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Perceptions of Unintended Adolescent Pregnancy: Associations with College Students' Neoliberal Beliefs and Type of Contraceptive Problem

Caroline O'Brien & Jennifer Katz

ABSTRACT

The purpose of this study was to explore perceptions of unintended adolescent pregnancy as associated with level of neoliberal beliefs and types of contraceptive problem. Northeastern U.S. undergraduate college students ($N = 72$) completed a measure of neoliberal beliefs and were randomly assigned to read about a couple who became pregnant after contraceptive non-adherence or a contraceptive accident. As expected, observers with greater neoliberal beliefs perceived an unintended adolescent pregnancy as more controllable than those with lesser neoliberal beliefs. Additionally, a pregnancy following a contraceptive accident was perceived as less controllable and elicited more sympathy than a pregnancy following contraceptive non-adherence. These findings suggest perceptions of unintended adolescent pregnancy are both context-dependent and related to the observer's level of neoliberal beliefs. This knowledge can be applied to promote the wellbeing of pregnant and parenting adolescents in social service, clinical, and school settings through increased awareness and improved attitudes toward these individuals.

Adolescent pregnancy is common, particularly in the United States (U.S.). More specifically, the birth rate for teenagers aged 15-19 was 24.2 births per 1,000 females in 2014 (Hamilton, Martin, Osterman, Curtin, & Mathews, 2015). Adolescents from the U.S. are more likely to give birth than adolescents from multiple other countries; U.S. teens are two and a half times as likely as teens in Canada, around four times as likely as teens in Germany or Norway, and almost 10 times as likely as teens in Switzerland (Kearney & Levine, 2012). Similarly, across 21 countries, the U.S. has the highest rate of pregnancy among 15-19 year olds and Switzerland had the lowest (Sedgh, Finer, Bankole, Eilers, & Singh, 2014). Common correlations of adolescent pregnancy include race, socioeconomic status, and family structure. In 2014, those who identified as Hispanic or Black in the U.S. had the highest rate of births among teenagers who were 15-19 year olds, whereas those who identified as Asian or Pacific Islander had the lowest (Hamilton et al., 2015). Additionally, girls who grow up in poverty, or in a single-parent household were found

to be about two times as likely to have a teen birth as those who do not (Kearney & Levine, 2012). Importantly, most teen births are reported as unintended by the mother (Kearney & Levine, 2012). In 2011, of 6.1 million pregnancies in the U.S., 45% were unintended (Finer & Zolna, 2016). Because adolescent pregnancy is especially prevalent in the U.S. and is often unintended, it's important to examine perceptions related to unintended adolescent pregnancy.

Pregnant and parenting adolescents in U.S. and similar cultures are often stigmatized. Stigmatization is the process of individuals or groups being labeled as different because they deviate from the social norm (Goffman, 1963). Teen mothers are particularly susceptible to stigma, commonly because of their age, as well as their class and race (SmithBattle, 2013). In a study by Wiemann, Rickert, Berenson and Volk (2005), 39.1% of pregnant adolescents reported feeling stigmatized by their pregnancy. They found feeling stigmatized was positively associated with White race/ethnicity, not being married or engaged to the



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baby's father, feelings of social isolation, aspirations to finish college, experiencing verbal abuse or being fearful of being hurt by other adolescents, and experiencing family criticism (Wiemann et al., 2005). In contrast, they also found that greater self-esteem and having dropped out of school before getting pregnant were negatively associated with feeling stigmatized (Wiemann et al., 2005). It has also been found that when pregnant teens feel stigmatized, they are more likely to delay prenatal care due to feelings of shame and embarrassment (Atuyambe, Mirembe, Annika, Kirumira, & Faxelid, 2009). According to Whitehead (2011), the degree of stigma that pregnant teens report experiencing is influenced by how greatly their pregnancy deviates from social norms. The most common experiences of stigma identified by teenage mothers are media reports and strangers who stare or verbally criticize them publicly (Gregson, 2009, as cited in SmithBattle, 2013). Teen mothers also identify teachers treating them differently and mandates to participate in intervention programs as disparaging (Gregson, 2009, as cited in SmithBattle, 2013). Some teens have also reported that, whereas some social service and school staff are supportive, others subject teens to rude behavior, heavy scrutiny, and mistreatment (Silver, 2008). The effects of stigma may create additional stressors for these young mothers to manage, and thus studies are needed to identify factors related to observers' stigmatizing perceptions.

