Why Wait? Gender, Race, and Class as Predictors of Teens' Attitudes Towards Pregnancy

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Approximately twenty percent of teenagers disagree with the American mainstream ideology that adolescent childbearing is a devastating life event to be avoided at all costs. In fact, about eighteen percent of 15 to 19 year olds report they would be happy if they became pregnant or impregnated someone in the near future. Teen fertility research focuses primarily on who is at risk of unplanned pregnancy and the negative consequences of early childbearing for the teen parent, her child, and the broader public. Often excluded from the teen fertility discourse are young men, and adolescents who desire pregnancy and children while they are young (except for efforts to change their minds). This study aims to examine "pro-pregnancy" attitudes among adolescents by

taking into consideration the intersectionalities of gender, race and ethnicity, and class.

Using a sample of over 4,000 15 to 19-year-old women and men from the 2006-2010

National Survey of Family Growth, this study examines patterns of pro-pregnancy

attitudes and finds that gender, race and ethnicity, and class shape teenagers' attitudes

toward (hypothetical) immediate pregnancy in complex ways.

Keywords: Race, Gender & Class; Reproduction; Family; Adolescence/Children

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INTRODUCTION

Teenage pregnancy and parenting in America are generally perceived as serious social problems, although the birth rate among teenagers has been sharply and steadily declining since its peak in 1957 (Furstenberg 2003; Ventura, Mathews, and Hamilton 2001). Family formation in America has undergone a drastic transition in the last 60 years. Contributions to this transition include the introduction of more effective contraceptives, older age at first marriage, intentional childlessness, and significant increases in divorce and children born to unmarried parents (Teachman, Tedrow, and Crowder 2000). Teenagers having babies is not a new phenomenon, and just like their older parenting peers, the tradition of childbearing within marriage is losing its strength (CDC 2010). As the separation of reproduction and marriage has become more common and the majority of teenage pregnancies are unintended (82 percent) (Finer and Zolna 2011), the academic, political and public concern has called attention to teenage childbearing as a national crisis with serious public health, economic and moral implications (Luker 1996; Furstenberg 2003). Essentially, teen pregnancy became a problem when it started to occur out of wedlock, as married teenagers are not included as targets of pregnancy prevention campaigns.

Adolescent sexual activity, specifically adolescent female sexuality, is typically perceived as deviant and premature (Tolman 1994; 2002). American adolescents are generally financially and socially dependent upon their parents or other adults, thus private issues such as sex and reproduction do not belong exclusively to teenagers, but

also to the adult public who feel responsibility for their adolescent populations' well being. Teenage pregnancy has thus become a highly politicized and public problem to be solved (Luker 1996) and is most often directed at women.

Teenage pregnancy prevention campaigns and resources typically operate with good intentions to help teenagers avoid the presumably negative consequences associated with a teenage pregnancy. However, not all teenagers feel as if pregnancy is something to be avoided (Abma, Martinez, and Copen 2010), in fact, Jaccard, Dodge, and Dittus (2003) found that 16 percent of females between the ages of 15 and 19 did not agree with the statement, "Getting pregnant at this time in my life is one of the worst things that could happen to me."

There are pregnant and parenting adolescents who intended their children, but they are included in the dominant message that early parenthood leads to a series of negative outcomes. According to NSFG data, approximately 23 percent of teen births were intended (Mosher, Jones, and Abma 2012). We need to learn more about "propregnancy" adolescents because they are not adequately represented in the literature. The few studies regarding pro-pregnancy teenagers are almost exclusively studying females. Most of these studies focus on behavioral outcomes linked to pro-pregnancy attitudes, such as inconsistent contraceptive use (Zabin 1999) or experiencing a pregnancy (Jaccard, Dodge, and Dittus 2003) and typically rely on retrospective reporting of pregnancy intention (Sheeder, Tocce, and Stevens-Simon. 2009).

The majority of studies focusing on pregnancy attitudes of teenagers are typically limited by small sample sizes (Rubin and East 1999; Coleman and Cater 2006; Lamay et al. 2007), are only done with female participants (Frost and Oslak 1999; Jaccard, Dodge,

and Dittus 2003), or are limited by racial and ethnic homogeneity, for example only including Latina or Black women (Afable-Munsuz et al. 2006; Davies et al. 2003; Zabin, Astone, and Emerson 1993). Research on male teenagers' fertility intentions and desires is scarce (Meyer 1991), and what we know about male pro-pregnancy attitudes typically comes through information provided by their girlfriends (Cowley and Farley 2001; Davies et al. 2003; Edin and Kefalas 2005; Unger, Molina, and Teran 2000).

We do not have a good understanding of how the key predictors of pro-pregnancy attitudes among teenagers intersect: does mother's education affect males and females differently? Are racial disparities the same for men and women? Using data from the National Survey of Family Growth (NSFG), this study examines the joint effects of gender, race and ethnicity, and class on both male and female teenagers' pro-pregnancy attitudes. This study uses a sample of over 4,000 adolescents, includes the often-absent male teenagers and teens that are not currently in school, and is representative of racial and ethnic diversity.

