

TEEN MOTHERHOOD: TRENDS AND CONSEQUENCES

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The fact that the teen birth rate has declined in Mississippi in recent decades is good news for the state. From a high of 102 births per 1,000 girls aged 15-19 in 1970, the rate fell to 62 per 1,000 in 2004.¹ Declines occurred among both whites and nonwhites, albeit from a much higher initial level for minorities. This report focuses on the causes of adolescent childbearing and its consequences for mothers, babies, and the larger society. It also offers some solutions and policy implications.

The decision to proceed to motherhood follows from pregnancy, which is itself the result of an earlier choice: to forgo the effective use of contraception, whether through ignorance, lack of access, sporadic use, or deliberate desire for a baby. Teen motherhood, when it comes, is a major risk factor for poverty, limited education and career choices, and the enormous challenges of single parenthood.

In this context, it is disturbing that the teen birth rate in Mississippi increased from 2005 to 2006, by 13.1 percent for whites and 12.4 percent for nonwhites. Whether this signals a reversal of the long downward trend since 1970 remains to be seen, but a recent national survey on teen attitudes toward nonmarital childbearing gives cause for concern. Responding to the statement “It is OK for an unmarried female to have a child,” 64.8 percent of girls aged 15 to 19 agreed, with most agreeing “strongly.” Girls who were already teen mothers were substantially more likely to agree with the statement, by a margin of 86.5 percent to 63.0 percent. There was little difference by race in the percent approving.²

In 2006, births to Mississippi teens comprised 16.5 percent of all births; very few (only one in eight) of these girls were married at the time of the birth. More than one in five teen births in the same year (22.0 percent) was a second or higher order birth.³ Mississippi’s teen birth rate was still the highest in the nation in 2004, according to the most recent data available, and was more than 50.0 percent higher than the national average.⁴ In an era where birth

control is safe, inexpensive, and highly effective, on the one hand, and the negative consequences of teen motherhood well reported, on the other, such attitudes and



behavior seem inexplicable. So it is important to ask why teenage girls become mothers.

Why Teens Become Mothers

A complex of interacting causes lies behind teen pregnancy and motherhood. Approving attitudes have already been mentioned. But a number of other factors also enter the picture. Not surprisingly, perhaps, teens who grow up in a broken home or in a single-parent family are more likely to engage in risky reproductive behavior, as are those who come from disadvantaged backgrounds and high-crime neighborhoods. Low parental income and lack of education are especially troublesome. Teens whose parents do not take an active role in their schooling, fail to closely supervise their activities, especially after school, and do not communicate strong disapproval of sexual activity, are more likely to take reproductive risks.⁵

Adolescent girls whose mothers or sisters had children as teenagers are more likely to repeat that behavior in their own lives. Girls whose friends are sexually active and do not use contraception are likely to behave likewise. Many young people “report acceptance of nontraditional marital and fertility behaviors from friends” and witness the widespread social tolerance for childbearing outside of marriage.⁶ Television, magazines, and other mass media often glamorize the



pregnancies of celebrities, regardless of marital status. At the same time, “little information is provided regarding . . . the costs of nonmarital parenthood, and relatively few positive role models are provided for stable married sex and parenthood.”⁷

Girls whose peers are low achievers in school and have no aspirations for higher education or a career are also less likely to delay motherhood. Even the type of school a girl attends makes a difference: attending private schools, schools not plagued by crime and vandalism, and schools with low percentages of low-income students are factors associated with a lower risk of early motherhood.⁸



Consequences of Teen Motherhood

Despite the fact that most teen mothers come from disadvantaged backgrounds, teen motherhood itself tends to worsen their already disadvantaged position. Teen mothers are more likely to drop out of school, remain unmarried, live in poverty, and require long-term financial support.⁹ Most are “not prepared for the emotional, psychological, and financial responsibilities and challenges of parenthood.”¹⁰

More significant, however, than the consequences for mothers are the adverse effects on their offspring. Compared to older mothers, teen mothers are far less likely to receive timely prenatal care, more likely to smoke during pregnancy, and more likely to have other characteristics that increase their risk of having a premature and low birthweight baby. Such infants face greater than average risks of serious and long-term illness and developmental delays and are more likely to die in infancy.¹¹



