

Social and Life Cycle Perspectives on Teenager Pregnancy's Psychological Effects

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Abstract

Teen pregnancy and psychological well-being are intricately linked. Pregnancy itself may exacerbate a depressive state, but psychological issues are also common precursors to adolescent pregnancies and may play a role in maintaining them. Expectant and parenthood adolescents (EPT) are at a higher risk for mental health issues because they must deal with the stresses of pregnancy, parenthood, and adolescence. Teenagers whose parents have suffered from melancholy are at an even more significant risk of developing depressive symptoms themselves and passing them on to their children. Negative emotional effects are not unavoidable, although they may happen. Well-being results in later life and across generations are influenced by a wide range of risk and safeguarding factors that may be better understood through the lens of the social and ecological framework and the life cycle viewpoint. This method may have significant effects on teenage mental health and the prevention of unplanned or untimely pregnancies. Using a socio-ecological framework and a life cycle viewpoint, this research discusses the differences in mental health results among EPT and highlights the frequency of mental health disorders among this population. We also address the repercussions for treatments and fresh approaches

Keywords: Adolescent pregnancy; socio-ecological model; Teenager pregnancy; Psychological effect.

1. Introduction

Every year, around 16 million adolescent females throughout the world become mothers. Pregnancy rates among teenage girls are disproportionately high. Physical and mental readiness for parenthood do not yet exist in teenage girls. This is a societal issue, not just a problem for females. The well-being, academic achievement, emotions, interactions with others, and destiny of a society are all negatively impacted when young females get pregnant. The stress it causes may lead to health issues and financial instability for families (Gselamu et al., 2019). There is a higher chance of having a baby with a low birth weight and of developing pregnancy-induced hypertension if a teen becomes pregnant.

Furthermore, the emotional, cerebral, and social capacities of young women are not entirely developed to support the weight of motherhood. According to the WHO 2014 the global community is becoming concerned about the number of students who drop out of high school because they are pregnant. Multiple studies have shown that the average age of first sexual encounters is decreasing, indicating that modern adolescents and young people are entering sexual activity at earlier generations. Studies have also revealed that few teens utilize contraception, leaving them vulnerable to unwanted pregnancies (Panting et al., 2019). The United States has the most incredible adolescent birth rate of any developed nation, with a rate that is two times that of the United Kingdom, a wealthy nation with the second-highest teen pregnancy rate (Manduku et al., 2021). Early adolescents begin to experience physical transformations and become pre-occupied with their appearance.

Adolescents undergo cognitive growth, which includes the maturation of their capacity for abstract thought and deductive reasoning. The late teenage years are a time of emotional development and maturation, as well as the emergence of a distinct sense of self, increased peer contact, and an emerging sexual orientation. Early teenagers engage in various risky behaviors, whereas those in the latter stages of adolescence begin to learn how to evaluate the safety of their choices. Early sexual activity increases the risk of teenage pregnancy and parenthood. Some families avoid discussing sexuality, leaving teens with a hazy understanding of how it works because of the lack of open dialogue at home (Akter, 2019). Because of potential harm, many people view

sexual experimentation at a young age with caution. Therefore, adolescents who begin sexual activity at a young age are at a higher risk for contracting HIV/AIDS, as well as for engaging in risky behaviors, including having several sexual partners, not using sterilization, becoming pregnant without intending to, and resorting to unlawful abortions. The frequent occurrence of sexual activity by minors at an increasingly early age is a significant health issue worldwide, particularly in developing nations. Early sexual conduct among teenagers is a concern, with significant psychological and health effects, notwithstanding regional and individual differences in the age at which it first manifests (Alhassan et al., 2021). Pregnant women are more vulnerable to the adverse effects of stress on their bodies and minds. Pregnancy-related anxiety and stress-related illnesses threaten the health of the mother and child and the health of the pregnancy itself. However, the consequences are often amplified and more damaging among teens. Statistics show that teenage moms and their infants are more likely to have postnatal depression than their older counterparts. Due to the mental strain and emotional challenges, they face when pregnant, teenagers are more prone to depression (Olajubu et al., 2021). Both the mother and child are at risk when a teen becomes pregnant. Systemic diseases, preeclampsia, and puerperal endometritis are more common in adolescent moms. As a consequence of teenage moms not taking prenatal vitamins or going to regular checkups, their unborn children are at an increased risk of being born prematurely, having low birth weight, having developmental impairments, and dying (Zainudin, 2019).