Studies of how college students in the U.S. perceive pregnant and parenting adolescent girls have often shown mixed results. On the one hand, empathy has consistently been associated with positive attitudes across studies. Eshbaugh (2011) and Kim, Burke, Sloane and Barnett (2013) both reported that higher levels of empathy were a predictor of positive attitudes toward teen mothers. On the other hand, there have been discrepancies with regard to both relationships with teen mothers and age correlates of positive attitudes. Kim et al. (2013) and Weed and Nicholson (2015) both found that having a family member or friend who was a teen mother predicted positive attitudes toward teen mothers generally, whereas Eshbaugh (2011) found that not having a family member who was a teen mother predicted positive attitudes. Age correlates of positive attitudes have also been inconsistent across studies; Weed and Nicholson (2015) identified freshmen as having

the most positive attitudes, while Eshbaugh (2011) found that juniors had the most positive attitudes and finally, Kim et al. (2013) found that seniors had the most positive attitudes. The mixed results from these studies suggest the need for further research to establish a better understanding in correlations of attitudes toward pregnant and parenting teens.

One individual characteristic that may be associated with perceptions of pregnant and parenting adolescents is level of neoliberal beliefs. Neoliberalism commonly refers to economic and social policies based on the principle of self-interested systems competing for opportunities and success on the same, level playing field (Bay-Cheng, Fitz, Alizaga, & Tucker, 2015). According to a neoliberal perspective that if all systems act on this same, level playing field—all consequences are deserved, whether they be rewards or losses (Bay-Cheng et al., 2015). Although this ideology has typically been applied to economic and social policies, researchers have determined that neoliberalism is also represented in individual attitudes, behaviors, and perceptions (Bay-Cheng et al., 2015), including individual beliefs about gender and sexuality. Bay-Cheng et al. (2015) found that participants who held strong neoliberal beliefs were more likely to hold victim-blaming positions about rape and have doubts regarding the existence and salience of sexism. This connection has been illustrated in various research endeavors. Bay-Cheng (2015) discussed how girls in the U.S. are judged based on adherence to neoliberal script of sexual agency. Additionally, Katz and Ostroot (in press) found that in cases of potential sexual assault, level of willingness to help was related to observers' level of neoliberal beliefs, as more neoliberal beliefs predicted more victim blame and subsequently less willingness to help. Neoliberalism may be helpful in understanding perceptions of unintended adolescent pregnancy, as it has been useful in understanding other phenomena related to sexuality.

Weiner's (1993) attribution theory may help explain perceptions of unintended adolescent pregnancy caused by different types of contraceptive problems that vary in how controllable they are. According to Weiner, control refers to the degree to which a person can willfully alter an event or outcome. Weiner argues that amount of controllability determines the levels of blame/responsibility assigned to a person for



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an event or outcome. Blame or responsibility, which can be defined as an inference about a person's role as culpable in a failure event or other negative outcome due to lack of effort (Weiner, 1993), predicts feelings toward the person involved with the event or outcome. Higher blame/responsibility promotes feelings of anger, whereas lower blame/responsibility promotes feelings of sympathy, an emotional response in which an observer takes another person's perspective and feels concern because what that person is going through (Irwin, McGrimmon, & Simpson, 2008). Thus, less controllable events yield less blame/responsibility, which in turn fosters greater sympathy. This model may be helpful in explaining perceptions of unintended adolescent pregnancy.

Weiner's (1993) attribution theory has been applied to understand perceptions of members of other stigmatized groups, including individuals who are single by choice (Slonim, Gur-Yaish & Katz, 2015), victims of sexual coercion (Katz, Moore & Tkachuk, 2007), those living in poverty (Osborne & Weiner, 2015), victims of acquaintance rape (Abrams, Viki, Masser & Bohner, 2003), and those diagnosed with AIDS (Zhang, Rivkin & An, 2013). For example, Zhang et al. (2013) found the observers' perceptions of controllability of the AIDS diagnosis contributed to judgments of responsibility, less positive affect (including less loving concern or sympathy toward the patient), and less desire to personally interact with the patient. Attribution theory has been helpful in understanding perceptions of other stigmatized groups, it may also be helpful in understanding perceptions of pregnant adolescents.