BACKGROUND

Since the post-World War Two Baby Boom, the teen birth rate steadily and sharply declined, reaching record low rates in 2012 when 29 out of 1,000 15-19 year olds gave birth (Martin et al. 2013). While there may be fewer teenage births occurring than 60 years ago, contemporary teen births are more likely to occur to unmarried parents. In 1957, 13.9 percent of teenage births were to unmarried mothers (Ventura, Mathews and Hamilton 2001). In 2012, 89 percent of teen births were to unmarried mothers (Hamilton, Martin, and Ventura 2013a). Public concern regarding teenage childbearing grew along with the shift towards births out of wedlock. There is a common agreement that suggests

teenagers should not become pregnant and certainly not premaritally. Sexually active teenagers today use contraceptives at higher rates than any previous generation (Martinez, Copen, and Abma 2011; Santelli et al. 2007), thus teenage pregnancies are assumed to be more preventable than ever.

Virtually all teenage pregnancies are assumed to be unintended. When fertility intentions are included in studies, they are typically asked about in a dichotomous, one question format: "Did you intend this pregnancy? Yes or No?" Terms such as "planned;" "intended;" "unwanted;" and "mistimed," do not have universally agreed upon definitions, but are often treated as if they are self-evident (Bachrach and Newcomer 1999; Fischer et al. 1999). And teenage pregnancy is synonymous with unintended pregnancy.

Whether intended or unintended, teenage pregnancies are often grouped together in homogenous statistics representing pregnancies and births among teenagers. Some common key predictors of teenage pro-pregnancy attitudes include older age, race, ethnicity and country of birth, and parental and relationship factors. Pro-pregnancy attitudes and intended pregnancies are more common among older teenagers (18 or 19 years old) (Finer and Zolna 2011) and Hispanic teen women, and even more likely among foreign-born Hispanic teens (Frost and Oslak 1999). Hispanic and African American teenage women have higher likelihood of pro pregnancy attitudes than white and Asian female teens (Jaccard, Dodge, and Dittus 2003). Jaccard et al. also found that teenage women who have a minimally educated mother, live in a single parent household, and are currently in a romantic relationship have higher likelihood of propregnancy attitudes. In a study of sexually active, nonpregnant African American

adolescent females, having a boyfriend who desired pregnancy and was at least five years older than their teen girlfriend was correlated with positive pregnancy desires (Davies et al. 2003). Work done by Sheeder et al. (2009) finds similar results using a more racially diverse sample.

Official statistics indicate that that Non-Hispanic Black youth, Hispanic/Latino youth, American Indian/Alaska Native youth, and socioeconomically disadvantaged youth of any race or ethnicity experience the highest rates of teen pregnancy and childbirth (CDC 2012). Other characteristics associated with adolescent childbearing include not being enrolled in school and living in a neighborhood where income and employment opportunities are limited (Kirby and Lepore 2007). Familial characteristics of teenagers who are more likely to have a baby before turning 20 include living in a single parent household, having a mother who does not have schooling beyond high school and was a teenage parent herself (Martinez, Copen, and Abma 2011). There is a lack of research regarding the demographic variation among pro-pregnancy teenagers

Life Course and Multicultural Feminist theoretical frameworks are best suited to examine attitudes about pregnancy among teenage men and women. Through a critical analysis of mainstream norms, and the experiences of those outside of the traditional life course, we can better understand the teenagers who would be pleased about a teen pregnancy. Feminist theories expose gender, race, and class as social constructions and institutions of inequality. Feminist theory exposes the research and concern surrounding teenage sexuality and reproduction as sexist (Chilman 1985; Ward 1995). To understand the context of a perceived problem, it is imperative that researchers investigate the history surrounding contemporary issues (Luker 1996). Feminist researchers shine a critical light

on issues relating to gender and sexuality, power and struggle, and the normal and 'othered' through a historical analysis (Kane and Schippers 1996; Mann 2013; Reid and Tom 2006). Feminist theory rejects dichotomous ideology and engages in multicultural analysis, acknowledging that there are infinite ways for people to experience the world around them. Hoffman states, "Teenage mothers are individuals, so they naturally vary in their circumstances, their behavior and their well-being... Consequently, there can be no "one size fits all" conclusion (Hoffman 1998, 236). Feminist theory provides a framework to critically examine the intersectional effects of gender, race and ethnicity and class as identities that work together, not separately, to influence pro-pregnancy attitudes among teenagers.

In mainstream American culture there is an assumed life course trajectory that teenagers are expected to complete, typically including completing their education and, ideally, getting married before starting a family. Early parenthood is considered potentially disruptive and teenagers who pursue this type of mainstream life course trajectory are more likely to access an abortion in the case of an unintended pregnancy (Ward 1995). Neugarten, Moore, and Lowe (1965) suggest that, while there is a variety of ways for people to experience major life events, age norms and actual occurrences are closely related. They elaborate, "Age norms and expectations operate as prods and brakes upon behavior, in some instances hastening an event, in others delaying it" (711).

Teenage pregnancy and parenthood has often been stigmatized (Weber 2012; Wiemann et al. 2005). Sexism, racism, and classism are important components of the stigmatization of teenage parenthood, and are partly to blame for a lack of research on those who desire to become parents. The goal of this paper is to better understand the demographic profiles

of teenagers who desire or are not opposed to teenage pregnancy.

