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THE PORTRAYAL OF TEEN PREGNANCY IN THE TV SERIES
“THE SECRET LIFE OF THE AMERICAN TEENAGER”

by

ERIN LOVELL
B.S., Stetson University, 2008

A thesis submitted in partial fulfillment of the requirements
for the degree of Master of Science in Communication
in the Nicholson School of Communication
in the College of Sciences
at the University of Central Florida
Orlando, Florida

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ABSTRACT

The aim of the current study was to investigate the way teen pregnancy is portrayed in Seasons 1 and 2 of the television drama *The Secret Life of the American Teenager*. Framing theory and social cognitive theory were used as guiding frameworks for exploring the way the main character's pregnancy was presented and the way this presentation may influence the ideas and behaviors of viewers. A qualitative content analysis was conducted to examine portrayals in the first 23 episodes. Results indicated that teen pregnancy was portrayed in five major ways: as Dramatic, as Identity, as Manageable, as Transformative, and as Serious. Overall, the findings suggest that teen pregnancy was presented in ways that encourage viewers to perceive this issue as positive and negative, with clearly positive outcomes.

To my parents and sister for their continuous support, genuine interest in my research, and encouragement during this process.

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CHAPTER ONE: INTRODUCTION

Teenagers in the United States are currently exposed to various fictional portrayals (i.e., frequent and inconsequential sex, drinking, and drug use) in the media (Eyal et al., 2007; Jensen & Jensen, 2007). The mass media in general has been found to have an influence on teens, including their beliefs and perceptions about their bodies, sexual behavior, and societal norms (Bandura, 2002; McIlhaney, 2005). Today, various media persuade and shape viewers' opinions of real issues through television, movies, and magazines. Two theories that support the idea that the media are a channel through which teens observe portrayals, situations, and different behaviors, and learn how to act in society are framing theory and social cognitive theory (Entman, 1991; Santelli et al., 2009; Somers & Surmann, 2005). Framing theory is used to investigate the way issues are presented in the media, whereas social cognitive theory is used to examine how the presentation of issues in the media may shape audience's beliefs (Miller, 2005).

It is important to understand how teen behavior is portrayed in the media, especially television, so that society is aware of television's potential role in shaping teens' ideas (Brown & Suellentrop, 2009). TV is an extremely pervasive force in our society. Americans spend one-third of each day viewing programming and consequently learning from television content. In 1989, the average U.S. household was tuned in for seven hours a day (Sun, 1989) and two decades later Americans are still exposed to screens for 8.5 hours a day, with TV accounting for most of this time (Stelter, 2009).

Television's portrayal of sexual encounters and sex-related content has been found to increase in past years (Eyal et al., 2007; Brown & Newcomer, 1991), which causes concern at a time when teens are becoming increasingly sexually active and 25% of these teens have been

diagnosed with an STD (Institute of Medicine, 1997). Moreover, these messages tend to be inaccurate and do not seem to promote sexual health in teen viewers (Brown & Strasburger, 2007; Fisher et al., 2004; Kunkel et al., 1999). For example, in a recent content analysis of primetime TV in the U.S., it was discovered that 75% of the shows contained sexual content, yet only 15% of the programming included messages about abstinence, the risk of STDs, the risk of pregnancy, or sexual responsibility (Brown & Strasburger, 2007).

Popular media play a big part in the socialization of adolescents (Ward & Friedman, 2006). For instance, one study reported that when teenagers were asked where they received most of their information about sex, 13 to 15-year-olds stated that they learned the most about sex from parents, friends, school, and the media (i.e., television, movies, magazines, and music) respectively. Sixteen to 17-year-olds said they learned about sex from friends, parents, and television respectively (Yankelovich Partners, 1993). The teens in this study did not mention any other media type as a source of sexual learning, a finding which suggests that it is especially important to study TV (Walsh-Childers, 2002; Yankelovich Partners, 1993).

The Importance of Studying Teen Pregnancy: The Rising Teen Birth Rate

Teen pregnancy is a huge issue worthy of study since it plays a role in lower education levels, economic issues, and teen health (Brown & Suellentrop, 2009). The Centers for Disease Control and Prevention's (CDC's) most recent teen birth rate (TBR) statistics were reported for 2006 and 2007, showing a rise in the TBR for the second year in a row in 2007 (Santelli et al., 2009). After a decade of TBR on the decline, the trend has now reversed (Santelli et al., 2009). Between 2005 and 2006, the teen birth rate increased by 3.5%; between 2006 and 2007, the TBR increased by 1.4% (Hitti, 2007; Santelli et al., 2009; Stobbe, 2009).

The age group with the largest increase in teen pregnancies was 18 to 19-year olds with a 4% increase (Hitti, 2007). Teen pregnancy among 15 to 17-year-olds increased by 3%, and there was no rise for girls ages 10 to 14 (Hitti, 2007). Currently, the United States has the highest rate of teen pregnancies among comparable countries. Presently, 30% of girls get pregnant at least once before they are 20 years old. Fifty-one percent of African American girls get pregnant at least once before they are 20 years of age, and 53% of Hispanic girls get pregnant before they turn 20-years-old (Santelli et al, 2009).

Nearly one million girls in America between the ages of 15 and 19 become pregnant each year, and the majority of these pregnancies are unplanned (Chandra et al., 2008). The effects of teen pregnancy can be far reaching, having an impact on not just those directly involved, such as the teen parents and their families, but on society as well (Chandra et al., 2008). Furthermore, teen parents are often single parents. For one, poverty and single parenthood are closely connected, and the state of the current U.S. economy makes life for single, uneducated parents even harder due to layoffs and unemployment during this recession (Santelli et al., 2009).

President Obama and other national leaders have stated that individuals need to complete high school and get an associate's degree in order to get a good job, since obtaining a well-paying job has become increasingly difficult for those with a limited education (Santelli et al., 2009). For teen mothers, this amount of schooling can be very difficult to achieve due to taking on the responsibilities of raising a child, maintaining a job to support that child, and doing it all as a single parent, as is the situation in many cases (Chandra et al., 2008).

Research shows it is important for teens to postpone starting a family until they are older and more likely to have a higher level of education, emotional resources, and the finances to

support a child (Santelli et al., 2009). In order to ensure this is possible, researchers should continue studying and attempting to understand the factors associated with TBR changes (Santelli et al., 2009). Data collected thus far suggests that the TBR will increase in upcoming years or remain at the current level (Santelli et al., 2009). The last report by the CDC in 2007 showed that for every 1,000 teens ages 15 to 17-year-old, there were 22 births, and for every 1,000 teens ages 18-19, there were 73 births (Hitti, 2007).

If the TBR remains at the present high level, there will be negative societal consequences (Santelli et al., 2009). For instance, teen mothers have a higher dropout rate from high school and have annual earnings below the poverty line, which means they require more public assistance (Brown & Suellentrop, 2009; Chandra et al., 2008). The children born to these young parents are also at risk for low birth weight and have low math and reading abilities as well as less developed motor skills. These children are also more likely to be high school dropouts (Brown & Suellentrop, 2009; Chandra et al., 2008).

Individual, social, and environmental factors such as not being informed about safe sex, not having access to contraception, a lax attitude toward using contraception, and peer pressure can contribute to teen pregnancy (Brown and Suellentrop, 2009; Chandra et al., 2008; Hermann, 2007; Kim et al., 2006; Santelli et al., 2009; Stobbe, 2009). Additionally, the portrayal of teen pregnancy in the mass media may play a role in teen pregnancy. However, only a few studies have explored this issue (Brown & Suellentrop, 2009; Chandra et al., 2008; Toppo, n.d.).

The Media's Potential Role in Misconceptions about Teen Pregnancy

One of the factors believed to play a role in the recent increase in teen pregnancies is the media (Chandra et al., 2008). The possible connection between the rising TBR and the increasing

number of predominantly positive portrayals of teen pregnancy in the media is a major reason this issue is critical to examine at this time (Chandra et al., 2008; Kingsbury, 2008). Public figures such as actress Jamie Lynn Spears and vice presidential nominee Sarah Palin's daughter, Bristol Palin, were highly popular in the news media in 2008 due to their surprising pregnancies at age 17. Both girls were unmarried but had the support of wealthy families, making their young pregnancies seem glamorous (Kingsbury, 2008).

Celebrity culture, media coverage of pregnant teen celebrities, and television programs tend to show sex as having few, if any, consequences, while contraception and a caring relationship between sexual partners is rarely presented (Santelli et al., 2009). Teen childbearing is also being portrayed as something that is acceptable and even glamorous (Santelli et al., 2009). For example, although *Juno* is a movie that shows the strength of a teenage girl giving up her baby for adoption, it also unrealistically shows abundant support and opportunities given to her (Jayson, 2009). According to Sarah Brown, CEO of the National Campaign to Prevent Teen and Unplanned Pregnancy, this is not the reality for most pregnant teenagers in America (Jayson, 2009).

Juno focuses on the life of a pregnant teen who is self-centered and sure of herself, but is also fortunate to have a supportive family (Jayson, 2009). Teens who watch movies and TV shows like these see the happy endings and may process them as actuality (Jayson, 2009). The reality is, less than 2% of teens give their babies up for adoption, while the majority raise their children as struggling single parents (Jayson, 2009).

The Secret Life, of the American Teenager a popular ABC Family drama about a pregnant 15-year-old, has created an interest in addressing the real consequences of teen

pregnancy. A statement from ABC Family channel said the show, “deals honestly and directly with the consequences of an unplanned pregnancy in a non-exploitative manner and explores how the core character’s relationship with her mother, father, sister and friends are affected... We hope the show encourages teenagers and parents to open up a dialogue about issues important to them...” (Villarreal, 2009, p. 1). *The Secret Life* series is attempting to break the stereotypes that good girls do not get pregnant and that the consequences are minor for those teen girls who do get pregnant (Villarreal, 2009).

According to Melissa Henson, the director of communication and public education for the Parents Television Council, “It’s beneficial for teenagers to see that an unplanned pregnancy can throw off your life plans” (Villarreal, 2009, p. 1). However, in the current U.S. culture, there are TV shows and movies focused on the issue of teen pregnancy, making light of the situation, making jokes, and portraying life as a pregnant teen or teen mother as an obstacle with few real consequences (Gibbons, 2008; Jaworski, 2009).

As teen pregnancy has become more prevalent in U.S. society, it is being represented in a glamorous and relaxed manner by television characters and celebrities in the entertainment media (Gibbons, 2008; Jaworski, 2009; Kingsbury, 2008; Villareal, 2009). For example, on the CW show *One Tree Hill*, a studious teen character went into labor while at her high school graduation (Villarreal, 2009). However, when the show returned for the following season, it had “fast-forwarded” through the character’s college experience, instead portraying the young woman as a happy mother (Villarreal, 2009). *One Tree Hill* avoided showing any unpleasant consequences that may have been a result of this character having a baby as a teen.

The television show *Gossip Girl* also included a possible teen pregnancy in the plot. However, the main character had a miscarriage which is a typical ending to a pregnancy scare in teen television shows (Villarreal, 2009). One viewer even posted to a *Gossip Girl* fan site that, “everyone knows that [Blair’s] going to have a ‘miscarriage’ because rich girls and TV characters always do...” (Villarreal, 2009). Like many other television shows that deal with “false alarm” pregnancies and miscarriages, *One Tree Hill* and *Gossip Girl* fail to portray the negative consequences of unprotected teen sex (Villarreal, 2009). Some fans of popular TV shows and parents of these young viewers are aware of these unrealistic portrayals, and some parents are going so far as to ban teen pregnancy-centered television from their teens at home (Boursaw, 2009; Crouse, 2009; Jayson, 2009; Keveney, 2009; Villareal, 2009).

A growing concern of parents and researchers is that media and society’s attitude toward sex may play a role in teens’ sexual socialization (Boursaw, 2009; Crouse, 2009; Eyal et al., 2007; Roberts et al., 2005). Parents and researchers have blamed television programs like *The Secret Life* and *16 and Pregnant*, movies such as *Juno*, and media coverage of popular pregnant teen celebrities for teen girls deciding to have sex at an earlier age than they might otherwise (Chandra et al., 2008; Collins, 2004; Kingsbury, 2008). *The Secret Life*, the focus of the present study, has been a popular series among young girls for the past few years and has also been controversial due to its content (Keveney, 2009; Jayson, 2009; Villarreal, 2009).

The Secret Life began its first season July 1, 2008. The *Los Angeles Times* and *USA Today* both published articles about this program being the first to deal directly with teen pregnancy (Keveney, 2009; Jayson, 2009; Villarreal, 2009). The show started the second half of its split season with 3.4 million viewers, the largest audience ABC Family has ever had for an

original series (Keveney, 2009). It also beat its CW television network competitor, *Gossip Girl*, in number of total viewers as well as the number of younger viewers (Keveney, 2009). For its first season, *The Secret Life* maintained an audience of 12 to 34-year-old viewers and has continued to grow in popularity (Keveney, 2009; Villarreal, 2009).

The Secret Life centers on the pregnancy of a 15-year-old high school student named Amy Guergens, who is known at school as a straight-laced French-horn player in the school band (Villarreal, 2009). A first-time sexual encounter with fellow student and troublemaker, Ricky Underwood, quickly changes her reputation as it results in Amy becoming pregnant (Villarreal, 2009). The first season focuses on Amy's struggles to tell her friends and family about the pregnancy, face the rumors and humiliation, and decide if she wants to keep the baby with a supportive family and friends by her side (Jayson, 2009).

Season 2 focuses on Amy dealing with the emotional turmoil of her social life and the upcoming birth of her baby (Jayson, 2009). Amy and her boyfriend, Ben, get married in a secret ceremony. Amy becomes increasingly overwhelmed by her pregnancy, whether or not she wants to keep the baby, and how she would provide for a child if she did keep it (The TV Loop).

Television shows like *The Secret Life* and similar shows like MTV's *16 and Pregnant* reality program, which follows actual high school girls through the ups and downs of being pregnant, have started a new genre of television programs, focusing not just on teen sex in general, but also on the situation of getting pregnant (Kingsbury, 2008). Both programs collaborated with the National Campaign to Prevent Teen and Unplanned Pregnancy to have Public Service Announcements encouraging parents and teens to talk about sex in an effort to prevent teen pregnancy after each episode (PR Newswire, 2008; The National Campaign, 2009).

However, some parent blogs and articles have expressed concern about preteens and teenagers watching these shows, noting that although the shows may be cautionary tales aiming to prevent teen pregnancy, the “glamorized” pregnancy content and positive spin on such a hard situation (e.g., low stress, easy time management, and elevated popularity) is not something to which they think teens should be exposed (Boursaw, 2009; Crouse, 2009; PR Newswire, 2008).

Further, the June 2008 teen pregnancy boom at Gloucester High School in Massachusetts was speculated by parents, fellow students, staff, and those who followed the media coverage of this true story to have been a result of glamorized teen pregnancies on television. The “pregnancy pact” received widespread media attention and the 17 pregnant teens who agreed to get pregnant and raise their children together were interviewed for TV networks and news stations. The “pact” at this high school caused people to wonder what society currently considers appropriate sexual and social behavior for teenagers (Kingsbury, 2008; Gibbons, 2008). If one looked to the media, they might see that teen sex and teen pregnancy are acceptable. However, similar situations in real life appear to have a much more devastating effect (Kingsbury, 2008).

Purpose

The purpose of this thesis is to investigate how teen pregnancy is portrayed in ABC Family’s hit drama *The Secret Life*. Specifically, it will focus on qualitatively content analyzing the portrayal of teen pregnancy in this television show. The investigation is intended to serve as an initial benchmark study, involving exploring and identifying elements of teen pregnancy in the media, to guide future qualitative and quantitative research on the topic. This study was motivated by the aforementioned societal concerns about teen pregnancy, the controversy surrounding its media representation, and the lack of scholarly research on teen pregnancy in

television shows. It is important to examine the way teen pregnancy is portrayed in entertainment television because media messages are a socializing influence in the lives of teenagers, which in turn, has an impact on society (Chandra et al., 2008; Jaworski, 2009). Studying the *The Secret Life*, specifically, is important because the focus of this television series is on the pregnancy of a 15-year-old girl, and this controversial show is aimed at young girls (Boursaw, 2009; Crouse, 2009). The central research question to be addressed is:

RQ1: How is teen pregnancy portrayed in the TV series *The Secret Life*?

The following Literature Review chapter will present the relevant theoretical framework for the study, including framing theory and social cognitive theory, and discuss how the theories have been applied to investigate mass mediated teen health issues (e.g., STDs, pregnancy, alcohol abuse) in different streams of empirical research. Then the Methodology chapter will discuss qualitative content analysis as the approach of the present study and explain the procedures pertaining to examining teen pregnancy portrayals in *The Secret Life*.

CHAPTER TWO: LITERATURE REVIEW

Previous research has investigated the framing of various teen health issues in various popular U.S. media. The present study will focus on teen pregnancy in particular and its portrayal on entertainment television specifically. As the theoretical frameworks for this study, framing theory and social learning theory will be discussed first. A review of the scholarly research literature on teen health issues in the media; sexual content on TV; and teens' sexual attitudes, sexual behavior, and risk of pregnancy will follow.

Framing and Social Cognitive Theory

The present study explored the way teen pregnancy is portrayed in *The Secret Life* by applying framing theory (Entman, 1993; Goffman, 1974) and social cognitive theory (Bandura, 2002) as the theoretical foundations. Framing theory and social cognitive theories both address portrayals in the media and the impact these portrayals may have on viewers (e.g., learned behaviors, attitudes, opinions). Framing theory concentrates on the way aspects of news stories and other media (e.g., television, movies, advertising, news, music) are represented and the role these representations may play in audiences' interpretations of media messages, whereas social cognitive theory focuses on the way representations in the media teach audiences ways of thinking and behaving through the process of socialization (Miller, 2005).

Framing theory and social cognitive theory are both appropriate theoretical frameworks for the current study, since the researcher will be examining how teen pregnancy is presented in a television series. Many content analyses investigating portrayals of teen health issues (i.e., sex,

drugs, alcohol, and STDs) in the media have used framing theory (e.g., Jaworski, 2009; Van den Bulck et al., 2000) and social cognitive theory (e.g., Eyal et al., 2007; Hust et al., 2008; Jensen & Jensen, 2007) to examine these representations.