Different types of contraceptive problems may lead to unintended adolescent pregnancy. One problem is contraceptive non-adherence. In a study by Manlove, Ryan, and Franzetta (2003), 16% of adolescents reported using contraception inconsistently in their first sexual relationship and 21% reported never using it. Additionally, Tyler et al. (2014) found that the prevalence of dual method use is low among adolescents and young women, with only 20.7% of adolescents and young women using dual methods. This implies that contraceptive non-adherence is occurring among adolescents in considerable proportions. Another type of problem is contraceptive accidents or failures. One study found that 12.4% of all episodes of contraceptive use ended with a failure

within 12 months after initiation of use (Kost, Singh, Vaughan, Trussell, & Bankole, 2008). Another study found that 54% of pregnancies among high school students specifically was a result of contraceptive failure, whereas the other 46% of pregnancies were attributed to failure to use a method (Santelli, Morrow, Anderson, & Duberstein, 2006). Because there are different types of contraceptive problems that lead to unintended adolescent pregnancy, Weiner's attribution theory and Neoliberalism may be helpful in understanding how people perceive these different occurrences.

Firstly, the current study examined whether, as scholars suggest (Bay-Cheng, 2015), neoliberal beliefs predict stigmatizing judgments of an unintentionally pregnant girl. Based on neoliberal ideology, which asserts that individuals are expected to exert control over their surrounding environments and deserve whatever consequences occur (Bay-Cheng, 2015), our first two hypotheses were developed. Compared to those who less strongly hold neoliberal beliefs, observers who more strongly hold neoliberal beliefs would perceive an adolescent pregnancy as more controllable (Hypothesis 1a). Secondly, observers with greater neoliberal beliefs would have less sympathy for an unintentionally pregnant adolescent (Hypothesis 1b).

Secondly, the current study also examined the degree to which apparent control over pregnancy, based on Weiner's (1993) theory, also predicts stigmatizing judgments, as prior research suggests it does for other stigmatized groups, such as those who are single by choice (Slonim et al., 2015). It was expected that participants would have less stigmatizing reactions to an adolescent who became pregnant following a contraceptive accident than an adolescent who became pregnant following a contraceptive non-adherence because in the latter condition the adolescent does not even try to avoid pregnancy. More specifically, it was expected that a person who experiences an accident would be seen as having less control (Hypothesis 2a) and therefore, be more deserving of sympathy (Hypothesis 2b) than someone who experienced an event that was not accidental.

Finally, the current study examined the degree to which level of neoliberal beliefs influences how controllability is perceived across different contracep-



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tive problems, as neoliberal ideology asserts that individuals are expected to be in control over their lives regardless of life circumstances or contexts (Bay-Cheng, 2015). It was expected that perceived controllability of pregnancy across non-adherence and accident conditions would vary as a function of level of neoliberal beliefs (Hypothesis 3). That is, among those lower in neoliberal beliefs, a contraceptive accident would be seen as less controllable than a contraceptive non-adherence. In contrast, among those high in neoliberal beliefs, a contraceptive accident would not necessarily be seen as less controllable than non-adherence.

METHOD

Participants

Undergraduate students ($N = 72$) from a public college in the Northeastern U.S. participated in the present study. Most participants were women (84.7%, $n = 61$) and self-identified as white/European American (76.4%, $n = 55$). On average, participants were 19.14 years old ($SD = 1.42$, 18 to 27). A majority of the participants were freshmen (59.7%, $n = 43$). When asked to categorize political affiliation, the modal response was Democrat (45.8%, $n = 33$).

Manipulation

Participants read a short (five sentence) scenario about an adolescent couple, Lauren and James. They are described as 17 years old, in love and together for about a year. In the contraceptive non-adherence condition, the two of them agree that they don't want to use a condom, and Lauren gets unintentionally pregnant after unprotected sex. In the contraceptive accident condition, the two of them agree they do want to use a condom, and Lauren gets unintentionally pregnant after the condom accidentally breaks during sex.

Design

A 2 (observers' level of neoliberal beliefs; higher or lower), not manipulated, \times 2 (type of contraceptive problem; non-adherence or accident), manipulated, between-subjects design was used. Perceived controllability of the pregnancy and feelings of sympathy were the dependent variables.

Measures

Neoliberal beliefs were assessed with the Neoliberal Beliefs Inventory (NBI; Bay-Cheng, Fitz, Alizaga, & Zucker, 2015), a 25-item measure of attitudes reflecting a view of society as meritocratic, post-racial, and post-feminist in which individuals win or lose based on their own personal strengths or weaknesses. A representative item is, "Anybody can get ahead in the world if they learn to play the game." Participants rated their levels of agreement with each item on a five-point scale (1 = *strongly disagree*, 5 = *strongly agree*). Individual responses were averaged so higher scores reflect greater agreement with neoliberal ideas. In the present sample, the estimate of internal consistency was good ($\alpha = .94$).

