ABSTRACT

Teen pregnancy is a concern not only for parents, but for the society and nation as well due to the numerous risks that come along with it. Teen pregnancy has been linked to deaths and other subsequent related psychological consequences, such as trauma and depression, as well as to socioeconomic issues such as financial hurdles and social isolation. So far, risk factors such as lack of sexual knowledge and reproductive health awareness have been associated with teen pregnancy. However, seldom considered factors like individual biological circumstances, such as early psychophysiological maturing, conduct issues, parenting deficit, or family instability and family dynamic can also be leading risk factors associated with teen pregnancy. This chapter explores the potential risk factors associated with teen pregnancy in North America (Canada, United States, and Mexico) from a biopsychological aspect, multi-ethnic, sociocultural, and economic diversity context. The chapter is a compilation of literature of possible risk factors associated with teenage pregnancy in North America.

INTRODUCTION

Teen pregnancy in North America, like anywhere else in the world, has numerous variables that can be traced through (a) biological, (b) psychological, and (c) sociocultural and economic variables (DeRidder, 1993). Despite commonality and similarity of risk factors across board, multicultural aspects and demographic diversity in North America, are key elements to understanding in-depth teen pregnancy etiology. Teen pregnancy in North America is a multi-factorial phenomenon, with various ecological factors, of social or environment influence, on macrosystem, mesosystem and microsystem as well (Corcoran, Franklin & Bennett, 2000). Moreover, evidence suggests that parenting, race, socioeconomic status,
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educational background of both parents and teenagers, are intrinsically associated with teen pregnancy across the board (Corcoran et al., 2000, p.19).

Nevertheless, irrespective of the above-mentioned factors, the influences on macrosystem, mesosystem and microsystem are only relevant, when associated with early conduct problems (Woodward et al., 1999). From a psychopathological and developmental context, the cohort research conducted on 533 female sample group in New Zealand par example, Woodward and colleagues (1999) study results strongly suggest that, early conduct and behavioral issues, are strong precursors of five times higher risk of later teen pregnancy (Woodward et al., 1999, p. 127).

Although, scientific research on teen pregnancy has focused on the biological and economic factors, evidence also suggests that some social aspects such as peer pressure, increased violence [including sexual and dating violence], and instability, along with digital communication, evolving social media and uncontrolled internet (world-wide-web] access can also be considered as risk factors responsible for teen pregnancy (Gover, Jennings & Tewksbury, 2009). However, lack of statistics, poor to non-existing information from some regions and countries, impedes possibility of clear knowledge of this phenomenon (Gortzak-Uzan, Hallak, Press, Katz & Shoham-Vardi, 2001). Furthermore, with limited access to the rest of the world, such as in rural areas, with less to no connection to media attention, medical services, the situation could be even worse hypothetically (Dryburgh, 2000).

Beside psychosocial aspects, mental health issues have also been linked with the occurrence of teen pregnancy in North America (Laura et al., 2010). These mental health issues vary from biological and organic predisposing factors, to psychological risk factors, including cognition and decision making, developmental perspective and trajectory to bio-physiological maturity, and personality traits (Puri & Treasaden, 2010). Parenting is another factor responsible for teen pregnancy especially, in the context of sociocultural aspects such as religion, values and beliefs, and sexual behavior related education to children.

BACKGROUND

Canada and United States of America

Canada and United States of America (USA) are demographically quite similar countries in terms of ethno-cultural diversity. These two countries are home to Indigenous population or Aboriginal ethnic minority groups, known as “First nations” or controversially called “Indians”, Inuits, and Métis. Aboriginales have distinct beliefs, and cultural aspects that are different from the white Caucasian majority groups, which is a significant variable in teen pregnancy as well.

Canada and United States of America are also known to be the home to a variety of migrant’s groups, mainly from Asia, Africa, Europe, and Americas (South/Latin-Central America), which makes North America a complexed, and sociocultural fascinating region (Nevitte,2017).

In the region of North America, USA has demonstrated fluctuation in its teen pregnancy rates and births (Kost et al., 2017), but remains with the highest among developed countries in the western hemisphere (Thomson, Bender, Lewis & Watkins, 2008). Furthermore, there appears to be a disproportionalty in teen pregnancies in North America, mainly in Canada and USA. Teen pregnancy is higher amongst the minority population (Hoffman & Maynard, 2008), in comparison to the white Caucasian population (Thomson et al., 2008, p. 125). Although, risk factors associated with high rates of teen pregnancy within the minority group remains unclear, evidence suggests that socioeconomic factors,
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