

Lindenwood University

Digital Commons@Lindenwood University

Theses

Theses & Dissertations

1996

A Study of the Relationship Between Locus of Control and Teen Pregnancy

Donra J. Yochum

Follow this and additional works at: <https://digitalcommons.lindenwood.edu/theses>



Part of the Social and Behavioral Sciences Commons

A STUDY OF THE RELATIONSHIP BETWEEN
LOCUS OF CONTROL AND
TEEN PREGNANCY

DONRA J. YOCHUM

An Abstract Presented to the Faculty of the Graduate
School of Lindenwood College in Partial
Fulfillment of the Requirements for
the Degree of Master in School
Counseling

1996

ABSTRACT

The relationship between teenage pregnancy and locus of control was explored. Participants included 60 girls between the ages of 14 and 18. Thirty of these girls had given birth to a child in high school; the other 30 had not. The participants completed Levenson's IPC Locus of Control test. It was predicted that there would be no relationship between the two groups and their locus of control. Belief in Internal Control, belief in Powerful Others, and belief in control by Chance were explored. It was found that there was no significant relationship between these factors and teenage pregnancy.

A STUDY OF THE RELATIONSHIP BETWEEN
LOCUS OF CONTROL AND
TEEN PREGNANCY

DONRA J. YOCHUM

A Culminating Project Presented to the Faculty of the
Graduate School of Lindenwood College in Partial
Fulfillment for the Requirements for the Degree of
Master in School Counseling

1996

COMMITTEE IN CHARGE OF CANDIDACY

Pamela Nickels, Ed.D.

Assistant Professor, Program Director

Wayne Oetting, Ed.D.

Principal, Francis Howell North High School

Marilyn Patterson, Ed.D.

Associate Professor

TABLE OF CONTENTS

I.	INTRODUCTION	1
II.	LITERATURE REVIEW	4
	Locus of Control	4
	Self-Esteem	7
	Teenage Pregnancy	11
III.	METHOD	17
	Subjects	17
	Instrument	17
	Procedure	19
	Data Analysis	20
IV.	RESULTS	21
V.	DISCUSSION	30
	Recommendations for Future Studies	32
	Limitations	32
	APPENDICES	34
	A. Permission Letter	34
	B. Levenson's Locus of Control Test	35
	REFERENCES	37
	VITA AUCTORIS	40

CHAPTER I

INTRODUCTION

In the world today the issue of adolescent pregnancy continues to be a major problem. Over one million adolescents between the ages of 15 and 19 become pregnant each year. These numbers have remained stable since 1973 (Morgan, Chapar, & Fisher, 1995; Ralph, Lochman, & Thomas, 1984).

Preventing teenage pregnancies among unwed youth who lack adequate economic resources to rear a child remains a perplexing problem. The United States has one of the highest rates of teenage pregnancies in the developed world (Liburd & Bowie, 1989).

According to Liburd and Bowie (1989), teenagers who desire pregnancy often harbor feelings of misery, hurt, or confusion associated with going through adolescence. They go on to suggest several factors related to teenage pregnancy. In homes where parents were controlling, adolescents rebelled and asserted their independence with pregnancy. Also teenagers used pregnancy in an attempt to unite the family or to gain attention. Teenage pregnancy could be the result of hopelessness and limited opportunities; having a baby could bring about the change they think is needed.

These feelings tended to be more common among low income teenagers whose success in school and work was impossible.

Along with adolescent pregnancy generally comes low self-esteem. Smith, Johnson, and Findlay (1994), indicated that studies have shown that both parenting and pregnant adolescents show poorer self-esteem adjustment than the norms.

There is preventative work taking place to overcome this growing problem, but the one million teen pregnancies remain stable. Prevention of early teen pregnancies has become a concern. Schools have incorporated courses dealing with early pregnancy and its downfalls. In addition, birth control has become more readily available for teens. General education through the media also provided ways to help prevent early pregnancy.

Statement of Purpose and Hypothesis

This study focused on adolescents who had experienced pregnancy and those who had not. The purpose of this research was to investigate the relationship between teen pregnancy and locus of control.

The following questions were posed:

Is there a relationship between belief in internal control and teenage pregnancy?

Is there a relationship between belief in control by powerful others and teenage pregnancy?

Is there a relationship between belief in control by chance and teenage pregnancy?

In order to answer this question the following hypotheses were formulated:

There is no relationship between belief in internal control and teenage pregnancy.

There is no relationship between belief in control by powerful others and teenage pregnancy.

There is no relationship between belief in control by chance and teenage pregnancy.

CHAPTER II
REVIEW OF THE LITERATURE

Locus of Control

Martin and Coley (1984) defined locus of control as a concept which referred to the degree to which individuals perceived themselves as having control or influence over their environment (internal) or as lacking such control (external). In addition, there seemed to be correlation between the subjects' age and locus of control scores. This could indicate that when tested, older subjects tended to be more internally oriented than younger subjects.

According to White and Cummings (1995), locus of control of reinforcement theory had to do with the belief that events in one's life were controlled either by oneself through effort and/or talent (internal), or by outside (external) forces such as fate or powerful others. In addition, behavior was determined partly by the degree to which people expected that their behaviors would lead to goal accomplishment. Locus of control orientation was learned from life experiences and influenced by the successes or failures of past experiences. Whether people believed they could

determine their own fate was of critical importance in determining the way in which they coped with stress and engaged in challenges. An external locus of control has been associated with at-risk status in adolescents. White and Cummings (1995) further suggested that their studies indicated that pregnancy in adolescents appeared to be coincidental; therefore, all teenagers were at risk.