Framing Theory

Framing theory is a well-known mass communication theory that is often used when exploring issues in the news media (e.g., Entman, 1991; Hallahan, 1999; Pan & Kosicki, 1993; Iyengar & Simon, 1993). However, this theory has also been applied to look at portrayals of certain phenomena in television shows (e.g., Eyal et al., 2007; Newcomb & Hirsch, 1983; Van den Bulck et al., 2008), movies (e.g., Stern, 2005a; Stern, 2005b), and other media, such as advertisements (e.g., Grow et al., 2006; Young & Welch-Cline, 2005).

Message producers use the framing process to create mental schemas, or categories, to understand and organize incoming messages in a way that makes sense to the individual receiver (Scheufele & Tewksbury, 2007). Framing influences how people think about issues by using representations that influence how they interpret the information they are receiving (Scheufele, 2000). This process occurs when messages are portrayed in a certain way in the media by the placement, tone, and details that accompany the presentation of that particular topic (Entman, 1993).

For example, the framing process occurs when media messages are presented to viewers. The news media, television, movies, print ads, and even music represent certain aspects of reality within these media (e.g., the benefits associated with engaging in sexual acts, such as gaining popularity, having fun, and falling in love) and downplay other parts of reality (e.g., the negative consequences of engaging in sexual acts, such as pregnancy or contracting an STD) (e.g.,

Anzicek, 2008; Aubrey, 2004; Batchelor et al., 2004; Fisher et al., 2004; Hust et al., 2008; Jensen & Jensen, 2007; Kunkel et al., 2006).

Sociologist Erving Goffman (1974) developed framing theory in the 1970s for use in the sociology field, describing framing as the way people organize and label fragmented information in the world to make sense of their reality. He argued that individuals struggle to interpret their life experiences, but are able to use “primary frameworks,” or categories, to interpret information and events (Goffman, 1974, p. 24). Goffman (1974) said frames allow the individual to label events, giving them meaning and organization.

Since its development, framing theory has been used as a tool in various disciplines including communication (e.g., Entman, 1991; Iyengar, 1993), economics (e.g., Kahneman & Tversky, 1979), cognitive linguistics (e.g., Lakoff, 2004), and psychology (e.g., Kahneman & Tversky, 1984; Pan & Kosicki, 1993). For example, framing has been applied for practical purposes in political campaigns (Lakoff, 2004), to examine psychologically how different presentations of identical decision-making situations can influence people to make different choices (Kahneman, 2003), in sociology to better understand how people process the world (Goffman, 1974), and in communication for portraying media messages and news stories to reach certain goals (Entman, 1991, 1993).

Studies in psychology (e.g., Kahneman & Tversky, 1984; Kuhberger, 1998; Levin et al., 2002; Pan & Kosicki, 1993) and sociology (e.g., Fagley & Miller, 1987; Fiss & Hirsch, 2005) have applied framing theory to examine how messages are presented and interpreted by individuals (Scheufele, 2007). Communication studies, in particular, have used framing theory as the theoretical framework for content analyses of messages regarding events and social

phenomena in the news (e.g., Davidson & Wallack, 2004; Entman, 1991; Iyengar & Simon, 1993), on television (e.g., Cope & Kunkel, 2002; Ganahl et al., 2003; Jaworski, 2009; Jensen & Jensen, 2007), and in magazines (e.g., Andsager & Powers, 2001; Clarke, 2009).

The potential effects of framing on audiences is an important area of communication research since this process can influence what aspects of a message audience members focus on when encountering media messages, a process called selective perception (Entman, 1993). Audiences pay more attention to the issues that are brought to their attention, which involves assembling the incoming data into a story that serves as a framework for them. The framing that takes place involves creating a frame that is a reflection of the individual's ideas and memories, as well as the content that has been presented to them through the media. Thus, frames are a mix of media content as well as the audience member's values and knowledge (McLeod et al., 2002).

In communication, media message producers use framing to socially construct political issues, social movements, controversial events, and popular social issues (Entman, 1991). This framing process happens naturally as individuals perceive meaning from textual devices such as words and phrases, as well as from visuals, such as pictures. The frames around these devices are schemas, or categorization devices, that encourage the audience to interpret the message one way and dissuade them from interpreting it another way (McQuail, 2005). For instance, sexual messages in television shows are often framed in a way that might encourage teen audiences to interpret sexual activity as common among teens, a casual occurrence, spur of the moment, and having very few negative consequences (e.g., Cope & Kunkel, 2002; Eyal et al., 2007; Fisher et al., 2004). This framing discourages teen audiences from interpreting sexual activity as serious, not as common as it appears, and frequently having negative emotional and physical

consequences (e.g., strong feelings, STDs, and pregnancy) (e.g., Brown et al., 2006; Brown & Strasburger, 2007; Eggermont, 2005; Eyal & Kunkel, 2008; Martino et al., 2009; Strasburger, 2005).

Entman (1993) identified four functions of framing: (1) to promote the definition of an issue (e.g., alcohol is consumed by teens), (2) to promote a causal interpretation (e.g., drinking alcohol is a way to escape one's problems), (3) to promote a moral evaluation (e.g., teen alcohol use is good/bad), and (4) to promote a treatment recommendation for that particular issue (e.g., teens should continue/stop drinking alcohol). Entman (1993) states that frames help audience members make moral judgments and also suggest ways of thinking about certain issues. For instance, based on the way alcohol was framed in the teen TV drama, *The O.C.*, audience members were encouraged to view alcohol intake in four ways: as an outlet, a celebration, escapism, and as a sickness (Van den Bulck et al., 2008).

In creating television shows, media professionals make associations between the portrayed reality on the show and the audience's collective memory to create framing devices, such as visuals (e.g., watching characters have fun while drinking at a party), word choice (e.g., a fun play on words regarding alcohol consumption: "Have you ever met my friend Jack?"), and phrases (e.g., excited, happy phrases such as, "Bring in the booze") (Gamson & Modigliani, 1989; Van den Bulck, 2008). Each of the above examples is a framing device that was used in *The O.C.* that possibly encourages teen viewers to see alcohol consumption as celebratory (Van den Bulck, 2008).

Social Cognitive Theory

Social cognitive theory (Bandura, 2002) is another viable theory applicable to media and audience effects and is particularly relevant to the current study. According to Bandura, the most notable scholar of social cognitive theory, teenagers tend to learn from vicarious experiences portrayed in the media because their experiences are typically limited due to age (Bandura, 2002; Brown & Walsh-Childers, 2002). For teens who have not had much real experience with sex and pregnancy, yet who are growing up and starting romantic relationships and/or exploring their sexuality, the media provides a window into these new chapters of their lives and provides scripts that they may use to understand relationships, sex, and teen pregnancy (Brown & Walsh-Childers, 2002; Chandra et al., 2008; Fisher, 2004).

Social cognitive theory is commonly used as the theoretical framework for content analyses of teen health messages in the media (e.g., Bandura, 2002; Eyal et al., 2007; Hust et al., 2008; Jensen & Jensen, 2007; Stern, 2005a, Stern, 2005b; Strasburger, 2005). This theory has also been applied frequently in multi-method media effects studies in the psychology and communication fields (e.g., focus groups, interviews, and observation) as means to explore the way media may influence violence (e.g., Bandura et al., 1961; Drabman & Thomas, 1974; Liebert & Baron, 1972), child behavior (e.g., Drabman & Thomas, 1974; Liebert & Baron, 1972), and teen sexual behavior (e.g., Kistler & Lee, 2010; Martino et al., 2005).

Bandura's (2002) social cognitive theory holds that media messages can have an impact on the way viewers live their lives, since the media is a tool for learning what is socially acceptable. However, it is recognized that other environmental factors can also play a role in

shaping and reinforcing human learning as well (e.g. family, friends, etc.). The media has become an overwhelming influence in society today, affecting how we think, what we think about, and how we behave. Although media is not the only social means by which we learn, media saturation has resulted in much learning of socially acceptable behavior from viewing movies and television (Miller, 2005).

Social learning theory originated in the psychology field as a result of Robert Sears' (1941, 1951) work on social behavior and learning, and B.F. Skinner's (1957) research on operant and verbal behaviorism (Grusec, 1992). Sears set out to explain human behavior through a combination of stimulus-response learning theory and psychoanalytic theory (Grusec, 1992). However, Bandura (1986) moved away from the psychoanalytic approach to a more cognitive approach to explain human behavior (Grusec, 1992).

Psychologists Miller and Dollard (1941) are other original researchers in the area of social learning. They published the book "Social Learning Theory and Imitation," which proposed the idea that humans learn behaviors through observing and imitating the actions of others (Miller & Dollard, 1941). Subsequently, Bandura (2002) started his social learning research in the 1950s by looking at aggression in teenage boys, which was the focus of Bandura and Walters' (1959) book, "Adolescent Aggression."

Much of Bandura's early social learning research focused on children and how the media plays a role in their behavior (Bandura, 1977; Grusec, 1994). Bandura's (1973) famous Bobo doll experiment in 1961 and 1963 illustrated how behavior can be learned through imitating what one has observed. In 1986, Bandura renamed social learning theory, calling it "social cognitive theory," to take into account the cognitive processes that happen with behavior (Grusec, 1992).

Bandura's (2002) resulting social cognitive theory described how humans think about, encode, and then use the information they have received. According to Bandura, there are three interrelated factors that influence the thoughts and behavior of individuals and society. These include personal factors (e.g. cognitive, affective, and biological occurrences), behavioral factors or patterns (e.g. actions an individual observes), and environmental factors or events (e.g. the way an individual was raised) that interact to shape a person's thoughts or behaviors.

Further, social cognitive theory holds that it is human nature for individuals to process, retain, and use coded information to then have the ability to engage in certain human capabilities: (1) symbolization, (2) self-regulation, (3) self-reflection, and (4) vicarious communication (Bandura, 2002). The following paragraphs will explain these four human capabilities.

Symbolization's role in social cognitive theory is that it is used as a tool for comprehending and learning from one's observed environment, whether through vicarious or personal experience. Symbolization helps humans transform short-lived experiences into "cognitive models" that guide future opinions and behaviors. The other three capabilities are based on this capability of communicating through symbols (Bandura, 2002, p. 122).

Self-regulation occurs through one's own personal standards and one's evaluation of their own behavior and the future consequences that may occur as a result of their actions. Knowing that this behavior will result in self-satisfaction or dissatisfaction, and/or a positive or negative reaction from those around them, motivates the individual to self-regulate, or operate, in a way that lives up to social and personal standards (Bandura, 2002).

Self-reflection occurs when one examines their own thoughts and behaviors to determine whether they are engaging in accurate or inaccurate ways. During self-reflection, people develop

ideas, act on these ideas, or predict what will happen as a result of having these ideas or engaging in certain behaviors (Bandura, 2002).

Lastly, vicarious communication occurs when humans use models from their environment (e.g. parents, friends, media) to learn about social reality, develop ideas, and determine the consequences that will result from these ideas or behaviors. Vicarious learning, especially through the media, has a great social impact. As an outcome of vicarious observation, individuals socially construct their reality, which can transform the way social systems work (Bandura, 2002).

As a result of engaging in symbolizing, self-regulating, self-reflecting, and vicarious, observational learning, humans are able to process their direct and observational experiences and subsequently socially construct their reality. Part of this socially constructed reality may consist of television portrayals of society, which tend to include misconceptions and the portrayal of stereotypes, which can shape false beliefs (Bandura, 2002).

Social cognitive theory refers to the way peoples' behavior and ideas are rooted in social structures. In any type of televised media, images and messages are brought into the home, which become a source of socialization and information (Bandura, 2002). It is in this way that audience members' beliefs become products of social structures communicated by media. The lessons of television are learned by viewers and become the foundation, even at a young age, for viewer attitudes and behavior (Bandura, 2002).

Bandura (2002) has discussed how learning through "observational experience" is subject to inaccurate social portrayals in the media. It is through these media portrayals that children and teens learn what is expected of them, although the behaviors they see represented on

television may not be depicted realistically in the media (Bandura, 2002; Ganahl et al., 2003). For instance, a number of social cognitive studies in the communication field have found that inaccurate information about contracting STDs, the frequency of teen sex, and the rare portrayal of negative consequences regarding teen sex can result in young people learning this information, developing casual attitudes toward sex, and engaging in sexual activities more frequently than they otherwise would (e.g., Brown et al., 2006; Collins et al., 2004; Collins et al., 2008; Eggermont, 2005; Eyal & Kunkel, 2008). Social cognitive theory is essential for accomplishing the current study's goal by providing a flexible lens through which to examine teen pregnancy portrayals and a tool to guide the researcher in analyzing and understanding what teens may be learning about teen pregnancy from *The Secret Life*.

Research on Teen Health Issues as Presented in Popular Media

Many studies have found that popular entertainment media present teen health issues (e.g., drugs, alcohol, sex, STDs, teen pregnancy) in appealing and sometimes humorous ways through portraying these issues as fun, inconsequential, easy to manage, and as a means to gain popularity (e.g. Brown & Strasburger, 2007; Eyal et al., 2007; Fisher et al., 2004; Hust et al., 2008; Jaworski, 2009; Kunkel et al., 1999; Van den Bulck, 2008).

Through content analysis guided by framing theory and social cognitive theory, communication and psychology researchers have explored the frequency and characteristics of portrayals of various teen health-related topics (e.g., drugs, alcohol, sex, and STDs) in various media, including in TV shows (e.g., Anzicek, 2008; Aubrey, 2004; Batchelor et al., 2004; Brown & Strasburger, 2007; Cope & Kunkel, 2002; Eyal et al., 2007), in movies (e.g., Hust et al., 2008; Stern, 2005a; Stern, 2005b; Strasburger, 2007), in magazines (e.g., Batchelor et al., 2004; Hust et

al., 2008), and in music (e.g., Hust et al., 2008; Jaworski, 2009). Together, these studies found that teen health issues are presented more frequently, more casually, and in a more enjoyable, consequence-free manner in popular media than is accurate in reality.

Teen sex, specifically, is a health issue that has been presented frequently and often inaccurately in the media and has been studied by many scholars (e.g., Batchelor et al., 2004; Eyal et al., 2007; Fisher et al., 2004; Hust et al., 2008; Jensen & Jensen, 2007; Jaworski, 2009). For example, Hust et al. (2008) quantitatively and qualitatively content analyzed movies, television, music, and magazines to explore the presentations of sexuality in different media. The purpose of the study was to examine what adolescents are likely learning about sexual health from popular media. The findings showed that sexual topics were common, but rarely gave accurate information and were unlikely to promote sexual health in teenagers. Three overall themes that emerged from the analysis were that sexual health was funny/embarrassing, boys are preoccupied with sex, and girls are responsible for the prevention of negative consequences (e.g., pregnancy, contraception, and STDs) (2008).

Television is the most popular form of media through which teens learn about sexual health (Ward & Friedman, 2006; Yankelovich Partners, 1993). In a study of 1,276 different TV program episodes on 11 different television networks targeted specifically at teens, researchers explored sexual content through a quantitative analysis of TV program episodes from 2001-2002 (Fisher et al., 2004). The findings showed that 82% of the programs contained some sexual content, 67% included sexual behavior, and 75% included sexual talk. Only 6% of the total programs examined included messages about sexual responsibility and these messages were present in only 13% of the shows that included sexual intercourse (Fisher et al., 2004).

The findings of this study are similar to the results of other investigations in the past two decades regarding sexual content on television directed at teens. Kunkel et al. (1999) compared the findings of three similar studies that all sought to investigate the sexual messages in television programs most popular with adolescents (Cope, 1998; Kunkel et al., 1996; Kunkel et al., 1998). The results showed that sexual talk and sexual acts occurred frequently on TV, talk about sex was more common than sexual behavior, and that sexual messages about the risks and responsibility of having sex were rare (1999).

Although the negative consequences of teen sexual behavior are rarely portrayed on television, one study sought to specifically investigate the representation of sexual consequences in teen television shows (Aubrey, 2004). A content analysis was conducted to explore the consequences of sexual activity on primetime television shows focused on characters between 12 and 22 years of age. The findings revealed that the social and emotional consequences (i.e. falling in love, being broken hearted, getting a bad reputation, etc.) were represented far more frequently than were the physical consequences. It was also found that negative consequences occurred less frequently in situations where male characters initiated sexual acts and more frequently in situations where female characters made the first move (2004).

Content analyses of sex in media aimed at the general public have been popular in the past, however, analyses of sex specifically on television shows that are targeted to teens are less common (Eyal et al., 2007). In one of the few recent studies to investigate sexual messages in television shows aimed at teens, the researchers sought to determine what sexual messages were being conveyed in three episodes from each of 20 heavily viewed shows (Eyal et al., 2007). The study compared sexual messages from television programs in 2001-02 and 2004-05, finding that

more recent shows have a higher frequency of sexual messages. However, only 4 and 5% of sex-related scenes, respectively, addressed sexual responsibility. Overall, the researchers found that sexual health messages are portrayed in a carefree manner on television. Supporting the findings of Eyal et al. (2007), Batchelor et al. (2004) also investigated the sexual messages the media presents to teens. Through a content analysis of popular magazines for young adults, daily newspapers, and TV shows, the researchers found that there were few examples of how to talk about safe sex in these media. Although this study was conducted in the UK, rather than the U.S., it is interesting to note that the findings were very much the same (2004).

Teen girls' health and reproductive rights are other health-related issues that have been found to be framed problematically in popular media (Clarke, 2009; Jaworski, 2009). For example, one study that explored the portrayal of disease and sexual health in popular magazines for teen girls found that abstinence is suggested as the only option to avoid pregnancy (Clarke, 2009). Additionally, sexual partners were portrayed as deceitful, and STDs were presented in a fearful way rather than in an informative manner (Clarke, 2009). This investigation is another example of the inaccuracies of teen health issues in the media.

Another study (Jaworski, 2009) that examined the way in which teen girls' health and reproductive issues are framed in the media investigated "reproductive justice." Jaworski (2009) found that stereotypes about reproduction are reinforced and that "reproductive justice" (i.e., choices about birth control, abortion, adoption, and teen girls' decisions to keep their baby) is framed negatively in music and on TV. The framing of teen pregnancy on television promotes the idea that any teen who has a baby will be irresponsible and uncaring (Jaworski, 2009). The findings showed that teen pregnancy portrayals on the TV shows *Grey's Anatomy* and *The*

Family Guy failed to provide viewers with any useful information about teen pregnancy and the causes. Jaworski (2009) suggested that presentation of the topic in a greater variety of media, informal discussions between parents and their children about inaccurate portrayals, and a variety of sexual health messages might help young people have a more well-formed and realistic view of sex and reproduction.