2. Related Works

Pregnancy among adolescents is a vast public health and economic issue that has spread rapidly in recent years across both industrialized and developing nations. The research aimed to learn how parental responses to their teen's conception affected their hopes and dreams for her. This investigation used an ethnographic method (a qualitative research paradigm). The research included twenty-one parents and twenty-four adolescent mothers. The end consequence is psychological and social issues that make it difficult for them to achieve their goals. The findings demonstrate that the emotions of parents have significant effects on the goals of teenage girls who are pregnant. The girls' families should also get counseling in accordance with the returning guidelines. That way, they can help their daughters through the tricky parts of raising a family and providing for their grandkids (Tambi, 2020). Adolescent pregnancy rates that are not desired continue to rise. Adolescents might suffer emotional and physiological consequences due to an unintended pregnancy. Unresolved psychological effects might lead to low self-esteem and even suicide. The goal of the review is to find out how an unplanned pregnancy affects the mental health of teenagers.

The psychological effects of an unplanned pregnancy on teenagers were found to include feelings of humiliation, dread, dismay, nervousness, sobbing, remorse, anger, introversion, frustration, anger, aggression, anxiety, sorrow, tension, and sadness (Kep et al., 2021). The goal of the research was to learn how emotionally stable teenage mothers who were raising their children alone were. Interviews are utilized to obtain data for this qualitative study, which takes a descriptive approach. Three teenage mothers raising their children alone participated in this research. a) Kupang City teenage mothers, b) 11-21 years old, and c) single mothers. For this study, we used a pre-field, in-field, and post-field data evaluation strategy. Based on the six categories of psychological well-being—self-acceptance, good connections with others, autonomy, environmental control, life objectives, and self-development the findings demonstrated that the three adolescent single moms were psychologically prosperous (Lena et al., 2021).

The life-span view emphasizes the ever-changing connections between an individual's growth and the shifting conditions in which that growth occurs. This viewpoint's basic themes become crystal clear when extended to the pre-adolescent years. Key characteristics of the life-span view on the growth of people are presented to demonstrate the life-span viewpoint's potential usefulness. Integration and changing interactivity, the two central tenets of the life-span context, imply, first, that each person's growth events take place in a setting of growth and non-developmental changes at various tiers of evaluation and, second, that advances and changes at a single level either impact and are impacted by advances and shifts at these other levels (Lerner and R.M., 2021). Data on children's social, emotional, and behavioral growth was gathered throughout eight waves for the National Longitudinal Survey of Children and Youth (Statistics Canada). Suicide ideation at the age of 15. a framework for selecting analysis. Social assistance, young-life psychological tensions, stress during pregnancy, and death signals are among the highest-ranking models. At age 15, suicidal ideation was 2.66 times more likely to be

reported among individuals who had experienced continuous early-life stressors than among those who had not. The primary method of caretaker social backing, nearby cohesion, the teenager's non-family social assistance, and the amount of social assistance sources are all related to self-harming ideation; higher levels of community unity and interpersonal promote sources are linked to lower rates of suicidal ideation (Ziker et al.,2020). Interpreting human actions as adaptive strategies in response to specific environments is the focus of life's historical theory. Few studies have examined the correlation between life history approaches and healthy maturation in young people. Adolescents' external and internal developmental assets are compared to their levels of ecological certainty and past life strategies (Chen et al., 2019). Life depends on a secure environment. Life history (LH) tradeoff tactics are a collection of mental and biological changes that animals and humans have made in response to threats to their well-being. Consequently, LH strategies that have been chosen via evolutionary processes govern growth and behavior to maximize survival under the parameters of the environment. The research used an ongoing cohort of 1,245 teenagers and their parents from 9 nations to explore LH hypotheses about safety over six years (Chang et al., 2019). To examine the correlation between educational attainment and adolescent birth rates in developing and middle-income countries. Pregnancy at a young age discourages girls and young women from continuing their education and developing their full human potential. The Recommended Reporting Items for Systematic Evaluations and Meta- Assessments were used to compile the data for this investigation. Only nine of the 4,980 articles retrieved between 2008 and 2018 matched the requirements for participation in the study. Higher levels of education are associated with fewer pregnancies among teenagers in poor and lower-middle-income nations. Teen pregnancy may be prevented if social service programs and regulations prioritize students' ability to attend and succeed in school (Mohr et al., 2019).

