Creating Consistency and Control Out of Chaos: A Qualitative View of Planned Pregnancy during Adolescence

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Abstract

Adolescent pregnancy can have devastating effects for both mother and child. However, little is known about the experience of planned pregnancy among adolescents. This paper presents an in-depth analysis of themes identified in a previous study of the experience of planned adolescent pregnancy. The experience of planning a pregnancy during adolescence consists of typical adolescent behavior in that these girls demonstrated the need for control, invulnerability, and a present focus to their lives. In addition to this typical behavior, a component manifests itself in which adolescent girls make reproductive health choices to gain control. By establishing a level of control over their hectic and stressful lives, they are able to add meaning to their lives. The need for consistency and control seem to be linked, because many of the adolescent girls' statements reflected dimensions of both concepts. This initial, descriptive study can be used to further explore adolescent pregnancy and to develop interventions that might assist these girls to lead healthy lives.

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This paper represents a deeper meta-analysis of data obtained in a study on pregnant adolescents and reported elsewhere by this author (Montgomery, 2000a, 2000b, 2000c). Based on the initial data analysis, a concept

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of planned adolescent pregnancy was proposed. This phenomenological study was conducted in the adolescent prenatal clinic at a large tertiary care facility in New York City. Eight adolescent girls between the ages of 14 and 17 were interviewed about their experiences in planning a pregnancy. Institutional Review Board approval was obtained without the need for parental consent, in accordance with New York State and City laws.

The adolescent girls were interviewed following routine prenatal care visits. Inclusion criteria included participants who were experiencing a planned first pregnancy, between 14 and 17 years old, receiving prenatal care in the clinic setting, unmarried at the time of conception, English-speaking, and able to read and write. Exclusion criteria included high-risk pregnancy (preterm labor, bleeding, etc.), previous pregnancy, or a history of psychiatric illness.

The initial analysis identified four *needs* themes that adolescents expressed regarding planning a pregnancy (Montgomery, 2000a). These themes included the need for (1) certain important criteria being met for pregnancy, including financial, relationship, and age-related goals; (2) planning that involved the boyfriend, at least to some extent; 3) solving environmental issues; and 4) stability. These needs themes emerged from the descriptions provided by the participants during in-depth qualitative interviews. Themes were categorized as *needs* because the descriptions provided by participants indicated a need in this area, in contrast to the work presented below, in which adolescents describe *wants* that are related to the experience of planning a pregnancy.

Four wants themes were also identified among the adolescents as they related their desires regarding planning a pregnancy (Montgomery, 2000b). These wants themes included (1) the desire to be or be perceived as more grown-up, and to have increased responsibility, independence, and maturity; 2) possessing a long history of desiring pregnancy and the maternal role; 3) having never possessed anything to call one's own and wanting something to care for and love; and 4) choosing pregnancy as the natural next step in one's life or in the relationship with one's boyfriend. These themes are labeled *wants* because the adolescents' descriptions reflected their wanting a pregnancy and baby for the reasons stated above.

The interviews also revealed some themes that were related to the pregnancy itself (Montgomery, 2000c).

These themes included (1) environmental issues, (2) adjustment to the pregnancy, and (3) increased motivation to do well in school and work in order to provide a good life for one's baby.

Control: An Overarching Theme

Further in-depth examination of the data revealed an underlying need for these adolescent girls to gain control of their lives. The desire for control manifested itself through typical adolescent behavior, as well as in planning the pregnancy. These adolescent girls' behavior was typical of general adolescents in that they demonstrated control needs, invulnerability, and a present-orientation (Gullotta, Adams, & Markstrom, 2000). The typical desire for control here included a component manifested in the adolescent girls' reproductive health decisions that were made to gain a certain level of control. By establishing a level of control over their hectic and stressful lives, these adolescents reported an ability to add meaning to their lives. Many of the girls who participated in this investigation came from stressful life-circumstances, including growing up in a group home and/or foster care, being recently placed into the group home environment, enduring poverty, and lacking motivation, goals, role models, and appropriate socialization. Thus, closer investigation into the true meaning of the pregnancy experience for these individuals revealed the following: Planning to become pregnant provided some level of control over their environment and their lives.