Research on the Relationship Between Television Viewing and Teens' Attitudes Toward Sex

There have been a number of qualitative and quantitative studies that link the viewing of sexual television content to more relaxed teen attitudes about sex, unrealistic attitudes about sex, and the acclimation of teens toward the consequences of sex. Past empirical research has used interviews (e.g., Steele, 2000), surveys (e.g., Eyal & Kunkel, 2008; Lemal & Van den Bulck, 2009; Somers & Surmann, 2005), and focus groups (e.g., Polacek et al., 2006; Steele, 1999; Steele, 2000) of male and female teenagers to determine how the media have shaped their opinions about sex.

For decades, researchers have been finding that the media play a role in the socialization of young people. Media have become the primary means by which teens form their identities and learn about sex (Brown, 2004; Collins et al., 2004; Eyal et al., 2007; Somers & Surmann, 2005; Steele, 1999). A 2004 national survey of 519 teenagers between the ages of 15 and 17 found that teens get their information about birth control from the media, rather than from their parents (Kaiser Family Foundation, 2004).

Teens also tend to learn information about pregnancy from television rather than their parents (Somers & Surmann, 2005). Somers and Surmann found that teens who watch teen pregnancy portrayals on TV rather than learning about teen pregnancy from a trusted adult have

different opinions about teen pregnancy. Specifically, the researchers surveyed 672 high school students to investigate how peers, parents, and sex education play a role in teens' attitudes and behavior regarding sex. The findings revealed that female participants were less certain about their personal sexual values when they reported learning about menstruation, premarital sex, and the reproductive system from their peers or the media rather than from their parents or sexual education courses in school. Female participants were more certain about their personal sexual values when they had learned about these topics, including sexual intercourse and the importance of birth control, from adults rather than from television (2005).

A review of past empirical research supported the idea that media play a role in the sexual socialization of teenagers (Ward, 2003). Ward (2003) investigated the prevalence of sexual content on TV and in magazines. Overall, exposure to overtly sexual media, such as certain music videos and soap operas, was linked to more casual and stereotypical attitudes toward sex. Researchers have also found that adolescents who receive most of their information about sex from TV are fixated on being sexually appealing or have unprotected sex at an earlier age than those who do not get most of their sexual information from this media source (Brown et al., 1990).

A focus group study by Steele (1999) sought to understand how sexual imagery from television shapes teens' attitudes and beliefs about sex. Discussions centered on how the media played a role in the teen participants' opinions about sex, love, and relationships. The participants reported watching shows based on how well they related to the characters and situations in the shows. The study found that teens used the media to define themselves and their sexual self as they prepared to enter the adult world (1999). Steele (1999) suggested that

researchers look not just at sexual media content, but at the way teens understand and use media as they mature.

The media have been found to not only shape teens' attitudes about sex, but also to acclimate them to the consequences. That is, the media can play a role in teens adjusting to the consequences of sex portrayed in the media to the degree that the conveyed consequences did not have a fearful impact on them (Brown, 2006; Collins et al., 2004; Eyal et al., 2007; Polacek et al., 2006; Somers & Surmann, 2005; Steele, 1999). Polacek et al. (2006) studied the association between Hispanic teens' viewing of sexual media content and their attitudes toward sexual activity. The researchers found that Hispanic teens received a large amount of sexual information from TV and other media. Through focus group discussions, the participants revealed that the media had "desensitized" them to the consequences of sexual activity (Polacek et al., 2006, p. 64).

A similar investigation by Lemal and Van den Bulck (2009) looked at how sexual media content could acclimate teens toward a very serious consequence of sexual activity: AIDS. The researchers sought to determine if there was a relationship between teens' viewing of sexual television content and their fear of getting AIDS. Through a longitudinal survey, the researchers found that teens regularly exposed to sexual TV content were not as likely to report being afraid of getting AIDS (2009).

Some research has found that teens, however, are responsive when given accurate information about sex and the consequences of sex from educational media (Pinkleton et al., 2008; Stankovic, 2007). Media portrayals may play a role in teens being irresponsible about sexual health, but they can also help them make responsible decisions (Pinkleton et al., 2008;

Stankovic, 2007). A recent study (Pinkleton et al., 2008) investigated ways to prevent teens from becoming acclimated to excessive sexual messages in the media, some of which may be inaccurate. The researchers used a teen media literacy program centered on sexual media portrayals to see if this type of program would lessen the appeal of sexual media portrayals, lessen the positive expectations teens had of sex, and increase teens' knowledge of untrue sex information in the media. The researchers found that 85% of the teen participants rated the programs better than other sexual education programs they had experienced (2008).

Pinkleton's (2008) findings showed that participants were less likely to have high expectations of sexual activity, more likely to suggest they would wait longer to engage in sexual activity, and less likely to view sexual portrayals on television as desirable. Further, the participants reported that the lessons taught them new information and made them think critically about sex which, if used as a sex education program, the researchers assert could help teens separate the fiction from reality when it comes to teen sex (2008).

Research on the Relationship Between Television Viewing and Teens' Sexual Behavior and Pregnancy

Although studies of sexual media content and its impact on teens' attitudes toward sex have been conducted in the past, the increasing number of teen pregnancies in the U.S. today has some scholars focusing more on the role that sexual media content may have on teens' sexual behavior and attitudes toward teen pregnancy in particular (Brown et al., 2005; Brown, 2006; Eyal & Kunkel, 2008; Martino et al., 2005; Somers & Surmann, 2005; Steele, 2000). The empirical research on the topic of teens' sexual behavior has used focus groups and interviews to explore the impact that exposure to sexual content in TV, movies, magazines, and music has on

teenagers' reported sexual behavior, initiation of sexual behavior, and pregnancy (Brown, 2004; Chandra et al., 2008; Collins et al., 2004; Eyal & Kunkel, 2008; Polacek et al., 2006; Somers & Surmann, 2005; Steele, 1999).

Recent studies have found that frequent exposure to sexual content on TV may be a factor in teens having sex at an earlier age than are those who are exposed to lower amounts of this type of content. For example, Collins et al. (2004) sought to discover whether adolescents exposed to more sexual content on TV would have sexual intercourse earlier than those who were exposed to lower amounts. The research was motivated by the American Academy of Pediatrics, which claimed that sexual portrayals on TV might contribute to teen sex. Findings of this longitudinal survey indicated that higher amounts of sexual behavior viewed on television correlated with earlier sexual initiation (2004).

Brown et al. (2006) found results similar to those of Collins et al. (2004). The researchers conducted a longitudinal investigation of 1017 black students and white students from 14 middle schools in North Carolina to assess whether sexual content from TV, movies, music, and magazines would predict sexual behavior. The participants were interviewed at age 12 to 14 and then two years later. The researchers found that the white participants who were exposed to sexual media content engaged in earlier sexual activity and were engaged in sexual initiation earlier. Black students, on the other hand, were more influenced by their parents' and friends' expectations of them rather than by media content (2006).

Only two published studies have investigated the association between sexual content exposure on TV and teen pregnancy specifically. The first study was conducted by Chandra and fellow researchers in 2008 (Chandra et al., 2008). Past researchers have found that sexual content

on TV shapes the sexual attitudes and behavior of teens, which could mean TV also plays a role in teens' attitudes about teen pregnancy (Eyal & Kunkel, 2008; Kim et al., 2006; Polacek et al., 2006; Somers & Surmann, 2005). Chandra et al. sought to determine whether the findings that sexual content on TV affects sexual attitudes/behaviors could also be applied to an association between sexual content on TV and teen pregnancy in particular (2008).

Through a national longitudinal survey of teens between the ages of 12 and 17, the researchers found exposure to sexual content on television was a predictor of teen pregnancy. Respondents who were in the 90th percentile of those who had exposure to sexual television content were twice as likely to experience a pregnancy in the following three years, compared to those who had been exposed to lower levels.

Even after outside issues were considered, viewing sexual content on television was found to be a significant predictor of pregnancy before the age of 20 (2008). Teens who were exposed to less sexual content in the Chandra et al. (2008) study had a lower risk of pregnancy before the age of 20, much like the results of the studies that found less exposure to sexual TV content correlated with less sexual activity in teens (Brown et al., 2006; Collins et al., 2004; Pinkleton et al., 2008).

Corder-Bolz (1981) is the only other researcher to conduct a similar study regarding teen pregnancy and television. After studying 75 pregnant and nonpregnant teens, the researcher found that the pregnant girls had watched soap operas more frequently before conception and were not likely to believe that their favorite soap characters used birth control (1981). Together, the results of these studies suggest that sex information and portrayals on TV play a role in the sexual socialization of teens who are exposed to these messages.

Although the empirical research discussed in this literature review encompasses television viewing as a factor in teens' attitudes and behaviors, the present study focuses on television content rather than the viewing of this content. The following Methodology chapter will outline the researcher's approach and analysis procedures for answering the question: How is teen pregnancy portrayed in the TV series *The Secret Life*?

CHAPTER THREE: METHODOLOGY

As previous scholarly work investigating teen health issues on television shows used content analysis to examine portrayals of topics such as teen sex (e.g., Anzicek, 2008; Aubrey, 2004; Batchelor et al., 2004; Fisher et al., 2004), drug use (e.g., Cohen et al., 2007) and alcohol consumption (e.g., Van den Bulck, 2008), this method was applicable to the current study. Content analysis involves the analysis of visual, written, and verbal components of communication messages (Cole, 1988). It is a detailed and orderly interpretation of a specific document (e.g., magazine, movie, or television show) to detect themes, meanings, patterns, and prejudice (Berg, 2007). Some content analyses take a quantitative approach, using a predetermined coding system to examine content and report frequencies and percentages, while others take a qualitative approach, which involves identifying and interpreting characteristics and properties of phenomena in a more in-depth, flexible, and emergent fashion (Abrahamson, 1983; Berelson, 1952; Berg, 2007; Selltiz, 1959; Silverman, 1993). The following procedures that the researcher employed in this investigation are common in qualitative content analyses (Patton, 2002).

The researcher used a grounded theory style approach in this more inductive based qualitative content analysis to understand and organize the data that was collected (Patton, 2002). Essentially, grounded theory involves description, organizing data into categories, identifying relationships among the categories, and theorizing concepts (Patton, 2002; Lindlof & Taylor, 2005; Rubin et al., 2005). This discovery-oriented approach was applied since no other study has been identified that looks at the framing of teen pregnancy in a television series (Chandra et al.,

2008). Further, qualitative content analysis (Berg, 2007; Bernard, 2000; Denzin & Lincoln, 2000; Elo & Kyngas, 2008; Lindlof & Taylor, 2005) was selected as the method since prior studies have called for more in-depth, qualitative inquiry of teen sexual health issues in general (e.g., Chandra et al., 2008; Pinkleton et al., 2008).

Thus, through qualitative content analysis, the researcher examined the program's characters and their images, behaviors, and language to explore how teen pregnancy was portrayed in *The Secret Life* (Batchelor et al., 2004; Lindlof & Taylor, 2005; Rubin et al., 2005). Inductive analysis requires the researcher to observe and determine patterns and categories that emerge from observation rather than stating a specific hypothesis before data collection has occurred (Patton, 2002; Denzin & Lincoln, 2000). Due in part to the dynamic characteristics of the television medium (i.e., sight, sound, behavior, and motion), the researcher conducted a content analysis in order to investigate the visual, symbolic, and latent elements in the communication, rather than conducting textual analysis which would focus only on the verbal content (words) (Lindlof & Taylor, 2005).

Program Sample

For this study, the researcher analyzed and coded the first two seasons (23 total episodes, averaging 43 minutes per episode on DVD) of *The Secret Life*, which consisted of eleven episodes (Season 1) that aired in July 2008 and twelve episodes (Season 2) that aired in January 2009. This sampling frame was chosen because the early episodes were most relevant to the study topic of pregnancy rather than motherhood. They covered the main character's entire pregnancy experience, starting from the day she discovered she was pregnant to the day she gave

birth. Every episode in Seasons 1 and 2 was coded since each dealt with the main character's pregnancy.

The Secret Life was selected as the television program to examine because it was aimed at teenage girls, the audience of interest (Keveney, 2009). When *The Secret Life* first aired in 2008, it received approximately 3.4 million viewers during its first season and most of these viewers were between the ages of 12 and 34 (Keveney, 2009). The series also addressed the issue of teen pregnancy more directly than any other television drama and prompted public controversy (e.g., parents expressing concern that their children were being exposed to the program), making this an interesting and important situation to investigate (Boursaw, 2009).

Data Collection

The researcher analyzed the data herself, recognizing that her perspective of *The Secret Life* and teen pregnancy in general may influence her interpretations of the data (Berg, 2007). However, she did not have strong positive or negative feelings toward the program or topic of teen pregnancy, and did not regularly view the program before beginning the current study, which helped her remain relatively objective (Patton, 2002). Throughout the study, the researcher remained open to new concepts and to changing any preconceptions she had about the television show and the topic of teen pregnancy (Patton, 2002).

The data collection and analysis procedures involved several steps. The researcher viewed each episode three times and analyzed the data in an ongoing, interactive process whereby data collection and analysis occurred simultaneously (Patton, 2002). The first step involved purchasing the complete DVD sets for Seasons 1 and 2 of *The Secret Life*. Second, the researcher watched each of the forty-three minute long episodes and took brief, handwritten

notes to get an overall idea of the content. This first set of notes included short summaries of each episode, a list of issues, emotions, repeated phrases, and themes that were evident within each episode and across multiple episodes. In the third step, the researcher carefully watched each of the 23 episodes a second time and further data were analyzed by hand (Patton, 2002). Specifically, during this second viewing, a second set of more detailed handwritten notes was taken and compiled with the brief first set, totaling 62 notebook pages of data. Throughout this note-taking process, particular scenes and dialogue were frequently replayed to document important interactions and to briefly summarize the plotline of each episode as it related to teen pregnancy. Further, numerous quotes and conversations were transcribed during this second viewing (Patton, 2002).

While collecting the data during the second viewing, the manifest content (i.e., surface level meaning of the messages) and latent content (i.e., deep meaning of the messages) in reference to teen pregnancy were also identified (Berg, 2007). The researcher carefully documented complete descriptions of the teen pregnancy portrayals present in each episode, including summaries of character interactions, dialogue, visuals, factual information (e.g. health advice), and quotations. The age, gender, attitudes (positive or negative), and importance of the characters to the teen pregnancy message in *The Secret Life* were also documented. As the researcher continued to accumulate detailed notes, patterns began to emerge. These descriptions served as preliminary categories for the show's content.

After finishing the second viewing, the researcher compiled the first and second sets of handwritten notes and typed them into one set of complete notes, resulting in a 92-page (double-spaced) document. Each episode's notes were separated from the following episode's notes with

a page break, along with the capitalized episode number and title, the date aired (e.g. EPISODE 12 (23): “AND UNTO US, A CHILD IS BORN” (aired March 23, 2009)), and a one to two-sentence episode summary found online (The TV Loop).

The headings for each episode from Season 1 were highlighted in yellow while those from Season 2 were highlighted in green for easy referencing. Notes for each episode were around three to six pages, being shorter or longer depending on the amount of teen pregnancy dialogue and visual cues. The typed notes from Season 1 were 57 total pages, while those from Season 2 were 35 total pages (due to some of the show’s content shifting to other characters and issues other than teen pregnancy during the second season).

The researcher printed two copies of the full set of typed notes from Seasons 1 and 2. One copy served as the master copy and is kept in a home office, without any handwritten notes. A second copy was used as a working copy – that is, for writing thoughts and possible themes in the margins, and was fully indexed and coded (which will be discussed in the following section). The original handwritten notes were placed in a binder with the indexed and coded set of typed notes (Patton, 2002).

Data Analysis

Data analysis took place during data collection. The first step of analysis involved developing a coding scheme to make sense of the information that had been documented. The researcher identified, coded, categorized, and labeled major patterns in the data. Each of these procedures will now be explained in more detail. The researcher’s analysis was informed by framing theory and social cognitive theory, but was not constrained by them. The theories guided the researcher in determining how teen pregnancy was presented in the show and how aspects of

the pregnancy were being communicated to the show's viewers, but she was open to discovering other approaches.

During the initial attempt at organizing the data, the handwritten notes were read thoroughly, and the researcher's subsequent comments and thoughts were written in the margins (additional thoughts and ideas for coding categories were also written on the typed set of notes). The typed notes included some shorthand codes (abbreviated ideas for categories) as the coding categories were developed. For example, thoughts on the show's portrayal of Amy as angry about her pregnancy in many scenes, but occasionally happy with her situation, were noted as a pattern of negative and positive emotions throughout the episodes.

The typed copy of the notes was also indexed and coded. The researcher identified different concepts using highlighter pens of various colors to help with systematic grouping. For example, noted emotions were highlighted in yellow, while portrayals of romance were highlighted in pink. Different colors denoted certain ideas that aided the researcher in discovering patterns in the data. For example, the concepts of emotion and romance in the program were subsequently found to be significant patterns in the data.

Coding was an important aspect of the analysis process as it helped in interpreting and organizing the data. The researcher followed the four basic guidelines for coding (Berg, 2007): ask the data specific questions (i.e., what is the objective of this study?), analyze the data closely (i.e., start with many categories until the television episodes are saturated with recurring categories), interrupt the coding to record notes (i.e., when a message in the television show triggers an idea, such as the frequent use of a certain word or the repetition of a notable concept in the data), and never assume that a demographic variable is relevant until the data shows it is

relevant (i.e., what data is relevant to this study?). For example, the fact that Amy is portrayed as 15-years-old, white, and upper middle class were all relevant demographic variables in the study.

To determine what was significant in the data, teen pregnancy-related messages in the typed, indexed and coded copy of the notes were analyzed in terms of the emphasis placed on certain topics, and the amount of time given to certain topics visually and/or verbally, and in situations where a teen pregnancy message was implied (i.e., nonverbal behavior, gestures, sarcasm, and emphasis of certain words) (Berg, 2007; Van den Bulck et al., 2008). For example, the issue of adoption was the focus of multiple episodes, while abortion was mentioned in multiple episodes, but was the focus in only one episode.