Gender, race and ethnicity and class have often been treated as independent predictors of attitudes towards pregnancy and childbearing. In the following sections, we discuss existing literature on teenage fertility in general and with a special emphasis on gender, race, ethnicity and class. Little is known about how these dimensions operate together. This study goes beyond existing research by examining how gender, race and ethnicity and class interact with each other to shape teenagers' attitudes toward pregnancy.

Adolescence has undergone a serious transformation over the course of the last 60 years (Furstenberg 2010a). Now, more than ever, American teenagers live with their parents longer than previous cohorts, and they take longer to complete college, choose a life partner and achieve self-reliance (Furstenberg 2010a; 2010b). While the term 'teenage' includes adolescents between the ages of thirteen and nineteen, there are drastic differences in the maturity level and experiences of 13 year olds and 19 year olds, especially with respect to sexual activity and pregnancy rates.

Some scholars would argue that a woman's (late) teen years are the best and safest time for her to bear a child, biologically speaking (Geronimus 2003; Luker 1996). Older teenagers, who are 18 and 19 years old, represent 72 percent of teenage births (Hamilton, Martin, and Ventura 2013a). In addition, older teenagers are more likely to intend their pregnancies with an intended birth rate of 21 per 1000 women compared to an intended birth rate of 9 per 1000 among 15-17 year olds (Finer and Zolna 2011). In a qualitative study examining 187 teenage females' pregnancy intentions and decisions, researchers found that the 32 percent of participants reporting they intended their

pregnancy were more likely to be 17 or 18 years old than 15 or 16 (Frost and Oslak 1999). It is also important to note age differences between males and females; teenage girls who experience (both unintended and intended) pregnancies often have male partners who are more likely to be older than them, often in their 20s (Pillow 2004). According to a study done by Glei (1999), females between the ages of 15 and 17 were 33 percent less likely to use contraceptives if their partner was three or more years older, compared to 15-17-year-old women whose partners were within two years of their age. However, older partners had little effect on contraceptive use among 18 and 19 year old women. The pregnancy rate among adolescent women whose partners were six years or older than them is 3.7 times higher than adolescent women whose partners were within two years of their age (Darroch, Landry, and Oslak 1999).

Gender

Research surrounding teenage fertility, much like adult fertility, focuses on women. Likewise, most studies regarding teenagers who want(ed) to get pregnant focus on females. The little information we have regarding teenage men's attitudes toward pregnancy usually comes through reports provided by their girlfriends. Some studies suggest that teen men are more likely than teen women to desire a pregnancy, that men have influence on contraceptive use and conception in their relationships and they are often older than their female partners. (Cowley and Farley 2001; Davies et al. 2003; Edin and Kefalas 2005; Glei 1999; Sipsma et al. 2012). Men's attitudes have been shown to influence a shift in their girlfriends' attitudes and behavior. Edin and Kefalas (2005) found that some boyfriends would beg their teenage girlfriends to have a baby, and while their girlfriends would initially refuse, they would eventually give in and become

pregnant. It is imperative that we learn more about male attitudes toward pregnancy and parenting because male partners have serious influence on the decision to conceive.

In the discourse surrounding teenage fertility, blame and responsibility are placed on pregnant and parenting young women. It is problematic that teenage parents are demonized and that female sexuality is placed under a microscope while males are virtually absent from the discussion. Chilman (1985) argues that sexist assumptions in issues surrounding fertility control dehumanize young men and place unfair burdens on young women. In American culture, female virginity is praised and protected but male virginity does not fall under the same sexual policing. Often, pregnant and parenting teen women are made to feel unwelcome in public (and private) spaces, and treated as if their 'condition' is contagious (Pillow 2006). Therefore, pregnant and parenting teen women are frequently pushed out of school, which likely contributes to their poor academic performance when they are not allowed to participate in traditional schooling (Pillow 2006).

It is necessary to analyze racial and class differences among pro-pregnancy males and how they differ from their female counterparts.

Race and ethnicity

Research on teenage pregnancy and parenting disproportionately focuses on women of color. In 2011, Black and Hispanic youth comprised 57 percent of the U.S. teen births, combined (Hamilton, Martin, and Ventura 2012). More babies are born to white teenagers than teens of any other racial or ethnic group. However, teenage birth rates are higher among nonwhite women. Nonwhite Hispanic teenage women have the highest birth rates at 46.3 per 1,000, followed by the African American birth rate of 43.9

per 1,000, and white teens have the lowest birth rate at 20.25 per 1,000 (Hamilton, Martin, and Ventura 2013a). The Hispanic population has the highest teen birth rate, but has also had the most dramatic decline, with the birth rate dropping 39 percent since 2007 compared to a 29 percent decline for Blacks and a 25 percent decline for whites (Hamilton, Martin, and Ventura 2013b).

Consistent themes for explaining the high Hispanic and African American teen birth rates focus on the social norm and high status of early motherhood, the high value placed on children, and the importance of large support systems young mothers have through extended family networks (Jacobs and Mollborn 2012). However, it is problematic to presume that all Hispanics and African Americans share the same familial values, as there is considerable cultural variance within racial and ethnic groups. The Hispanic population in the United States is not culturally or economically homogenous (Mogull 2005) and hails from dozens of different countries (Motel & Patten 2012).