Culturally, for many of these girls, adolescent pregnancy and childbearing were the norm. They viewed pregnancy and their reproductive lives as something they could control, to some extent. The period of adolescence makes it even more difficult to break free from some of their other life constraints (poverty, environment). Potentially breaking free from these life constraints is also a long road. During adolescence, however, long-term needs and goals are put aside to focus on the here and now—namely, instant gratification of current needs. In a world that is out of control, these adolescents were able to gain at least some sense of control by making decisions related to their reproductive health. To these participants, planning to become pregnant represented the norm in their reality. In general, though, these girls did not have very realistic expectations about what the

[T]hese adolescents were able to gain at least some sense of control by making decisions related to their reproductive health.

future held for them (Montgomery, 2000a), which suggested a present-orientation.

Yet, from the descriptions provided by the participants, the very fact that they were able to exert some level of control added meaning to their lives. This meaning can be readily illustrated in some of the participants' comments about planning the pregnancy, and how their lives changed. For example, Elaine* gives clear evidence of planning her pregnancy:

Well, I wanted to get pregnant 'cause . . . me and my boyfriend . . . my baby's father . . . we were kinda havin' a relationship where we . . . decided to have a baby. And I . . . wanted a baby since I was younger and . . . I was too young to have it, so now . . . I actually got pregnant when I was 15 . . . I just turned 16 . . . and . . . I thought that maybe when I was 16 I could . . . find a job. And it wouldn't be as hard as if I was 14 or 15 years old.

Elaine goes on to say:

So I thought it would be a good time to have a baby so . . . that certain day we had sex and . . . I was happy 'cause I thought I was pregnant and . . . the next month I went to the doctor and he told me I was pregnant.

Elaine also talks about the added meaning this baby will provide in her life after it arrives. She describes her motivation to control her behavior for the benefit of the baby:

My boyfriend had two jobs and I was getting a job. Which I now have and so. . . I thought since he has a lot of money and everything that. . . Every week that he gets paid we go out to buy clothes and stuff. . . . And instead of buying all these clothes and stuff we

could . . . have a baby and I thought it was a good time. And I thought I could love a baby. . . . I could be there for it and it'll give me something to do. Teenagers now days just want to run around and . . . do what they want to do . . . and I want to have responsibility. . . . So I'm gonna hafta not want to do these things. . . . But I . . . think . . . it's not going to be all that hard. I don't think so. . . . [E]verything is going to be for me, is going to be about the baby . . . and I'm going to try to do good for my baby to help him so he doesn't get into drugs or other kinds of things and . . . I'd rather have the responsibility where I'd have to be sensible for my child, my baby.

Elaine also mentions a new orientation that is more future-oriented:

Like, I needed something to do rather than just chillin' with my friends and . . . I need something to do. To be able to get all the way up there, you got to be able to do a lot of things and college or whatever, so I think I'll be more independent. I can find a babysitter . . . I can go to school and go to work and . . . I'll do whatever I hafta do. Because before, I never used to be, I used to never care about anything . . . and now I'm into school and I'm getting me a job and whatever . . . stuff that actually . . . is not bad. 'Cause I want to be somebody and I want to go to school and I still want to have my baby.

Another participant, Frieda, had this to say about how the pregnancy added meaning to her life and instilled motivation to control her behavior:

Well, I came to New York and I got put into the system. And the path I was goin' was not good. So then I was drinkin' and fighting and . . . everything. And I needed a change and so I knew, unless I had something in my life that I love or felt good about, or something that I needed to work toward, I would continue. I would do the same thing. I would drink. At the same time, my boyfriend was saying . . . he's going into the Marines . . . and like, in the Marines they instill in you that family-values stuff and so he decided he wanted to start a family, so I decided that was the only way . . . that was the only way I was gonna quit smokin' and roaming the street . . . to get responsible. . . . So, I went from reckless, female crack-addict to me. I used to be like, "Why you lookin' at me?" and then smack and fight and like. . . . And now, to me my child is the most

*Throughout this article, the participants' real names are not used.

