The Significance of Social Context:

The Case of Adolescent Childbearing in the African American Community

Julia R. Henly University of Michigan

The incidence of adolescent childbearing is significantly higher among African Americans compared to Whites, whereas the rates of early childbirth have declined more rapidly for African Americans over the past two decades. Although traditional measures of socioeconomic status do not account for the difference in adolescent childbirth rates by race, there are important reasons to question the external validity of these conventional variables. After summarizing differences in teen childbearing by race, this article addresses the problems inherent in a comparative approach to understanding race differences. More meaningful measures of socioeconomic status that provide a richer account of the social context of adolescents at risk of early childbearing are outlined. The social context approach might help inform literature on the role of family factors in adolescent childbearing, and some recent examples of such an approach are provided. The resiliency shown by African American adolescents living within socially disadvantaged communities is also discussed. Finally, a brief excursion into how attention to the social context of teen childbearing might inform public policy is undertaken.

Adolescent childbearing is a phenomenon rooted in socioeconomic disadvantage (Hayes, 1987). African American youths are disproportionately poor and also display higher rates of teen childbirth compared to their White counterparts (Moore, Simms, & Betsey, 1986). Traditional measures of social class do not account for differences in adolescent childbearing rates by race, this article argues that the origin of the race difference may still be socioeconomic. That is, measuring social class in a manner that results in the two groups being somewhat comparable in status involves much more than

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employing conventional variables such as parental income and education. A more descriptive analysis of the social context within which African American and White adolescents live is necessary to understanding the true effects of socioeconomic disadvantage.

After describing more completely the state of the race differences and explaining in greater depth the difficulties in cross-racial class comparisons, this article identifies factors that might more adequately portray the social context of adolescents' lives and then suggests the possible effects that social context might have on family patterns and processes. The capability of individuals and families to cope with and show resiliency against the social forces of disadvantage is also highlighted. Finally, directions for social policy, aimed at addressing the circumstances that make African American adolescents living within disadvantaged social contexts particularly vulnerable to early childbearing are discussed.

RATES OF ADOLESCENT MOTHERHOOD

Contrary to what is suggested by popular attention to adolescent pregnancy and childbearing, adolescent birth rates fell steadily from 1960 through the first half of the 1980s. Not only have the rates decreased for both White and African American adolescents, but since 1970, the rate of decrease has been more pronounced for African Americans. The *incidence* of childbirth among African American teens remains much higher, however. For example, between 1970 and 1984, birth rates per 1,000 adolescents aged 15-19 fell about 26% (from 57.4 to 42.5) for Whites and about 35% (from 147.7 to 95.7) for African Americans. Considering only the adolescents 15-17 years old, the rate decreased approximately 18% (from 29.2 to 23.9) for Whites and 36% for African Americans (from 101.4 to 69.7). For adolescents younger than 15, the African American rate again decreased while White rates increased slightly. Importantly, rates are relatively low for African American and White teens under 15 years of age (all statistics taken from Moore, Wenk, Hofferth, & Hayes, 1987).

In the late 1980s, however, birth rates increased, with most of the rise occurring from 1988 to 1990. Not since 1975 have rates reached the present level of 59.9 births per 1,000 15-19-year-old females (Child Trends, Inc., 1993). This recent increase is somewhat higher among African Americans. In 1990, for example, the teen birth rate for Whites was 42.5 per 1,000, which is quite comparable to the 1984 rate, and for African Americans was 116.2 per 1,000, up from 95.7 in 1984. It is unclear, of course, whether this increase

is the beginning of a new trend of rising teen birth rates or whether the rates will return to the course of decline evident through the first half of the 1980s.

PROXIMATE FACTORS OF CHILDBEARING

Age of menarche, age and frequency of sexual activity, contraception use, and decision making following a pregnancy are precipitating factors of adolescent childbearing that might help explain the differential rates of adolescent childbirth between African Americans and Whites. African American teens are both more likely to reach puberty at earlier ages and more likely to engage in sex at earlier ages, thus leading to a longer period for the potential of a pregnancy (Moore et al., 1986; Moore et al., 1987). Further, younger teens are less reliable birth control users, so fecund, early sex initiators are more likely to expose themselves to the risk of pregnancy.