Perceived control over pregnancy was assessed with a three item self-report measure adapted from Katz, Moore, and Tkachuk (2007). Specific items were, "She had a lot of control over whether she got pregnant," "She had a lot of control over the use of contraception," and "She probably could have prevented this pregnancy." Participants rated each item on a seven-point scale (1 = *strongly disagree*, 7 = *strongly agree*). Individual responses were averaged so higher scores could reflect greater control. In the present sample, the estimate of internal consistency was acceptable ($\alpha = .81$).

Feelings of sympathy were assessed with a two-item self-report measure adapted from Osbourne and Weiner (2015). Specific items were, "I feel sympathy for the girl" and "I feel sorry for the girl." Participants rated each item on a seven-point scale (1 = *strongly disagree*, 7 = *strongly agree*). Scores were averaged such that higher scores reflected greater perceived sympathy. In the present sample, the estimate of internal consistency was acceptable ($\alpha = .80$).

Procedure

Undergraduate students were recruited from a voluntary psychology department pool for a study of *Attitudes and Perceptions about Unintended Pregnancy*. Data collection sessions were held in campus classrooms and lasted no more than 1 hr. Participants sat in alternating rows to ensure privacy. After providing informed consent, each participant responded to questions assessing level of neoliberal beliefs. Then, each participant was randomly assigned to read



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about one of two situations in which a heterosexual adolescent couple engages in sex. In one condition, the couple did not use a condom (contraceptive non-adherence); in the other condition, the couple used a condom that broke (contraceptive accident). Self-report measures assessed participants' perceptions of the situation. Participants were compensated with course credit, and a full written debriefing was provided. The campus Institutional Review Board approved all study procedures.

Results

Exactly 50% ($n = 36$) of the sample was randomly assigned to the contraceptive non-adherence condition, whereas the other half ($n = 36$) was randomly assigned to the contraceptive accident condition. Across both conditions, level of neoliberal beliefs ($M = 2.81$, $SD = .73$, 1.48 to 4.36) was moderate. Across conditions, both perceived control over becoming pregnant ($M = 5.04$, $SD = 1.83$, 1.33 to 7.00) and level of sympathy for the unintentionally pregnant adolescent ($M = 4.99$, $SD = 1.85$, 1 to 7) were moderately high.

Three study hypotheses were tested using a 2 (neoliberal beliefs) x 2 (contraceptive problem) analysis of

variance (ANOVA) with perceived control as the dependent variable. To create groups of participants higher and lower in neoliberal beliefs, the sample was split at the median. Hypothesis 1a was supported, as there was a significant main effect of level of neoliberal beliefs on perceived control, $F(1, 68) = 5.38$, $p < .05$; level of neoliberal beliefs was positively associated with perceived control of an adolescent pregnancy. Means are shown in Figure 1. Hypothesis 2a was also supported, as there was a significant main effect of type of contraceptive problem on perceived control, $F(1, 68) = 52.07$, $p \leq .001$; perceptions of pregnancy controllability were significantly reduced in the contraceptive accident condition compared to the non-adherence condition. Means are reported in Figure 2. Hypothesis 3 was not supported, as there was no significant interaction between type of contraceptive problem and level of neoliberal beliefs on perceived control, $F(1, 68) < 1$, ns ; there was no significant difference in perceived control of different contraceptive problems leading up to an adolescent pregnancy between levels of neoliberal beliefs.

The remaining study hypotheses were tested using a 2 (neoliberal beliefs) x 2 (contraceptive problem) ANOVA with sympathy as the dependent variable.

