## The Influence of Poverty on Teen Pregnancy in Texas

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#### **Problem Statement**

Texas is ranked number four in the United States for teen pregnancy and has the highest rate of repeat teen pregnancies in the country. During 2014, there were 24.2 live births in the United States for every 1000 females who were 15 through 19 years of age. During this same time frame, the national average for teen pregnancy for Hispanic adolescents (17%) and non-Hispanic African American adolescents (16%) were significantly higher than the 8% for non-Hispanic Caucasian adolescents (Wisniewski & O'Connor, 2018).

#### **Statement of Purpose**

The purpose of this research study is to identify the factors influencing the human experience of adolescent pregnancies within poverty.

# Research Question / Hypothesis

Does poverty influence teen pregnancy in females, aged 13 through 19, in Texas?

#### **Theoretical Framework**

The family structural theory developed by Salvador Minuchin focuses on identifying the strengths of a family system which can reduce dysfunctional patterns of interaction (Minuchin, 1974). Minuchin's theory relates to the current topic since the family's household would be changed once an adolescent becomes pregnant. Furthermore, teens living in poverty, do not have the means of obtaining contraception and other means of avoiding pregnancy.

## Theoretical / Operational Definitions

**Poverty**: The state of one who lacks a usual or socially acceptable amount of money or material possessions (Merriam-Webster, 2011). Poverty is measured as < 60% of the national median equalized income for a given year (Green, 2018). Also implementing the U.S. Federal Poverty Guidelines for 2019 for providing a dollar amount per year. Per U.S. Federal Poverty Guidelines for 2019, a family of two making at or below \$16,910, and for families, more than 2 add \$4,420 for each additional person. Poverty will be measured based on the U.S. Federal Poverty Guidelines using the Harris Health Admission form.

Adolescent: Males or females ages 13 through 19; a young person developing into an adult. (Morris, 2015). It will be measured by the Harris Health Admissions form.

Teen Pregnancy: As defined by the American Pregnancy Association, is a pregnancy that occurs for a woman under the age of 20 (American Pregnancy Association, 2017). Teenage pregnancy will be measured by a positive pregnancy test verification form.

#### Literature Review

Woodtke, (2013) conducted a quantitative, descriptive study and found that long-term exposure to poor neighborhoods substantially increases the risk of adolescents parenthood and that exposure to neighborhood poverty during adolescence may be more consequential on teen pregnancy outcome than exposure earlier during childhood.

Penman-Aguilar, Carter, Snead, and Kourtis, (2013) conducted a quantitative, observational study and found that low-income female students were more likely to become teen mothers, as compared with those with the alternative characteristics such as access to healthcare, obtaining contraceptives.

#### Research Design

A retrospective study is where the dependent variable has already been affected by the independent variable. The retrospective design was selected since it offers a higher level of control when analyzing the correlation between the independent variable, poverty, and the dependent variable, teen pregnancy (LoBiondo-Wood & Haber, 2014).

#### Research Setting

The study will be conducted at the Harris Health Hospital since this is a county hospital, in Houston, Texas Medical Center that serves low-income families and families receiving federal assistance.

## **Population and Sampling**

The target population used for the research are adolescent females, ages 13 through 19 years. The method that was used to recruit and determine the sample size is called stratified sampling.

The inclusion criteria: females, first or recurrent pregnancy, in low-income families of all ethnicities, and must currently be pregnant.

The exclusion criteria: females ages younger than 13 or older than 19 years, pre-existing diseases such as polycystic ovarian syndrome, diabetes, high blood pressure, and anyone who lives outside of Houston, Texas.

Based on previous studies, an effect size of 0.35 and a power 0.8 was used to determine the sample size of 129 participants. The attrition size is 30%, which is 39 participants. In total, there are 168 participants.

#### **Data Collection**

Participants will be asked to complete the Harris Health Admissions form and the positive pregnancy test verification form encompassing: annual income, number of pregnancies, and members within the household.

### **Data Analysis**

Descriptive analysis including chisquare, mean, and frequency will be used to determine the relationship between poverty and teen pregnancy.

## Significance to Nursing

The result of this research seeks to facilitate a broader outlook on adolescent pregnancy. It will bring awareness to the healthcare community that living in poverty compromised neighborhoods will negatively affect the families and the dynamics of the family once an adolescent becomes pregnant. After understanding the effects of poverty on the household, healthcare systems and government programs can make contraceptive methods more available and affordable for those who are living in poverty. Nurses being informed of the correlation between poverty and teen pregnancy would be better able to educate teens that are high risk. Increased contraceptive availability along with education can assist with the cost and epidemic of teen pregnancy on the society.

#### **Ethical Consideration**

This research will be submitted to PVAMU research department for approval.