Moreover, African American teens at older ages, compared to their White counterparts, are more likely to be sexually active and less likely to be using reliable birth control. For example, Zelnik and Kanter (1980) found that at age 15 less than 20% of unmarried White adolescent females report ever having had sexual intercourse, whereas over 40% of African American unmarried adolescent females report having engaged in sexual intercourse. By age 17, about 44% of Whites and 73% of African American unmarried females had experienced sexual intercourse. Further, African American sexually active adolescent females are more likely to have never used any birth control. However, among consistent contraception users, there is no significant difference in childbearing rates by race (Zelnik & Kanter, 1980).

Controlling for age of menarche and age of sexual initiation does not eliminate the gap between African American and White adolescent birth rates (Moore et al., 1986). Furthermore, because most teen births occur much later than age of menarche, the larger window of susceptibility for early fecundity or early sexual initiation cannot account for either the majority of adolescent pregnancies or for the persistent race differences. By age 15, most adolescent women, Whites or African Americans, have reached menarche (average age is about 12.5), and the difference in birth rates for African American and White teens over the age of 15 remains substantial (Moore et al., 1987).

About one fifth of Whites and two fifths of African Americans become pregnant by the age of 18 (Moore, Wenk, et al., 1987). Once pregnant, there is not a great deal of difference between White and African American teenage decision making. Since the legalization of abortion, the ratio of legal abortions per 1000 live births has been quite comparable for White and African

American adolescents (Moore et al., 1987). Whites have historically been more likely to give their child up for adoption, but for both Whites and African Americans this has become an uncommon choice. Bachrach (1986) found that, in 1982, 91% of White and 95% of African American adolescents between the ages of 15 and 19 decided to keep their children if they carried them to term.

WHAT DO THESE DIFFERENCES MEAN?

The differential rates of childbearing and behaviors leading up to childbearing between African American and White adolescents have been the topic of a great deal of research. Yet "accounting" for the difference has proven difficult. Whereas some work emphasizes individual and cultural differences, other work stresses economic and other environmental differences (Hayes, 1987). The problems inherent to a "comparative research framework" (see Azibo, 1988; Dodson, 1988) are of particular importance in the adolescent childbearing domain. What does it mean to have two comparable groups of adolescents—one African American, one White? In particular, social class, or socioeconomic status, is not easily controlled when African Americans and Whites are compared, as traditional measures, such as parental income, education, and occupation, carry with them different meanings for Whites and African Americans (Dodson, 1988; Hayes, 1987).² For example, African Americans do not get the same return for their education as do Whites and as a result are often underemployed (Dodson, 1988). Further, similar occupations do not necessarily imply similar incomes (Dodson, 1988). Additionally, African Americans and Whites, with the same incomes, are likely to live in neighborhoods with extremely different average incomes (Haves, 1987). Furthermore, measuring income levels at any one point in time does not adequately address the finding that African American poverty is more likely to be persistent, whereas White poverty is more unstable and event driven (Bane, 1986; Duncan & Rodgers, 1988). Finally, none of these traditional socioeconomic measures take into account the additional obstacles of racism and discrimination faced by African Americans within any socioeconomic class.

Even though the above factors point to the inadequacy of traditional measures of social class for explaining race differences, a great deal of research employs such variables. This work generally finds that race differences in teen sexuality, contraception use, and birth rates, decrease once parental education, occupation, or income is controlled but that the race

difference does not disappear completely. For example, Furstenberg, Morgan, Moore, and Peterson (1987) found that adolescents whose mothers did not complete high school were twice as likely to have had sexual intercourse, once race and sex of the adolescent was controlled. However, at both low and high levels of maternal educational attainment, African American teenagers were more likely to be sexually active than White teenagers (Furstenberg, Morgan, et al., 1987). Measuring socioeconomic status in financial terms, studies have found significant associations between poverty and early sexual behavior and adolescent pregnancy; however, again, race differences remain after income levels are taken into account (Hayes, 1987; Moore et al., 1986).