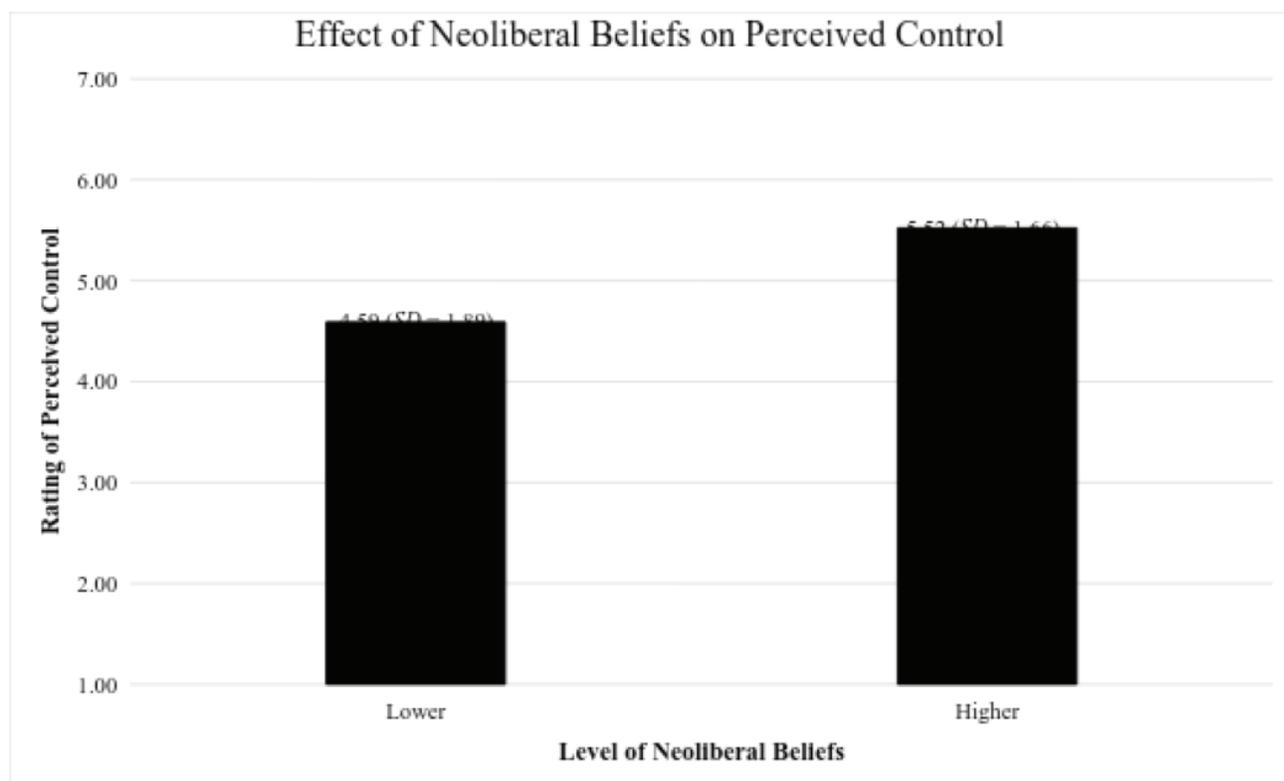


Figure 1. Effect of Neoliberal Beliefs on Perceptions of an Adolescent's Control over an Unintentional Pregnancy ($N = 72$)



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Hypothesis 1b was not supported, as there was no significant main effect of level of neoliberal beliefs on feelings of sympathy, $F(1, 68) < 1$, *ns*; unexpectedly, there was no significant difference in sympathy for an unintentionally pregnant girl between observers with greater neoliberal beliefs than those with lesser neoliberal beliefs. In contrast, hypothesis 2b was supported, as there was a significant main effect of type of contraceptive problem on feelings of sympathy, $F(1, 68) = 7.11$, $p \leq .01$; sympathy was significantly reduced in the contraceptive accident condition compared to the non-adherence condition, as shown in Figure 3.

DISCUSSION

The purpose of this study was to examine perceptions of unintended adolescent pregnancy when associated with level of neoliberal beliefs and types of contraceptive problems. As expected, results showed that observers with greater neoliberal beliefs perceived an unintended adolescent pregnancy as more controllable than those with lesser neoliberal beliefs. Results also showed that a pregnancy following a contraceptive accident was perceived as less controllable and

elicited more feelings of sympathy toward the pregnant adolescent compared to a pregnancy following contraceptive non-adherence. Unexpectedly, neoliberal beliefs were not associated with sympathy for an unintentionally pregnant adolescent. As expected, however, a contraceptive accident was perceived to be less controllable than contraceptive non-adherence, although unexpectedly, this was independent of and not interactive with the observer's level of neoliberal beliefs.

The current study findings suggested that neoliberal attitudes might shape observers' cognitive appraisals of unintended adolescent pregnancy. These results extend prior research that suggests adherence to neoliberal ideology is connected to beliefs about sexuality. For example, Bay-Cheng et al. (2015) found that individuals who held strong neoliberal beliefs were more likely to hold victim-blaming positions about rape and have doubts regarding the existence and salience of sexism. Additionally, Katz and Ostroot (in press) found that in cases of potential sexual assault, level of willingness to help was related to observers' level of neoliberal beliefs, as more neoliberal beliefs predicted more victim blame and subsequently less

