girls. Exploration of teenager’s perceptions of the future after birth and their ability to complete life-goals is important as disadvantaged teenage girls perceive motherhood as a career path choice. The author argues that consideration of evolutionary, familial, vocational, and cultural factors may help explain why so many disadvantaged teenage girl choose to become mothers.

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Brown, Brady, and Bayley (2010) presented teenage pregnancy as a problem amongst low-income youth with nearly 16 million pregnancies worldwide annually. The World Health Organization reported that 95% of these pregnancies occur in low income countries (2011). Researchers think the answer to this problem is to increase sexual health education and access to resources, but teenagers are still becoming pregnant (Brown et al.). When polled, most teenagers feel they have adequate knowledge about contraception and how to avoid pregnancy (Brown et al.). So, why are teenager pregnancy rates so high? Johns, Dickins, and Clegg (2011) reported that teenage pregnancy may provide an evolutionary advantage for disadvantaged teenagers. Disadvantaged teenagers have lived a life of deprivation, risk and poverty, therefore giving birth may be evolutionarily advantageous to the young woman in her child-bearing prime (Johns, et al.). Commendador (2007) agreed with the evolutionary perspective, but added that teenage pregnancy is normal outcome in disadvantaged cultures. Jumping-Eagle, Sheeder, Kelly, and Stevens-Simon, (2008) found that 58% of disadvantaged teenage girls feel they can still achieve their life and educational goals while raising a child (p.77). This idea of being able to achieve life goals while raising a child does not typically happen in practice, but is often articulated by girls who were raised by a teenage mother (Klaw, 2008). The exception to this rule is teenage girls with adult mentors who were teenage mothers themselves and were able to finish their education and obtain a career (p.444). Another reason teenage girl become pregnant, according to Bender (2008), is their view that child-rearing is a viable career choice when other educational venues appear less attainable, or as Smith, Skinner, and Fenwick (2008) described, pregnancy as a way to improve a life path. For a more complete explanation of the high prevalence of teenage pregnancies among disadvantaged youth it is important to consider cultural, familial, vocational
and evolutionary factors.

Johns, Dickins, and Clegg (2011) explored how evolution plays a large role in pregnancy rates of disadvantaged youth and acknowledged that these teens often have a lower life expectancy due to “dangerous or risky environments” (p.9). Teenage pregnancy is evolutionarily advantageous to ensure a parent sees his or her child to adulthood as parents in some inner-city communities often do not survive to see their child turn twenty (p.9). Teenage girls may perceive their life expectancy as shortened due to their environment, family members, and upheaval in their lives. This situation leads to early pregnancy not because the girls perceive that they can’t achieve life-goals, but because of their violent communities they think they will not survive long enough. Commendador (2007) looked at this issue from a cultural perspective as unstable communities typically have strong cultural influences and beliefs. For example, in some Native American communities, females are not accepted as women until they give birth, and birth control is postponed until after the first child is born (p. 615). Klaw (2008) examined the cultural influences on teenage pregnancy and how teenagers perceive adults who were teenage mothers. Often, these women are seen as role models, especially if they successfully completed their education and obtained a career. Many teenage girls who become pregnant have mothers that were pregnant as teenagers. From an evolutionary and cultural perspective, disadvantaged teenage girls who live in unstable living situations are better candidates to be accepted as a mother, gain support and obtain a career.