3. The Complicated Relationship Between Teen Pregnancy and Parental Mental Health

There are conflicting studies on the mental health effects of adolescent pregnancy and being a mother. Pregnancy among adolescents and mental health have intricate connections. The multifaceted pathways of elements that either contribute to or protect EPT from adverse psychological effects may be better understood by adopting a socio-ecological paradigm and a life cycle approach. Research has accumulated over the last several decades, allowing for greater awareness of the variables that put teenagers at risk for pregnancy and its repercussions. For expectant mothers, this includes a better understanding of the variables that increase the likelihood of a healthy pregnancy. A comprehensive review⁴ found that EPT had mixed emotions during their pregnancies. Among EPT mothers, sadness is more common when there is remorse. Pregnancy-related sadness was demonstrated to be a predictor of depression following delivery in teenage mothers in future research.

Poor social adjustment, maternal stress, lack of social support, negative pregnancy expectations, and a pessimistic outlook were all revealed to be significant predictors of depression symptoms. On the other hand, some EPT claim that motherhood improved their perception of self and helped them grow into excellent adults. They spoke about how much better off they were now that they had a kid. The causes of these different results may be better understood using a socio-ecological approach and life cycle analysis.

4. The Socio-ecological Model Applied to Expectant and Parenting Teens (EPT)

Bronfenbrenner first proposed the socio-ecological model to investigate what elements influence human growth. It has developed to assist in elucidating the impacts on health results and informing actions for improving health by considering five critical determinants of health. Figure 1 is used for the illustration of socio-ecological framework for analyzing EPT's effects on psychological wellness. Governance, media coverage, and cultural influences all have a role in shaping the magnitude of socioeconomic and health inequalities at the macro level. At the next level, we have community elements like local amenities and the interdependence of local groups. Next, we have components related to the places where people spend a great deal of their time throughout their lives. The second stage is interpersonal, it consists of people you know and your social networks/support mechanisms. Personal traits are the closest level to the observer. It's crucial to examine not just the unidirectional effects of psychological, biological, and socioeconomic variables on health but also the mutual influences among these tiers. Adjustments to pregnancy and motherhood, as well as general mental health and happiness, are all linked to many of the same variables that raise the risk of young pregnancy. Therefore, we are using this model to guide our investigation into the elements that affect the emotional well-being of EPT.

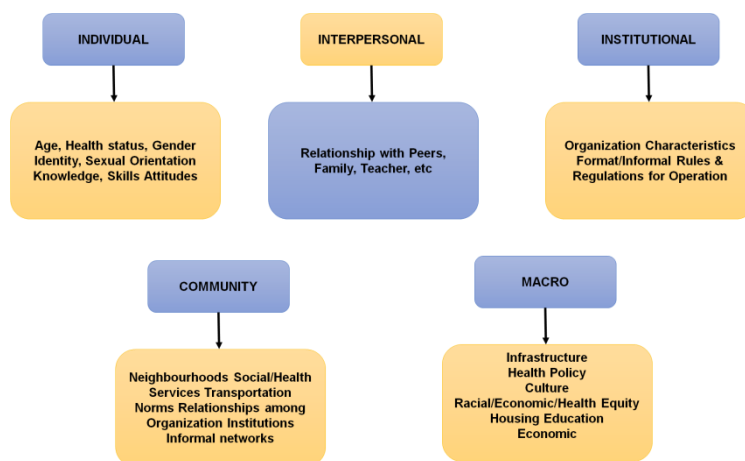


Figure 1: A socio-ecological framework for analyzing EPT's effects on psychological wellness