African Americans are often compared to Hispanics in regards to large extended family networks and social support for young parents. However, marriage tends to be more common among White and Hispanic women who had a nonmarital birth compared to Black women (Graefe & Lichter 2002). The low marriage rates among many Black mothers may have less to do with race and more to do with their disproportionate lower socioeconomic status (Gibson-Davis, Edin, and McLanahan 2005).

Geronimus (2003) argues that the delayed fertility-timing norms of white Americans are an adaptive practice, and it is a naïve presumption to conclude that if poor minorities, too, delayed their childbearing that social, economic and political equality would occur. For many low-income youth, parenthood provides a sense of purpose,

accomplishment and happiness and serves as a marker of adulthood, when mainstream norms of college, marriage and mortgages seem unattainable (Merrick 1995). However, Trent and Crowder (1997) found that women from socially disadvantaged groups who had intentions to become teenage parents or have children outside of marriage were no more likely to do so than women from advantaged groups with similar intentions. *Class*

Researchers often equate "lower socioeconomic status" with "inner city" or "urban," residence. The latter also serve as a synonym for Blacks and other minorities (Meyer 1991). This makes Blacks and minorities of higher socioeconomic status and whites of lower socioeconomic status less visible (Meyer 1991). Overwhelmingly, teenage parents of all races and ethnicities are from families of lower socio-economic status (Luker 1996; Furstenberg 2003). According to the research of Edin and Kefalas on primarily white, low-income, poorly educated young women, marriage is often viewed as a luxury, yet motherhood as a necessity for personal happiness and fulfillment (Edin & Kefalas 2005). With fewer prospects for a marriage, poor women do not associate wedding vows as a pre requisite for parenthood; in fact, it is often the other way around: a good father will be considered as a marriage partner. Low-income unmarried parents subscribe to the mainstream ideas of financial and relationship prerequisites that must be met in order to marry, however, these prerequisites do not apply to delaying childbearing (Gibson-Davis, Edin, and McLanahan 2005).

Measurements of class in the teen fertility literature typically include mother's education and public assistance use (Afable-Munsuz et al. 2006; Jaccard, Dodge, and Dittus 2003; Martinez, Copen, and Abma 2011). Mothers who are college educated may

place greater emphasis upon obtaining an education, pursuing a career and delaying childbearing (Kirby 2002). A familiar agreement among teen fertility scholars is, "Teenage parents are not middle-class people who have become poor simply because they have had a baby; rather, they have become teenage parents because they were poor to begin with" (Luker 1996, 108). Zabin et al. found that over 60 percent of women among their sample of 313 pregnant, inner city Black teenagers were receiving some form of public assistance (1993). However, Mollborn argues that the vast majority of teenage mothers do not receive welfare benefits, but instead rely on their families for financial support (Mollborn 2011). Teenagers of lower socioeconomic status may have fewer reasons for delaying parenthood. Duncan and Hoffman (1990) found "Women with the least to lose are most likely to have children during their teen years" (532).

For many poor teenagers in America, attending college is not a realistic option (Ward 1995). For adolescents whose futures entail working a minimum wage job their entire life, having a baby at 18 rather than 28 may actually be more appealing because of the childrearing help their younger extended family network can provide. In some cases, early debut into parenthood is expected of young people and in some African American families, typically those of lower socioeconomic status, early debut into parenthood is common (Burton 1990; 1996).

On the other hand, limited financial resources make parenting even more difficult. Children are often a source of happiness and purpose for their parents. However, raising children is also expensive and time consuming. And for many middle and upper class teenagers, the costs of having children early may outweigh the benefits of delaying parenthood to pursue higher education and financial stability. Middle and upper class

teens tend to take more precautions to avoid an unintended pregnancy and also have more resources and motives to access an abortion in the case an unintended pregnancy occurs. Ward states, "Using abortion and contraception, rather than delaying sexual activity, is characteristic of the middle class. Having sex does not sort out by class; having babies does" (Ward 1995).

Taking into consideration the previous research surrounding teenage reproduction and adolescent attitudes toward pregnancy and parenting, this paper explores the intersectional effects of gender, race, ethnicity and class and attitudes about a hypothetical immediate pregnancy. This paper examines how gender influences pregnancy attitudes of teens of different racial groups and class statuses. This paper also explores the differences in attitudes between genders, races and class groups.

DATA AND METHOD

Data

This study utilizes data from the 2006-2010 National Survey of Family Growth (NSFG). The NSFG is a very well known and widely utilized nationwide survey conducted by the Centers for Disease Control. During 2006-2010, 22,682 men and women between the ages of 15-44 were interviewed once, in their home, about questions pertaining to family life, marriage and divorce, pregnancy, infertility, use of contraception, and men's and women's health (CDC 2014). Advantages of the NSFG data for this study include the large, nationally representative sample size, which includes teenagers regardless of schooling situation, the survey's recentness, and the balanced representation of males and females. This project focuses exclusively on teenagers, ages

15-19, leaving a sample of 4,406 respondents once 208 observations with missing information on key variables are excluded.