After preliminary coding, patterns began to emerge as certain aspects of the pregnancy were focused on repeatedly and in-depth. For example, social support (e.g. hugs, supportive words, gentle tone of voice) was identified as a major characteristic of much of the teen pregnancy content as it was present in each episode and was a focal point throughout Seasons 1 and 2. The data were then reviewed again to determine to what extent social support was present and in what forms.

In a second classification of the data, the descriptions from the preliminary qualitative coding were organized into categories and subcategories. For example, a teen pregnancy portrayal that emphasized the physical changes (e.g. a new, curvy figure) the main character experienced was grouped with similar portrayals of her psychological (e.g. shy to confident and angry) and social (e.g. an average girl, then isolation, then embraced in the popular crowd) changes. These subcategories were then placed in a third classification of the data that resulted in

an overall “Teen Pregnancy as Transformative” category (which will be presented in more detail in the Results Chapter). To further explain, the portrayals that focused visually, verbally, and vocally on Amy’s changing appearance, attitude, and social status (all in negative and positive ways) all emphasized that teen pregnancy causes changes, or transformations, to the individual. These qualitative subcategories provided a description of how teen pregnancy content is presented in *The Secret Life*.

The researcher watched each of the 23 episodes a third time, during which she reviewed the notes further to verify that the categories were saturated. Specifically, she watched the episodes while following along with the notes to ensure that the final categories and subcategories applied across all episodes in Seasons 1 and 2 of the program.

After data collection and analysis was complete, the researcher interpreted her findings in relation to prior scholarly empirical work and the relevant theoretical frameworks, and attached significance to certain results. As the present study draws on framing theory and social cognitive theory, the data were interpreted with respect to how teen pregnancy was framed in the series and what viewers might learn from exposure to these messages. The approach was much like that of prior content analytic studies that have applied these theories to examine other teen health issues (e.g., Eyal et al. 2007; Hust et al., 2007; Jaworski, 2009; Jensen & Jensen, 2007). The identified categories reflect the teen pregnancy-related messages that viewers likely encounter and learn from as a result of watching the show. For example, the messages that teen pregnancy is humorous and romantic were communicated through multiple portrayals in the show. These portrayals can potentially teach viewers that teen pregnancy is not a serious situation.

Throughout this process, the researcher gained insight into depictions of teen pregnancy that were prevalent in the series, as well as to how the depictions were presented, how they made sense as categories, and what message they may be sending to viewers.

CHAPTER FOUR: RESULTS

The purpose of this qualitative study was to examine the portrayal of teen pregnancy in the television series *The Secret Life* and to investigate the messages that these portrayals may communicate to the show's viewers. Through the researcher's observation and analysis of framing devices including: (1) verbal cues (e.g., words and phrases spoken by the characters), (2) visual cues (e.g., appearance, behavior, environment, background context), and (3) auditory cues (e.g., tone of voice, crying, music), five major categories of teen pregnancy portrayals were identified across the 23 episodes in this study.

The five major categories of teen pregnancy portrayals identified in Seasons 1 and 2 of *The Secret Life* are: (1) Teen Pregnancy as Dramatic, (2) Teen Pregnancy as Identity, (3) Teen Pregnancy as Manageable, (4) Teen Pregnancy as Transformative, and (5) Teen Pregnancy as Serious. The category labels attempt to capture the experience of teen pregnancy and how it is portrayed in the program. Subcategories also emerged within these major categories.

The categories will be discussed and supported by illustrative verbatim quotations from the show's characters, descriptions of emotions in the dialogue/quotations, and descriptions of visual cues such as character appearance and settings from *The Secret Life*. (Please see Appendix A: Character Chart for summary information and descriptions about the show's characters discussed in this chapter.) It should be noted that the following categories are distinct, yet not mutually exclusive. (Please see Appendix B for an outline of the Categories and Subcategories.)

(1) Teen Pregnancy as Dramatic

The strongest theme in the data was the portrayal of teen pregnancy as extremely dramatic. For the purposes of this study, the term “dramatic” is defined by the researcher as the involvement and physical expression of conflict and/or emotion in the main character Amy as well as the other characters. The subcategories in the “Teen Pregnancy as Dramatic” category are: (a) emotional (e.g., Amy and the supporting characters experience a wide range of emotions during the pregnancy), (b) complicated (e.g., difficult decisions to make about the baby and Amy herself) and (c) romance (e.g., Amy denies being pregnant, Ben offers to “rescue” her, a continual struggle between Ricky and Ben for Amy’s affection).

1 (a) Emotional

The first subcategory of “Teen Pregnancy as Dramatic” is Emotional. *The Secret Life* series presented teen pregnancy to TV viewers as extremely emotional through visual cues (e.g., physical fights, tears, smiling), vocal cues (e.g., yelling, sarcasm, happy tone of voice), and verbal cues (e.g., use of words or phrases such as “I’m scared” to portray fear, and “I can’t wait” to express happy excitement).

In every episode, the main character, Amy Juergens, was shown crying and expressing negative feelings toward being pregnant. Her social circle (e.g., friends, family, school guidance counselor) was also portrayed as experiencing emotional distress in each episode as a result of the situation. The characters’ positive emotions were also portrayed, but emotional distress was more prominent, presenting viewers with the notion that teen pregnancy involves more negative than positive emotions. The range of emotions presented to audiences in Seasons 1 and 2 as a

result of Amy's pregnancy were: (1) positive (e.g., happy, thankful, in love, etc.), (2) negative (e.g., scared, angry, embarrassed, etc.), and (3) others' various emotional reactions (e.g., feeling happy, excited, overwhelmed, angry, embarrassed for Amy, etc.).

Negative Emotions

Throughout the 23 episodes, Amy's pregnancy elicited mostly negative emotional reactions from herself and those around her. The negative emotions took several forms, including fear, embarrassment, frustration, regret, nervousness, loneliness, anger, concern about "getting fat," worry, and being overwhelmed. Teenage pregnancy was portrayed as emotional when she found out she was pregnant, when she initially attempted to hide her pregnancy from her social circle, and when she talked to others about the pregnancy.

Anger appeared to be the emotion that Amy expressed most frequently (e.g., yelling at her friends, family, and her boyfriend Ben in most episodes). For example, in a conversation between Amy and Ashley (Amy's younger sister), Amy was portrayed as being overwhelmed and angry through vocal cues such as yelling and an angry tone of voice, as well as visual cues such as her facial expressions, and a physical act of pushing Ashley to the ground. Ashley's annoyance with Amy's self-pitying attitude was portrayed through verbal cues (i.e., word choice) as she spoke evenly and calmly, and through visual cues as she maintained a blasé expression throughout the exchange (Season 2, Episode 5):

Amy: "If Ricky [the baby's father] doesn't go along with the adoption, I'll just drop out of school, get a full time job, put the baby in daycare, and embrace teen motherhood." (angrily, as she argues with Ashley)

Ashley: "You're so dramatic" (calmly, but annoyed)

Amy: "I'm pregnant! I'm 15!" (angrily)

Ashley: "Stop feeling so sorry for yourself, you're not the only pregnant teenager in the world." (annoyed)

Amy: "I'm not feeling sorry for myself! I'm doing the responsible thing by trying to find two adults who can provide my baby with a stable home and a loving family!"

Ashley: "Well if you'd done the responsible thing 6 months ago..." (Amy tackles Ashley to the ground, while Ashley warns her to be careful of the baby; Amy is fuming)

Amy: "I do not feel sorry for myself! I'm trying to do the right thing!" (angry)

In situations such as the physical fight between Amy and Ashley, viewers are shown the anger of being a pregnant teen.

Teen pregnancy was also frequently presented as being shameful and embarrassing. Amy was portrayed as feeling ashamed of her pregnancy through verbal cues (e.g., telling her mom she wants to change schools and go live with her grandmother) and visual cues (e.g., trying to cover her pregnant belly). For example, while Amy and Ben were being happily married by a minister, the minister said, "You are blessed with life." As a result of this statement, Amy's smile faded and she shamefully tried to cover her stomach with her hands, visually portraying teen pregnancy as embarrassing. The lesson these negative depictions present to viewers appears to be that teen girls who become pregnant should be angry, embarrassed, and worried, likely discouraging them from finding teen pregnancy appealing.

Positive Emotions

The only time teen pregnancy was portrayed as emotionally positive was when Amy was occasionally happy, having fun, being in love, and being supported by her social circle. Although this might not seem directly related to the pregnancy, the relationships she developed and the emotions she felt appeared to be intensified by the fact that she was pregnant, so the researcher attributed the positive emotions as being related to the pregnancy. Each of these positive emotions were, however, preceded or followed by portrayals of negative emotions,

communicating to viewers that teen pregnancy is not only a positive experience. It appeared that the producers of the series did not want viewers to leave each episode with the idea that teen pregnancy involves mostly favorable emotions. The message that being a pregnant teen involves a mix of emotions may help discourage viewers from seeing teen pregnancy as something desirable.

Amy was presented as experiencing positive emotions, not necessarily related to the baby, but rather to things that had happened as a result of becoming pregnant (e.g., marrying Ben and experiencing the support of her new friends). The following examples from the series likely teach viewers that being in love and experiencing the support of new friends are realistic results of becoming pregnant at 15 years old, which is not an accurate depiction of real life.

For example, Episode 10 of Season 2 presented the baby shower that Amy's new friends, Adrian and Grace, planned for her. Not only was the occasion portrayed as enjoyable, but the visual and verbal cues conveyed the message that teen pregnancy is something that can be celebratory. Specifically, in a scene before the baby shower when Ben gave Amy a gift, she happily declared, "No, Ben, you're the gift. I can't believe you stayed with me through this whole thing. You're so sweet." In this scene, happiness and gratitude were presented through verbal cues. This verbal expression of positive emotions was followed by a visual representation of positive emotion in a humorous and happy kiss between Amy and Ben.

Another way that Amy experienced positive emotions (e.g., happiness, love, excitement) was in regard to her baby. In later episodes, it appears that being a pregnant teenager and the prospect of being a teen mother are exciting experiences. Once Amy started expressing a desire to keep the baby, the trials she would have to endure seemed to have been forgotten. In the

episodes at the end of Season 1, she was portrayed through visual and verbal cues as having positive emotions toward the baby. For example, she happily and lovingly rubbed her pregnant stomach during the wedding reception while she danced with her girlfriends. She appeared carefree and happy to have her unborn baby present at the occasion. Amy was also portrayed as happy and excited when she was about to give birth, and Ashley asked if she was scared. Amy replied as she smiled and said, “Yeah, but I can’t wait to see him.” These positive visual and verbal cues presented Amy as a happy pregnant teenager, communicating the message that being a pregnant teenage girl can involve some positive emotions.

Others’ Various Emotional Reactions

The expression of emotion was also evident in how the characters in Amy’s social circle behaved and spoke about her pregnancy. Amy’s friends did not appear to be as emotionally involved as Amy’s family, but they still cried, got angry, and also got excited about the pregnancy. Overall, the supporting characters were emotionally involved. For instance, they became emotional when they received news of the pregnancy, talked to others about it, or spoke to Amy about it. The portrayal of Amy’s friends and family seems to communicate the idea to viewers that the pregnancy of one girl can affect the lives of those around her, both positively and negatively.

For example, in an early episode when Amy was still hiding her pregnancy, her sister Ashley was visually portrayed as distraught, and determined to get the truth. She was shown waiting in the living room for Amy to get home from a date with Ben. When Amy walked in the front door, Ashley nervously stated, “I stayed up because I wanted to ask you something. You’re not, you’re not pregnant or anything are you?” (Season 1, Episode 3). After Amy confessed and

they had a short talk, Amy went to her room and Ashley stayed crying quietly in the living room. The visual cue of Ashley crying by herself and the vocal cue of Ashley's nervousness as she stammered out her question for Amy communicate the message that the situation can devastate people who care about the pregnant teen. Based on Ashley's talk with Amy and her reaction to hearing the news, it appears that teen pregnancy is an upsetting and devastating situation for the family members.

Aside from her family, Ricky and Ben were also portrayed as having experienced emotional turmoil as a result of Amy's pregnancy. When talking about the possibility of adoption, Ben and Ricky were verbally, visually (e.g., Ricky's clenched jaw and strong hand gestures), and vocally (e.g., Ricky's frustrated and angry tone of voice) portrayed maturely, but heatedly, discussing the issue in Amy's living room (Season 2, Episode 5):

Ben: "I'm jealous of you"

Ricky: "I'm jealous of you, because you've got a choice. I don't. You don't have to stay around, you don't have to take care of a baby, you don't have to have these painful discussions with Amy. But I do, and my advice to you would be to get out."

Ricky also expressed guilt about the pregnancy, as he stated, "I feel so damn guilty that I did this... I hate myself" (Season 2, Episode 23). Ben, on the other hand, showed sadness in Season 1, Episode 5, when Mr. Molina, the school guidance counselor, questioned Ben about the possibility that Amy was pregnant. Mr. Molina gently said, "I should be talking to Ricky, shouldn't I?" as Ben started to cry without speaking.

Amy's social circle was also portrayed as experiencing positive emotions as a result of her pregnancy. For example, before Amy gave birth, her dad expressed verbal and vocal cues of being a happy expectant grandfather, as he exclaimed, "I'm having a grandson!" after Ashley

called him from the hospital. In his excitement, he also expressed visual cues of happiness by hugging a perfect stranger in a humorous moment. The cues of friends and family having experienced positive and negative emotions as a result of Amy's situation were communicated to the series' viewers, possibly contributing to their ideas about the impact teen pregnancy has on a girl's social circle in real life. Although one would assume that the pregnant teen would be the most emotionally involved and impacted by the pregnancy, it seems that the supporting characters experienced almost as many emotional ups and downs as did Amy.

1 (b) Life Complications

The second subcategory of "Teen Pregnancy as Dramatic" is Life Complications. *The Secret Life* portrayed the life complications, complexities, decision-making, and theatrics that went along with Amy Juergens' pregnancy, setting the emotions aside. The complexity was portrayed throughout the episodes as the main character initially tried to keep her pregnancy a secret, then temporarily decided to get an abortion (Episodes 5 and 6), then decided to give up her baby for adoption (Episode 7), and finally decided to keep the baby (Episode 8). There was surprisingly little focus on the option of Amy keeping her baby at the beginning of her pregnancy, and as a further surprise, her life seemed to be simplified once she decided to keep the baby.

Her life as a pregnant teen was portrayed as having difficult as well as exciting complications as she continually tried to escape the reality of the situation (e.g., denial, sneaking out with the intention of getting an abortion, skipping school, marrying Ben) and had Ricky and Ben in her life (who both eventually wanted to be a major part of Amy's life and that of her unborn child) as Seasons 1 and 2 progressed. The portrayal of the eventual love triangle among

Amy, Ricky, and Ben as a result of Amy being pregnant is presented as something that is complicated. However, the triangle is presented as more of a positive complication. It seems to communicate that potential boyfriends are drawn to the idea of a pregnant teen girl, as Ricky and Ben only desired her more as the series progressed.

Although Amy had the help of her friends and family while she was pregnant, she was initially portrayed as struggling with deciding when to tell her parents, when to tell her friends, and in accepting the situation herself. For instance, in Season 1, Episode 2, her two best friends were involved in an early complication: Lauren asked Amy, "Did you tell your parents?" Amy responded by saying she was just going to, "Pretend it never happened." Once Amy walked away, Madison turned to Lauren and said, "People know."

Although Amy's pregnancy was increasingly becoming a reality and her life was portrayed as becoming more complicated, she denied her situation on and off during the early episodes when she was still trying to maintain the simple life she had previously. In many of these episodes, Amy was presented as a girl who would rather focus on being happy in her relationship with Ben and avoid the pregnancy situation altogether. This depiction communicated that it is difficult to cope with the acceptance and responsibility of becoming pregnant at such a young age.

For instance, in Season 1, Episode 3, Amy and Ben seemed young, naïve, and happy as they talked in the school hallway. Then when Dr. Hightower (Amy's pediatrician) called her to make an appointment moments after Ben had walked away, Amy told the doctor to leave her alone and was nervous and close to tears as she said, "I already took care of it, okay?... Just don't call me again" (lying about having an abortion). This was another example of the main character

being portrayed in a phase where she was avoiding reality, as a result of not knowing how to admit it to herself.

The complications of Amy's pregnancy included: (1) having to tell her parents, (2) trying to decide what to do about the baby (e.g., keep the baby, abortion, or adoption), and (3) trying to decide what she plans on doing with her life (e.g., change schools, move in with her grandmother, let Ben take care of her). Initially, her sister Ashley behaved in strange ways (e.g., wearing matronly clothes, adopting a stiff and artificial way of speaking to her parents) so her parents would focus on her rather than on discovering Amy's secret (Season 1, Episode 4). In a scene from Episode 4 where Amy confessed her pregnancy to her dad on the phone, she said: "I did it, dad! Everyone's talking about it. She's just covering for me!" Amy's sudden outburst to her dad portrayed Amy verbally, vocally, and visually as a confused, upset, overwhelmed young girl.

Once her parents learned about the pregnancy, Amy's life became even more complicated, and the pregnancy was portrayed as becoming more real to Amy and those around her. For instance, in a conversation with Ben about abortion, Amy said, "Maybe it's the easiest thing," while Ben responded, "Maybe it's not" (Season 1, Episode 5). This short exchange between the characters communicated that teen pregnancy is complicated and there is no easy solution, especially when other people are emotionally involved.

The problems between Ben and Ricky as a result of Amy being pregnant added to the complexities. In a scene from Season 1, Episode 2, Amy experienced morning sickness in the school bathroom while Madison and Lauren talked to her from outside the stall about Ricky spreading rumors about the pregnancy. Amy said in response, "He better stop right now, or my

boyfriend's going to have a word with him." In this statement, Amy was presented through verbal cues as being angry about Ricky spreading rumors and as willing to further complicate the situation by putting Ben in the middle.

The pregnancy situation was also portrayed as continually complicated as Amy accused her friends Madison and Lauren of spreading the rumors, and as Ben accused Amy of still having feelings for Ricky. The complications presented in the series among Amy's social group communicated to viewers that teen pregnancy is complex and involves a number of decisions and difficult situations that affect not just the pregnant teen girl, but those around her.