Recognizing the problematic nature of interpreting this remaining difference (since African Americans and Whites are not comparable simply by equating them on such measures), it seems that one potentially fruitful line of inquiry might be to examine more critically the social contexts of African American and White adolescents—for example, by measuring the caliber of the schools, the neighborhood levels of poverty, the quality of the local labor market, or the social stressors on the family. The following section outlines some components of the social context that seem particularly relevant to adolescent childbearing. In doing so, it draws on previous research and suggests avenues for future research.

THE SOCIAL CONTEXT

To more sufficiently define social class, some work has attended to several different measures and created an index of social class (Hogan & Kitagawa, 1985). In Hogan and Kitagawa's (1985) study of urban African American adolescents, the composite index consisted of mother's and father's educations, occupations, labor force history, income, and housing quality. This index was used to divide the sample into three different groups characterizing high-, medium-, and low-quality neighborhoods. A separate variable indicating whether or not the teenager lived in Chicago's West Side ghetto was also included. Employing these variables, findings indicated no difference in pregnancy rates or contraception use between the high- and medium-level neighborhoods; however, there was a one third greater chance of becoming pregnant if a teenager lived in the lowest-quality area and a two fifths greater chance of becoming pregnant if the teenager lived in the West Side ghetto. Teenagers in the medium- and high-status neighborhoods showed a 50% greater chance of using birth control at first sexual encounter. Thus, within a sample of urban African American adolescents, great differences were found in sexual activity and pregnancy rates, once richer measures of the social context were employed. Such a study adds a great deal to our understanding of the contextual variables influencing teen childbirth rates.

Another attempt at defining more carefully the social context of teen childbearing extends the traditional measure of parental occupation to the level of the community. Crane (1991) examined the relationship between the percentage of high-status workers in a neighborhood and the rate of adolescent childbearing. Using the neighborhoods calculated by 1970 census data, Crane controlled for a host of variables, such as family income, living arrangements, parents' education, occupation of family head, family size. geographic residence, as well as the composite social class index used by Hogan and Kitagawa (1985). Crane found that the presence of even a small percentage of high-status workers in a neighborhood greatly reduced the probability of teen childbearing for the White and African American adolescents in the census sample. For urban Whites residing in a neighborhood with 3.5% versus 7.5% high-status workers reduces the probability of adolescent childbearing greatly, from .102 to .01. Above 7.5% there are still benefits to higher-status neighborhoods, but the effects begin to level off. For African Americans, the effects are more continuous; yet a pronounced effect in the worst neighborhoods is still evident. Residing in neighborhoods with 3.5% versus 5.6% high-status workers decreases the probability from .161 to .124, whereas in areas with over 30% high-status workers, the probability drops to .082.

Crane's results indicate that the incidence of childbearing is still higher for African Americans than for Whites in communities of similar characteristics. Yet it would be premature to conclude that the social contexts are comparable for Whites and African Americans and that these differences are therefore the result of cultural or individual factors. For example, it remains open to investigation whether the opportunities provided to African American and White adolescents in what appears to be comparable social contexts are identical. Perhaps it takes a community with a greater number of highstatus workers to change the opportunity structure for African Americans because of the additional burden of racial discrimination facing these youths. Work by Kirschenman and Neckerman (1991), for example, provides compelling evidence regarding the high degree of racial discrimination toward prospective African American employees by White employers. Moreover, the race of the high-status workers might be an important factor in the relationship between occupation level and sexual behavior. Conceivably, high-status workers who are of similar racial and ethnic background to at-risk youths might be more influential role models (assuming that Crane's, 1991, findings operate at least partially through the process of role modeling). Thus further research in this domain might examine the level of racial discrimination in the community as well as measure the percentage of *same-race* high-status workers in the neighborhood. These factors could very well influence adolescents' perceptions of opportunity and serve as valuable information to them about available career paths; hence influencing lower childbearing rates among African American adolescents.