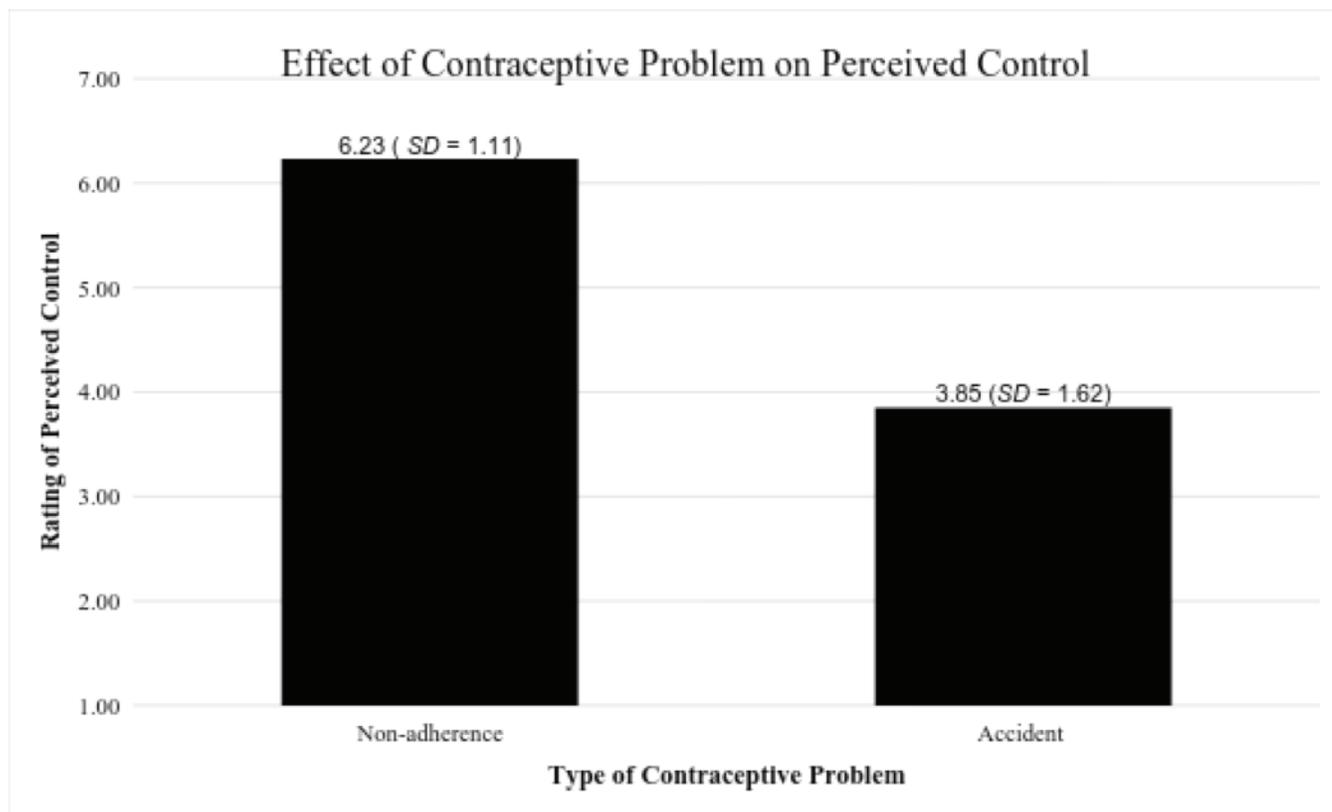


Figure 2. Effect of Contraceptive Problem on Perceptions of an Adolescent's Control over an Unintentional Pregnancy ($N = 72$)



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willingness to help. The current result linking neoliberal beliefs to perceived control over pregnancy provides additional support for the connection between neoliberalism and perceived sexuality while also extending the past literature on neoliberal ideology by showing its applicability to a new group of stigmatized individuals: pregnant adolescents.

The current results also suggested that some pregnant adolescents are perceived in less stigmatizing ways depending on the circumstances leading up to the pregnancy context; specifically, whether pregnancy followed a contraceptive accident or contraceptive non-adherence. That is, a contraceptive accident was perceived as less controllable and elicited more feelings of sympathy than contraceptive non-adherence. These results add to prior research suggesting that individuals are viewed differently depending on the context leading into a negative outcome. For example, Slonim et al. (2015) found that people who were single by choice were subject to different kinds of stereotypes than people who did not choose to be single; singles by choice were perceived as more lonely and miserable, as well as less warm and sociable than those who did not choose to be single.