Mann-Feder (1996) indicated that when two groups of adolescents were compared, pregnant and non pregnant, there was no evidence of any measurable difference in locus of control. The groups were given Rotter's Internal-External Locus of Control Scale. This scale was a self-report inventory which consisted of 23 question pairs, plus six filler questions. In the pairing of internal statements with external statements, a forced-choice format was used. However, there was a tendency for the non pregnant group to score higher on self-esteem when given the Tennessee Self-Concept Scale. There were positive indicators of self worth in those girls who had never given birth.

Studies indicated that there was a difference in locus of control between adolescents who became pregnant and those who did not (Morgan, Chapar, &

Fisher, 1995; Cobliner, 1995; Coddington, 1979). Morgan et al., (1995) further explained that adolescents who had never experienced pregnancy scored much higher on "Powerful Others" locus of control sub scale than those who had never been pregnant. The "Powerful Others" locus of control sub scale was a measure of external locus of control. Morgan et al., (1995) also stated that self-esteem was unrelated to becoming pregnant as a teenager.

Ralph, Lochman, and Thomas (1984) indicated that low-income black pregnant teenagers had a more internal locus of control than middle-income white females, indicating that pregnancy may have been more a matter of choice with low socioeconomic teenagers. The pregnant adolescent's psychological status and her perception of the deviance of her pregnancy could be affected by her socioeconomic level and the subculture of which she is a member.

Morgan, Chapar, and Fisher (1995) found that adolescents who had given birth, not only began intercourse at an earlier mean age (15 rather than 16 for not pregnant adolescents), but that they also scored higher on the "Powerful Others" locus of control sub scale, a measure of strong belief in external

control by others. According to Morgan, Chapar, and Fisher, (1995), this could indicate that adolescents who were dependent on others for health decision-making were also more susceptible to peer pressure or even more dependent on authority figures than others, which might make them at higher risk for unintentional pregnancy than more self-reliant peers. Further research would be needed to prove this, however. Furthermore, no significant differences were detected between the groups for self-worth or life events perceived as stressful.

Self-Esteem

Pete-Gladney (1995), defined self-concept as a psychological dimension that told how good one felt about one's self. It was crucial in determining future human behavior. Self-concept has been shown to be a relatively stable personality trait from adolescence onward.

Martin and Coley (1984) defined self-esteem as a set of attitudes an individual held with regard to him or herself. Self-esteem was the result of interpersonal interactions in which the self was considered important to someone. Self-concept referred to the self-knowledge one possessed regarding one's

strengths and weaknesses. The constructs of self-esteem and self-concept were similar and overlapping.

Smith, Johnson, and Findlay (1994), stated that self-esteem referred to the feelings and attitudes toward the self. Individuals who considered the self to be capable, significant, and worthwhile had high self-esteem. On the other hand, individuals who considered themselves as incompetent, insignificant, and worthless were perceived as having low self-esteem. High self-esteem was presumed to predict good adjustment behaviors: behaviors valued and sanctioned by society. Low self-esteem was presumed to predict self-destructive and deviant behaviors such as drug use, school drop out, and early sexual behavior.

According to Dubow and Luster (1990); Smith, (1984); Stark, (1986), high self-esteem in children was the result of authoritative parenting. Also, children with high self-esteem tended to have mothers who set clear limits and respected the child's rights to make decisions within the appropriate limits. The mothers also communicated well and were nurturing. The children tended to be independent, inquisitive, assertive, and they were well-liked by their peers.

According to Ralph, Lochman, and Thomas (1984), a characteristic associated with risk for pregnancy during adolescence included low self-esteem. Smith, Johnson, & Findlay (1994); Liburd & Bowie (1989); Pete-McGadney (1995); Streetman (1982); Dubow & Luster (1990) indicated that studies have shown that parenting and pregnant adolescents show poorer self-esteem adjustment than the norms.

Ralph, Lochman, and Thomas (1984) identified characteristics associated with risk for pregnancy during adolescence. These characteristics included alienation from the mother, low self-esteem, an overvaluation of the relationship with the father, and isolation from feminine relationships. Pregnant teenagers were less able to cope with threats to self-esteem, to view experiences with family, school, and peers as devaluing, to be less likely to display self-accepting attitudes, and to adopt normatively deviant behavior patterns.

Hollinger and Fleming (1988) stated that, in general, individuals who perceived themselves as possessing both instrumental and expressive attributes possessed high self-esteem. The authors went on to say that the higher the gifted and talented young woman's

social self-esteem, the less vulnerable she may be to fearing social rejection resulting directly or indirectly from achievement. Social self-esteem should correlate positively with achievement.

Morgan, Chapar, and Fisher (1995) indicated that self-esteem and locus of control have been identified as salient variables in understanding a wide range of adolescent health behaviors including contraceptive behaviors and pregnancy. Moreover, self-esteem and locus of control were important contributors to the maintenance of a stable self-concept under conditions of stress during adolescence.