Crane's analysis was based on 1970 census data; however, the current conditions of social dislocation in urban areas suggest that the social context for poor adolescents has worsened over the years (W. Wilson, 1987). In fact, there are important differences between the 1960s and the 1980s in both the costs of having a child as a teenager and the benefits of delaying adolescent childbirth (Duncan & Hoffman, 1991). In particular, Duncan and Hoffman (1991) provide evidence that whereas the costs of adolescent childbearing have increased in the past 20 years, the benefits of delaying early childbearing have simultaneously decreased. In their study of cohort differences between women who completed adolescence in the 1960s and those who finished adolescence in the 1980s, Duncan and Hoffman found that the likelihood of being in poverty given early childbearing was three times greater for Whites and two times greater for African Americans in the 1980s than it was in the 1960s. However, the benefits of delaying childbirth have also declined. In the 1980s, African American high school graduates who successfully avoided pregnancy made two thirds as much money as a comparable group of African Americans in the 1960s. Duncan and Hoffman reported that a decline in income also occurred for White women during this time, but to a much lesser degree. It is apparent, then, that the opportunities available to women who delay childbirth are not as great as they once were, particularly for African Americans. Thus an important dimension of the social context, absent from traditional approaches to socioeconomic status, is the differential incentives that African Americans and Whites have to avoid adolescent childbirth.

Another important domain of the social context concerns the schools that adolescents attend. Adolescents might likely understand their future opportunities through the type of schooling they receive (Hayes, 1987). Aspects such as the quality of education, the messages that teachers and peers send concerning future opportunities, and the safety provided by the school are all potentially influential factors contributing to teen birth rates. The degree of racial integration within a school was measured by Furstenberg, Morgan, et al. (1987) in their study addressing the importance of the school context. African Americans in segregated classrooms were found to be much more likely than those in integrated classrooms to have had sexual experiences at

earlier ages. Furstenberg and his colleagues interpreted this difference in terms of differential normative influences in racially segregated and integrated classrooms. Yet socioeconomic and social disadvantage, the two alternative hypotheses tested but not supported in the data, were both operationalized using variables limited to aspects of the adolescent's family. For example, mother's education and father's income measured socioeconomic status, and mother and father's work status and father absence from the home were considered measures of social disadvantage. No measures of the school context other than integration level were included in the study—for example, factors such as the quality of education within integrated and segregated schools or resource differences within the communities where the schools are located. Thus, whereas Furstenberg and his colleagues interpreted the integration effects as suggestive of normative differences between African American and White onset of sexual initiation, they might also be explained in terms of the level of social disadvantage within the school and the community. A richer measure of social disadvantage would be necessary to test such a hypothesis.

THE FAMILY IN SOCIAL CONTEXT

The search for richer measures of the social context not only informs discussions of social class but is also relevant for more micro levels of analysis, such as work on the family processes involved in adolescent childbearing (Furstenberg, 1990). The role that the family plays in buffering the effects of a disadvantaged environment has been acknowledged in a great deal of research (e.g., Danziger, 1992; Furstenberg, 1990; Hogan & Kitagawa, 1985). Yet a disadvantaged social context also puts families under considerable stress. Thus, whereas the importance of family characteristics may be even greater in disadvantaged social contexts, the forces impinging on family stability are also more severe in the very contexts where families are most needed. This dilemma is of utmost importance for an understanding of the role that families play in adolescent childbearing.

Family supervision has been identified as a particularly important factor associated with adolescent childbearing (Hogan & Kitagawa, 1985; Miller & Moore, 1990). For example, Hogan and Kitagawa (1985) found that African American females whose parents supervised dating were less likely to engage in sexual behavior and had lower pregnancy rates, controlling for the other variables making up their composite social class index. In a qualitative study of African American adolescent mothers and their nonparent peers living in

disadvantaged communities, Danziger (1992) found that family encouragement, supervision, and rule-setting are related to later onset of sexual initiation and greater likelihood of remaining in school (for adolescents with and without children). Additionally, Miller, McCoy, Olson, and Wallace (1986) found that both high and low degrees of supervision are related to higher levels of sexual behavior than are moderate degrees of supervision, suggesting that there is a risk to leniency as well as overprotection.