5. Relational Depth

The parents, siblings, instructors, and classmates are all examples of people in the adolescent's immediate surroundings that might have an effect. Multiple studies have indicated that healthy teenage growth is facilitated by strong, loving relationships between parents and children characterized by little conflict and adequate oversight and surveillance. It helps prevent mental health problems and drug abuse in young people and decreases unsafe sexual practices, including teen pregnancies and sexually transmitted diseases. Pregnancy risk and psychological readjustment to parenthood have been linked to a person's romantic or sexual relationships. Sexual decision-making is affected by a variety of factors, including but not limited to intimacy dynamics, inequalities in power, modes of communication, and domestic violence. Contraception pressure, unexpected pregnancies, STIs, and adverse psychological effects have all been linked to relationship issues. It's essential to think about the realities faced by marginalized teenage groups as well. For instance, young people identifying as LGBTQ or a sexual minority have a higher chance of experiencing abuse as kids and bullying, increasing their vulnerability to engaging in hazardous sexual conduct and sharing adverse mental health outcomes. A teen pregnancy's emotional toll also depends on the adolescent's interactions with her family, friends, and educators.

6. Individual Levels

Numerous traits, such as intellect, a caring nature, receptivity to others, and a pleasant personality, have been linked to better psychological resilience in adversity. Naturally, they are also influenced by the higher levels. The correlation between a young pubertal phase and a younger sexual experience among teenagers is one example of an individual biological component. A lack of pregnancy at a young age has been linked to a delay in menstruation. The environment and these natural elements are interconnected, but the influence goes both ways. Protective variables, thus, are related in that they anticipate adaptability, and they operate across numerous levels of impact and throughout the duration, notwithstanding the importance of particular variables. In conclusion, bolstering EPT has the potential to guarantee that subsequent generations have superior paths via the families they establish through childbirth.

7. The Socioecological Model's Complementarities to the Life-Course Approach

In contrast to the economic status, the life course viewpoint offers a structure for recognizing that factors, especially both risk and protective variables in early existence, are responsible for forming the understandings, mindsets, and actions which, in turn, impact results later throughout life and from a single generation to the next, such as the likelihood of pregnant teens and the adaptations to the function of an EPT. Implementing an outlook on life necessitates considering the adolescent's psychological surroundings as an indicator of risk, as it affects the adolescent's actions as a parent and the setting in which she raises her child.

Poverty, systemic prejudice, and a lack of opportunity all play a role in exacerbating these problems. Throughout a person's development, each layer of external effect builds upon the others and exerts unique control. Psychological and medical consequences later in life may be affected by both favorable and harmful

prenatal impacts. Long-term results are also affected by factors such as repeated exposure across generations and social dissemination of hazards. It also investigates the mechanisms by which and the underlying causes of intergenerational continuity of wellness. Stress, sadness, and post-traumatic stress disorder (PTSD) are just some mental health issues linked to ACEs. Adverse childhood experiences (ACEs) and their multigenerational influence on a teen's family raise the chance of unsafe sexual conduct, untimely becoming pregnant, and behavioral consequences.

There are several potential causes of teen pregnancies, and figure 2 represents the cause of teenage pregnancy, some of which include:

- In part, increased adolescent pregnancies may be caused by a lack of comprehensive sex education. Includes programs that teach teens about sexuality but fail to have essential topics like birth control, safe sexual practices, and the long-term effects of young pregnancy.
- Teenagers may engage in sexually dangerous conduct because of peer pressure or the need to be accepted by their peers. Unwanted pregnancies are more likely when a person is influenced by friends or a partner who does not value contraception or safe sex practices.
- Teens may find it challenging to prevent unwanted pregnancies due to a lack of access to contraception, such as condoms or birth control techniques. This may happen when people don't know where to get contraceptives, can't afford them, or both.
- Teens with poor self-esteem, few options for advancement in their schooling, or a pessimistic outlook on life are more likely to participate in high-risk activities like unsupervised sexual encounters. Pregnancy may also be seen as fulfilling their need for significance and community.
- Teenage pregnancies may be more common among girls from disadvantaged circumstances, such as those who are poor or come from broken homes. Increased susceptibility to early sexual activity and pregnancy might result from parental neglect, abuse, or a lack of support and supervision.
- Teenagers may be vulnerable to sexual material and inaccurate depictions of relationships due to the media's impact. It may affect their outlook on sexuality and relationships and lead to sexual exploration at a young age.
- Higher adolescent pregnancy rates may result from cultural and socioeconomic factors whereby marriage and having children at a younger age are more socially acceptable or even promoted.
- Teenage pregnancy is a multifaceted problem with many potential causes. By elucidating these factors, we can better design programs to prevent and support adolescent pregnancies.