Morgan, Chapar, and Fisher (1995) indicated that self-esteem did not discriminate among pregnant teenagers and non-pregnant teenagers. Studies have found that self-esteem was not a discriminating variable and could be unrelated to becoming pregnant as a teenager. However, self-esteem was a complex construct which may not be amenable to self-report measurement. Also, upon testing, there were wide ranges of reported responses to questions about self-worth. Self-report measures of self-esteem may detect gross deficiencies in self-esteem rather than the

nuances of low but not necessarily pathologically low self-esteem.

Teenage Pregnancy

Pete-McGadney (1995), found certain factors to be associated with high pregnancy rates among teenagers: low socioeconomic status, black race, family instability, and peer expectations. Pete-McGadney went on to state that although these variables may characterize a high-risk population, they provided little assistance in identifying specific teenagers at risk for sexual involvement and pregnancy prior to an actual unplanned pregnancy.

According to Morgan, Chapar, and Fisher (1995), being poor and black have been identified as major risk factors for adolescent pregnancy. Studies arising from developmental psychiatric perspectives have investigated the role of pre morbid psychopathology and cognitive and emotional immaturity in adolescents who became pregnant. The literature had identified a regressive relationship with the mother, cognitive immaturity, inability to plan for the future, and impulsiveness in those adolescents who became pregnant.

According to Cherniss and Herzog (1996), although teenage pregnancy and parenting was, in general,

associated with poor outcomes for the teenage mother and child, there was still great variability in outcomes within the population of adolescent parents. Some teenage parents, usually those with substantial family support, finished high school, delayed future pregnancies, met the basic needs of their infants, and became financially independent adults. At the other extreme, however, were the adolescent parents who encountered all the worst outcomes (school failure, dependence on welfare, repeat pregnancies in rapid succession, and failure to care adequately for their children). The most salient characteristics of the least successful teenage parents included very low levels of family and social support, poor school performance, and depression.

According to Tait, Osofsky, Hann, and Culp (1994), adolescent mothers were far less likely to offer a child continuity because, in addition to balancing parenting demands, they had such tasks as constructing their own identity, achieving an education, and making a decision about a future career. These adolescent mothers also experienced a more advantageous life circumstance. They tended to have more stress, more depression, which correlated with worries about

education, employment, relatives, partners, children, housing, and finances.

Barth Schinke, and Maxwell (1983); Kaplan, (1991); and Babikian, (1990) indicated in their findings that teenage pregnancy and adolescent mothers were much less distressed and psychologically incapacitated by their situation than was once thought. Social supports and socioeconomic status predicted psychological well-being better than parenting status. Expanded school programs for teenage mothers and renewed efforts to enhance young mothers' social and socioeconomic resources were recommended and helpful.

Barth, Schinke, and Maxwell (1983) went on to explain that conclusions that pregnant and parenting teenagers suffer major psychological distress arose from studies predating the current tolerance for sexual activity by teenagers and unmarried women and for single parenting. Because of recent social change, old studies needed reexamination. "Out-of wedlock" pregnancy and parenting did not arouse the stigma of past decades. The rate and acceptance of outside-of-marriage sexual activity and conception were rising. Community-based services for teenage parents were expanding as evidence of adolescent mothers' increase

in liberty. Such changes imply that adolescents' reactions to motherhood may have also changed.

Cherniss and Herzog (1996) indicated that there were several good reasons why family support was a key factor in the lives of teenage parents and their infants. The family was a system in which the behavior of its individual members was highly interdependent. Involving the teenager's parents could help to insure that the teenager received clear, consistent information about childbearing. The absence of emotional and/or material support from the extended family placed the teenage parent at high risk for long-term economic dependence and emotional and social problems.

Liburd and Bowie (1989) further stated that teenagers who were behind academically in school were three times more likely to become unwed parents. In addition, lower income teenagers were more likely to become pregnant if their families considered early sexual activity and pregnancy to be acceptable. However, if a teenage girl had a good relationship with her mother and her mother had stated that she was opposed to teenage pregnancy, the girl was less likely to become a teenage mother. Liburd and Bowie (1989)

indicated that premarital pregnancy rates were highest among young women from families that were poor and disrupted, had female heads-of-households, were large, had one or more sisters who became teenage mothers, and had lax parental supervision during their initial dating experiences.

In summary, locus of control could be learned from life experiences and influenced by past successes and failures. An external locus of control has been associated with at-risk adolescents. On the other hand, other studies indicated no measurable difference in the locus of control in adolescents who had given birth or had not. Some studies indicated a higher belief in control by powerful others in teenagers who had given birth.

Furthermore, it was found that self-esteem was crucial in determining future behavior. Self-esteem had to do with the self being considered as important to someone. Some studies indicated that low self-esteem was associated with teenage pregnancy.

In addition, teenage pregnancy was found in some studies to be associated with low socioeconomic status, black race, family instability, and peer expectations. Other studies indicated pregnant teenagers were much

less distressed than was once thought. Teenagers today had more social support along with expanded programs in the area of teenage pregnancy.