Once home from the hospital, however, the problems such babies face are only beginning. “The vast majority of children born to teenage mothers grow up in economically and educationally disadvantaged households.”¹² They are more likely to exhibit pro-

blem behaviors like anger, fighting, and anxiety than children born to older mothers.¹³ They are more likely to be placed in foster care and to become victims of abuse and neglect.¹⁴

Such children have been found to score lower on cognitive measures such as vocabulary and math tests. They also demonstrate less eagerness to learn, less creativity, and less ability to concentrate on a learning task. Given these traits, it is not surprising that they are far less likely to graduate from high school.¹⁵ Moreover, these are the very circumstances that make the daughters of teen mothers more likely to



repeat their mother’s behavior in their turn. According to a recent study, almost one in three of the daughters of teen mothers under age 18 eventually became teen mothers themselves; for mothers aged 18 and 19, about 17.0 percent of their daughters also gave birth in their teens.¹⁶

Research has also shown that, compared to the sons of mothers in their early twenties, the sons of teen mothers are more likely to be incarcerated. Data on the criminal activity of the daughters of adolescent mothers are not available.¹⁷

Public Costs of Teen Childbearing

According to the most recent statistics, the cost of teen childbearing to Mississippi taxpayers is \$102 million annually, in 2004 dollars. This figure represents only the *additional* public costs associated with a teen birth “over and above what would have happened if a person with the same characteristics delayed childbearing until age 20 or 21.”¹⁸

These public costs are divided into four subcategories: (1) *lost income and sales taxes*, estimated annually at \$50 million, due to the lower earnings of teen mothers, their partners, and their offspring; the lower earnings, of course, result largely from lower educational attainment; (2) *health and medical care costs* of approximately \$26 million, due to greater re-

liance on publicly-provided health care through programs like Medicaid and State Children's Health Insurance; (3) *child welfare services* consume an estimated \$8 million dollars annually of taxpayer dollars; the money is used for foster care and other costs associated with child abuse and neglect; (4)



incarceration of the sons of teen mothers accounts for an estimated \$18 million annually in Mississippi; this figure is almost certainly too low, since data on the incarceration of daughters are not available.¹⁹

The total estimated annual expenditures shown above are considered “conservative” by the researchers who calculated them. This is because not all the costs of teen childbearing could be measured. For example, there are no reliable data on the special education services that may be disproportionately used by the children of teen mothers. Nor could spending associated with the juvenile justice system be included. Likewise, the costs of injuries to people and property caused by adolescents’ offspring were not included.²⁰ Hence there can be no doubt that the true costs of teen childbearing exceed the numbers presented in this report.

Policy Implications and Conclusion

The factors underlying teen motherhood are varied and complex. The consequences are wide-ranging – for the mothers, their children, and the larger society. Perhaps the single most important policy move to improve this situation is attitude change, with parents, churches, community organizations, and government agencies working jointly to provide a strong, clear, and insistent message: that teen parenthood is neither acceptable nor desirable. At the same time, information on birth control and access to it must be provided, with due recognition to the fact that “abstinence only” sex education programs do not work, as a recent landmark study demonstrated.²¹



A number of other programs, however, have been found to be effective in reducing or preventing teen births. Teen outreach

programs that involve adolescents in voluntary community service are useful, presumably because they present young people with opportunities for growth, achievement, and meaningful relationships with adults.²² Visiting nurse arrangements in which nurses meet with expectant teen mothers both before and after the birth help reduce the number of subsequent pregnancies. Efforts to discourage dropping out of school, raise academic performance, and foster high educational aspirations are helpful, as is encouraging church attendance and religious activity. Promoting better parent-child communication and shared activities are positive moves. Though obviously difficult, improving family socioeconomic well-being and promoting intact families can likewise reduce the incidence of teen births.²³



Unfortunately, teen motherhood is only one aspect of a far larger problem in Mississippi – a problem that is appropriately called *premature parenthood*. Parenthood occurs too soon when the parents are unmarried, too immature, too sick (from illicit drug use, for example), too poorly educated, or otherwise ill-equipped to take on the tremendous responsibility of raising a child. In this state, more than half of all births (52.8 percent) in 2006 occurred to mothers who were unmarried; for minorities, the percentage was 78.0. These figures have been *rising* over time, not declining. Few of these mothers were teenagers at the time of their most recent birth, but most had their *first* child as teens. The poverty rate for single mothers with minor children (under 18) was 48.1 percent in Census 2000, the most recent available data; for married couples with minor children, only 8.9 percent lived in poverty. Clearly, the poverty statistics alone suggest the severe disadvantages faced by the children of unmarried mothers and set the stage for the repetition of premature parenthood in the next generation.