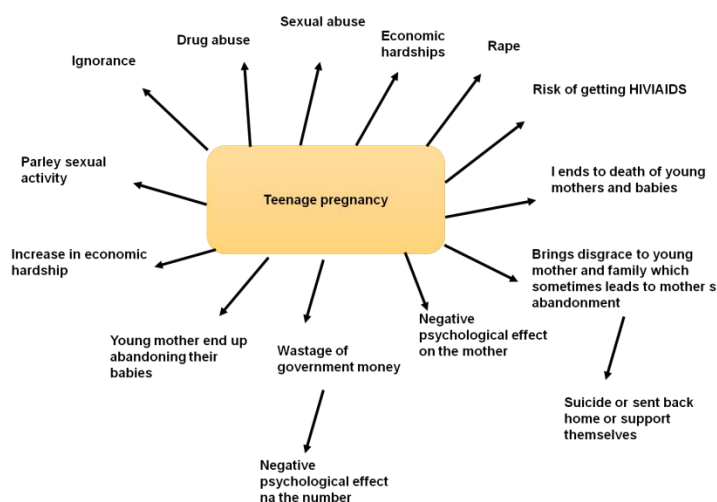


Figure 2: Causes of Teenage Pregnancy

8. Consequences for Including Social Factors in the Development of Efficient Behavioral Health Treatments

EPT's psychological and emotional care must be prioritized. There is a relationship between hazards and safeguards at various degrees of outside influence that can either cause the emotional consequences that EPT face as they negotiate the developmental responsibilities of teenagers and simultaneously make modifications to childbirth and parenthood. This has significant repercussions for the kind of therapies that should be implemented. Addressing the socioeconomic drivers of health from a life cycle perspective is crucial for advancing social justice and adolescents' physical, mental, and social well-being. For example, reducing disparities in education is vital, considering the correlation between poor educational attainment, high-income inequality, and increased adolescent pregnancy rates. EPT can contribute to financial sustainability and equality if more people access post-secondary schooling and alternate employment opportunities. Thus it's crucial to see if current policies facilitate either of these goals. Supporting the adolescent before she turns into an EPT and improving the ability of systems to meet the holistic health and mental health requirements of EPT are just two examples of the various "upstream" layers of policy effects that are necessary. Because most teenage psychological needs are not currently being met by existing medical systems, this is crucial.

To expand and utilize the kinds of youth-centered sexual and psychological services that become readily accessible, culturally acceptable, and growth suitable for diverse young people, it is necessary to develop new models of care, such as through greater utilization and getting reimbursed for mental telehealth treatments, as well as boost the system's capacity, including training for professionals. Services for youth throughout their lifetime, such as preventative, family-focused treatments, need to be expanded by using a multi/transdisciplinary approach in their delivery. Both institutional policies and procedures and cultural norms contribute to the stigma that prevents adolescents from accessing reproductive and mental health care resources. The stress and adverse mental health outcomes experienced by EPT are exacerbated by the stigma they face for being young mothers. As a result, we require system-wide initiatives to combat stigma.

9. Result

Teenage birthrate during 2013-2017 as a percentage. Line charts show proportions, whereas bar charts show absolute numbers. Figure 3 represents the pregnant teens ranged in age from 15 (5% of the total) to 19 (54.6%). Those aged 16 (4.7%), 17 (11.6%), 18 (26.6%), and 19 (54.6%) were the most common. Births per one thousand women aged 15 to 19 make up the adolescent fertility rate statistics among girls under 15 are unstable due to asymmetry and are not frequently recorded. Figure 3 displays the rate of teenage pregnancies.