Dependent Variable

In this study, we examine attitudes about hypothetical pregnancies, following Ward (1995) who suggested that "Viewing adolescent pregnancy as a dependent variable places it as a consequence or marker of social forces existing beyond the individual and avoids blaming the victim" (Ward 1995, 152). Both men and women were asked, "If you got (or got someone) pregnant now how would you feel?" The response options included 'Very upset' (48 percent of respondents), 'A little upset' (33 percent), 'Wouldn't care' (<1 percent), 'A little pleased' (13 percent), and 'Very pleased' (5 percent). Only 41 respondents refused or did not know.

For this study, we created a dichotomous measure indicating whether a respondent would be pleased or upset about a hypothetical pregnancy. Respondents who reported they would be a little pleased or very pleased were combined into one category and are compared to respondents who reported they would be a little upset or very upset. Respondents who either refused to answer the question or responded "Don't know" were coded as missing.

Independent Variables

We examine the interplay between the dimensions of gender, race, and class in analyzing teenage pro-pregnancy attitudes. Specifically, intersectionality includes respondents' reported gender. Race is measured by respondents' mention of race which best describes them (Black, white, other). A fourth category indicates whether a respondent identifies as being of Hispanic origin (of any race). Class is measured in two

ways: first, whether or not the respondent or his/her family received public assistance in the prior calendar year which included any of the following: public assistance/welfare, food stamps, The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), help with transportation, childcare or job training. And second, mother's (or mother figure's) highest achieved education. We distinguish between less than high school, high school diploma or GED, some college (including two year degrees), and bachelor's degree or higher.

Control Variables

Analytic Strategy

Control variables include: age of respondent; whether their mother was a teenager at time of her first birth; if the respondent grew up in a single parent household; whether the respondent has ever had sex; and if they have had sex, whether the respondent is in a relationship with their most recent sexual partner or currently single; current enrollment status in regular school; and the importance of religion (not religious = 1, not important = 2, somewhat important = 3, and very important = 4). Descriptive statistics of the dependent and independent and control variables are provided in Table 1.

The analysis proceeds in two analytic steps. First, we estimate nested logistic regression models that examine how gender, race, and class impact attitudes towards

pregnancy independently and interactively. Second, we estimate predicted probabilities of feeling positive towards a potential teenage pregnancy to illustrate the full extent of the intersectionalities of gender, race, and class.

RESULTS

Table 2 shows odds ratios from logistic regression models. We find that gender, race and class are important predictors of attitudes towards a hypothetical teenage pregnancy. Female teenagers have lower odds compared to male teenagers of having propregnancy attitudes. We find differences between racial groups: Non-Hispanic black and Hispanic respondents have greater odds of being pleased about a hypothetical pregnancy compared to white teenagers. Several dimensions of class are associated with attitudes towards a teenager's pregnancy. Receiving public assistance is linked to greater odds of having pro-pregnancy attitudes. Having a mother with a bachelor's degree or higher is associated with reduced odds of having pro-pregnancy attitudes compared to mothers with a high school diploma or GED. Teenagers whose mothers have "some college" education have reduced odds of pro-pregnancy attitudes compared to teenagers whose mothers only have a high school diploma or GED, but the significance of this variable varies across models.

The control variables in models two and three show effects in the expected directions. Older teenagers have greater odds of pro-pregnancy attitudes than younger teenagers. Being sexually active is associated with greater odds of having pro-pregnancy attitudes compared to teenagers who are virgins, and sexually active teenagers who are in a relationship have even greater odds of having pro-pregnancy attitudes than sexually active, single teenagers. Current school enrollment is associated with reduced odds of having pro-pregnancy attitudes in both Models 2 and 3. Growing up in a single parent household and religiosity are consistently linked to pro-pregnancy attitudes.

In Model 3 we allow for interactions between gender, race, and class. We find that gender and race shape the way class affects attitudes towards teenage pregnancy. Two aspects of class vary across gender and racial groups. First, the effect of having a mother who did not complete high school differs by gender, with females having lower odds of having positive pregnancy attitudes than males. There is also racial/ethnic variation in the effect of parental education; mother's college education has a different effect for non-Hispanic others compared to whites. Additionally, non-Hispanic Blacks and Hispanics differ from whites in the ways in which their attitudes towards a hypothetical pregnancy are shaped by receiving public assistance

The odds ratios presented in Table 2 support most previous findings of which teenagers are generally more likely to have pro-pregnancy attitudes: Males are more likely than females to have pro-pregnancy attitudes. Hispanic and Black teens are more likely than white teens. Several indicators of social class suggest that lower level of SES is associated with greater odds of pro-pregnancy attitudes. Still, these results do not fully show how the effects of race, class, and gender intersect in complex ways.

The non-linearities of the effects can best be illustrated through examining predicted probabilities. Figure 1 shows that across the board, receipt of public assistance increases the probability of having pro-pregnancy attitudes. But regardless of whether or not a respondent received public assistance and level of mother's education, whites have the lowest probability of being pleased about a hypothetical teenage pregnancy. Whites with mothers who did not complete high school have lower probabilites of being propregnancy than hispanic and Black respondents with mothers with Bachelor's degrees.