CHAPTER III

METHOD

Subjects

The subjects were 60 teenage girls in the St. Charles, Missouri area who were asked to participate in the study. They were from public school districts that service predominately middle class, midwestern, Caucasian students. Of the 60 girls who participated in the study, two were African American; 58 were Caucasian. All were students in high school and had never dropped out. Thirty of these girls had never had a child, and 30 of these girls did have a child. No girls in the sample were married and never had been. The girls ranged in age from 14-18 and ranged in grades 9-12. The mean age was 15 and the mean grade was nine. The volunteers were given a test to measure locus of control.

Instrument

Levenson's Locus of Control instrument was used to measure locus of control in three separate belief areas: belief in Internal control, belief in control by Powerful Others, and belief in control by Chance. This tool was a 24 item questionnaire. The researcher

was interested in a measure of locus of control in those teenagers who had given birth and those who had not.

Levenson's Locus of Control test has a Likert 6-point scale instead of a forced-choice format. All the statements are phrased as to pertain to the subject herself. Kuder-Richardson reliabilities (coefficient alpha) yielded $r=.64$ for the Internal scale, $.77$ for the Powerful Others scale, and $.78$ for the Chance scale. Split-half reliabilities (Spearman-Bowman) were $r=.62$ (Internal scale), $.66$ (Powerful Others scale), and $.64$ (Chance scale). Test-retest reliabilities for a one-week period were $r_s=.64$, $.74$, and $.78$. Means for the second administration of the scales were not significantly different from those of the first administration (Levenson, 1974).

A high score on the Internal scale indicated that the subject expected to have control over her own life. A low score in the Internal scale indicated that the subject did not expect to have control over her own life.

A high score on the Powerful Others scale indicated that the subject expected powerful others to have control over her life. A low score indicated that

the subject expected powerful others did not have control over her life.

A high score on the Chance scale revealed that the subject expected chance forces or luck to have control over her life. A low score on the Chance scale revealed that the subject expected chance forces not to control her life.

Procedure

This researcher was located in a high school. The teenage girls were briefed about the nature and purpose of the study and were requested to participate. Anonymity was assured to all who volunteered.

Teenagers who agreed to participate in the study were given a letter for the parent or guardian. (See Appendix A). This letter asked for parental permission for their child to take the test. It also gave some explanation of the test. The teenagers were also given Hanna Levenson's Locus of Control test. (See Appendix B).

The teenagers were told to answer all 24 test items to the best of their knowledge. They were also told that the test measured locus of control and that the study was to see if there was a relationship in the locus of control of girls who had given birth and those

who had not. The girls were instructed to return the tests and permission forms to the researcher. They were not supervised while taking the test.

Data Analysis

The Pearson Correlation Coefficient was used in this study. This was utilized to determine if a relationship existed between the locus of control for teenagers who had given birth and those who had not.

CHAPTER IV

RESULTS

Variables included scores on the Internal, Powerful Others, and Chance sub scales as measured by Levenson's Locus of Control. The level of measurement for the variables was interval level. The descriptive statistics for this sample are displayed below in Table 1.

TABLE 1

Internal, Powerful Others, and Chance Descriptive Statistics

Variable	Mean	Std Dev	Minimum	Maximum	N	Label
I1	33.77	6.45	22.00	43.00	30	
PO1	16.73	7.45	6.00	34.00	30	
C1	19.60	8.44	3.00	35.00	30	
I2	33.40	6.51	19.00	45.00	30	
PO2	21.77	9.62	3.00	38.00	30	
C2	21.83	9.27	9.00	36.00	30	

The mean for Internal locus of control for group 1, teens who had not had a child, was 33.77 with a standard deviation of 6.45. The mean for the Internal

locus of control for group 2 teens who had a child was 33.40 with a standard deviation of 6.51. The teenagers who had given birth had a Powerful Others mean of 16.73 with a standard deviation of 7.45. The group of teenagers who had not given birth had a mean score of 21.77 on the Powerful Others sub scale with a standard deviation of 9.62. The Chance scale mean for girls who had no child was 19.60 with a standard deviation of 8.44 and was 21.83 with a standard deviation of 8.44 for the group with a child.

Internal scores for group 1, 33.77, and Internal scores for group 2, 33.40, were almost identical. The dispersion was almost the same. These two were so close that there was no statistical difference between the two; therefore, there seemed to be no difference in locus of control influencing pregnancy between the group who had given birth and the group which had not.

Powerful Others scores for group 1, 16.73, was a bit more compact because the standard deviation was smaller. Powerful Others scores for group 1 was closer to the mean and less dispersed than Powerful Others group 2 scores of 21.77. The mean for Powerful Others group 1, 16.73, was more of a standardized score because of so little dispersion.

Chance scores for group 1, 19.69, were more compact and less dispersed than Chance scores for group 2, 21.83. The Chance for group 1 was lower than group 2. The three groups were statistically about equal even with slight means and standard deviations.

Correlations were used to determine the relationship between pregnancy, non pregnancy, belief in Internal locus of control, belief in Powerful Others locus of control, and belief in control by Chance locus of control. The correlation factor between Internal locus of control group 1 and Internal locus of control group 2 was .0508 (See Table 2). This is very weak with little or no correlation between the two factors. Because of the small 2-tailed significance factor, the correlation results cannot be applied from the sample to the population. The Internal locus of control for group 2 did not impact on the Internal locus of control for group 1. Belief in internal locus of control accounted for only .25% of the variability for teenage pregnancy.