1 (c) Romance

The third subcategory of "Teen Pregnancy as Dramatic" is Romance. The romantic side of teen pregnancy that was portrayed in the series refers to the romance between Amy and Ben as well as the romantic notions Amy had about being "rescued" (i.e. relieved of the burden of being pregnant by running away or by marrying Ben who would provide financial aid), a common idea in Seasons 1 and 2. In Episode 1, the notion of being rescued is presented visually and verbally when Amy's mom walked into her room (before she knew Amy was pregnant) to find her staring out the window at the moon, touching her stomach, clearly reflecting on what was happening in her life:

Anne: "You thinking about running away to the moon?"

Amy: "You made it sound like so much fun."

Anne: "I love you Amy, no matter what happens... Remember, he [your father] loves you, and I love you too."

Immediately following this exchange, Amy realized Ben had left a voicemail on her phone while she was staring at the moon. After her mom left her room, she listened to it. Ben's message said,

“Come on, marry me. The offer of marriage is good for a lifetime. Just let me know when and where.” The combination of visual and verbal cues in this scene presented an idealistic, romantic scenario for Amy. This scene presented the idea that it would be nice to run away from one’s problem, but it also emphasized that running away is a fantasy. However, the episodes following this one present the realistic side of the notion to “run away” as Amy considered abortion and snuck out of her house to go to the abortion clinic in Episode 6.

In Episode 1, Madison and Lauren expressed their own romanticized ideas about Amy’s pregnancy. At the school dance, verbal, vocal, and visual cues emphasized the idea of romance as Madison and Lauren used an excited tone of voice when they asked about Ben. Amy exclaimed that she liked him, but that once he found out she was pregnant, he would not want to date her anymore. The two girls continued to tell Amy their romanticized ideas that Ben would fall in love with her, want to marry her, and want to take care of her with his wealthy father’s money, even if she was pregnant. The conversation among the three girls communicated to viewers that there is still the possibility of romance, love, and “rescuing,” even as a pregnant teenage girl. To continue with this idea that Amy needed “rescuing,” in the following scene, Ricky approached Amy to flirt with her. When Ben saw that she was upset by this, he immediately walked over to her and asked Ricky to leave her alone. Amy appeared extremely happy while Ben talked to her and asked her to dance to the last song of the night. In this scene, Ben visually and verbally portrayed the idealistic, romantic idea of Amy’s “knight in shining armor.”

The epitome of romantic notions in *The Secret Life* was Ben’s character. Nearly every conversation he had with or about Amy involved him discussing his love for her and/or that he

would rescue her. Ben's character seems to present the message that there is a positive outcome for pregnant teen girls, and a boy who will love unconditionally, despite the difficult situation. Ever the hopeless romantic, Ben pursued Amy endlessly before he found out she was pregnant as well as after he learned of her situation. He told Mr. Molina in Episode 1, "I have been rejected by the French horn player. Therefore, I have decided I love her and cannot live without her."

One of the most romantic conversations between Amy and Ben happened early on in Episode 5 when he prepared a picnic for her on the grass during school lunch with cider, champagne flutes, and chicken wings. Although the conversation showed some other teen pregnancy themes identified in this study (Social support, Emotional, Identity, and Dramatic), the setting and Ben's devotion to love and "rescue" Amy, made it most appropriate for the Romantic subcategory:

Ben: "I'll get through life on my dad's money, unless this green movement takes off. Then I'm really in trouble, we both are."

Amy: "Both?"

Ben: "Someone's in a good mood."

Amy: "I am, I don't know why, but I just really am!"

Ben: "Can I ask you something?"

Amy: "Yea, I guess."

Ben: "Will you marry me?" (Amy breaks down in tears; Ben puts his arm around her while she cries)

Ben: "A simple 'yes' would do." (smiling, but knowing something's wrong)

Amy: "You know about me?" (while sobbing)

Ben: "I know that I love you and I want to marry you."

Amy: "Why does this have to happen to me?"

Ben: "I'm not that bad, don't cry" (trying to make light of the situation)

Amy: "Who told you?"

Ben: "My dad."

Amy: "I'm so embarrassed."

Ben: "It's okay."

Amy: "It's not okay. You're such a nice person. I'm such a whore."

Ben: "You're my whore... I love you and I'll care for you if you let me. We'll tell your parents it's my baby."

Amy: "I wasn't even sure it was sex... until this happened."

Ben: “Everything will be fine. I don’t know how or when, but everything will be fine.”

Amy: “I’m getting fatter and fatter by the second. People are finding out.”

Ben: “As far as everyone else is concerned, that’s my baby and you’re going to be my wife... You’ll be the sausage princess... let me be your prince.” (Season 1, Episode 5)

The verbal cues Ben uses (e.g., the poetic and loving way he speaks of Amy) promote the idea of romance in the series. His pursuit of Amy continued without hesitation after he found out she was pregnant, when she frequently cried, and even when she was angry. After he had heard some pregnancy rumors in the early episodes, he told his friends Alice and Henry, “Maybe I’ll get married soon and have a little family band... She’s perfect, and I love her” (Season 1, Episode 2). The unconditional love Ben shows for Amy, regardless of her being pregnant with Ricky’s child, communicates a romantic, but unrealistic message about the situation of teen pregnancy.

(2) Teen Pregnancy as Identity

The second major category is “Teen Pregnancy as Identity.” Throughout Seasons 1 and 2 of *The Secret Life*, Amy’s pregnancy, her baby, and identity as a person were all presented in many ways. In this study, the term “identity” is defined as the set of qualities by which someone or something is known. This term will be used to describe the stereotypical, negative, positive, and neutral ways that Amy and her social circle used to identify herself, other pregnant girls, and her baby.

As is clear from the above dialogue between Ben and Amy, these two characters identified Amy like the rest of her town. Amy and Ben referred to Amy as a “whore” in Episode 5, although Ben used it jokingly, as was communicated by his vocal cues (e.g., his gentle tone of

voice) and visual cues (e.g., his loving expression and smile). The Identity theme was apparent in most of the 23 episodes. However, negative identification came mostly from: the main character as a form of self-loathing, outsiders (e.g., those not in Amy's social circle), her acquaintances, her parents or others' parents, and her school peers (before they became her friends). Referenced identification of Amy positively came from her family, friends that loved her, and others who knew more about her aside from her pregnancy. It appeared that the more the characters got to know Amy, the less they identified her in stereotypical ways.

2 (a) Negative Identity

The first subcategory of "Teen Pregnancy as Identity" is Negative Identity. Initially when Amy discovered she was pregnant, the identity "the pregnant girl" was placed on her and the "good girl" title was removed from her reputation, although she was never referred to as "bad" in the episodes. In a conversation between Jack and Adrian in the school hallway in Episode 5 (before these characters became friends with Amy), Jack spoke negatively of Amy through verbal cues, identifying her as "girls like that," as a reference to teenage girls who get pregnant:

Jack: "You shouldn't hang out with girls like that"

Adrian: "Girls like what?"

Jack: "Girls like Amy Juergens."

Adrian: "What's wrong with Amy Juergens?"

Jack: "She's pregnant, she's having a baby."

Adrian: "Amy Juergens?!"

In this scene, Jack conveys the message that Amy is a "bad girl" through vocal cues (e.g., he presents the information to Adrian in a hushed tone of voice) without saying it verbally. The exchange also seems to promote the idea that girls who get pregnant (e.g., Amy) are a worse influence on their peers than girls who sleep with multiple sexual partners (e.g., Adrian).

Following this exchange, Grace walked up to Jack and Adrian while they were still talking and Jack communicated once more the message that Amy was no longer a “good girl”:

Grace: “So Amy’s really having a baby?”

Jack: “Yep. You win Grace. You’re the good girl and Amy isn’t.” (Season 1, Episode 5)

Even Amy’s father stripped her of her “good” or “nice” identity on a few occasions in the series. In a conversation with Leo Boykewich about Ben and Amy, who stated, “They’re good kids.” George responded with, “If they were good kids, we wouldn’t be sitting here having this conversation!” (Season 1, Episode 6). Additionally, when Anne, her mother, stated, “They’re very nice girls, and so is Amy,” George responded, “Yeah, not as nice as we thought” (Season 1, Episode 6). Leo and Anne both verbally send the message that Amy is still “good” and “nice,” despite being pregnant. George, in contrast, verbally communicates that she is “not a good kid” and is “not as nice as [he] thought” because she had sex one time and got pregnant. These verbal cues send the message to viewers that there is both positive and negative identification that one might endure as a pregnant teenager.

Another negative identity placed on pregnant girls in general was “slut.” When Amy temporarily attended the Alternative Extension School for Independent Women, her peers referred to it as the “school of sluts” and the “slut school,” presenting a message that all pregnant girls are sluts (Season 1, Episode 10). The only people who referred to the school as the Extension School were adults, Amy, and Ben. Negatively identifying Amy as a “slut” and “pregnant girl” portrayed Amy as an outcast in Episode 10.

Her social support waned occasionally in the first season and many people no longer identified her as a good girl, but Episode 10 was the one in which Amy was mainly portrayed as

an isolated individual due to being pregnant. For example, Jason told Lauren, “You know mom and dad aren’t going to let you hang out with her anymore because she had sex with a deviant and is pregnant” (Season 1, Episode 2). The verbal cues in Jason’s comment to his sister communicates the idea that Amy is not only identified as “bad” by his parents because she had sex and got pregnant, but because she had sex with someone who was a “deviant.”

- The most common identity for Amy in the first two seasons was “the pregnant girl.” In Season 1, Episode 12, Adrian told her mom she was going to a wedding, and stated, “They’re getting married, Ben and Amy, that pregnant girl.” At a carwash in the same episode, a fellow student who was not a main character, referred to Amy as “That pregnant girl, Amy” (Season 1, Episode 12). Even Amy identified herself as “a pregnant teenager” when understanding the way people saw her. In one scene, she admitted to Ashley, “I’m looking for a job with insurance, but nobody wants to hire me. Who wants to hire a pregnant teenager?” (Season 2, Episode 3). The verbal reference to Amy as “the pregnant girl” was presented in the series as being neither a negative nor positive identity. When characters used this reference, it was for descriptive means, but it seemed to strip Amy of the other qualities she should have been known for and the other identifying attributes people formerly used to describe her (e.g., a good girl, French horn player, Julliard bound student, studious individual).

Although Amy was the one who was identified most often, the term “it” was also used in identifying the baby or the situation of being pregnant. Having an abortion was mostly talked about as “taking care of it”. This identification had a negative connotation. Use of this reference by the characters presented Amy’s pregnancy as a problem that needed to be eliminated. For instance, Adrian told Ricky it would not be smart if Amy had his baby. She said she “probably

already took care of it” (Season 1, Episode 5). In the following episode, Ricky told Grace that he heard Amy had “already taken care of it” (Season 1, Episode 6):

Grace: “Amy Juergens really is having a baby?”

Ricky: “She’s taking care of it.”

Grace: “She’s having an abortion? Oh no.”

The baby, or the situation of being pregnant, was also identified as a “problem” or a “mistake.” For instance, Mr. Boykewich told Ben that Amy’s parents might not want her getting married because “They might consider it a second mistake” (Season 1, Episode 6). Amy also told Ben, “It’s really nice of you to want to marry me, but it’s not your problem, it’s my problem” (Season 1, Episode 6). Use of these negative references presents the message that pregnant girls are “sluts” and that being pregnant as a teenager is a “problem,” likely influencing teen viewers to perceive pregnancy as something that negatively defines a person, which may encourage them to find teen pregnancy unappealing.

2 (b) Positive Identity

The second subcategory of “Teen Pregnancy as Identity” is Positive Identity. The main character was labeled negatively for the most part. However, she was occasionally referred to as a “good girl” by those who knew her well. In a scene from Season 1, Episode 4, Ben and his dad were sitting in Ben’s room talking as the topic of Amy came up in the discussion. The following was just one of a few occasions where Mr. Boykewich referred to Amy positively, identifying her as a “nice” girl:

Ben: “Is it okay if I take the Juergens’ a gift basket?”

Mr. Boykewich: “Take her anything you want. She’s a nice girl... She’s a nice girl Ben, but things don’t always work out the way we plan... Is she pregnant?”

The only other times in Seasons 1 and 2 that the pregnancy situation was identified positively was when the minister marrying Ben and Amy referenced the baby, saying, “You’re blessed with life” (Season 1, Episode 12). Amy’s grandmother also said the baby was “a blessing” (Season 1, Episode 8). These references identify Amy, teen pregnancy, and her baby positively.

The identifying references used throughout Seasons 1 and 2 of *The Secret Life* presented a message to viewers that different people can view teen pregnancy in different ways. It appeared to the researcher that the show’s writers and producers included words and phrases that identified aspects of the pregnancy positively and negatively in an effort to provide an unbiased portrayal. However, the positive references do not seem as realistic as do the negative ones.

(3) Teen Pregnancy as Manageable

The third major category is “Teen Pregnancy as Manageable.” Although *The Secret Life* portrayed the main character’s pregnancy as emotional, complicated, and unacceptable by those around her, it was portrayed as manageable overall. In this study, “manageable” is defined as a situation that may not be easy, but can be handled or controlled in a way that results in a successful outcome. In *The Secret Life*, Amy and her loved ones were able to handle the pregnancy and the challenges that accompanied it (e.g., difficult decisions, financial needs, negative emotions). Through (a) social support, (b) financial support, and (c) use of humor, the characters were presented as better able to cope with Amy’s situation than if she had to deal with it by herself and without the relief of occasional humor, making it manageable.

3 (a) Social Support

The first subcategory of “Teen Pregnancy as Manageable” is Social Support. For every bad feeling and bad experience Amy encountered as a result of being pregnant, there was someone with her to reassure her that everything would be okay. In Episode 8, Amy’s grandmother expressed being proud of her for the way she had dealt with her pregnancy. In Episodes 4 and 9, Ben’s father referred to Amy as a “good girl,” and her friends and family provided solutions, help, and unconditional love in every episode in which she was knowingly pregnant. For example, in Episode 1, Lauren said, “Amy we’re in this with you,” while Amy, Lauren, and Madison stood in the school bathroom after she took a home pregnancy test. Lauren and Madison even offered to go with her to the doctor after school. The continuous social support in the majority of the episodes communicated that teen pregnancy is manageable. However, the portrayal of Ben’s and eventually Ricky’s support might give viewers the inaccurate idea about teen boys’ desire to be involved with a teen pregnancy.

Even when Amy had difficulty coping with the decisions she needed to make regarding the baby, her social circle consistently reassured her that they would be supportive through everything. In Season 2, Episode 3, Amy and her mother, Anne, had a conversation about decisions and Anne’s willingness to help:

Anne: “I’m not trying to make the decision for you about the baby, I’m really not.”

Amy: “Well, you kind of are, since you won’t help me.”

Anne: “I’m going to help you once in a while. But I’m not in a position to take care of the baby, I need to get a job. You can keep the baby or choose adoption, but ultimately the choice is yours.”

Anne: “Maybe your purpose is so you could provide a baby for a couple who couldn’t have one... One thing that’s not going to change is that I love you, and I’m here for you. Always” (Season 2, Episode 3).

The unconditional support portrayed throughout the series communicated the message that teen pregnancy does not have to be a lonely ordeal. Although Anne is portrayed as putting much of the responsibility on Amy’s shoulders, her words in the dialogue above indicate that she will provide support for Amy and help her manage the situation. This dialogue sends the message to viewers that loved ones can provide a support system for pregnant girls and help make the experience easier to deal with, while also communicating that the decision-making and/or child raising responsibilities belong to the teen.

3 (b) Financial Support

The second subcategory of “Teen Pregnancy as Manageable” is Financial Help. Although Amy’s family showed no visible signs of “going broke” as Ashley put it, her family and friends were portrayed as willing to help financially. It is interesting to note that financial struggles are not prominent in the series. However, once the possibility of having money troubles was presented, Amy’s friends and family were ready to help within the very same episode.

Verbal cues (e.g., Amy’s friends and family vocalizing their willingness to find employment to help support her and the baby financially) and visual cues (e.g., Anne shown working at the Hotdog hut with Amy, and her friends visiting her at her house to offer jobs and free babysitting) in the episodes portrayed the economic assistance Amy received from her social circle. Anne took a job at the Hotdog Hut and Ben frequently told Amy he could take care of her with his father’s money. Ben and Ashley also agreed to get second jobs without hesitation. Both social support and financial help were expressed in a scene where her friends, Grace, Jack,

Adrian, Ben, Ricky, Lauren, Madison, Jason, Henry, and Alice visited Amy's house to offer her a job and their help:

Jack: "Well, Grace came up with an idea... You can work for the church. Here's what the church can offer you..."

Grace: "...a job. A job in the daycare center, so you can leave the baby there during school hours, and then when you get out of school, you can work there to pay for the care that you received."

Grace: "We can all babysit for you, if you decide to keep the baby."

Madison: "If she's having a baby shower, we're throwing the baby shower."
(referring to her and Lauren)

Once Amy's friends left, she had a conversation with her mom, where she decided that with the social and financial help, she wanted to keep the baby:

Anne: "I think you can do it, if that's what you really wanted."

Amy: "Everyone wants to help me. Can I do it, mom? Will you let me do it?"

Anne: "I'll help you as much as I can, but it's your baby and you have to take care of him. It's not going to be easy."

Anne's support is verbal in this scene, and Amy is portrayed as feeling confident and competent to raise a child once she knows she has the emotional and financial aid she will need. Her friends' and family's offers to assist send the message that raising a child as a teenager is difficult emotionally and financially, but with a reliable support system and the right resources, keeping the baby is a viable, manageable option.

3 (c) Humor

The third subcategory of "Teen Pregnancy as Manageable" is Humor. Although Amy's pregnancy was portrayed seriously much of the time, it was also sometimes presented humorously. It seems that one reason the writers and producers incorporated humor is because the show's primary purpose is to entertain. A second reason may be that humor is represented as a coping mechanism and a way of making light of the difficult situation. However, the humor

tended to reduce the seriousness of Amy's pregnancy and communicate to viewers that teen pregnancy is funny.

For example, in Episode 1, Madison was portrayed humorously through verbal, vocal, and visual cues as she persuaded a group of high school girls to quickly leave the bathroom. While upbeat background music played in the scene, Madison yelled, "I'm going to puke!," ran into the bathroom, put her hand to her mouth, and made gagging noises and expressions. With the bathroom cleared out, Amy was then able to take the home pregnancy test Madison had secretly brought for her.