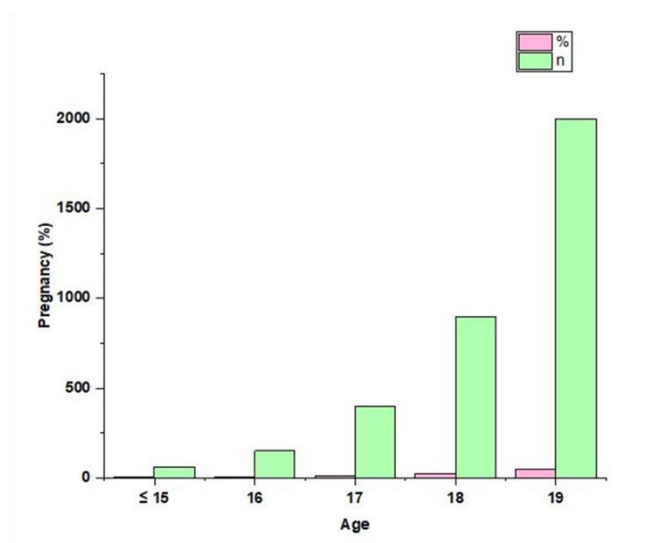


Figure 3: The chart represents the Number and Percentage of Adolescent Pregnant Women

Pregnancy, birth, and abortion rates peaked and have since steadily declined, as seen by the accompanying graphs. Teenagers aged 15 to 19 pay one set of rates, while those aged 20 to 24 spend a second set of prices and those aged 30 to 34 spend third set of prices. Comparison of these are depicted in figure 4.

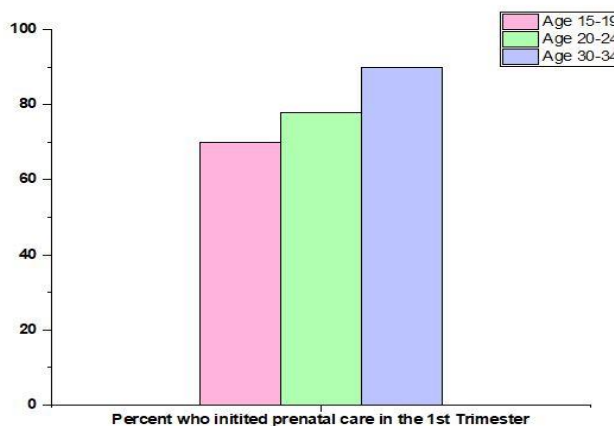


Figure 4: Initiation of prenatal care.

Pregnancy, abortion, and birth rates among teenagers have been steadily falling, with steeper declines seen among 15–17 year olds than among their somewhat older 18–19 year old peers. The figure 5 depicts the numbers show a modest increase in births from 2000 to 2020. Adolescents of Asian descent had the most outstanding rates of pregnancy, childbirth, abortion, and fetal loss, whereas Hispanic adolescents had the lowest.

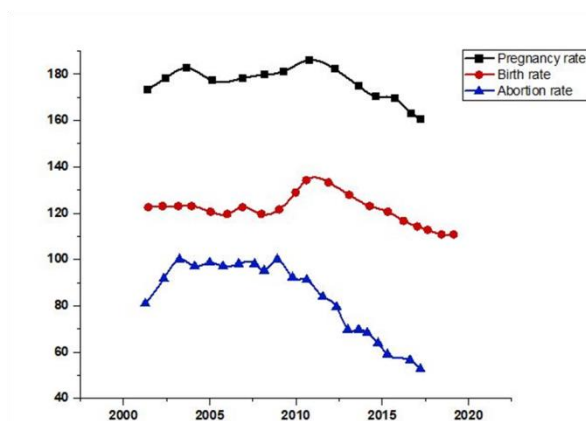


Figure 5: Rate per 1000 women aged 15 to 17

10. Conclusion

Combining the life cycle perspective on psychological wellness with EPT gives applicable models for rethinking the sorts of upstream influences that impact the lives of teenagers and the people they love in the context of the social-ecological framework. The creation of multifaceted and multi-pronged methods that react to socioeconomic variables of wellness and allow for a multi-generational life cycle standpoint is hindered by smaller perspectives or slices of significant elements.

Adolescents are at a higher risk of confronting an unwanted or premature birth if lawmakers, neighborhoods, program directors, and other stakeholders fail to acknowledge the effect of numerous external variables at both the fundamental and distant levels. In turn, aiding the EPT increases the odds that mental health issues, other

adverse effects, and subsequent economic cycles may be mitigated. Studies and assessments are crucial at all response stages because they add information about the methods that work and why, and for whom.

Such data must be utilized to guide the next steps. For this reason, the coming generations of applications must involve all types of young people, from those who are not expecting to those who are parents, to ensure that they succeed in bringing about a systemic shift.

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