Table 2

Correlation of Internal Scores for Group 1 and Internal
Scores for Group 2

Correlations:	I1	I2	
I1	1.0000	.0508	
I2	.0508	1.0000	
N of cases:	30	2-tailed Signif:	* - .01 ** - .001

The correlation between Powerful Others locus of control scores for group 1 and Powerful Others locus of control scores for group 2 (See Table 3 below) was an inverse relationship. Powerful Others group 1 was 1.000 and Powerful Others group 2 was $-.1135$. As one decreased, the other increased. Again, there was a small correlation factor, although probably not significant to the population. The 2-tailed significance value, $-.01$, allowed no correlation between scores for Powerful Others group 1 and scores for Powerful Others group 2. Powerful Others accounted for only 1.28% of the variability for teenage

pregnancy. It was, however, improved over I1 and I2. Powerful Others group 2 did not impact Powerful Others group 1.

Table 3

Correlation of Powerful Others Scores for Group 1 and Powerful Others Scores for Group 2

Correlations:	PO1	PO2	
	PO1	1.0000	-.1135
	PO2	-.1135	1.0000
N of cases:	30	2-tailed Signif: * - .01 ** - .001	

The correlation between group 1 scores for belief in Chance's control over one's destiny and group 2 scores for belief in Chance's control over one's destiny was stronger than the previous two (See table 4). Chance group 1 scores were 1.000, and Chance group 2 scores were -.2761. Again, there was a negative correlation factor of -.1135. When one decreased, the other increased. This was a relatively small

correlation factor. The 2-tailed significance factor of $-.01$ indicated that there was no overall correlation. Chance group 2 did not impact Chance group 1. Chance accounted for 7.62% of the variability for teenage pregnancy.

None of the correlations affected each other. There was no direct relationship between the variables. The motivation for certain behaviors must lie with other factors.

Table 4

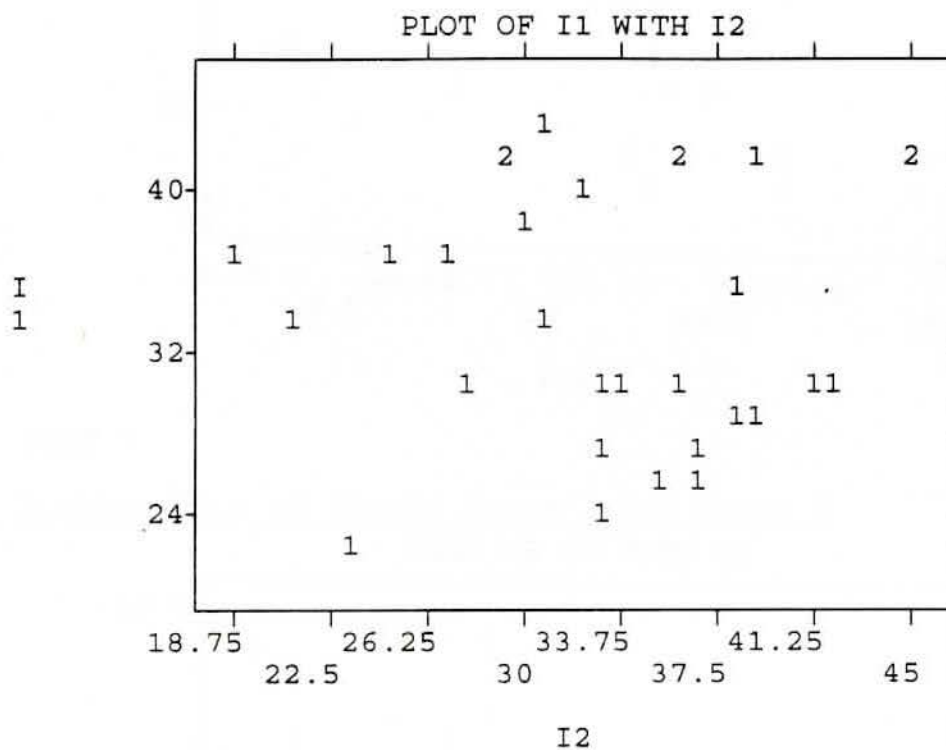
Correlation of Chance Scores for Group 1 and Chance Scores for Group 2

Correlations:	C1	C2	
C1	1.0000	-.2761	
C2	-.2761	1.0000	
N of cases:	30	2-tailed Signif:	* - .01 ** - .001