The humor resumed in Episode 2 as Amy rushed into the restroom, vomited into a public toilet, and took a piece of gum from Lauren before casually heading to class. Amy's morning sickness was portrayed through visual cues that denoted humor (e.g., she stumbled as she ran, covered her mouth, and shoved her way into the bathroom stall), as well as with lighthearted background music. In Episode 3, humor was again communicated through visual cues as Amy almost vomited due to morning sickness when Ben tried to kiss her.

Although there is some physical, visual humor, much of the humor in the episodes derives from Ashley and George. These characters made jokes about teen pregnancy frequently, in what appears a coping mechanism regarding the situation.

(4) Teen Pregnancy as Transformative

The fourth major category is "Teen Pregnancy as Transformative." Amy transformed through the process of discovering she was pregnant and as she carried the baby to full-term. In this study, "transformative" is defined as a marked change in appearance, character, and identity. In the series, pregnancy transformed Amy in physical and apparently psychological ways, and

was portrayed as having changed her reputation and her social circle in favorable and unfavorable ways. Although the writers and producers seemed to present these changes as realistic, positive and negative changes were still glamorized to some extent (e.g., Amy is sexy, more confident, and popular), thereby sending mixed messages to viewers.

4 (a) Physical Changes

The first subcategory of “Teen Pregnancy as Transformative” is Physical Changes. As Amy’s pregnancy progressed, she was portrayed as changing physically. The writers and producers appeared to have made efforts to visually and verbally present the changes with Amy’s body, unlike typical TV shows with a teen pregnancy plot. It seemed evident to the researcher that this portrayal of physical transformation was an effort by writers and producers to emphasize to young viewers the many real changes a pregnant girl’s body will experience. However, it also sends a message that this physical transformation is associated with maturity and sex appeal, which may confuse viewers about whether physical transformation is a positive or negative aspect of teen pregnancy.

Visual cues that conveyed physical transformation were that she wore more makeup, gained weight, and appeared “sexy” to some, “bigger” to others, and “fat” to herself. Although Amy complained to her two best girlfriends that she was “getting fat” in Episode 3, the rest of her female and male peers began to express that she appeared sexy and grown up. Before Amy revealed that she was pregnant, her mother told her she was developing and “getting curves.” This resulted in a shopping trip where Amy’s mother bought her new, more mature and sexy clothes. As Amy’s pregnancy progressed she seemed to wear more makeup, appeared prettier, and started getting more attention from boys and the rest of her classmates, which caused newly

acquired popularity. Even when Amy experienced emotional difficulty, stress, bouts of crying, and having morning sickness, her character still appeared physically attractive. Amy's increasing attractiveness and physical desirability to the boys in her school communicates the idea that pregnancy makes one more mature, womanly, and sexy.

Although Amy was portrayed as unhappy with her body's physical transformation, her sister Ashley viewed these changes positively. The following scene not only emphasized the physical changes the main character was encountering, but the beginnings of psychological transformations. In this scene, Amy listened to music and tried on clothes in the mirror while she attempted to hide her pregnant stomach with certain articles of clothing. Although she looked attractive, her visual cues (e.g., unhappy expression and looking at herself from every angle in the mirror) portrayed her as anxious and on edge when Ashley, her sister, walked in the room. The physical changes Amy was experiencing (e.g., larger breasts, bigger stomach, and an overall sexier appearance) were presented as both negative (e.g., Amy did not appear happy with her changing body) and positive (e.g., Ashley appeared happy that her sister's look was becoming sexier) aspects of pregnancy through visual, vocal, and verbal cues. This scene was also one of the first that portrayed Amy as being more confident in her relationship with Ashley, rather than being quiet and intimidated by her younger sister as she was before she was pregnant.

Ashley: "When did you get boobs?" (lightheartedly)

Amy: "I gained a little bit of weight, okay?" (defensively)

Ashley: "It's just that you look kind of..." (timidly)

Amy: "What?" (annoyed)

Ashley: "You look kind of... sexy." (smiling, impressed by her older sister)

After Ashley happily told Amy she looked "sexy," Amy told her to get out of her bedroom. She was clearly not happy, but it was the first time in Season 1 that Ashley was not in command of

the relationship. Amy appeared to finally have more power and was not concerned with being pleasant (Season 1, Episode 3).

4 (b) Psychological Changes

The second subcategory of “Teen Pregnancy as Transformative” is Psychological Changes. As was mentioned briefly, Amy experienced psychological changes as well as physical changes. She was portrayed as having learned how to make more serious decisions, determine her priorities, and become more confident and outspoken as a result of being pregnant. These psychological changes were presented through verbal and vocal cues.

As the first season started, Amy was a nervous, shy girl who was overwhelmed and unable to cope with possibly being pregnant. Although she discovered she was pregnant, she appeared young, weak, and in denial. With each episode, however, Amy became stronger emotionally and mentally. She started standing up for herself in conversations with her friends and with Ricky (the beginning of her transformation to a more assertive individual was in Episodes 2 and 3). Although she was portrayed as quiet and sweet initially, as her pregnancy progressed, she became a woman who stood up for herself and started having more confidence. She became more decisive and outspoken, but also more angry at herself and others, as she gained acceptance of her situation.

Amy’s new confidence, decisiveness, and anger were verbally apparent in a scene where Amy tells Ashley, “I’m pregnant, an adult, and I can make my own decisions.” The psychological changes Amy experienced throughout Seasons 1 and 2 demonstrated both positive and negative attributes that Amy acquired, and communicated to viewers that teen pregnancy causes one to think as a mature adult, but also as an angry and impatient individual. For instance,

in a scene where Ricky thought he could still intimidate Amy, he was surprised that she had become more outspoken:

Amy: "I don't know what my father said to you, but I am perfectly capable of speaking for myself!"

Ricky: "Since when?"

Amy: "Since I got pregnant! That's when! Since I discovered that I am going to have to take charge of another human being's life! You know, I might as well start with my own."

4 (c) Social Changes

The third subcategory of "Teen Pregnancy as Transformative" is Social Changes. In addition to physical and psychological changes, Amy's social group and social status also went through changes in the first two seasons. The pregnancy resulted initially in her peers and others in town talking about her behind her back. She became well known, but only because she was "the pregnant girl."

However, as Seasons 1 and 2 progressed, many of the characters who originally knew Amy as "the pregnant girl" became her friends and social support. Talk among her acquaintances and friends became more focused on her relationships with Ricky and Ben and less about the idea that she was having a baby.

The show's writers and producers seemed to incorporate a realistic depiction of Amy's ruined reputation and her experience dealing with hurtful gossip. However, her infamy turns to popularity, suggesting that pregnant teen girls may become more socially desirable and more interesting. Amy's social transformation seems to send a mixed message of negative and positive outcomes to the show's viewers. These social changes are explained in the following sections: Gossip and Positive Popularity.

Gossip

As Amy's school and the rest of the town started hearing rumors about Amy being pregnant, she was portrayed as having to cope with her reputation changing completely. The transformation from an obscure high school student to the frequent topic of conversation was a fast one in the early episodes, denoted by visual cues (e.g., people staring at Amy, friends noticeably whispering to each other about her in the hallway, girls giving her dirty looks) and verbal cues (e.g., malicious gossip about Amy having sex with Ricky, becoming pregnant, abortion rumors).

As early as Episode 2, people close to Amy were already discussing the inappropriateness of Amy being pregnant, and these conversations put her in a negative light. The former "good girl" who no one knew or even discussed, became the focus of the high school "rumor mill" as Amy's social status transformed. For instance, Lauren's brother Jason said, "You know mom and dad aren't going to let you hang out with her anymore" (Season 1, Episode 2). In addition, two unnamed girls in the school hallway gave Amy dirty looks and made negative comments when she pulled Lauren and Madison away from their conversation:

"I heard she and Ricky had sex."

"I know, the whole school knows." (Season 1, Episode 4)

The school gossip was also presented as having changed Amy's relationship with her two best friends. Although the two girls did not intend to start the rumor about Amy being pregnant, an argument about the rumor source caused a rift in the relationship with Amy. Lauren and Madison were not portrayed as close to Amy as they once were. Also, Amy's social circle began to visually transform. For instance, the characters Lauren and Madison had less screen time with

Amy, while the popular crowd and Ben became major characters in each episode. On the other hand, Amy and Ashley forged a stronger bond through the seasons.

One example of Ashley and Amy's growing friendship was in Season 1, Episode 6, when Madison and Lauren called Ashley to try and contact Amy. The two asked Ashley to take a message and her angry response was: "I know, how about you're very sorry you told everyone in the world that your best friend Amy's pregnant," as she hung up her cell phone forcefully. Through vocal and visual cues Ashley is portrayed as having become Amy's best friend and the person she can trust. Amy and Anne were also portrayed as having forged a stronger bond in the episodes, as they began to speak more frequently and candidly as a team and as friends.

Once the pregnancy rumors were spread throughout the school and much of the student population knew that the "pregnant girl" was the shy, band girl, Amy Juergens, the gossip continued to evolve. Amy's peers started taking further interest and even started spreading rumors about what she had decided to do with the baby. In one such scene, Ricky and Adrian went their separate ways in the school hallway after discussing Amy. Ricky then talked with Grace, who at this point was not friends with Amy, but wanted to know the latest gossip:

Grace: "Amy Juergens really is having a baby?"

Ricky: "She's taking care of it."

Grace: "She's having an abortion? Oh no." (Season 1, Episode 6)

Amy's first social transformations from unknown band student to the shunned "pregnant girl," and from detached family member to close friend of her mom and sister, were portrayed as difficult changes in Amy's life. Her social status was portrayed as having a major shift, as Amy learned to rely on family more than friends and acquaintances who were spreading gossip about

her. This initial social transformation communicated to viewers that life changes when one becomes pregnant, as one learns the importance of family.

Positive Popularity

As the gossip continued from Episode 2 into future episodes, it was less malicious and became more about interest in Amy's love life as one of the most popular girls in school. As Amy transformed from a shy, stick-thin girl to a curvy woman, her social life appeared to become more active and fun. Her social circle expanded, she ran with a "cooler" crowd, gained more friends, and improved her love life.

As a result of finding out that Amy was pregnant in Episode 5, her boyfriend, Ben, decided he wanted to marry her and take care of the baby. Ben's wealthy father agreed without hesitation, to help him take care of Amy and the baby. The addition of Ben (Amy's first boyfriend) to her life was the beginning of a major positive social transformation. In addition to Ben's devotion, Ricky was also presented as having taken an interest in Amy, through taunting at first, which led to friendship. Though their sexual encounter happened at a time when they hardly knew each other and Ricky had no feelings for her, the popular "bad boy" was portrayed as starting to care about Amy and their unborn child in later episodes. By the end of Season 2, Ben and Ricky had established an unspoken, but obvious struggle for Amy's love and attention.

The other students were also becoming increasingly curious about Amy Juergens, and not just because she was pregnant. All the "cool kids" seemed to spend their time in the school hallway talking about her:

Adrian: "Ricky's hanging out with Amy tonight."

Jack: "What's Ricky doing hanging out with Amy?"

(across the hallway during the same scene, Ben to Henry)

Ben: “Amy wouldn’t see Ricky without telling me, right?”

Grace: (appears out of nowhere, responding to Ben) “Yeah, he’s going over there tonight. Ricky told me. Amy didn’t tell you?”

As these conversations continued, Amy appeared in the hallway looking gorgeous, confident, and mature. The verbal cues of students discussing Amy’s social life as well as the visual cue of heads turning in response to her approach (because she was popular rather than because she was pregnant) embody her social transformation of becoming popular and having gained a new, more positive reputation. Amy’s social transformation into popularity sends the message to viewers that becoming pregnant is a potential way to increase one’s social status and become more popular.

(5) Teen Pregnancy as Serious

The fifth major category is “Teen Pregnancy as Serious.” In this study, the term “serious” is defined as requiring thought, contemplation, and work. Although humor, romance, and popularity accompanied Amy’s pregnancy in Seasons 1 and 2, it was also portrayed as something that was serious, needed medical attention, required responsibility, was a major challenge, and had serious consequences (both good and bad). “Teen Pregnancy as Serious” is the only category in *The Secret Life* that the researcher thinks includes the most realistic portrayals of teen pregnancy. While the other categories glamorized aspects of teen pregnancy (e.g., romance, support, and transformations), this category involves aspects of the show clearly intended to inform the teen female audience that they are ill equipped to handle pregnancy. This category emphasizes that sex and pregnancy should involve doctors’ visits and becoming knowledgeable individuals, and that sex and pregnancy involve health consequences.

In the “Teen Pregnancy as Serious” category, Amy and her peers were portrayed as having to cope with understanding the complexities of teen pregnancy, often expressing how foreign the concept of pregnancy was to them. The medical side of teen pregnancy was also frequently discussed (e.g., the need to see a doctor and take prenatal vitamins) as well as presented through visual cues (e.g., Amy was shown as being in a doctor’s office on multiple occasions), as were the positive and negative consequences of teen pregnancy in general (e.g., gaining a bad reputation, having to make difficult decisions, being popular, having a support system). Three subcategories in the “Teen Pregnancy as Serious” category emerged from the data including: Lack of Knowledge, Health Issues, and Consequential.

5 (a) Lack of Knowledge/Foreign

The first subcategory of “Teen Pregnancy as Serious” is Lack of Knowledge/ Foreign. In the first two seasons of *The Secret Life*, the idea of pregnancy was portrayed as a serious situation, yet foreign to Amy and those around her. Amy appeared naïve, young, and ill equipped to handle the situation. She did mature and become more decisive throughout the episodes, but knowledge about prenatal care and taking care of her baby once she gave birth were presented as foreign topics to Amy and some of her social circle.

In a conversation with Ashley from Season 1, Episode 4, Amy cried while she said, “I don’t think I can have this baby. I don’t know what to do.” Also, when she told her two best friends that she was pregnant in Episode 1, she said, “I can’t believe I’m old enough to use the word pregnant in a sentence, much less be pregnant.” Amy was also portrayed as being confused and lacking the appropriate knowledge through visual, vocal, and verbal cues (e.g., she cried multiple times due to confusion and lack of knowledge about pregnancy). In a conversation with

Madison and Lauren, she confessed that she wanted to have an abortion, but did not know the first thing about terminating her pregnancy. The seriousness of teen pregnancy was communicated through verbal and visual cues that emphasized that young girls do not know enough about the reality of being pregnant and the options a teen girl has:

Amy: "Help me?" (with tears and a shaking voice)

Lauren: "I can't help you, I don't know anything about it."

Amy: "Are you guys going to help me or not?... I don't know where to go!"

Even in Season 2, Amy still has naïve notions about raising a child. For example, in a serious discussion with Anne, Amy and Ben were depicted as naïve when they expressed how foreign the idea of raising a child was to them (Episode 2, Season 2):

Anne: "I know you do, Ben. And so do I; and I love you for loving Amy. But you know, the funny thing about love is it's not just about feeling. It's about doing. It's about doing the right thing always for the person that you love. And that's what I'm doing right now, Amy. I'm coming here to try to make you realize the awesome responsibility of taking care of a baby and raising a child...Did you really think that getting married would solve anything?"

Amy: "Kind of, yeah. I thought that if I just lived here then somebody could watch the baby while I went to school. That would be better than day care, wouldn't it?"

Anne: "Someone like?"

Amy: "Housekeeper?"

Ben: "Yeah or we could get a nanny."

Anne: "And have your dad pay for that?"

Amy: "Ricky should help; he is the father."

Ben: "I don't know if he could or if he would. And I don't know if we want him to be involved."

Anne: "Oh, he's involved. He said that he wants to be involved and legally he is Amy, Ben."

Amy: "Mom, can't we keep him from being involved somehow?"

Anne: "No I don't think that we can. I mean he has said that he wants to be involved. He's made that pretty clear. We just don't know how yet."

Amy: "But if I was married to Ben..."

Anne: "It won't change anything. You're still going to have a baby; Ricky's baby. Look I'm on your side here, Amy. I'm on your side. I'm not being mean by trying to get you to face reality, but a baby is coming. And it's not just enough to have a

plan. You have to act on that plan. So what is your plan, Amy, Ben? Look I want to help you but I can't help you if you don't talk to me. And there are no easy answers. You either get a job, go to school, and get someone to help with child care, or you think seriously about adoption. But whatever choice you make it has to be what is right for your child, Amy, not just about what is easiest for you. You can't run away from this. You have to face the fact that you're halfway through your pregnancy and the baby's going to be here before you know it.”

Amy: “Mom...I think the baby agrees with you. I think it might be coming right now. Mom it's moving. It's really moving. I thought I felt it before but I wasn't sure, now I'm sure.”

Ben: “Do you want me to call an ambulance?”

Anne: [nods her head] “It's okay. It's supposed to move. The baby's not coming right now...but it is coming.”

Amy: “Mom, I don't think I can do this.”

Anne: “You can do this, Amy. You can. You have to.”

5 (b) Health Issues

The second subcategory of “Teen Pregnancy as Serious” is Health Issues. The seriousness of teen pregnancy was also portrayed through dialogue relating to medical information about pregnancy and the importance of using condoms. *The Secret Life* attempted to portray this medical information realistically in the series, teaching viewers that if you get pregnant, you must make doctors' appointments, get an OBGYN, become informed (e.g., read books about teen pregnancy, talk to your parents and doctor about it), and take care of your body.

These medical lessons were presented through visual cues (e.g. Ricky sitting on the couch at his foster parents' house reading a book titled “Giving Birth”) as well as verbal cues (e.g. when the characters offered medical advice).

For example, in Episode 3, Jason, an aspiring doctor, told his sister that she needed to advise Amy to see a doctor. He stated, “Amy's body will change, and she should eat right and take prenatal vitamins to protect the fetus.” Amy's pediatrician, Dr. Hightower, also provided medical information in Episode 2, as she called Amy and gave her suggestions to help with

morning sickness. She asked how Amy was feeling and encouraged her to tell her mom about the pregnancy.

Immediately after Amy told her mother, Anne demonstrated concern for making sure Amy and the baby were healthy (e.g. she stated, “I’m going to call my OBGYN as soon as the office opens”). The words used clearly presented to viewers that it was urgent to see an OBGYN once a girl/woman becomes pregnant. The verbal cues in Jason and Dr. Hightower’s dialogue also communicated to viewers that if one becomes pregnant, it is important to take prenatal vitamins and talk to your parents. This presentation of health-related information depicts teen pregnancy as a serious situation that requires medical attention.