[Figure 1 about here]

While racial differences are similar for both male and female teenagers, the impact of mother's education differs between male and female respondents. Among both young men and young women, the higher a mother's educational level, the smaller the probability of teenager's pro-pregnancy attitudes. The gender gap in the attitudes towards a possible teenage pregnancy differs by race: Regardless of mother's education, whites always have the smallest gender differences in the probability of pro-pregnancy attitudes.

Results presented earlier showed that older teenagers are more likely to have propregnancy attitudes than younger teenagers. Figure 2 shows that these age differences vary across groups: In each subgroup, 19 year olds have higher probabilities of having pro-pregnancy attitudes compared to 15 year olds of the same gender, race and class. However, we find that effect of class (as measured by mother's education and public assistance receipt) is more pronounced among older teenagers. Moreover, the age differences are more pronounced among non-white respondents.

[Figure 2 about here]

DISCUSSION

The research surrounding teenage pregnancy tends to focus more on *how* to solve the problem of teenage pregnancy and less on *why* teenage pregnancy is a problem in need of solving. A massive amount of academic and public attention is given to females under the age of 20 who are pregnant and parenting. The scholars who stand in defense of young mothers and their decisions are greatly outnumbered by researchers hoping to find the cure for the "epidemic" of children having children. Politicians, public health officials and the media have commandeered the topic of teenage pregnancy and constantly send

messages to the public that teenage mothers are a threat to America's public health, economic health, and moral health (Furstenberg 2003).

Teenagers in America are generally considered "children," and because adults feel responsible for, and want the best for "children," public concern regarding teenage sexual and reproductive behavior seems justified. The argument on the surface of the teen fertility issue is that early parenthood disturbs the life chances of American teenagers, however, as found in these analyses, teenage childbearing has much more to do with poverty, racial discrimination, sexual activity and gender relations than with teenagers having babies before adults believe they should (Furstenberg 2003).

Many of the findings of previous pregnancy attitude studies were also true in this study. Older teenagers are more likely than younger teenagers to have pro-pregnancy attitudes. Males are more likely than females to have pro-pregnancy attitudes. Hispanic and Black teens are more likely than whites to have pro-pregnancy attitudes. Teenagers who received public assistance in the prior calendar year are more likely to have pro-pregnancy attitudes than teenagers who did not receive public assistance, and teenagers whose mothers have a Bachelor's degree or higher are the least likely to have pro-pregnancy attitudes. None of these findings are surprising, as there is a consensus in the literature that gender, race, class and age are associated with pro-pregnancy attitudes and are the typical variables included in most teen fertility studies.

The contribution this study makes is in regards to how the independent factors of gender, race and ethnicity and class interact in their association to pro-pregnancy attitudes. While males are generally more likely to have pro-pregnancy attitudes than females, the gender differences are larger among Blacks and Hispanics than whites. Race

may affect how gender is experienced in sexual relationships as well as parenting expectations and responsibilities. We know that men have influence on their partner's attitudes toward pregnancy (and women likely have influence on their boyfriends' attitudes, but there are virtually no studies, nor evidence to support this). Young women who perceive that their boyfriends desire a pregnancy are more likely to desire a pregnancy, too, but the causal relationship has yet to be studied. More research is needed to explore these gender disparities. In addition to the effects of gender and race, the intersection of gender and class affects pregnancy attitudes.

There is greater likelihood of pro-pregnancy attitudes among lower class teens but also greater gender and racial differences among the pro-pregnancy teenagers of lower class status. White men and women may have more gender equality in regards to their educational and career opportunities, as opposed to greater gender inequalities among Black and Hispanic teenagers. Racism and classism contribute to fewer opportunities for upward mobility among minority populations in the US. Becoming a parent before turning 20 does not have as many economic opportunity costs for lower-income teenagers, which is apparent regardless of race. However, gender inequalities are more pronounced among lower-class status youth, especially for Black and Hispanic teens.

This study reveals the importance of using multiple measurements to determine class status and analyzing the varied racial and gendered experiences of class. When taking mother's education level and public assistance use into consideration, the probability of pro-pregnancy attitudes among teenagers becomes more complicated. In all cases, likelihood of pro-pregnancy attitudes increases for teenagers who received public assistance compared to teenagers who did not. And public assistance use is not exclusive

to less educated mothers. This is evidence that Bachelor's degrees do not provide the same opportunities to people of color that are often afforded to white college graduates and that pursuing higher education does not always result in financial stability and upward mobility or protect people from needing public assistance services. The predicted probability values tell a story about racial and ethnic disparities and class disparities.

Future research should qualitatively explore reasons for the pronounced racial and ethnic differences in pregnancy attitudes among lower class teenagers.

Teenagers tend to date people of similar racial and ethnic backgrounds and similar class backgrounds and women tend to date older men. This study found men to have higher likelihood of pro-pregnancy attitude probability compared to women of the same mean age of 17. However, this study also found that 19 year olds have considerably larger probability of pro-pregnancy attitudes than 15 year olds. This evidence suggests that older men are likely to have significantly higher likelihood of pro-pregnancy attitudes than younger women within the same race and class groups. These men are likely to have influence on their younger partner's pregnancy attitudes. A recommendation for further research is to explore the negotiations that are made in relationships regarding contraceptive use and conception. Another recommendation is a longitudinal study of the pregnancy attitudes of women before they enter a relationship and then during a relationship, and take into consideration intra-racial and inter-racial relationships as well as couples with different class backgrounds.