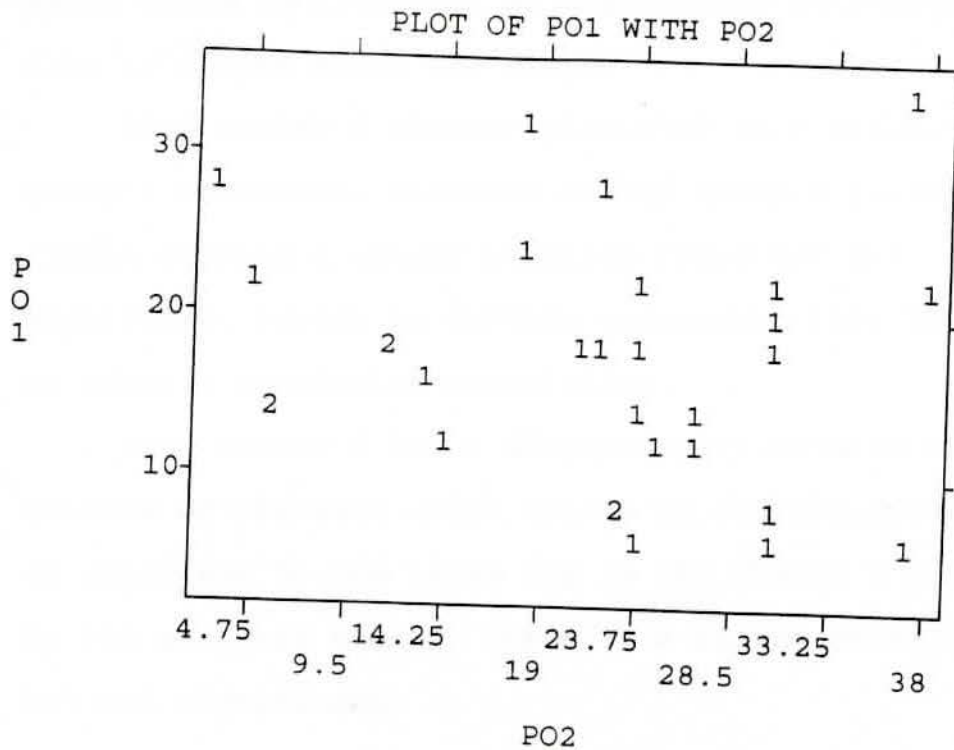
The following scatter plots provided a visual representation of the distribution, thus illustrating relationship.

PLOT 1

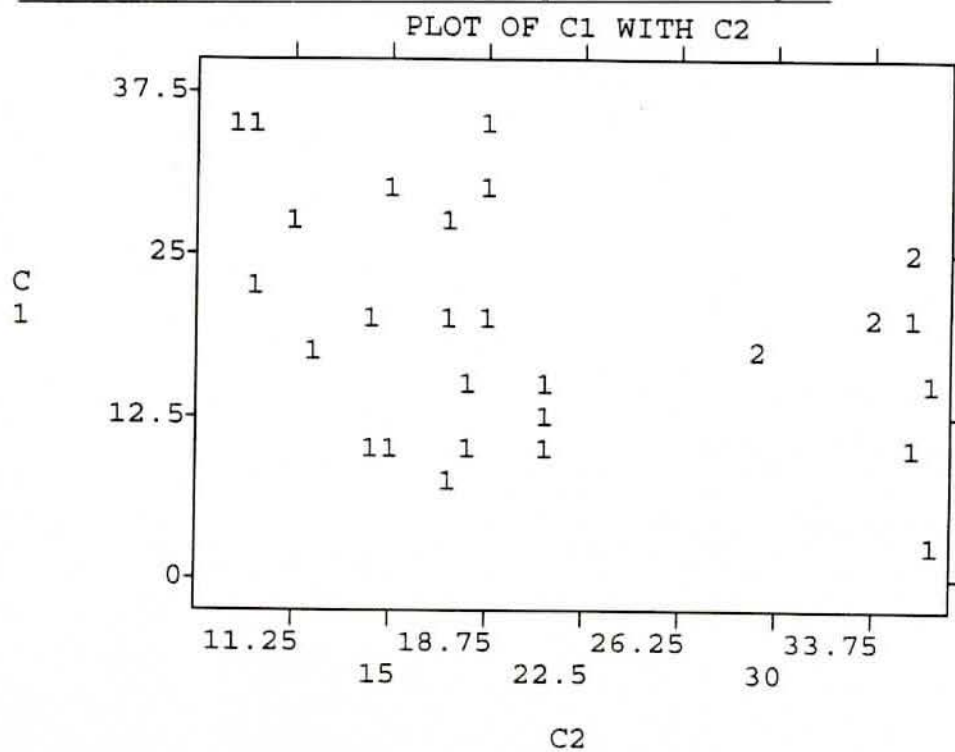
Scatter Plot of Internal Group 1 and Group 2



PLOT 2

Scatter Plot of Powerful Others Group 1 and Group 2

PLOT 3

Scatter Plot of Chance Group 1 and Group 2

Plot number 1 has corresponding x's and y's. This shows there is little or no correlation because the data is strewn about the plane.

Plot number 2 demonstrated that as Powerful Others group 1 decreases, Powerful Others group 2 increases a little causing a slight negative trend but not significant enough to justify concluding that there is an overall population correlation.

Plot number 3 has a disparagement between certain subsets of the data which causes no overall correlation to exist due to the large gap in the Chance 2 readings. As the analysis showed, there is a slight correlation but not significant.

CHAPTER V

DISCUSSION

The null hypothesis being tested stated that there was no relationship between locus of control and teenage pregnancy. The findings of this study suggested that there was no relationship between belief in internal control and teenage pregnancy. There was no relationship between belief in control by powerful others and teenage pregnancy. There was no relationship between belief in control by chance and teenage pregnancy.

White and Cummings (1995) indicated that there was no difference in the locus of control in teenage adolescents. All were at risk equally. Mann-Feder (1996) stated there was no measurable difference in the locus of control among teenagers who had given birth and those who had not.