Out-of-wedlock parenthood, too-early parenthood, and deficient parenting skills, which often go hand in hand, are key factors

behind children's educational inadequacies and ultimately, their shortcomings as workers and increased likelihood of dependence on the public purse when they reach adulthood. Premature parenthood lies at the heart of many of the state's most serious social and economic issues, such as children's learning and discipline problems and criminal behavior.

None of this is to say that every child of a teen mother or an older, unmarried mother will turn out badly, for many do not. Nor is it to say that single parenthood is always undesirable, that parents should stay in a bad marriage for the sake of the children, or that children raised in two-parent homes always become model citizens. Yet one cannot read the daunting list of negative outcomes that many children endure without asking why so many parents have children too soon, why so many unmarried women choose to bring a fatherless child into the world, and why this happens in an age when cheap, safe, and effective birth control is, or should be, readily available.

We must address questions of *attitudes*, *values*, and *motivation* if the problems caused by premature parenthood are ever to be resolved.



Notes

1. Child Trends, "Facts at a Glance," located here: www.childtrends.org.
2. National Campaign to Prevent Teen Pregnancy, "Science Says: 'Teens' Attitudes Toward Nonmarital Childbearing, 2002," and can be found here: www.teenpregnancy.org.
3. Mississippi State Department of Health, "Teen Vital Statistics Data, 2006," at this address: www.msdh.state.ms.us.
4. Child Trends, op. cit.
5. Jennifer Manlove, Elizabeth Terry-Humen, Angela Romano Papillo, et al., "Preventing Teenage Pregnancy, Childbearing, and Sexually Transmitted Diseases: What the Research Shows," at www.childtrends.org.
6. Kristin A. Moore, "Executive Summary:

Nonmarital Childbearing in the United States," Report to Congress, DHHS Pub. No. (PHS) 95-1257-1, Hyattsville, MD, September 1995, p. 19.

7. Ibid., p. 23.
8. Manlove, et al., op. cit.
9. Elizabeth Terry-Humen, Jennifer Manlove, and Kristin Moore, "Playing Catch-up: How the Children of Teen Mothers Fare," (Washington, D.C., National Campaign to Prevent Teen Pregnancy, 2005), p. 1.
10. S. J. Ventura, T. J. Mathews, and B. E. Hamilton, "Births to Teenagers in the United States, 1940-2000," *National Vital Statistics Reports*, Vol. 49, No. 10 (Hyattsville MD: National Center for Health Statistics, 2001), p. 5.
11. Ibid.
12. Terry-Humen, et al., op. cit., p. 24.
13. Ibid., p. 3
14. National Campaign to Prevent Teen Pregnancy, "Costs of Teen Childbearing: Consequences for the Children," found here: www.teenpregnancy.org/costs.
15. Ibid. For teen mothers under 18, only 66.0 percent of their children earned a high school diploma by age 22, compared to 81.0 percent of the offspring of mothers aged 20 or 21. The child graduation rates were substantially better when mothers were 18 or 19 when the child was born.
16. Ibid.
17. Ibid.
18. National Campaign to Prevent Teen Pregnancy, "By the Numbers: The Public Costs of Teen Childbearing," found at this site: www.teenpregnancy.org/costs.
19. Ibid.
20. Ibid.
21. Gardiner Harris, "Teenage Birth Rate Rises for First Time Since '91," *New York Times*, December 6, 2007.
22. National Campaign to Prevent Teen Pregnancy, "By the Numbers: The Public Costs of Teen Childbearing: What Policymakers Can Do," and can be viewed here: www.teenpregnancy.org/costs.
23. Manlove, et al., op. cit.