5 (c) Consequential

The third subcategory of “Teen Pregnancy as Serious” is Consequential. As Seasons 1 and 2 progressed, Amy was portrayed as having experienced numerous negative short-term consequences and positive long-term consequences as a result of the serious situation of pregnancy. She had to cope with the negative consequences: a bad reputation, being socially isolated, and making adult decisions about what to do regarding the pregnancy. She also experienced implied long-term positive consequences: having a more active social life, forging a strong bond with her mom and sister, and having a “blessing” in her life. The consequences that the main character experienced included those that involved her individually as well as her entire family.

In one scene Amy was focused on the future negative consequences she would endure. These consequences were portrayed verbally (through the words she used to talk about her

situation) as well as through vocal cues (as she spoke in an angry, frustrated tone of voice). One such depiction is provided below:

Amy: “My parents aren’t going to raise the baby. How are we going to take care of a baby? We don’t have jobs or insurance. We’re teenagers. We’re teenagers. We’re in high school. I’d like to graduate high school and go to college, and eventually marry Ben. I just want to have a normal life.” (frustrated)

Ricky: “Amy, you’re not going to have a normal life. And the answer’s “no.” I’m not going along with it.” (walks away, frustrated)

In some scenes, Amy was portrayed as having not yet fully grasped some of the consequences she would encounter, such as being “inconvenienced,” as evident in the conversation below. In the episode, the seriousness of these consequences was communicated to viewers through visual and verbal cues. For instance, in Episode 13, Amy’s pregnancy was presented as having some consequences when she spoke with Anne about responsibility:

Anne: “But you can be a mother when it’s convenient?... I’m here to teach you about the responsibility of having a baby and raising a child.” (gently, with tears)

Amy: “But mom, I don’t know anything about getting a job or having a child.”

The above example sends the message to viewers that pregnant girls have more responsibility than other teen girls (e.g., holding down a job, taking care of a child). The conversation also portrayed Anne as having new responsibilities ahead of her, in teaching Amy about taking care of the baby as well as helping with the baby herself. The verbal and visual cues (e.g., Anne crying) in this example also presented the idea that one consequence of teen pregnancy was the negative impact on the lives of loved ones.

In sum, the major teen pregnancy portrayals identified in this study were not expected by the researcher. That is, teen pregnancy was not presented in a one-sided fashion (i.e. as being mostly positive or mostly negative), but rather as a mix of complex issues and emotions. The

verbal, vocal, and visual cues in categories such as “Teen Pregnancy as Dramatic,” “Teen Pregnancy as Identity,” and “Teen Pregnancy as Transformative” included both positive and negative aspects of Amy’s pregnancy within each category, as well as portrayals that were realistic as well as unrealistic. Cues in the category “Teen Pregnancy as Manageable” appeared to be more positive as well as unrealistic, and cues in the category “Teen Pregnancy as Serious” appeared to be more negative and realistic.

The more realistic portrayals and dialogue of certain teen pregnancy aspects seemed an attempt to inform viewers of the struggles involved with teen pregnancy, while unrealistic presentations were for entertainment. Further, the positive and negative cues in each of the major categories appear to be an attempt to provide an unbiased depiction of teen pregnancy, although unfavorable components of the main character’s pregnancy were presented as temporary, while favorable components were permanent. There does not seem to be a true balance of favorable and unfavorable pregnancy aspects, but rather an overall message sent to viewers that teen pregnancy is complicated, but has positive outcomes.

The following Discussion chapter will outline the researcher’s overall findings, overarching themes, limitations, and suggestions for future research.

CHAPTER FIVE: DISCUSSION

The portrayal of teen pregnancy in television is nothing new but it has become more common in recent years. The current study aimed to answer the research question: “How is teen pregnancy portrayed in the TV series *The Secret Life*?” A qualitative content analysis was conducted of *The Secret Life* focusing on the main character, Amy Juergens’, teen pregnancy. The findings revealed five major categories of how teen pregnancy was portrayed in the show, including: (1) Teen Pregnancy as Dramatic, (2) Teen Pregnancy as Identity, (3) Teen Pregnancy as Manageable, (4) Teen Pregnancy as Transformative, and (5) Teen Pregnancy as Serious. This chapter will discuss these findings in relation to previous relevant empirical studies and the literature on social cognitive theory and framing theory, both of which provided a guiding framework for the present investigation.

Overall, the study findings show that the world presented in *The Secret Life* is one in which the main character’s pregnancy is a complicated, difficult experience, yet is also rewarding. The answer to the research question: “How is teen pregnancy portrayed in the TV series *The Secret Life*?” is that it is portrayed as a situation that is manageable and has a positive outcome for everyone involved. Further, the teen pregnancy portrayals within the series are contradictory (e.g. favorable and unfavorable) and meant for entertainment. However, there appears to be an attempt to present some aspects of teen pregnancy realistically.

Overarching Themes

Contradictions

While the pregnancy situation in this television program was depicted as difficult, there was a continuous positive side presented, creating contradictory messages throughout the episodes (Please see Appendix C: Portrayed Contradictions Chart). Some previous investigations of unwed pregnancy and teen health issues in the media also found contradictory messages (Hust et al., 2008; Van den Bulck, 2008). In Hust et al.'s (2008) quantitative and qualitative study of sexual health content on television, magazines, music, and movies popular among teens, the researchers found that a pregnant teen described in a popular song's lyrics was presented as becoming an adult and being responsible for her baby, yet was also described as being immature. In general, Hust et al. (2008) found that teen magazines, television, movies, and music lyrics included contradictory health messages about pregnant teens being responsible yet naïve, enduring difficulty but having a positive outcome, and overall sexual health as being serious yet humorous.

The current investigation found that there were conflicting favorable and unfavorable portrayals of pregnancy in the program being studied. Although the difficulties appeared to be more prominent within the episodes than were favorable depictions, every dilemma had a positive resolution at the end of an episode or season. Hust et al. (2008) also found conflicting positive and negative outcomes to be common in television portrayals of unwed pregnant females (e.g. the father eventually wants to take responsibility and be part of the family unit).

Further, Hust et al. (2008) concluded that fictional TV shows and movies portrayed unwed pregnancy more favorably (e.g. the father taking responsibility) than nonfictional

magazine feature articles (e.g. young mothers experiencing obstacles, pain, and the father leaving them). For example, although the pregnant character in *The Secret Life* struggled to determine what she should do about her pregnancy, in the end she kept the baby and had the support and help of her friends and family. This resolution was similar to that of the characters of different fictional media that Hust et al. (2008) examined. For instance, in the movie *Save the Last Dance* and the TV show *Friends*, both unwed pregnant mothers encountered struggles, but experienced the positive outcome of keeping their babies and the assumed positive result of a responsible father eventually being a part of the family (2008).

Other contradictions identified in the present study included the main character being labeled both a “slut” and a “nice girl,” her parents telling her she was responsible for supporting the baby yet continually taking care of anything she needed, and people gossiping about her just weeks before she became part of the popular crowd. The contradiction of these portrayals communicates to teen female viewers that although pregnancy is difficult there is a favorable outcome for nearly every ordeal. Amy is even described by Hampton as the show’s “pregnant heroine,” which could be considered an oxymoron (YouTube interview, uploaded 2008).

Parental involvement was also present across all twenty-three episodes. The main character’s parents took control during the pregnancy, continually providing support, taking care of the young girl, finding her a job, and defending her to people who had heard the pregnancy rumors. In this way, the expectant teen mother was presented as a child, contrary to other depictions of her as a mature adult.

It is suggested at the end of Season 2 when the main character gives birth that she will be able to continue school, maintain her friendships, continue dating her boyfriend, and have the

support of the father's baby. Furthermore, she and her friends never talk about homework, are never shown in class, and are never visually portrayed doing homework, yet much of the series is filmed in the high school hallway. This contradiction gives viewers the impression that being a pregnant teenager does not affect schoolwork, although the main character aspires to go to Julliard and is considered a good student.

Realism versus Entertainment

Another overarching theme in the present study is realism versus entertainment. According to Hust et al.'s (2008) investigation of health messages in adolescent-targeted media, fictitious presentation rather than realistic information regarding teen pregnancy and other teen health issues is one key characteristic of television shows that address teen health. In *The Secret Life*, each time the main character is faced with a potentially difficult issue (e.g., abortion, lack of money, giving birth), she is helped immediately by family or friends, happy music plays, and the problem is resolved.

The baby's father in some fictional teen pregnancy TV programs becomes part of the pregnant character's life. He is portrayed as having good intentions and a desire to be responsible. Results of the Hust et al. (2008) study showed that favorable outcomes of unwed pregnancy situations are common in fictional movies and television shows. Their study findings confirmed that despite life complications resulting from unplanned pregnancy, the baby's father will eventually want to be part of the family and take responsibility. The current researcher believes these portrayals perpetuate the unrealistic idea that teen pregnancy has a positive outcome.

Another significant content characteristic of television shows centered on teen health messages and/or unwed pregnancy is the absence of negative consequences altogether or of long-term negative consequences (Hust et al., 2008; Stern, 2005a; Van den Bulck, 2008). For example, in a quantitative content analysis of the portrayal of drinking and drug use in teen films, Stern (2005) found that negative short-term consequences of irresponsible teen behavior (e.g., bad breath from smoking) were present occasionally in teen movies, however, few characters suffered long-term consequences (e.g. regret of substance abuse). Similarly, the main character in the current study encountered short-term negative consequences related to her pregnancy, while permanent negative consequences were absent.

For entertainment, television shows aimed at teen audiences tend to minimize the depiction of negative outcomes resulting from teen health problems. Instead, they present favorable long-term outcomes to appeal to viewers. For example, the depiction that being a pregnant teen can increase popularity and make one's love life more exciting is intended for entertainment rather than information. Parallel to the present study, Van den Bulck (2008) found that fictional television portrayals of drinking behavior in the teen drama *The O.C.* were meant to engage teen audiences rather than communicate informative messages to viewers. The positive consequence of teen alcohol consumption in the Van den Bulck study was romantic success, while a minor negative consequence was embarrassment as a result of drunken behavior.

Consequences that seemed lacking from *The Secret Life* series that would likely have been major concerns in reality included timing, money, and education. There were a few occasions when the main character and her parents mentioned that she was too young to have a baby, but this was never discussed at length. Financial issues were presented in one or two

episodes, but the family never showed real concern that they would not have enough money to help with the baby. The pregnant character's continuing education was another topic that was only mentioned in one or two episodes. The character briefly expressed a desire to go to Julliard for college in a short discussion with her high school guidance counselor, but no one said whether she would be able or unable to attend college in Seasons 1 and 2. It is assumed that the young girl would finish high school, but college was never discussed.

The current study's findings indicate that the series did include some realistic depictions of the teen pregnancy situation, including short-term negative consequences (e.g. ruined reputation, making difficult decisions about keeping or getting rid of the baby). Medical requirements and health-related information that would be useful information to teens was presented through dialogue, although this information was only briefly presented in one or two scenes per episode. This realistic information could assist in teaching viewers about some of the health-related realities of teen pregnancy.

However, the manner in which this realistic information was presented did not appear natural in the context (e.g., awkward and lengthy conversations, adult vocabulary, and stilted delivery), possibly limiting viewers' consideration of the potentially useful information.

Theoretical Connections

Regarding the literature on social cognitive theory and framing theory, both theoretical frameworks used in the present study contribute to the existing literature involving teen health issues depicted on television. The current study investigated the framing of teen pregnancy on television and what these portrayals are likely communicating to viewers, which previous studies have not done (to the researcher's knowledge). Past research has examined other types of teen

health issues (e.g. sex, alcohol consumption, drug use) using social cognitive theory and/or framing theory as a theoretical framework, but there have been no content analyses specifically of teen pregnancy portrayals in any form of entertainment media. Unlike past research, the present study examined teen pregnancy in a particular television drama aimed at teen girls, examined a particular teen health issue, and examined a particular media form addressing this issue (e.g. rather than across various TV shows or media).

The findings of the study reported here help introduce to the communication field (contributing specifically to social cognitive theory and framing theory literature) how teen pregnancy is being communicated to viewers through various portrayals that include realistic, unrealistic, favorable, and unfavorable depictions across five identified categories: teen pregnancy as dramatic, identity, manageable, transformative, and serious. Future qualitative and quantitative studies can use this five-category framework to examine the presentation of teen pregnancy in other television programs and forms of media (e.g. movies and television/magazine entertainment news coverage).

Framing Theory and Teen Pregnancy Portrayals

Framing theory explains the way depictions of issues are used to define a problem, identify the causes of a problem, and provide solutions in different media. Framing theory also addresses the way these depictions may influence audiences to pay attention to certain aspects of a problem, disregarding other parts of the problem.

As was mentioned in the Literature Review chapter, Entman (1993) asserts that frames help audiences, or television viewers, make moral judgments and also suggest ways of thinking about certain issues. Applied to the present study, the way teen pregnancy was framed in *The*

Secret Life seemed to encourage audience members to view teen pregnancy in five ways: (1) as Dramatic, (2) as Identity, (3) as Manageable, (4) as Transformative, and (5) as Serious. Overall, these categories included portrayals that are realistic and unrealistic, as well as contradictory.

In creating TV programs, writers and producers use framing devices which may make connections between the portrayed “reality” on the show and the audience’s memory. Examples of framing devices used in *The Secret Life* include visuals (e.g., watching Amy cry or happily kiss her boyfriend), word choice (e.g., labels describing Amy as a “nice girl” or “slut”), and phrases (e.g., “slut school” or “girls like that” in reference to Amy as a bad influence) (Gamson & Modigliani, 1989; Van den Bulck, 2008). These devices may encourage teen viewers to perceive teen pregnancy as negative or positive through the way it has been framed in certain scenes.

The analysis of teen pregnancy depictions in *The Secret Life* was informed by Entman’s (1993) four functions of framing: (1) to promote the definition of an issue (e.g., teen pregnancy is a burden and a blessing), (2) to promote a causal interpretation (e.g., the result of uninformed teen sex), (3) to promote a moral evaluation (e.g., teen pregnancy is good or bad, acceptable or not acceptable), and (4) to promote a treatment recommendation for that particular issue (e.g., teens should stop having sex, have safe sex, give up the baby if they become pregnant, or rely on their social circles in order to keep the baby). Each of these functions will be discussed further in the following paragraphs.

(1) *To promote the definition of an issue*, or define the problem being presented, is the first step in how framing presents the issue of teen pregnancy. As the Teen Birth Rate (TBR) continually increases in the U.S., this issue is becoming the focus of many popular television

shows aimed at teens, framed in different ways that give viewers a look into the issue of teen pregnancy. Teen pregnancy is defined through frames in *The Secret Life* as a problem that occurs as a result of unprotected sex, and as a burden on pregnant teens, family, and friends.

Conversely, it is also defined as a blessing that brings friends and family together.

(2) *To promote a causal interpretation*, or identify the cause of an issue, relates to the way the main character is presented as having become pregnant. Framing devices such as words and phrases (i.e. the main character stating, “I didn’t even know it was sex”) promotes the idea that pregnancy is caused by teens not being informed about sex.

(3) *To promote a moral evaluation*, or determine whether an issue is morally acceptable or unacceptable, is present in the way the characters discuss their differing, unique opinions on the show. To the researcher, it seemed the writers and producers made an effort to frame teen pregnancy in a way that does not promote a distinct moral evaluation. The portrayal of numerous stereotypical teen characters with various views and opinions of the main character’s pregnancy (e.g. Christians, the bad girl, the therapist’s daughter, family, school guidance counselor) kept the moral side of teen pregnancy open to audience interpretation, and an interpretation that will likely vary based on which characters viewers relate to the most (Bandura, 2002; Entman, 1993).

(4) *To promote a treatment recommendation*, or suggest solutions for the problem, is seen through frames in *The Secret Life* suggesting that one could get an abortion, give up the baby for adoption, or keep the baby. Of these solutions, the treatment recommendations for keeping the baby were relying on friends and family for help and getting a job. Preventative recommendations in the TV drama promoted safe sex and abstinence to keep other characters from getting pregnant.

The present study's findings show that the teen pregnancy issue is viewed through frames that promote this issue as a problem and a celebration with solutions and positive outcomes. As a common function of framing, there are facets of teen pregnancy that are presented as more salient in the show, while other characteristics that accompany teen pregnancy in reality are excluded from the frames. The framing of a pregnant teen in this series helps audiences shape their reality and views of pregnancy to be in line with the picture of reality presented in the program (McQuail, 2005).

As frames are difficult to resist and other teen pregnancy-centered TV shows may reinforce some of the frames in this study, it may be appropriate and necessary that audiences engage in learning from educational media about teen pregnancy and from adults and educators who do not depict pregnancy for entertainment, but rather address all components of the teen pregnancy issue for informative purposes (Entman, 1993).

Social Cognitive Theory and Teen Pregnancy Portrayals

According to Bandura's (2002) social cognitive theory, the portrayals of teen pregnancy through the five teen pregnancy portrayal categories identified in the present study send certain messages to viewers who evaluate and reflect on these messages through cognitive processes.

Social cognitive theory holds that humans have the capability of processing, retaining, and using coded information, which gives them (1) symbolizing, (2) self-regulatory, (3) self-reflective, and (4) vicarious capabilities (Bandura, 2002), as was outlined in the Literature Review chapter. It is with these four capabilities that individuals are able to understand and learn from their environment. Through the portrayal of the main character's pregnancy in *The Secret Life*, as well as other teen pregnancy-related media programming they may encounter, teen

female viewers are exposed to presentations that likely lead them to interpret teen pregnancy in certain ways and to learn specific lessons about teen pregnancy. The researcher will use these capabilities as a framework for explaining how viewers vicariously learn about this issue through the main character's own experience in *The Secret Life*.

(1) *Symbolizing capability*, or the ability to observe symbolic models (e.g. TV characters) and organize the information gained from these models for future use (Bandura, 2002), is encouraged through the teen pregnancy portrayals in this series. In other words, viewers can function symbolically based on the knowledge they have gained from the characters they watch on television. Through the process of symbolization, viewers can transform the main character's pregnancy experience into a guide that can help them make future judgments about teen pregnancy situations they encounter in the media or real life. The current study presents a pregnancy experience that is complex, but has a positive long-term outcome.