Morgan, Chapar, and Fisher (1995), Cobliner (1974), and Coddington (1979) indicated that adolescents who had never experienced pregnancy scored higher on the Powerful Others locus of control sub scale. This could indicate that adolescents were not only dependent on others for decision-making purposes,

but were also influenced by peer pressure. Adolescents were also more dependent on authority figures.

Ralph, Lochman, and Thomas (1984) stated that low income black pregnant teenagers had more of an Internal locus of control than middle income white females. This could indicate that pregnancy could have been a matter of choice with low socioeconomic women. These authors further suggested that a pregnant adolescent's psychological status may be affected by her socioeconomic level and the subculture in which she is a member.

This study has undertaken an assessment of the factors which determine the high school teenage girl's locus of control. The study compares the relationship among perceptions of control determinants between pregnant and non pregnant teenage females. The results indicate that no significant correlation exists between the locus of control determinants of Internal, Powerful Others, and Chance.

Studies of this type are important because a sense of self worth and esteem is an essential element in the successful treatment and counseling of pregnant teenagers. Understanding the determinants of self-

esteem is a significant step in developing well adjusted behavior patterns among these young women.

Recommendations for Future Studies

One recommendation for future study would be to give some type of self-esteem scale to the adolescent teenagers. Another recommendation would be to also give Rotter's Internal-External Locus of Control Scale in addition to Hanna Levenson's Locus of Control Scale to compare similarities and differences.

Limitations

The study itself was somewhat limited by its small and non-random sample size. The study was limited to a sample of 30 pregnant and 30 non pregnant teenagers. A larger sample size may have yielded different results. A more random sampling which included more members from ethnically, economically, regionally, and socially diverse population sub groups may also have influenced the results of the survey. This area of study remains substantially open to additional research, and given the meteoric increase in terms of pregnancy rates, teenage mothers, and all of the attendant personal and societal issues that these pregnancies generate, continues to be an important topic for future study.

Appendix A

11/19/95

Dear Parents,

I am a Language Arts teacher at Francis Howell North High School. I am currently working on a Masters Degree in school counseling at Lindenwood College. This requires me to do a thesis involving statistics and comparisons.

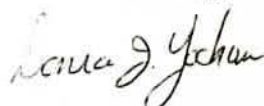
I am interested in comparing the locus of control of young women who have had a baby in high school versus those who have not.

To do this I would like to give the enclosed test, "Locus of Control" to your daughter with your permission. There are 24 statements, none of which are of a personal nature. It is a test which measures attitudes about who or what is in control—self, others, or chance.

I would appreciate your help in allowing your daughter to take this test. Her name does not go on the test. It is completely anonymous. If you agree, please sign below, have your daughter circle her answers, and return to me in Room 210.

Thank you for your time and effort.

Sincerely,



Donra Yochum

Return the portion below with your test.

My daughter _____ has my permission to take the "Locus of Control" test.

parent signature

Appendix B

Locus of Control

58 HANNA LEVENSON

Appendix A: I, P, and C Scales

Directions

On the next page is a series of attitude statements. Each represents a commonly held opinion. There are no right or wrong answers. You will probably agree with some items and disagree with others. We are interested in the extent to which you agree or disagree with such matters of opinion.

Read each statement carefully. Then indicate the extent to which you agree or disagree by circling the number following each statement. The numbers and their meanings are indicated below:

If you agree strongly: circle + 3

If you agree somewhat: circle + 2

If you agree slightly: circle + 1

If you disagree slightly: circle - 1

If you disagree somewhat: circle - 2

If you disagree strongly: circle - 3

First impressions are usually best. Read each statement, decide if you agree or disagree and the strength of your opinion, and then circle the appropriate number.

GIVE YOUR OPINION ON EVERY STATEMENT

If you find that the numbers to be used in answering do not adequately reflect your own opinion, use the one that is *closest* to the way you feel. Thank you.

Scoring and Interpretation for the I, P, and C Scales

There are three separate scales used to measure one's locus of control: Internal Scale, Powerful Others Scale, and Chance Scale. There are eight items on each of the three scales, which are presented to the subject as one unified attitude scale of 24 items. The specific content areas mentioned in the items are counterbalanced so as to appear equally often for all three dimensions.

To score each scale add up the points of the circled answers for the items appropriate for that scale. (These items are listed on p. 59.) Add to this sum + 24. The possible range on each scale is from 0 to 48. Each subject receives three scores indicative of his or her locus of control on the three dimensions of I, P, and C. Empirically, a person could score high or low on all three dimensions.

