## Teen pregnancy

Family, Teenage Pregnancy



Research Paper: Teen Pregnancy Adolescent pregnancy has long been a societal concern, but in the past decade, this issue has become one of the most frequently cited examples of the perceived societal decay in the United States. The United States has the highest teen pregnancy rate in the western world with approximately 1 million adolescents becoming pregnant every year (National Women's Health Information Center). Teenagers are engaging in sexual activity, and at the same time they are choosing not to practice safe sex. Why are they partaking in such behavior? There are many reasons as to why teens are having sex such as love, media influence, poverty, and family. The result of this adolescent behavior is childbearing, which has many negative effects and most teens are unaware of them. A couple of these negative effects are lifestyle change and poverty. Adolescent pregnancies have an effect not only on the teen and her family, but it also has a universal effect on the United States as it has to spend tax dollars on social welfare. Anti-pregnancy campaigns need to be re-evaluated to reach adolescents and to prevent them from the hardships they will endure as a result of having a child at a young age. Focus adolescent services, an information and support web and phone service, states that sexual content is regularly marketed to younger children, pre-teens, and teens and this affects young people's sexual activity and beliefs about sex (par. 2). According to Michael Sutton, in his book Shaking the Tree of Knowledge for Forbidden Fruit: Where Adolescents Learn About Sexuality and Contraception, children are exposed to an overwhelming amount of content filled with sexual messages (25). He gives the following statistics: In 2003, 83% of the episodes of the top 20 shows among teen viewers contained some sexual

content, including 20% with sexual intercourse. Forty-two percent of the songs on the top CDs in 1999 contained sexual content -- 19% included direct descriptions of sexual intercourse. On average, music videos contain 93 sexual situations per hour, including eleven " hard core" scenes depicting behaviors such as intercourse and oral sex. Girls who watched more than 14 hours of rap music videos per week were more likely to have multiple sex partners and to be diagnosed with a sexually transmitted disease. Before parents raised an outcry, Abercrombie and Fitch marketed a line of thong underpants decorated with sexually provocative phrases such as "Wink Wink" and "Eye Candy" to 10-year-olds. Neilson estimates that 6. 6 million children ages 2-11 and 7. 3 million teens ages 12-17 watched Justin Timberlake rip open Janet Jackson's bodice during the 2004 Super Bowl halftime show (25-55). A survey (given to teens 13 to 16 years old) administered by NBC News and People Magazine gave several more reasons as to why teens are having sex. These included: the teens had met the right person, were curious, hoped it would make their relationship closer, pressure from partner, wanted to be more popular and accepted, and to satisfy a sexual desire. Reasons such as curiosity and a desire for popularity cannot be completely helped; they are a symbol of today's society and how times have changed. It is said that if parents sit down with their child at a young age, inform them of the consequences but also give them different views of handling the situations teens will be more likely to not become pregnant. I do believe that if parents instill love and self-worth in their children at a young age, the children will not look for it in the opposite sex. The media holds large responsibility for today's youth participating in sexual activity. Shows

that are geared towards pre-teens should have little (such as holding hands) to no sexual connotation. The act of sex leads to pregnancy, but more specifically is the act of unprotected sex. In Daniel Hong's Why Do So Few Teens Use Protection, because I trust my partner, because it's not comfortable, and because it was unplanned were the reasons given by teens (17), and most other scholars agree. Obviously adolescents do not realize the severity of their risky behavior. It is not being emphasized that only once without protection can cause pregnancy as well as the contraction of an STD. Teens are having sex, they are not using protection, and as a result they are getting pregnant. After the pregnancy come the negative side effects. As a result of becoming a young mother, adolescents will enter a cycle of education failure, poverty, unemployment, and low self-esteem (Smith 62). Often, the teen has to drop out of school in order to work and support their child. Then they are denied many well-paying jobs with benefits because they do not have an education. As a result, the young mother and the baby live in poverty, and after viewing the situation and looking at her life the adolescent incurs self-esteem issues. A lifestyle change takes place. Teens are going from being free of worries to having to take care of another person all on their own. Teens don't have the financial or emotional means to do so. Teens without an education don't have a way of supporting a young child and generally can't handle all the responsibilities that come along with a child. A child needs constant attention, affection, and has numerous expenses that most teens don't have the resources to provide. These kids, who usually range from ages of 15-19, are still living at home, being supported by their parents and are in school full time. They don't have time

to be a full-time student, full-time parent and a full-time worker. Along with the youth and her family, the country as a whole feels the effects of her pregnancy. When adolescents get pregnant the government has to spend money. The children of teen mothers have higher health care, foster care and incarceration costs than those of older parents, says the report commissioned by the National Campaign to Prevent Teen Pregnancy, a nonprofit advocacy group. Most teen mothers come from low-income households in which their mother had them at a young age. It is a continuing cycle so, like their parents, they earn less as adults and pay less in taxes. These funds that are invested in social welfare and the lack of tax money being received from teen mothers could be used for after school programs and our education system. A good question to ask ourselves is, " How can we lesson the teen pregnancy rate?" Pregnancy prevention programs can be found in every state, and they have the potential to be very effective. I say potential because the current programs that are being implemented are not working in the fight against adolescent pregnancy. One of the main problems with these prevention programs is that many focus on abstinence only. The National Campaign to Prevent Pregnancy released a report that outlined the teaching in abstinence-only programs. The outline was as follows: A. Have as its exclusive purpose teaching the social, psychological and health gains to be realized by abstaining from sexual activity. B. Teach abstinence from sexual activity outside marriage as the expected standard for all school-age children. C. Teach that abstinence from sexual activity is the only certain way to avoid out-of-wedlock pregnancy, sexually transmitted diseases, and other associated health problems. D. Teach that a mutually faithful,