Viewers will likely use the information they gain from this show and other teen pregnancy entertainment media to develop possible solutions to the teen pregnancy issue (e.g., it is not as bad as others make it out to be if friends and family help out pregnant teens), analyze the possible results of these solutions (e.g. social support would make the pregnancy manageable), and pick corresponding options for how teen pregnancy should be managed in real life (e.g., teen pregnancy should be more socially accepted and supported).

(2) *Self-regulation* is the ability to govern one's beliefs and actions based on expected self-satisfaction (Bandura, 2002). The audience will likely observe Amy's pregnancy and determine, over time, whether teen pregnancy would result in satisfaction or dissatisfaction in real life, and/or a positive or negative reaction from others. In the program, the main character

experiences numerous forms of dissatisfaction (e.g. gaining weight, making adult decisions, disapproval of people in town), but the pregnancy results in satisfaction (e.g. good friends, supportive family, baby that she loves).

Based on how viewers interpret the positive and negative depictions modeled in the show, and how these depictions coexist with the beliefs these individuals already have, they will determine if they believe teen pregnancy is appropriate or inappropriate. Viewers will also determine if being a pregnant teen would live up to appropriate social and personal standards.

According to this self-regulation capability, viewers may interpret the depiction of teen pregnancy modeled in *The Secret Life* as one that involves an average girl, the support of the community, and the finances to take care of a baby. If the viewer holds previous beliefs similar to these (e.g. that teen pregnancy could happen to any teen girl, would result in support, and would not cause a financial strain), this show may encourage the viewer to believe teen pregnancy is acceptable in regard to social and personal standards.

(3) *Self-reflection* is the ability to evaluate oneself and the competence of one's ideas and behaviors (Bandura, 2002). To verify ideas through self-reflection, viewers develop ideas, behave according to these ideas, and predict what will happen as a result of these ideas. Through verifying their thoughts with those ideas presented in the show, viewers may develop inaccurate thoughts parallel to those presented in the show.

Based on the depictions of Amy's pregnancy, viewers will likely generate ideas and act on these ideas of teen pregnancy, depending on how accurate they believe their previous thoughts about teen pregnancy are and how accurate they believe the teen pregnancy portrayals in the television show are. More developed cognitive functioning would help viewers determine

accurate from inaccurate thinking and interpretations of teen pregnancy. However, teens are still in the process of developing critical thinking skills (Bandura, 2002). Media versions of “reality,” like the main character’s pregnancy, can distort teen girls’ thinking and cause misconceptions.

(4) *Vicarious capability*: An individual’s real environment plays a large part in learning, however, individuals also learn through vicarious means such as through television viewing (Bandura, 2002). It is likely that viewers of *The Secret Life* will unintentionally socially construct parts of their reality based on what they see in the television show, which undoubtedly includes some incorrect information.

The teen pregnancy portrayals in this program include suggestions of how individuals should think and act regarding teen pregnancy. The only previous study that examined what viewers’ learned as a result of watching teen pregnancy depictions on television found that the lessons learned resulted in uncertain opinions and values regarding the issue (Somers & Surmann, 2005). This is in contrast to the certainty teen girls had about their opinions when learning about teen pregnancy from a parent (Somers & Surmann, 2005).

Stemming from their abovementioned capabilities, viewers of this television drama are able to interpret their real life and observational experiences regarding teen pregnancy, and subsequently socially constructed their reality to incorporate the information and portrayals of teen pregnancy into their own set of values and beliefs.

A previous study that investigated how relatable media models (e.g. characters and situations in a television show) can impact viewers (Steele, 1999) found that teens watched TV shows based on how well they could relate to the characters and the situations within the show. Teens may not be able to relate to being pregnant themselves, but they have likely been exposed

to the situation indirectly through peers at their own school. Furthermore, the pregnant teen in this series is presented as a typical girl and the kind of girl anyone could be friends with, making her a relatable media model. The supporting characters also represent stereotypical teen personality types one would find in a typical high school, of whom viewers may be able to relate.

The present study's findings show that media models have the potential to help viewers socially construct a mistaken reality about teen pregnancy, based on the symbolic models presented in this television program that may appear authentic at times. As a result of processing symbolic models, self-regulating, self-reflecting, and vicarious learning, viewers may model the symbolic ideas in this program. Viewer beliefs (e.g. it is normal, it is manageable) and behaviors (e.g. trying to get pregnant as a teenager, having unprotected sex) regarding teen pregnancy may be reinforced, or new behaviors resulting from the decision that teen pregnancy in television aligns with their own values and beliefs may cause further change in society (Bandura, 2002).

Currently teen pregnancy and unwed pregnancy seem to be presented in news media, entertainment television programs, and reality programs in a manner that generally promotes the situation as socially acceptable, celebratory, and free of social stigma, contrary to the way it had been presented in the past (Kingsbury, 2008). Through watching the behaviors of media characters, the standards of audiences are adjusting as models display the way in which teen pregnancy should be evaluated and regarded. The TV program of interest further validates teen pregnancy and seems to encourage viewers to adopt new ways of thinking and behaving (Bandura, 2002).

Practical Implications

It is important for television producers and writers to heighten their consideration of the messages that various teen pregnancy portrayals communicate to teen viewers. It is also important for young viewers and their parents to be aware and remember that although some of the teen pregnancy-related content on television can be informative, it is of a fictional nature, developed mainly for entertainment purposes.

Teen pregnancy on television is an important area of communication research to continue to examine since media have the ability to shape viewers' thoughts and behavior. The increasing popularity of teen pregnancy on TV and the appealing aspects of this kind of programming (e.g. the dramatic nature, excitement, and rewards that are portrayed as consequences of teen pregnancy) draw millions of viewers. Thus, this programming has the potential to create problems with teens and in society at large. If teen pregnancy portrayals remain unrealistic, this along with other factors could result in the continued rise of the TBR, causing more teen girls to drop out of high school due to pregnancy, require government support, and in turn, raise children who are more likely to drop out of high school. Indeed, individual problems resulting from teen pregnancy can create larger societal and economic problems.

The researcher did not measure the specific amounts of screen time allocated to the different themes. However, based on the favorable outcomes of most of the pregnancy-related difficulties in the show, the researcher determined that the pregnancy portrayal was positive and unrealistic overall. The series did occasionally communicate useful, realistic information to viewers, but due to its largely fictional and entertainment-driven purpose, caution is advised for

teen viewing of this show, even with parental supervision. *The Secret Life* does not appear to be an appropriate means to learn accurate information about teen pregnancy. Yet, from an entertainment standpoint, this series effectively depicts teen pregnancy in an engaging manner, as it continually garners an audience of millions of teen girls each week.

The researcher does not believe the series should be taken off the air. However, unless changes are made to the program (as recommended below), it seems that teenagers who view the show should be informed and reminded that it does not reflect reality, and/or should view with adults who can help them to think critically about the show's content. ABC Family promotes *The Secret Life* as a harmless program meant for family entertainment (ABC Family website), but the overall pleasant nature of the show seems to send an unrealistic message to viewers.

Recommended changes to the series stemming from the researcher's analysis include minimizing the unrealistic, glamorized content pertaining to teen pregnancy. This modification would make it a more appropriate form of media literacy for teenagers. However, it is improbable that these changes will be made given the entertainment (and financially-driven) purpose of the show. Since it is unlikely changes will be made to the series or that the show will conclude in the near future (Volume/Season 5 of the show began in March 2011), schools might consider implementing media literacy programs to help teens interpret inauthentic television depictions, and to help them discern fiction from reality in teen pregnancy portrayals on television. Parents and educators should engage in conversations with teenagers about sex and the reality of teen pregnancy to help counteract the false presentations of this situation portrayed in *The Secret Life* and similar media.

Further, it is recommended that the writers and producers of *The Secret Life* consider taking cues from the popular MTV reality show *16 and Pregnant* or the spin-off *Teen Mom* (since Amy is now portrayed as a teen mother in *The Secret Life*), which present viewers with portrayals of increasingly difficult obstacles teen girls encounter as their pregnancy progresses and as their motherhood responsibilities accumulate.

Pending results from further investigations of teen pregnancy depictions, researchers can determine what kind of changes, if any, should be made to teen pregnancy-focused movies and television shows. More realistic depictions may need to be included, while positive attributes of teen pregnancy may need to be downplayed. Media literacy programs focused on teen pregnancy in media may also need to be developed and implemented in middle schools and high schools to teach pre-teens and teenagers how to think critically about media depictions of pregnant teenage girls.

Limitations

While it is important to investigate how teen pregnancy is portrayed on television dramas aimed at teen girls, a limitation of this study is that the researcher can only draw assumptions about what viewers are potentially learning from *The Secret Life*; the researcher cannot determine how these portrayals impact the audience. It is important that future research involve focus groups and interviews with teen girls who regularly watch the show to determine how they interpret these portrayals (Berg, 2007).

Another limitation is that the researcher watched the episodes on DVD, which may not have accurately imitated the experience of watching the original airing of the episodes. The original airing of the episodes, as well as *Secret Life* marathons ABC Family has run in the past

(during which multiple episodes of the show have played for most of the day), may have included certain commercials related to teen sex, teen pregnancy, or teen girls who are interested in these topics. Including analysis of the content of commercials during the show may have been an interesting addition to the study. The DVDs also did not include the Public Service Announcement about teen pregnancy that Shalene Woodley (the actress who plays Amy Juergens) delivers at the end of each episode, which would have been another interesting aspect of the series to examine.

It would have also been useful to extend the analysis to the complete series (to date there are five volumes/seasons of *The Secret Life* available on DVD) in order to examine the portrayals of teen motherhood in the show. Having one researcher conduct the study is another acknowledged limitation. Including additional researchers to assist in the analysis process may have helped other significant insights to emerge from the data (Patton, 2002).

Directions for Future Research

Findings of the present investigation offer direction for future related studies. For example, the findings should be useful in developing an interview guide for focus groups or interviews pertaining to this show or other shows involving teen pregnancy. Future qualitative and/or quantitative research may also consist of content analyses of other teen pregnancy-focused dramas (although none have been developed yet), teen pregnancy-centered movies (e.g. *Juno* and *The Pregnancy Pact*), past or future media coverage of teen pregnancies (e.g. entertainment news shows and magazines that have covered the pregnancies of Jamie Lynn Spears and Bristol Palin), and reality shows devoted to the issue of teen pregnancy (e.g. *16 and Pregnant*). It would be interesting to conduct comparative analyses of adult pregnancy versus

teen pregnancy media portrayals as well as with other media-portrayed teen health issues to determine and understand more fully the unique characteristics of pregnancy for teens and corresponding coping strategies.

By documenting the frequency and time duration allocated to certain TV portrayals of teen pregnancy, quantitative content analyses would aid in understanding the extent to which teens are exposed to certain positive or negative portrayals and what they may be learning more specifically. Further, it would be worthwhile to focus on specific framing devices (e.g. stereotypes) and evaluate the personal characteristics of who is being portrayed as a pregnant teen in popular shows. Research has indicated that attractive, relatable media characters will likely influence learning more than unappealing media models (Stern, 2005). Based on the tenets of social cognitive theory (Bandura, 2002), viewers will likely pay more attention to a media model that they find relatable and attractive, (e.g., a character who is well-liked, wealthy, and physically appealing.)

Additionally, comparative analyses of past and current teen pregnancy portrayals on TV and in movies could be undertaken. For example, qualitative investigations could compare content analyses of *The Secret Life* with past teen pregnancy-centered television shows or movies to examine how portrayals of teen pregnancy have changed over time. A comparative analysis of *The Secret Life* with other current television shows and movies would also be interesting to determine how the different aspects of teen pregnancy compare across different television programs or other forms of media.

Another step in the research stream should involve examining the portrayal of teen motherhood in television and movies. The investigation of the portrayal of Amy as a teen mother

in later episodes of *The Secret Life* would be an appropriate follow-up research endeavor. It would also be worthwhile to investigate the portrayal of teen fathers in television and movies.

As teen pregnancy-focused television programs and movies continue to increase in popularity and general acceptance, longitudinal research should address the potential effects of this phenomenon on teens as they become adults. The findings may heighten consideration by media producers and other stakeholders in society to consider the impact of certain teen pregnancy content on television. The findings might also help researchers determine the best forms of media literacy and other programs aimed at teens in an effort to prevent or offset any negative side effects of viewing teen pregnancy portrayals.

APPENDIX A: CHARACTER CHART

<u>Name</u>	<u>Age</u>	<u>Role/ Relationship</u>	<u>Description</u>
Adrian	15	Ricky's "bed buddy," who becomes Amy's friend.	The school's promiscuous "bad girl" who secretly gets good grades.
Alice	15	Ben's best friend, Henry's girlfriend, Amy's acquaintance.	The attractive, but prude, intellectual/ know-it-all.
Amy	15	George and Amy's daughter, Ashley's sister, Ben's girlfriend, pregnant with Ricky's baby.	Unpopular, studious, French horn player who becomes pregnant and popular.
Anne	Mid 30s	Amy and Ashley's mom, George's wife.	Supportive, loving mother and wife.
Ashley	13	Amy's younger sister, Anne and George's daughter.	Wise-cracking, frequently angry, sarcastic loner.
Ben	15	Amy's boyfriend, Leo Boykewich's son.	Unpopular hopeless romantic who falls hard for Amy and becomes popular; heir to his father's fortune.
Bob Underwood	Mid to late 30s	Ricky's father.	Sexually abusive drug addict who is not in Ricky's life.

Donovan and Leon (minor characters)	Early to mid 30s	The gay couple that almost adopt Amy's baby, Leon is George's employee.	Friendly, caring, classy men.
George	Mid to late 30s	Amy and Ashley's father, Anne's husband.	Loving, wise-cracking father; cheating husband.
Grace	15	Ricky's love interest, Jack's on and off girlfriend, Adrian and Amy's eventual friend.	The beautiful, popular, straight-laced, Christian virgin; the object of the male students' desire.
Henry	15	Ben's best friend, Alice's boyfriend, Amy's acquaintance.	The easygoing, unpopular, doting boyfriend and sidekick to Ben.
(Dr.) Hightower	Late 30s	Amy and Ashley's pediatrician who Amy initially goes to about the pregnancy.	A relatively young, attractive, concerned doctor who gently tries to help Amy.
Jack	15	Grace's on and off boyfriend, Adrian's occasional "bed buddy," and Amy's eventual acquaintance.	The attractive, popular, Christian school jock who makes bad choices, but tries to do good for others.

Jason	17	Lauren's older brother, Madison's boyfriend, Amy's acquaintance.	The aspiring doctor who doles out medical/pregnancy advice to Amy and her friends.
John		Amy's unborn baby.	
(Dr.) Ken Fields	Mid to late 30s	Father of Lauren and Jason, Ricky's therapist.	A therapist and father who is caring yet stern and respected.
Lauren	15	Amy and Madison's best friend, Jason's sister, Dr. Ken Fields' daughter.	A less popular, but attractive and confident girl who is caring, but has strong/harsh opinions.
Leo Boykewich	Mid to late 30s	Ben's father, the "Sausage King."	A loving father who talks candidly with Ben, does not judge Amy, and is humble despite the wealth from his butcher shop.
Madison	15	Amy and Lauren's best friend, Jason's girlfriend.	The loving, helpful best friend.

Marc Molina	Late 20s to early 30s	The school guidance counselor.	Every student's "go to" guy for help with academic and personal problems.
Mimsy	Mid to late 60s	Amy and Ashley's grandmother, Anne's mother.	The loving, supportive woman who calls Amy's baby a "blessing."
Ricky	15	Adrian's "bed buddy," father of Amy's baby, and Dr. Ken Field's patient.	The school's "bad boy," who takes Amy's virginity, sleeps around, and has a troubled past.
(Rev.) Sam Stone	Early to mid 40s	Jack's stepfather.	The friendly, nonjudgmental man who counsels Amy's family when making pregnancy decisions.

*

* Appendix B: Character Chart Information is from The Internet Movie Database (www.IMDb.com) (2011)

APPENDIX B: CATEGORIES AND SUBCATEGORIES

1. Teen Pregnancy as Dramatic
 - a) Emotional
 - b) Complicated
 - c) Romantic
2. Teen Pregnancy as Identity
 - a) Negative Identity
 - b) Positive Identity
3. Teen Pregnancy as Manageable
 - a) Social Support
 - b) Financial Support
 - c) Humor
4. Teen Pregnancy as Transformative
 - a) Physical Changes
 - b) Psychological Changes
 - c) Social Changes
5. Teen Pregnancy as Serious
 - a) Lack of Knowledge/ Foreign
 - b) Health Issues
 - c) Consequential

APPENDIX C: PORTRAYED CONTRADICTIONS CHART

	<i>Negative Examples</i>	<i>Positive Examples</i>
Teen Pregnancy as Dramatic		
Amy's emotions	Unhappy with the pregnancy situation	Happy with the pregnancy situation
Supporting characters' emotions	Unhappy that they are involved in the teen pregnancy situation	Happy that they are involved in the teen pregnancy situation
Complicated	Amy wants to get rid of the baby	Amy wants to keep the baby
Romantic	NA	NA
Teen Pregnancy as Identity		
Identity regarding Amy	"Bad influence," "slut," "whore"	"Nice," "good"
Identity regarding the situation of teen pregnancy	"Mistake"	"Blessing"
Teen Pregnancy as Manageable		
Social support (family)	Parents say it's Amy's responsibility to care for baby and make decisions about the pregnancy	Parents take care of Amy and continually help her
Social support (friends)	Ricky claims the baby is not his and does not want to be involved	Ricky wants to be in Amy's life and the baby's life
Financial support	Parents say it's Amy's responsibility to get a job if	Anne gets a job for herself and for Amy to make extra

	she keeps the baby	money for the baby
Humor	The pregnancy situation is serious	The pregnancy situation is humorous

Teen Pregnancy as

Transformative

Physical changes during the pregnancy	“Pudgy,” “bigger,” “fat”	“Sexy,” “curvy”
Psychological changes during the pregnancy	Angry	Confident
Social changes during the pregnancy	Isolated, different from her peers	Gains more friends, fits in more

Teen Pregnancy as

Serious

Lack of Knowledge/ Foreign: Ways in which Amy is presented as an expectant mother	Irresponsible, scared to give birth, uninformed, immature, Amy is portrayed as a child (e.g. decisions, attitude)	Responsible, excited to give birth, informed, mature, Amy is portrayed as an adult (e.g. decisions, attitude)
Health Issues	NA	NA
Consequential	Life is ruined	Life is enhanced

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