These findings can be extended to an investigation of the factors within a social context that make supervision more likely, or alternately, those community factors that impinge on families' abilities to provide supervision. Furthermore, in social contexts of differing levels of disadvantage, the level and type of supervision most able to prevent early childbearing might be different. This area of research has received scant attention until recently.

Furstenberg (1990) reported some preliminary qualitative data regarding the various methods of supervision that families employ in a variety of distinct disadvantaged neighborhoods. He noted that aspects of the social environment, such as low levels of community integration evidenced by infrequent contact with neighbors, make child segregation and constant supervision likely strategies of parental child rearing. As of now, it is unclear what conditions might lead such a strategy of over protection to backfire and what circumstances might result in effective pregnancy prevention. Regardless of its impact on teen childbearing, such a strategy hinders interpersonal communication that might otherwise help disadvantaged families cope with limited resources and relieve parents of child care duties. Furstenberg (1990) discussed the "precarious balance" that parents in his study faced between circumventing community danger and encouraging adolescents to explore opportunities. Moreover, Furstenberg stressed that the ability to provide a positive environment for a child growing up in socially disorganized and disadvantaged communities is a capability above and beyond the competence necessary for effective parenting in more advantaged neighborhoods. Thus, when the social context is taken into account, family supervision becomes a much more complicated and yet more meaningful concept. The approach to understanding family behavior in context, described by Furstenberg (1990), suggests promising directions for future work.

The study of family structure and its role in adolescent childbearing also benefits from an analysis of the social context. Although family structure has received a great deal of attention in popular press, political debates, and social science research, the argument that particular family structures are related, net of other factors, to early sexual activity and adolescent childbearing has

received mixed support in the literature. First, because there is a correlation between nontraditional families (e.g., constellations other than motherfather) and poverty (Ellwood, 1988; W. Wilson, 1987), the greater incidence of teen childbirth among nonnuclear families must be understood in light of the economic association. That is, the relationship between particular family structures and teen childbearing must remain, controlling for socioeconomic status, in order for family structure to be implicated in early childbirth. Because of the many problems measuring socioeconomic status, careful attention to the social context is crucial.

Furthermore, there is evidence that the association between single parenting and early childbirth may be stronger among Whites (Moore et al., 1984, as cited in Hofferth, 1987a). Mother-grandmother arrangements have been found to be equally protective against early pregnancy as mother-father arrangements for African Americans living in disadvantaged urban areas (Hogan, 1984, as cited in W. Wilson, 1987). Whether or not this is also true for Whites cannot be discerned, as Hogan's sample was restricted to African Americans. However, both the incidence of nonnuclear families among African Americans and the importance that extended family and kin play in supervising and taking care of children are greater in the African American community than they are in the White community (Barth, Schinke, & Maxwell, 1983; McLoyd, 1990; Pearson, Hunter, Ensminger, & Kellam. 1990; Wilson, 1987). Because of this greater emphasis on alternative structures, it might be hypothesized that the association between nuclear structures and pregnancy avoidance will be less clear for African Americans. Certainly the disproportionate challenges facing African American families in disadvantaged neighborhoods make family networks beyond nuclear arrangements especially necessary (Wilson, 1987).

RESILIENCY AND SURVIVAL IN A DISADVANTAGED SOCIAL CONTEXT

Given the increased severity of disadvantage in poor communities (Duncan & Hoffman, 1991; Wilson, 1987), it is somewhat surprising that teen birth rates have decreased in the past two decades. There are other signs of adolescent resiliency as well, especially in the African American community. The effects of a teen birth are not nearly as devastating as is often suggested (Furstenberg, Brooks-Gunn, & Morgan, 1987; Geronimus, 1991). Although the association between early childbearing and a host of adverse outcomes is well documented in the literature (see Hofferth, 1987b, for

review), this association is often due to circumstances other than the occurrence of the birth (e.g., poverty). Furstenberg and his colleagues' 17-year longitudinal study of inner-city African American women who became mothers as teenagers demonstrated that adolescent mothers made marked recoveries from disadvantages faced early on. For example, at the end of the 17-year period, the majority of the adolescent mothers had finished high school and found regular employment, few were welfare dependent, one fourth had modest incomes, and another one fourth of them had family income over \$25,000 a year (Furstenberg, Brooks-Gunn, & Morgan, 1987).

