# Introduction & Purpose
This paper examines the social network characteristics of teens with pregnancy status (teens who have been pregnant or whose partner has been pregnant) in the U.S. It uses the National Longitudinal Study of Adolescent Health (Add Health) data, which contains a nationally representative dataset, with individual and network structure variables, of adolescents in the U.S.

The U.S. has one of the highest rates of teenage pregnancy among the industrialized countries, and it is estimated that 70 per 1,000 teens were pregnant in 2006. Many studies have been conducted in the area of teenage pregnancy. These studies reveal that teen parents and their children have poorer health outcome and these teens have disadvantaged social position in their communities. For instance, teenage parents’ high school dropout rate is higher than non-parents’ rate, which directly affect their competitiveness in the labor market. However, there are fewer studies focusing on social isolation, which may start in their schools.

# Experimental Design
This is a secondary data analysis of a longitudinal data set.

# Results
The study found that teenage girls and boys with pregnancy status has significantly lower in-degree and out-degree friendship nomination compared to other teens. The teens with pregnancy status also have a lower centrality score compared to other teens. However, there was not a significant difference in density measure. Also, African-American teenage girls and boys are more likely to have pregnancy status.

# Conclusions
Teenage girls and boys with pregnancy status have smaller networks, and they are more isolated than other teens. Teens with pregnancy status are also more likely to be in the periphery of the networks, and more likely to marginalized among their peers.

Longitudinal analysis of teens in Add Health data provide an unique opportunity to understand the process of social marginalization. The paper discusses the role of stigma among teens’ health status.