A second reason education and resources fail to prevent disadvantaged teenage girls from becoming mothers is the teenager’s immature thought processes. The teenagers feel able to fulfill their life goals while raising a child and have naïve knowledge of the responsibilities and commitments required to be a mother. Several researchers (Bender, 2008; Jumping-Eagle et al.,
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2008; Klaw, 2008; Raines, 2009; Smith et al., 2012) looked teenagers’ belief that they can have hope and still achieve their life goals within the new role of mother. According to Bender (2008), teenagers become mothers because they have the immature idea that their parents will take care of the child until the teenager is ready to take on the parenting role (p.868). One pregnant fifteen-year-old felt able to continue at school immediately after childbirth and take over child-rearing after school (p.868). Some of the issues not considered were who would look after her child other than the mother, cost of childcare, and whether to breastfeed (p.868). The teenager was unable to articulate what would change in her life with a newborn baby, seemed to think that her life would continue as she knew it just with the addition of a baby (p.868). Klaw (2008) looked at the high expectations disadvantaged pregnant teens have compared to the life goals they actually achieve. Many of these teens feel they can still achieve their life goals, but, in practice, do not. Disadvantaged teenage mothers tend to continue to live in poverty, because it requires hard work, discipline and support to attain education, and a career while looking after a child (p.442). The distinguishing factor in the cases of teenage mothers who rise out of poverty is the presence of a mentor who supported them to “beat the odds” (p.444). This mentor is typically a non-family member who had a teenage pregnancy, completed education and became gainfully employed. Often, teenage girls who feel they can complete their life goals while raising a child have mothers who were teenage mothers. Raines (2008) also looked at the issue of poverty and teenage mothers from the perspective of a nurse practitioner and asked each teenager to discuss her life goals, encouraged education, talked about travel plans, and created a “dream assessment”(p.118). The Nurse Practitioner discussed this “dream assessment” (p.118) with the teen at each visit as a means to encourage life ambitions. She also discusses finances required to have a child, become educated and obtain a career. Together they look at the differences between
a minimum wage salary with childcare deductions, and the salary of a college educated teacher with no children. She hopes to encourage girls to seek further education, and wait to have children until financially stable. She has these discussions with teenage girls as a form of contraception. When a teenage girl looks at the future as the culmination of her choices, it may influence her to postpone pregnancy.

Bender (2008), states disadvantaged teenage girls may continue with a pregnancy when they feel as though motherhood is a viable career goal. These girls typically do not excel in formal education and have no aspirations for education beyond high school. Motherhood is seen as an alternative to advanced education that many teenaged girls find unfulfilling. This trade off of school for motherhood is often considered normal in their communities or cultures, or the girl may have had a teenage mother who dropped out of school to have children (Bender). Smith, Skinner and Fenwick (2012) looked at how some girls see teenage pregnancy as an escape from poor life decisions. In these cases, the teenagers had been participating in binge drinking, drugs, and frequent sexual partners, among other behaviors. When they became pregnant, they stopped these behaviors, and took a renewed interest in settling down (p. 184). The teenage girls who felt as though pregnancy was a path to a better life often had mothers who were teenage mothers themselves (p.184). Raines’ (2008) suggestion as a Nurse Practitioner is to motivate these disadvantaged teenage girls to delay childbearing until after their education. She used a “dream assessment” to encourage teenagers to think about their potential futures: one with children and a minimum wage job, and another with education and a middle-income career (Raines, para. 7). The hope is that teenagers will postpone childbearing in order to pursue education to help with their futures (Raines).
In conclusion, many factors explain for the high prevalence of mothering among disadvantaged teenage girls. Community and cultural beliefs about motherhood and appropriate age to become a mother are salient. The value of teenage motherhood to some cultures is being recognized as a woman. Teenage motherhood can also be evolutionarily advantageous for teens living in violent communities. Teenage mothers often have unreal expectations that a baby will not interfere with attaining future goals. In practice, this is naive thinking, and a large percentage of teenage mothers continue to live in poverty for the duration of their lives. Occasionally, a teenage mother is able to continue to educate herself, and obtain a career, but this is rare, and often attributed to the support of a mentor who was able to do the same. Finally, disadvantaged teenage girls view motherhood as a viable career option. Many disadvantaged girls are not academically inclined and may see child-rearing as a career path. In all of these examples, the biggest predictor of a teenage girl becoming a mother is having a teenage mother herself. Future research should focus on motivating disadvantaged teenage girls to pursue their life-goals prior to pregnancy and NPs in practice could implement interventions such as dream assessments to increase their hope for the future.
References


