Narratives on Teen Pregnancy

Teen pregnancy is often framed in a stigmatizing light in the United States. The stigmatization of teen pregnancy and teen parenthood can have adverse health effects on parents, newborns, and families. Often, racism and classism are insidious within the narrative about teen pregnancy and can heighten the adverse effects of stigma. Specifically, teen parents who are Black and Latinx tend to face higher rates of stigma. The complex narrative around teen pregnancy utilizes both hypervisibility and silence to further contribute to a deficit-focused narrative.

This duality can often make it difficult for young people to question and point to false or stigmatizing assumptions about teen parents. While the teen birth rate has been on a decline in Chicago since 2014, the stigma around young parents persists. Babytown seeks to challenge and question this narrative through gameplay.

Our Methods

Babytown was developed as part of a three-week summer program, the Hexacago Health Academy (HHA), implemented at the University of Chicago in 2015. HHA aimed to increase interest in Science, Technology, Engineering and Mathematics (STEM) and health among young people from the south and west sides of Chicago. As part of the program, participants engaged in game design modules where they developed ideas and low-fidelity prototypes of board games for various topics relevant to sexual and reproductive health. Youth-developed prototypes were then refined and developed into high fidelity board games by game designers, physicians, and researchers at the University of Chicago to produce the final game.

The process of Babytown with adolescents had three strengths:

1) Greater relatability for the target audience while simultaneously increasing the skills and knowledge of those who are participating in the design process.

2) Facilitates critical thinking and reflection for those who are involved in the design process.

3) Augments the voices of young people by empowering them through the design process.

Through the Hexacago Health Academy, young people designed and played games intended to highlight implicit negative or false narratives. The reproductive justice-based curriculum focused on the belief that all people should be able to decide when, how, and if, they would like to have children. Babytown was designed and tested in the Hexacago Health Academy.

This game is an adolescent that problematizes the narrative around teen parenthood. In the summer of 2015, 43 young people played Babytown and completed pre and post-surveys. These surveys were intended to gauge the effectiveness and usability of the game. 51% of participants identified as female, all participants were cisgender, and most participants identified as Black and/or Latinx. The mean age was 15 years and all young people participating resided in the Chicagoland area.

Participant Demographics
**Empathy & Narratives**

Collective narratives are essential to world-building and world-creating. Through narrative inquiry and exploration, common narratives are problematized, questioned, and re-structured.

Babytown allows players to empathize and imagine being a young parent. The game brings out the importance of teen parents being able to raise a baby along with academic and social responsibilities. Players have to concurrently balance their friends and social life while navigating new parenthood.

“Some people in my school are really afraid to talk about stuff like that {teen pregnancy} but reality is you have to learn about it sooner or later. So not to force them to be more open about it, but at least you can know more information about it without exposing yourself.”

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**Results**

This game also explores the educational process of narrative gameplay to question stigmatizing and recurrent perceptions of teen parenthood. The research team used the Teen Parent Semantic Scale (TPSS) to measure differences in players’ perceptions about teen parenthood.

TPSS is a likert-type scale which uses 1-7 negative and positive adjectives. Participants rate their association with each adjective and perceptions of young parenthood. There was a significant increase from pre to pottest on TPSS (pretest mean=4.81/7.00 (SD .78), the posttest mean = 5.12/7.00 (SD .88), p< 0.01)

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https://ci3.uchicago.edu/wp-content/uploads/2023/03/Babytown-HHA-.mp4#t=30,120

“I have more respect for teen parents now. Based off of Babytown I now know it’s a struggle to be a teenager, going to school, getting a job so you can pay for stuff for your child, having the child, finding people to care for your child while you’re at school ... just keeping control of all of that and being able to still live your life. That’s kind of hard”

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**Conclusion**

Babytown demonstrates a unique educational method that helps to mitigate the harmful effects of stigma. In creating a space to learn and question narratives around teen parenthood, Babytown helps to facilitate increased empathy and understanding about teen parenthood.

**References**


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Contact

For more information, please contact Madeline Quasebarth at mquasebarth@bsd.uchicago.edu