The current finding that context of pregnancy influences perceptions of adolescent pregnancy could help explain discrepancies in past studies. For example, Eshbaugh (2011) and Kim et al. (2013) found inconsistent findings regarding the relationship between contact with a teen mother and positive perceptions of teen mothers. This may be because participants in the Eshbaugh (2011) study knew teen mothers whose pregnancies seems controllable, whereas participants in the Kim et al. (2013) knew teen mothers whose pregnancies seemed less controllable.

The current results suggested that neoliberal attitudes might shape cognitive appraisals (i.e. perceived control), but not emotions (i.e. sympathy). If replicable, this pattern of findings may suggest that neoliberal ideology primarily affects judgments toward, rather than emotional responses, to individuals in adverse circumstances. The current study could suggest that individuals who adhere to neoliberal beliefs are sympathetic to young people, as the unintended pregnancy described was an adolescent couple. However, those feelings of sympathy may not be comparable for an unintended pregnancy in an adult couple. This would make sense, given that prior research has

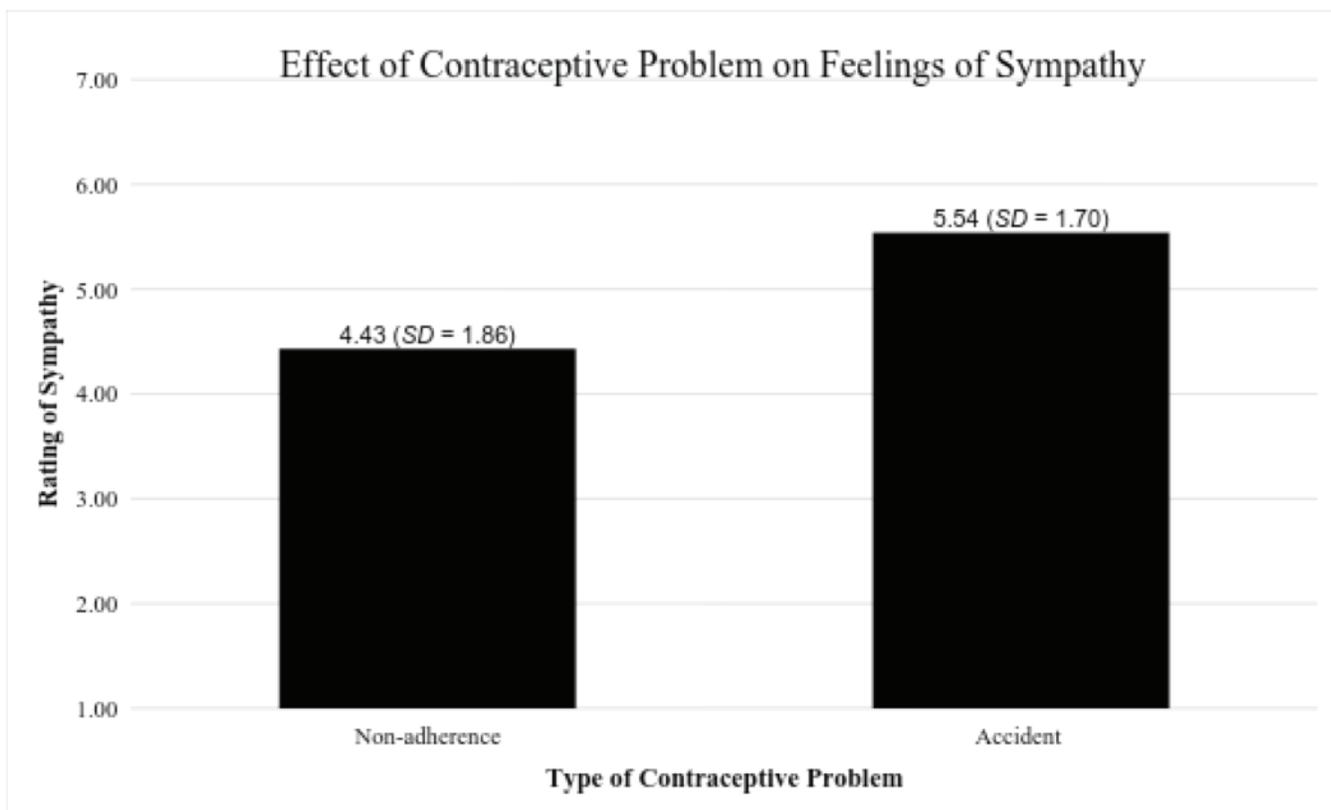


Figure 3. Effect of Contraceptive Problem on Feelings of Sympathy for an Unintentional Adolescent Pregnancy ($N = 72$)

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found humans have developed a care/harm foundation in response to the adaptive challenge of caring for helpless children; this foundation makes us sensitive to signs of need, causing us to express care for those we perceive as vulnerable, namely children (Haidt, 2012). Further research is needed on unintended adult pregnancy to explore this possibility. The current study might also suggest that political beliefs beyond neoliberalism are related to feelings of sympathy. Previous research has shown that individuals who are perceived as responsible for their negative life experiences, a dominant explanation by conservative ideology, tend to elicit anger and neglect, as opposed to sympathy and helping care (Weiner, Osborne, & Rudolph, 2011). Further research is needed on the relationship between unintended pregnancy and political beliefs to explore this possibility.