Moreover, concerning race differences, studies that compare the effects of adolescent childbirth for African Americans and Whites suggest that the costs of adolescent childbearing are less severe for African Americans, and there is even some recent evidence that health benefits might result from early childbirth among African Americans (Geronimus, 1991; Geronimus & Bound, 1990). Concerning the health statistics, Geronimus and Bound (1990) found that neonatal mortality rates are lower for the children of African American adolescents than for those born to older African American mothers, whereas for Whites the reverse is true. However, these findings should be interpreted with caution as comparisons between adolescent and adult women on other health statistics, such as the likelihood of giving birth to an underweight baby and the receipt of prenatal care, show African American teens to be doing less well than older mothers (Ladner, 1988).

Resiliency among African American teenage mothers is also evident in the domains of education and employment. Several studies demonstrate that there are less negative effects on education for African American adolescent mothers compared with White adolescent mothers. For example, Rudd, McKenry, and Nah (1990) found that neither African American nor White adolescent mothers completed as much education as their nonparent counterparts; however, African American mothers were less likely to disrupt their schooling than were White mothers. Further, Moore, Hofferth, Wertheimer, Waite, and Caldwell (1981), using both the Panel Study of Income Dynamics (PSID) and the National Longitudinal Survey (NLS), found that, controlling for background and motivational differences, age at first birth is significantly related to decreased educational attainment for Whites but not for African Americans. Only for the youngest African American teenage mothers does the birth significantly affect educational achievement. Moreover, in her review of research on race differences in the consequences of adolescent childbearing, Hofferth (1987b) concluded that an association between early childbearing and reduced workforce participation has been found for White but not African American adolescents.

Finally, resiliency is evident in the family patterns shown by African Americans. White adolescent mothers are more likely than African Americans to get married as teenagers, and marriage is usually identified as a negative outcome in the teen childbearing literature (Burden & Klerman, 1984; Moore et al., 1981). That is, although teens who marry and stay married are generally better off, the vast majority of married teens divorce and do less well than their nonmarried counterparts (Burden & Klerman, 1984; Furstenberg, Brooks-Gunn, & Morgan, 1987). Moreover, the greater incidence of nonnuclear, multi-individual households among African Americans has been understood as an adaptive response to the negative effects of social disadvantage (Stack, 1974; Wilson, 1986).

IMPLICATIONS FOR POLICY

Policies addressing adolescents should also recognize the importance of the social context. School systems are a particularly viable institution for transmitting knowledge about sexual behavior and providing access to contraception (Gilchrist & Schinke, 1983). Comprehensive sex education and health services within schools, especially schools in poorer areas, have had promising results, whereas relying on parents has proven less successful (Gilchrist & Schinke, 1983). Public health clinics are another vehicle for knowledge building and service delivery. Public clinics are more likely to be used by African Americans and people of low socioeconomic status; hence a revamping of these clinics (which faced severe cuts in federal financing throughout the 1980s) would be fruitful. When funding for public health clinics was increased in the 1970s, the use of these services increased with promising results in averting pregnancy (Jones, 1985). Although federal funding for medical care generally has increased tremendously since the late 1960s, most of this money has gone to hospitalization and nursing home care instead of to community health care programs (Starr, 1986).

The apparent importance of supervision, especially in low-income communities, suggests that policies allowing easier access to child care and other support services for parents might be helpful in lowering pregnancy rates. Programs might also benefit from community outreach in order to build public trust toward child-caring institutions—as giving up control and supervision of children is often viewed with suspicion by parents in the most socially disadvantaged communities (Furstenberg, 1990).