Our research questions are only as good as the data allows them to be. This study was unable to take into account teenagers' higher education aspirations as a variable associated with pregnancy attitudes because in the National Survey of Family Growth,

teenagers were not asked about their desire to attend college and the feasibility of that goal. Educational and career aspirations are a crucial component of family planning goals as teenagers who want to attend college are more likely to want to avoid a teenage pregnancy as well. Another limitation of this study is that questions were asked to men and women differently regarding their sexual activity and their relationship status.

Virgins were not asked if they were in a relationship and men and women were given different response options for labeling the relationship status with their most recent sexual partner. Survey questions (that are not about sex-differentiated biological capabilities) should be asked to males and females identically.

For researchers to ask and answer more complex questions, we need better data. Humans with biases and assumptions design surveys and this results in survey questions that are sometimes sexist and ageist. Assumptions that teenagers should not want children as teenagers leaves us lacking information regarding the family formation desires of this group.

While our questions and answers are limited by our data, they are also limited by our own biases and assumptions. Researchers need to be critical of their biases because we are responsible for disseminating information that fuels policy, campaigns and public opinion. Often, research regarding teenage sexuality and reproduction results in generalizations that lead to stereotyping. When findings show that Hispanic and Black teenagers are more likely than whites to become pregnant and give birth – all Hispanic and Black women are perceived as at risk of teen pregnancy. We must keep in mind that regardless of gender, race, or class, more teenagers *do not* want to get pregnant than do; and more teenagers *do not* get pregnant than do. That said, the teenage pregnancy

prevention campaigns do not exclude teenagers who *do want* to get pregnant, which sends the message that their country does not approve of their decision to start a family. We must be critical of the cultural policing of adolescent sexual and reproductive behavior.

Research regarding teenage fertility should operate with a multicultural feminist lens and critically analyze gender, race, and class. Include men as often as women in studies to show that males are an important aspect of pregnancy and parenting. And study the differences among males in regards to age, race and class. Incorporating respondent diversity rather than homogenous samples is beneficial for critically analyzing gender, race, and class differences.

A recommendation for further research includes looking at the geographic, socioeconomic and acculturation differences among groups of people of Hispanic origin, as Hispanic subgroups are not homogenous.

This study found there to be considerable differences in predicted probability of pro-pregnancy attitudes among teenagers of different racial groups with otherwise identical profiles. Young women with mothers who have a Bachelor's degree or higher and are not on public assistance are theoretically and empirically the least likely to desire a teenage pregnancy. However, Black and Hispanic women with this profile are twice as likely than white women with this profile to have pro-pregnancy attitudes. A recommendation for further research is to critically assess how respondents' attitudes and aspirations towards higher education affect pregnancy attitudes for women and men of different racial and ethnic backgrounds.

We urge academics to turn their critical lens off the teenagers and onto American culture where sexism, racism, and classism are much bigger problems than teenage pregnancy. If we work on solving these more pressing issues first, teenage pregnancy rates are likely to decline even more, but hopefully in the process, the stigma surrounding pregnant and parenting teenagers will be replaced by support for the teenagers who debut into parenthood earlier than what mainstream ideals perceive as normal. Because when it comes to family formation in America – there is no normal.

TABLE 1: Descriptive Statistics with Control Variables

Variable	Min	Max	Mean %
Happy (DV)	0	1	18%
Female	0	1	49%
Race			
Non-Hispanic White (reference category)	0	1	50%
Non-Hispanic Black	0	1	20%
Non-Hispanic Other	0	1	6%
Hispanic	0	1	24%
Class			
Received pub. Assistance	0	1	37%
Mother <hs< td=""><td>0</td><td>1</td><td>18%</td></hs<>	0	1	18%
Mother HS grad/GED (reference category)	0	1	31%
Mother some college	0	1	28%
Mother Bach. Degree +	0	1	23%
Controls			
Age	15	19	17
Sexual Activity/Relationship Status			
Virgin (reference category)	0	1	55%
Sexually active & not in relationship	0	1	16%
Sexually active & in relationship	0	1	30%
Religiosity			
Not religious	0	1	20%
Religion not important	0	1	7%
Religion somewhat important (reference category)	0	1	38%
Religion very important	0	1	35%
Mom was teen parent	0	1	30%
Single parent home	0	1	31%
Currently in school	0	1	83%