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important thing, and ever since . . . I don't have time to fool with things I used to. I don't have time to cut school everyday or fight and stuff. Why? What am I going to accomplish? I have to do what I have to do for my child and my finance.

Another participant, Georgia, also describes a clear intent to become pregnant:

I decided to get pregnant when . . . it was like . . . when we were first doin' it and we . . . like, was using protection and . . . then like . . . all the sudden we was like . . . talkin' about . . . that. . . . I don't know, I asked him how he felt and . . . if I was to get pregnant and . . . at the same time and I asked him and . . . like, he didn't have no bad comment on it or whatever. . . . So it was like we just started doin' it without protection and it was like, it was like we just kept doin' it without protection and actually I planned it or whatever. And I then I went to the doctor and found out about it . . . but he [boyfriend] knew before me that I was pregnant. . . . He told me to go to the doctor to . . . so he knew before me and. . . . That was it.

Later in the conversation, Georgia continues to speak of the closeness engendered when, as a couple, she and her boyfriend anticipated a pregnancy:

I was livin' in a group home on Staten Island and he was livin' there with his family and we got together and . . . then. . . . Nothin' really led me to wanting to get pregnant. . . . It was just like . . . I don't know. . . . Because when I was little, I . . . didn't get a lot of attention and a lot of love. . . . But I was getting that from him so I don't think it would be really . . . the cause of it or whatever. I don't know. It just happened so fast. So . . . I knew if I wasn't . . . using protection that I would get pregnant and it was like . . . I planned it. And it was like everything just got better and . . . before I got pregnant and, like whatever. . . . His attitude changed and his mood changed.

Hattie speaks of adding the baby as a significant other in her life. She also describes becoming motivated to take more control of her life:

I mean, we talked a lot before . . . like serious, like we were serious, but we were serious . . . but I never thought I could have kids. . . . I mean, I been with him

for about a year and we used protection throughout the beginning of our relationship. We decided to stop usin' it and . . . I did not get pregnant. I didn't get pregnant 'til now, and I never really had anything to call my own and . . . for a long time . . . and my parents . . . they both deceased, and I've been in the system for awhile and . . . I think . . . I pretty much mature for my age . . . and I, I love kids. . . . I love kids, and so it's just like . . . one day . . . we kinda decided to kinda have a baby. From his part . . . I was serious and I didn't think he was all that serious about it so . . . like, I just kept trying to . . . to get pregnant and . . . there was also a point where I . . . I didn't have anything of my own and I . . . just wanted to have a baby and. . . . Then it just kinda happened, and me thinkin' it wasn't gonna happen. . . . Initially, I had a staff ask me if I got pregnant just to keep him and . . . that's kinda not true. Because if it were true, I think I woulda left the agency by now and goin' to live with him and then decided to make a family or somethin'. I'd still go to school and all, but I'd leave the agency. One of the reasons I'm still at the agency is . . . because I want to see if I can do it on my own. I want to see if I could do it on my own and support me and my child. . . . And I think it's made me stronger, 'cause I really wasn't . . . think about anything and all that. I mean, I love my boyfriend but . . . I pretty, I . . . I would love to make a family and now this is the beginning of making a family . . . even though me and him, when we was together . . . saw him as family . . . it's like our family is increasing and if, I think, if me and him ever separate . . . I think we still have a, maybe understand that we both have something that we share and . . . sort of are part of it. . . . I haven't even gave him birth yet and I . . . just love my baby to death. . . .

Later, Hattie continues:

I think I was . . . getting a little bit . . . mature in life. . . . In the way I lived and life, and I knew that I was I was startin' off . . . before I got pregnant, I was startin' off without really having anything. I was startin' to go to school and . . . I was, I was really . . . interested in a lot of things but . . . I think I got . . . more stronger after . . . I found out I was pregnant. . . . Once you know you gotta do it for somebody else as well . . . you put a little more effort into . . . doing what you have to do and . . . after, I think I kinda . . . look at it a little bit different, I think. I put a little more effort in it. I was doin' what I had to do . . . but I think that,

once I found out I was pregnant, I started looking at it different. I kinda worried that . . . I needed to work a little bit harder 'cause . . . I realize, you only stay, you don't stay in a certain place forever. You gotta move on and when you're in a certain situation . . . like I, I'm not livin' with my parents, so I know that they have age limits that . . . and I, for now, I think it's best for me to just stay in that situation until I'm that age and . . . then sign out.