page 2-test

I, P, and C Scales

	Strongly disagree	Disagree somewhat	Slightly disagree	Slightly agree	Agree somewhat	Strongly agree
1. Whether or not I get to be a leader depends mostly on my ability.	-3	-2	-1	+1	+2	+3
2. To a great extent my life is controlled by accidental happenings.	-3	-2	-1	+1	+2	+3
3. I feel like what happens in my life is mostly determined by powerful people.	-3	-2	-1	+1	+2	+3
4. Whether or not I get into a car accident depends mostly on how good a driver I am.	-3	-2	-1	+1	+2	+3
5. When I make plans, I am almost certain to make them work.	-3	-2	-1	+1	+2	+3
6. Often there is no chance of protecting my personal interests from bad luck happenings.	-3	-2	-1	+1	+2	+3
7. When I get what I want, it's usually because I'm lucky.	-3	-2	-1	+1	+2	+3
8. Although I might have good ability, I will not be given leadership responsibility without appealing to those in positions of power.	-3	-2	-1	+1	+2	+3
9. How many friends I have depends on how nice a person I am.	-3	-2	-1	+1	+2	+3
10. I have often found that what is going to happen will happen.	-3	-2	-1	+1	+2	+3
11. My life is chiefly controlled by powerful others.	-3	-2	-1	+1	+2	+3
12. Whether or not I get into a car accident is mostly a matter of luck.	-3	-2	-1	+1	+2	+3
13. People like myself have very little chance of protecting our personal interests when they conflict with those of strong pressure groups.	-3	-2	-1	+1	+2	+3
14. It's not always wise for me to plan too far ahead because many things turn out to be a matter of good or bad fortune.	-3	-2	-1	+1	+2	+3
15. Getting what I want requires pleasing those people above me.	-3	-2	-1	+1	+2	+3
16. Whether or not I get to be a leader depends on whether I'm lucky enough to be in the right place at the right time.	-3	-2	-1	+1	+2	+3
17. If important people were to decide they didn't like me, I probably wouldn't make many friends.	-3	-2	-1	+1	+2	+3
18. I can pretty much determine what will happen in my life.	-3	-2	-1	+1	+2	+3
19. I am usually able to protect my personal interests.	-3	-2	-1	+1	+2	+3
20. Whether or not I get into a car accident depends mostly on the other driver.	-3	-2	-1	+1	+2	+3
21. When I get what I want, it's usually because I worked hard for it.	-3	-2	-1	+1	+2	+3
22. In order to have my plans work, I make sure that they fit in with the desires of people who have power over me.	-3	-2	-1	+1	+2	+3
23. My life is determined by my own actions.	-3	-2	-1	+1	+2	+3
24. It's chiefly a matter of fate whether or not I have a few friends or many friends.	-3	-2	-1	+1	+2	+3

References

- Babikian, H.M., (1990). A study of teenage pregnancy. *American Journal of Psychiatry*. 128, 755-760.
- Barth, R. & Schinke, S. & Maxwell, J. (1983). Psychological correlates of teenage motherhood. *Journal of Youth and Adolescence*. 12, (6), 471-478.
- Cherniss, C. & Herzog, E., (1996, January). Impact of home-based family therapy on maternal child. *Family Relations Magazine*. 45, (1).
- Coblener, W.G. (1974). Pregnancy in the single adolescent girl: The role of cognitive functions. *Journal of Youth and Adolescence*, 3 (1), 17-29.
- Coddington, R. D. (1979). Life events associated with adolescent pregnancies. *Journal of Clinical Psychiatry*, 180-185.
- Dubow, E. & Luster, T. (1990). Adjustment of children born to teenage mothers: The contribution of risk and protective factors. *Journal of Marriage and the Family*. May, 393-404.
- Hollinger, C. & Fleming, E. (1988). Gifted and talented young women: Antecedents and correlates of life satisfaction. *Gifted Child Quarterly*. 32, Spring, 254-259.

- Kaplan, H.B. (1991). Psychological antecedents of unwed motherhood. *Journal of Youth Adolescence*. 8, 181-207.
- Levenson, H. (1974). Activism and powerful others: Distinctions within the concept of internal-external control. 38, 377-383.
- Liburd, L. & Bowie, J. (1989). Intentional teenage pregnancy: Community diagnosis and action plan. *Health Education*. 20, 5, 33-38.
- Mann-Feder, V. (1996). Adolescents in therapeutic communities. *Adolescence*. Spring.
- Martin, J. & Coley, L. (1984). Interrelations of some measures of self-concept. *Educational and Psychological Measurement*. 44, 517-521.
- Morgan, C. & Chapar, G. & Fisher, M. (1995). Psychological variables associated with teenage pregnancy. *Adolescence*. 30, 118, Summer, 276-287.
- Pete-McGadney, J. (1995). Differences in adolescent self-concept as a function of race, geographic location, and pregnancy. *Adolescence*. 30, (117), Spring, 95-105.

- Ralph, N. & Lochman, J. & Thomas, T. (1984).
Psychological characteristics of pregnant and
nulliparous adolescents. *Adolescence*. 19,
(74). Summer, 282-294.
- Smith, D. & Johnson, M. & Findlay, H. (1994).
Pregnancy status, self-esteem, and ethnicity: Some
relationships in a sample of adolescents. *Family
and Consumer Sciences Research Journal*. 23,
(2), December, 183-197.
- Smith, P. (1986). Desired pregnancy during
adolescence. *Psychological Reports*, 54, 227-231.
- Stark, E. (1986). Young, innocent, and pregnant.
Psychology Today, Oct., 20 (10), 28-35.
- Streetman, L. (1987). Contrasts in the self-esteem of
unwed teenage mothers. *Adolescence*. 21,
(86), Summer, 458-464.
- Tait, L. & Osofsky, J. & Hann, D. & Culp, A. (1994).
Predicting behavior problems and social competence
in children of adolescent mothers. *Family
Relations*. 43, 439-446.
- White, S. & Cummings, M. (1995). Goal setting and
control orientation of pregnant/parenting female
adolescents. *Family and Consumer Sciences Research
Journal*.