N = 4406

TABLE 2: Odds Ratio Predictors of Teenagers' Pro-Pregnancy Attitudes

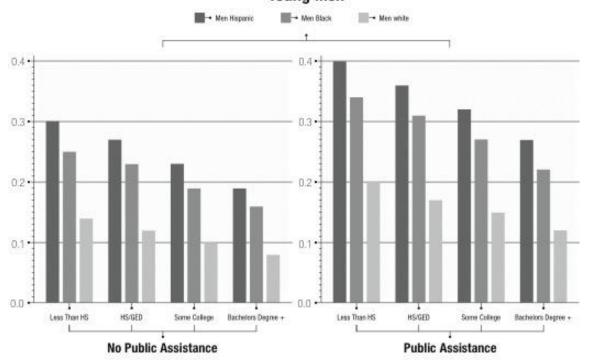
Variables	(1) GRC	(2) GRC+ Controls	(3) GRC + Controls + Interactions
Female	0.57***	0.57***	0.69*
	(0.05)	(0.05)	(0.14)
Race			
Non-Hispanic Black	2.18***	2.15***	3.67***
	(0.24)	(0.26)	(0.85)
Non-Hispanic Other	1.16	1.27	0.55
	(0.23)	(0.26)	(0.29)
Hispanic	2.47***	2.72***	3.15***
	(0.26)	(0.30)	(0.71)
Class			
Received pub. Assistance	1.59***	1.53***	2.09***
	(0.14)	(0.14)	(0.36)
Mother <hs< td=""><td>1.24*</td><td>1.15</td><td>1.30</td></hs<>	1.24*	1.15	1.30
	(0.14)	(0.14)	(0.35)
Mother some college	0.77**	0.81*	0.78
	(0.08)	(0.09)	(0.16)
Mother Bach. Degree +	0.55***	0.64***	0.58**
	(0.07)	(0.09)	(0.14)
Controls			
Age		1.22***	1.22***
		(0.04)	(0.05)
Sexually active / not in relationship		1,45***	1.44***
		(0.18)	(0.18)
Sexually active / in relationship		2,10***	2.10***
		(0.22)	(0.22)
Not religious		1.03	1.05
		(0.12)	(0.12)
Religion not important		1.10	1.14
		(0.19)	(0.20)
Religion very important		0.93	0.91
		(0.10)	(0.10)
Mother was teen parent		1.16	1.17*
		(0.11)	(0.11)
Single parent home		1,08	1.06
		(0.10)	(0.10)
Currently in school		0.53***	0.55***
		(0.06)	(0.06)
Interactions			
Female			
Female*NHB			0.78
			(0.18)

TABLE 2 - CONTINUED

Variables	(1) GRC	(2) GRC+ Controls	(3) GRC + Controls + Interactions
Female*NHO			1.60
			(0.67)
Female*Hispanic			0.79
			(0.18)
Female*Public assistance			1.21
			(0.22)
Female*Mother <hs< td=""><td></td><td></td><td>0.63*</td></hs<>			0.63*
			(0.15)
Female*Mother some college			0.95
			(0.21)
Female*Mother Bach. Degree +			0.91
			(0.25)
NHB*Public assistance			0.45***
			(0.10)
NHO*Public assistance			1.00
			(0.42)
Hispanic*Public Assistance			0.61**
			(0.13)
NHB*Mother <hs< td=""><td></td><td></td><td>0.73</td></hs<>			0.73
			(0.26)
NHB*Mother some college			0.99
			(0.26)
NHB*Mother Bach. Degree +			1.13
			(0.38)
NHO*Mother <hs< td=""><td></td><td></td><td>1.68</td></hs<>			1.68
			(1.07)
NHO*Mother some college			3.68**
			(1.93)
NHO*Mother Bach. Degree +			1.18
			(0.82)
Hispanic*Mother <hs< td=""><td></td><td></td><td>1.32</td></hs<>			1.32
			(0.40)
Hispanic*Mother some college			0.87
			(0.26)
Hispanic*Mother Bach. Degree +			1.72
			(0.59)
Constant	0.16***	0.01***	0.00***
	(0.02)	(0.00)	(0.00)
Observations	4,406	4,406	4,406

Standard errors in parentheses *** p<0.01, ** p<0.05, * p<0.1

FIGURE 1
Predicted Probability for Pro-Pregnancy Attitudes by Gender, Race, and Class
Young Men



Young Women

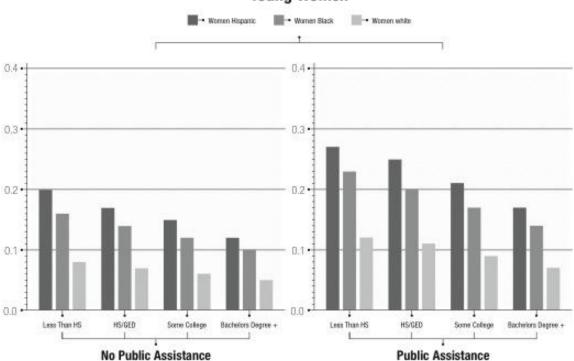
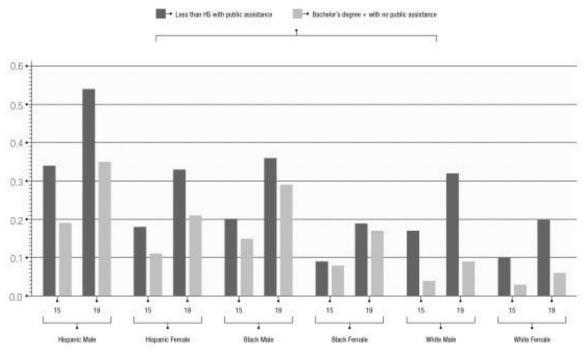


FIGURE 2
Predicted Probability for Pro-Pregnancy Attitudes by Age



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