Later in the same conversation, Hattie also talks about control issues and a sense of meaning in life:

I kinda think when you're living in a situation like that, not living in a family household, you start . . . you don't, I mean I don't mean that everybody in agencies gets pregnant, but I mean just speakin' on myself I . . . before I was even pregnant, I think that makes me even stronger and . . . it makes me a little bit more independent, and so I start lookin' at things in a different way. And you know that you gotta accomplish thing, or certain things, to get certain things and . . . you know you gotta, you kinda like not gonna stay here forever. . . . Not like if you were living with your parents and you could stay as long as you want. Or maybe some be like, "You got to leave. You gotta go to college," or I mean I think it would be a little bit different.

When asked about whether or not she believes people treat her as more grown-up or differently since the pregnancy, Hattie responds:

I don't think people treat me . . . different . . . now that I am. I believe that they look at me in a different view . . . now that I am. . . . I believe that they look at me in a different view, but . . . I think that once you . . . don't you once you get pregnant you don't . . . you play an adult role 'cause . . . that's really an adult role. . . . You know . . . there's a lot of teen pregnancy and . . . now . . . in our times but . . . that's . . . something an adult usually kind of does. . . . Me being a teenager, to my child I'll be an adult and I have to play the adult role. I have to be a role-model and I feel like I'm in a little, like, I have a bit more, a little bit more and I do have a little bit more responsibility. . . . And I feel like a little bit more . . . I'm not gonna say mature, but I kinda think that I have more responsibilities. So I view myself as pretty much, pretty much an adult.

In addition to the themes that relate to gaining a sense of control, Hattie also talks about gaining some level of security with that control:

I'm workin' towards that stuff [her own apartment] and the only thing that right now I need is in my mind and is my baby. . . . I know if I break up with my boyfriend then, and then before if I argue with him . . . or my brother, since he's the only family I have left, I know that . . . I know that we gonna argue and it's gonna be a different type of argue. I argue with my baby, I know he's always gonna be my baby. And so if I argue with my boyfriend and we end up breaking up . . . then that's something that will affect me. But no matter how much time I argue with my baby, I know that that is something that is mine. I know that he will always be mine . . . he or she will be mine and . . . you know that he will always be like, "That's my mother," and that's how I look at it.

Hattie also presents another angle related to wanting to be with a baby of her own:

There's times that everybody feels lonely, but when I feel lonely I know I got this little body in my stomach and I just get a little bit happy [joyously], like I think I'm not really alone. . . . But I'm . . . there's times that I felt lonely before and I just make a phone call and just kinda get comfort. And then I now, I just can't wait to give birth. I'm only 5 months and I just wish I could give birth already. . . . I don't know . . . from what people is telling me . . . since everybody is kinda the same . . . when they pregnant . . . they can't wait 'til they give birth. . . . It kinda seems, it goes by fast, but it kinda seems like you're going real slow. Like some people can't wait for the weekend to come, but you know when you can't wait for the weekend to come, the week goes by extra, goes by so slow. . . . I don't know, I mean the first time I felt like . . . could like, in my mind like I can't believe I'm pregnant, and like I don't think I'm pregnant and I know I am, even after I moved to, like I've taken 5 pregnancy tests already and like I'm like, "No, I'm not pregnant . . ." Maybe 'cause I'm not that big yet and . . . I mean, I feel the baby moving and something . . . kicking but . . . it don't feel like, I like actually can't believe I'm pregnant. I can't wait to see my baby.