However, given that, on one hand there are risks to *overprotection*, and yet, on the other hand, vigilant supervision is particularly important in

disadvantaged areas because of greater pressures to engage in unprotected sex (Hogan & Kitagawa, 1985), it seems essential that policies confront those negative forces directly through improving the opportunities for youths. Thus programs that focus on improving economic opportunities for adolescents, their families, and their communities would undoubtedly have the most powerful effects on rates of childbearing. This is certainly not a new idea. Several authors have argued that to really reduce high rates of adolescent childbearing it is imperative to change the conditions of poverty (Fischman & Palley, 1978; Furstenberg, 1991; Ladner 1988).

Duncan and Hoffman's (1991) findings, that completing high school and delaying pregnancy until after adolescence no longer offer the same rewards as they did 20 years ago suggest that there is a necessity to improve the quality of our high schools as well as increase opportunities in higher education for low-income adolescents. Furthermore, based on the various studies of disadvantaged neighborhoods (e.g., Crane, 1991; Hogan & Kitagawa, 1985), creating jobs in neighborhoods with high pregnancy rates, encouraging employers to advertise in these neighborhoods, moving high-status employers into disadvantaged communities, and increasing salaries for low-skilled work might all result indirectly in reducing childbearing rates.

Many researchers have proposed policies addressing the incentive to delay childbearing (e.g., Ellwood, 1988; Wilson, 1987), but actual policies have fallen short of these recommendations. Programs often operate to educate teens regarding life options other than early motherhood. These programs explore various career and educational possibilities with adolescent women; however, they concentrate primarily on increasing aspirations and the amount of time that adolescent women think about options, not on providing actual opportunities (Hofferth, 1987c).

Youth employment programs for both males and females have been suggested by the Panel on Adolescent Pregnancy and Childbearing in their recommendations to the National Research Council (Hayes, 1987). Such programs have the possibility of providing teens with a reason to delay childbirth if they offer adolescents both experience and opportunities to secure future employment prospects. Unfortunately, many job-training programs prepare poor teens for low-wage work (Katz, 1989), and are reserved for women who are already parents. Even some of the more successful programs, such as Job Corps, do not result in the lifting of inner-city youths out of poverty and into high-paying jobs (Bassi & Ashenfelter, 1986; Katz, 1989).

In his book *The Truly Disadvantaged*, Wilson (1987) argues that besides programs aimed at involving youths it is important to have a macroeconomic policy ensuring a tight labor market as well as a national labor market strategy

that would "make the labor force more adaptable to changing economic opportunities" (p. 163). These large-scale policy changes might provide opportunities for adolescents in disadvantaged communities that indirectly affect rates of adolescent childbirth, even though such policies would not directly target adolescents.

CONCLUSION

African American and White adolescents grow up in contexts that are likely to vary considerably in resources important to economic advancement. Differential community resources persist even after African Americans and Whites of similar parental education, income, and occupation are compared. Even after taking into account community-level factors such as neighborhood unemployment rates, occupation status of the community workforce, and neighborhood school quality, African Americans and Whites are not truly comparable. A history of political struggle, denied economic and social opportunities, and other means of persecution based on skin color cannot be "controlled" in statistical comparisons with Whites.

Hence, given the obstacles that youths in disadvantaged communities face and given that African Americans are not only more likely to be living in these disadvantaged communities but are burdened with the additional factor of racial discrimination, it is not surprising that African American and White adolescent childbearing rates vary substantially. A critical examination of the social context within which adolescents develop provides researchers with a better understanding of the different social forces operating in various communities. As this article attempted to demonstrate, this social context is relevant not only to the development of a better definition of social class but also for a richer understanding of family processes and adolescent behavior.

NOTES

1. Furstenberg (1991) discussed potential reasons for this popular misconception of an "epidemic" of adolescent parenting. He argued that a confluence of sociodemographic changes took place throughout the 1970s that focused attention on the problem. Included in these changes was an increase in the number of teenagers (baby boomers reached adolescence), pregnant teens stopped marrying to the same degree, sexual mores loosened, Roe vs. Wade passed, and level of schooling increased.

2. In fact, some scholars might argue that it is impossible, and a meaningless endeavor, to attempt to define comparable racial groups.

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