The study findings suggested that, although neoliberal attitudes may shape perceived control of an unintended adolescent pregnancy, observers with greater neoliberal beliefs still consider a contraceptive accident less controllable than contraceptive non-adherence, similarly to those with lesser neoliberal beliefs. This was unexpected, given that neoliberal ideology asserts that individuals are expected to be in control over their lives regardless of life circumstances or contexts (Bay-Cheng, 2015). The current study could suggest that those who endorse neoliberal ideals may still recognize that their ideals do not reflect reality. Should this result be replicated in future studies, this might suggest that pregnancies following a contraceptive accident are perceived as less controllable than pregnancies following contraceptive non-adherence, despite the observer's level of neoliberal beliefs. In fact, fertility is not completely controllable, and if these findings can be replicated, it suggests neoliberal beliefs do not blind individuals to this fact.

Limitations of the current study should be addressed. First, our sample included primarily White women and findings may not generalize well to groups beyond these individuals. The lack of gender diversity may not be as much of a problem as the lack of racial diversity though, given that Weed & Nicholson (2015) found that gender did not predict perceptions of pregnant or parenting adolescents. Second, this study was conducted on a predominantly liberal college campus in the Northeastern U.S. and findings may not generalize beyond this setting. Convergence

between the current findings and past research conducted in other settings provides some reassurance, but replication in other geographic areas is needed.

Future research might explore several other issues. First, the present study examined perceptions of pregnant adolescents specifically, but future studies might also look at perceptions of parenting adolescents, as previous studies have done (Eshbaugh, 2011; Kim et al., 2013; Weed & Nicholson, 2015). This distinction is important, as pregnancy is a time-limited experience, whereas parenting is longer-term, giving parenting adolescents more opportunity for exposure to stigmatization. Neoliberal beliefs may affect perceptions of deservingness of resources. Relatedly, future research might also explore how perceptions of unintended adolescent pregnancy impact positions on welfare assistance for teen mothers, as prior research suggests many people associate teen mothers with welfare dependency (Whitehead, 2001). Research might also examine how perceptions of unintended adolescent pregnancy and neoliberal beliefs impact willingness to interact with a teen mother and interaction behaviors, as individuals may come into contact with teen mothers in their lives and it's important to be aware how judgments impact interactions (Eshbaugh, 2011) and level of compassion. Finally, future studies might also address how perceptions of unintended adolescent pregnancy and neoliberal beliefs impact views about accessibility to comprehensive sex education and contraceptive methods, as prior research has established contraceptive non-adherence is a common issue experienced among adolescents (Manlove et al., 2003; Tyler et al., 2014).

The findings from the current study suggest that strong neoliberal beliefs predict more perceived control in scenarios of unintended adolescent pregnancy. They also suggest that pregnancies following a contraceptive accident will be perceived as less controllable and elicit more feelings of sympathy toward the pregnant adolescent compared to a pregnancy following contraceptive non-adherence. First, the findings from this study might be used to promote the wellbeing of pregnant and parenting adolescents in social service, clinical and school settings, as adolescents have reported feeling stigmatized in these settings (Eshbaugh, 2011; Gregson, 2009, as cited in Smith-Battle, 2013; Silver, 2008). Educators and providers



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might use this information to improve their attitudes toward pregnant adolescents. This would make for better and more effective care. Second, the findings from the current study may be useful in reducing negative social evaluations of pregnant and parenting teens, as these evaluations may make it difficult for pregnant and parenting teens to stay in school and finish their education (Wiemann et al., 2005), as well as receive proper prenatal care (Atuyambe et al., 2009). Finally, these findings might be used to help educate individuals, particularly those studying areas such as social work and family services, about stigmatization of pregnant and parenting adolescents, in hopes of making students more aware of their own perceptions (Eshbaugh, 2011). Together, these implications may be used to improve the lives as well as perceptions of pregnant and parenting adolescents.

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