Mary talks about control in terms of taking charge over her life:

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I guess it would have to be my family [influencing her planning to become pregnant], 'cause my mom had me when . . . she was young and . . . she was . . . she and I . . . we get along and . . . I didn't want to wait to have a child too late and . . . but I didn't want to have it too early. So it was like I wanted one, then I didn't. And it was like I, I pretty much felt like . . . I would be able to handle the responsibilities and . . . be ok 'cause . . . I have a lot of people who . . . was going through what I was going through and . . . they said they seen girls who can't do it, and they know from the start that I can . . . 'cause that's . . . what I like to do. I love taking care of children. Like, my godchild . . . when she was first born, I took care of her. And I like to be around children so . . . some people say, "Yeah, well you're going to get tired getting up during the night," and . . . I don't think it will bother me.

Nancy was very definite in her conversations regarding control:

First, being in a group home to tell you the truth, being in a group home . . . that was first. Being in a group home and then after that, my boyfriend asked me if I would have his baby and I said no. But then after that, they wanted to . . . send me upstate so . . . I thought . . . that if I got pregnant they wouldn't send me upstate so . . . so, then I said yes. And I wanted to have a baby too. I want to . . . have a baby . . . to have something to love [sheepishly].

When asked about why she and her boyfriend wanted to have a baby, Nancy gave clear evidence of planning the pregnancy:

My cousins were having babies and he was like, "Why don't we have a baby? We been together for like ever, so why don't we have a baby?" Like, we know we're young but like we were thinking . . . just one right now and then we would have more later, like when we were older. He . . . just wanted to have one and . . . I did too, and so we just decided.

Nancy's need for control (and perhaps typical adolescent rebellion) is further displayed in her comments regarding group home life:

It's all right. It's kinda like . . . different. You hafta come in early and they give us rules . . . and that's not

the time I'm used to coming in and it's hard and . . . I don't do it, so I get punished for it. It's different.

But Nancy takes control of the situation and notes how this pregnancy has added meaning to her life. She, too, is controlling her behavior in reference to this pregnancy:

It [the other group home] was in Brooklyn, and I know a lot of people in Brooklyn, and it's like this is Manhattan and, but it's close and like a lot of people know [where she has relocated], but mostly I just stay there [at her current group home]. It's like partly my choice . . . 'cause like, I feel better if I'm not associating with people like . . . 'cause I'm going to want to go out and go to clubs and stuff like that, and I'm . . . and right now, I'm pregnant and I can't stand being out there like that. I don't want to lose this baby, and I know I'll be doin' stuff if I go out.

Nancy continues:

Yeah like, there's people around and they call me on the phone and ask me what I'm doin' and they want to know and I'll go for a walk or go somewhere in the daytime, but after 6 or 7 o'clock I don't go nowhere.

Nancy also talks about how the pregnancy helps her gain consistency in her life. For example, when asked about what else was happening in her life at the time she became pregnant, Nancy responds:

I wasn't stable. 'Cause I kept running away from the group home and I . . . wanted to stay with my boyfriend and . . . they kept telling me I couldn't 'cause I was underage and. . . . He's not, he's not by himself. He's livin' with his mother and he's getting a job. Well, he already has a job, but he's getting another job and he's gonna get an apartment and hopefully when . . . I'm having the baby in June, so that's when I'm expecting. Six months after that, I'll be 18, so I . . . got that modeling thing . . . so after the baby is born, I'm gonna do that and . . . he'll watch the baby for whatever I'm doin' and so . . . we both will have a job and then we'll have to . . . be stable after the baby is born . . . like a year-old, I'm . . . expectin' to go to live with him in his apartment.

Toward the end of the interview, Nancy describes the sense of meaning that this pregnancy has given to her life:

I guess at that time I felt . . . I love my boyfriend, but I don't know. I just need somebody else . . . something to love me and will be here for the rest of my life . . . and I want to have the baby—like, it'll make my life.

In summary, the experience of planning a pregnancy during adolescence consisted of typical adolescent behavior in that these girls demonstrated the need for meaning, a relationship, control, invulnerability, and a present focus to their lives. The adolescent girls additionally made reproductive health choices in an attempt to become pregnant and to gain a level of control. They hoped they could add meaning to their lives by establishing a level of control over their hectic and stressful lifestyles. The need for consistency, improved health behavior, and control seem to be linked, in that many of the adolescent girls' statements reflected dimensions of all three concepts. It is notable, however, that a theme of reformed behavior and intent to move toward positive goals emerged. As in all qualitative research, the intent is not to generalize from a small sample; instead, the intent is to explore the themes that emerge so they can be considered in research and practice arenas.