monogamous relationship in the context of marriage is the expected standard of sexual activity. E. Teach that sexual activity outside the context of marriage is likely to have harmful psychological and physical effects. F. Teach that bearing children out of wedlock is likely to have harmful consequences for the child, the child's parents, and society. G. Teach young people how to reject sexual advances and how alcohol and drug use increases vulnerability to sexual advances. H. Teach the importance of attaining self-sufficiency before engaging in sexual activity. The Advocates for Youth website stated that there is no scientific evidence that abstinenceonly-until-marriage programs are effective. I agree with them; the report mentioned " Teach that abstinence from sexual activity is the only certain way to avoid out-of-wedlock pregnancy, sexually transmitted diseases, and other associated health problems" as a philosophy of the program. This statement alone is the reason that abstinence-only-until marriage programs are ineffective. Not all teens are going to abstain from having sex and there is nothing that can be done about it, no matter how long you preach abstinence to them. Those who make the decision to be sexually active are being neglected by abstinence-only-until marriage programs. They are not being taught safe sexual behavior, and as a result youth are getting pregnant. Research continues to show that comprehensive sex education, which teaches both abstinence and contraception, is most effective for young people (Advocates for Youth). Youth who receive this kind of education are more likely to initiate sexual activity later in life and use protection correctly and consistently when they do become sexually active. Evaluations of comprehensive sex education programs show that these

programs delay the onset of sexual activity, reduce the frequency of sexual activity, reduce the number of sexual partners, and increase condom and contraceptive use; importantly, the evidence shows that these programs do not encourage teens to become sexually active (Advocates for Youth). In my opinion, comprehensive sex education programs can use improvement as well. The youth are being exposed to these programs too late. In today's society children are becoming sexually active at an early age. By the time they reach their junior year of high school, which is when most schools offer sex education, they have been in several sexual situations. Pregnancy prevention programs are great, and they could be very effective. Starting at the fifth grade level students should be exposed to sex education. The elementary school programs should focus on abstinence but they should definitely mention the adverse side effects of having sex. I don't think they should go into detail about safe sex, such as how to put on a condom, because fifth graders are not mentally mature for that teaching; it could also incite curiosity, but they should mention that there are ways to protect one's self from the potential adverse side effects of having sex. The comprehensive programs should be available to incoming high school freshman because that is when a lot of teens begin to experiment with sex. These provisions will make pregnancy prevention programs more effective. Educational failure, poverty, unemployment, and low self-esteem are circumstances that contribute to early childbearing. They are also negative outcomes of early childbearing. In early childhood, children are bombarded with sexual messages. Teens are sexually active as a result of peer pressure and the American popular culture glorifying sex and ignoring responsibility.

The issue of teen pregnancy can be resolved through reworked pregnancy prevention programs. Bibliography " Adolescent Pregnancy." Medical Encyclopedia Online. 2006. Medical Encyclopedia. 14 March 2007. < http://www. nlm. nih. gov/medlineplus/ency/article/001516. htm#Definition>. Advocates for Youth. 16 June 2006. 22 March 2007. . Castle, Michael N. " Investing in the Power of Prevention" 1 November 2006. US Fed: News. LexisNexis. U of Tennessee at Knoxville, U Tennessee Lib., Knoxville. 15 March 2007. < http://web. lexis-nexis. com/universe/document> Checkland, David, James Wong, ed. Teen Pregnancy and Parenting: Social and Ethical Issues. Toronto; Buffalo: University of Toronto Press, 1999. Focus Adolescent Services. 20 March 2007. . Frick, Lisa. "Teen Pregnancy and Parenting." School Library Journal. 53. 3 (2007): 228-228. Academic Search Premier. EBSCO. U of Tennessee, Hodges Lib., Knoxville, TN. 15 March 2007. . Hong, Daniel. "Oral Sex: Why Do So Few Teens Use Protection?" 17 Feb. 2006. Center for Applied Psychology, Rutgers U. 3 Apr. 2007. . Rosen, Ann, Sue Christianson. "Teenage Pregnancy." The Family Connection of St. Joseph Inc. 16 March 2007. . Stevens-Simon, Catherine. " Teen Pregnancy and Sexually Transmitted Diseases: Re-thinking the Bedfellow Question Means that Condoms will Never Be Seatbelts." Journal of Pediatric and Adolescent Gynecology. 19. 5 (2006): 351-352. Academic Search Premier. EBSCO. U of Tennessee, Hodges Lib., Knoxville, TN. 15 March 2007. < http://web. ebscohost. com/ehost/detail?>. Sutton, Michael J. et al. Shaking the Tree of Knowledge for Forbidden Fruit: Where Adolescents Learn about Sexuality and Contraception (2002). In J. Brown et al (Eds.) Sexual Teens, Sexual Media: Investigating the Media's Influence on Adolescent Sexuality, New York:

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