Recommendations for Further Research

This investigation represents an exploratory effort to identify what the experience was like for a small group of adolescents who chose to become pregnant. While much information has been learned from this initial in-depth investigation, many other avenues need to be explored to provide the most appropriate health care for adolescents. Two main areas warrant further extensive research: (1) measuring long-term outcomes related to pregnancy and childbearing for adolescents who planned

to become pregnant and (2) providing interventions to help adolescents move beyond a present orientation and, thus, make wise choices regarding fitting motherhood into their lives.

Measuring Long-Term Outcomes

While there is a tremendous amount of literature on the consequences of adolescent pregnancy and childbearing (see box on following page), planned and unplanned pregnancies are generally not addressed or compared. Minimal research has been done on the phenomenon of planned adolescent pregnancy. A significant amount of research is needed to further explore both the short- and long-term outcomes for such mothers and infants. Future studies need to address whether these children and mothers experience the same negative consequences that are associated with adolescent childbearing in predominantly unplanned samples, as reported in the literature. It may be that adolescents who plan to become pregnant have very different outcomes from those who do not plan and, yet, continue the pregnancy anyway. Future research efforts may help to answer this question and will assist health care providers to develop better interventions to support adolescents who choose to become pregnant.

Interventions to Help Adolescents Make Wise Choices

Another important area for further research is on how to help adolescents make wise choices for their lives and think beyond the present. Many of the adolescents who participated in this study did not have realistic expectations about the future. Many of them evidenced an "invulnerable view" as they described their plan or goals that really represented the best possible outcome for a very determined and select few. Assisting these adolescents to learn and make choices may potentially improve the quality of life for both themselves and their child. Future research must focus on understanding their decision-making in a wide variety of areas that affect their lives.

Implications for Perinatal Education

Perinatal educators who work with pregnant adolescents on a regular basis have likely heard other teens make similar statements as the ones reported in this article.

"[A]nd I want to have the baby—like, it'll make my life."

However, some educators may not recognize these comments as an expression of the adolescents' need for control in their lives or educators may not have followed through to in-depth listening of the adolescents' hopes related to their pregnancy. To the extent that adolescents who plan their pregnancies are in part motivated by a desire for control in their lives, it would seem logical for educators to present good health practices as a way for adolescents to take charge in a portion of their lives. A list of "shoulds" might only create causes against which to rebel. Engaging adolescent peers in brainstorming the positive ways to take more control of their lives would seem to be a strategy consistent with the thoughts voiced by the adolescents in this study.

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Negative Consequences of Adolescent Childbearing

Much of the research conducted around the broad aspect of adolescent childbearing—planned or unplanned—reflects negative consequences to the mother, infant, or both. A few examples of current literature are listed below.

Williams and Vines (1999) conducted a study to discover what adolescent mothers view as their childhood struggles, their transition to the role of mother, and their important relationships after they become parents. This was a qualitative study that examined these issues in-depth. Participants were first-time mothers who were being seen in a community setting because they were high-risk for abusing their children (all reported having been abused as children). Their ages ranged from 13 to 20 years. Five themes emerged from the interviews: an impoverished past, disintegration of relationships, emotional distance, problem fixing, and reconnecting.

Roth, Hendrickson, Schilling, and Stowell (1998) conducted a review of the current medical literature regarding adolescent women's increased rate of delivering low birth-weight infants. They discovered two lines of research: *nature* (which represents issues related to biology, such as immaturity of the female reproductive system) and *nurture* (which represents issues related to a teen mother's ability to provide appropriate socialization and her own life circumstances, including poverty and educational attainment). The authors found that young maternal age alone does not explain the higher rates of low birth-weight infants born to adolescent women. The authors note that both of the nature and nurture issues likely contribute to the high low-birth rate among adolescents.

Deal and Holt (1998) report that adolescent mothers experience high rates of depression when compared to adult mothers and that interventions are desperately needed to help these young mothers cope.