

## Between Desire and Responsibility: Unplanned Pregnancies in Contemporary Romance Novels

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**Abstract:** The study investigates how unplanned pregnancy is presented and discussed in seven contemporary romance novels. Three main themes were identified: contraception, abortion, and the function of a pregnancy narrative. Within these subjects, we listed several examples with the support of interdisciplinary theories from gender studies, film theory, literary studies, medicine, sociology, and psychology. The topic is an outlier in the genre, but it still addresses many issues important to young women reading contemporary romance, e.g., the consequences of casual sex, contraception, abortion, responsibility, and motherhood. Now more than ever, the representation of young women experiencing unplanned pregnancies is a highly relevant theme of romance fiction. We observed that romance fiction responds to female fears and desires surrounding pregnancy and motherhood. Pregnancy in these stories is not simply a marketing trope for readers, but a vital part of the narrative, which induces the issues and complications that are presented in this study and relays particular aspects of women's lives.

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**Keywords:** abortion, contemporary romance, contraception, pregnancy, pregnancy narrative, unplanned pregnancy

## Introduction

A one-night stand followed by an unplanned pregnancy is a plot opening that offers portrayals of female sexuality, complications, and a forced relationship that may lay the ground for a love story. The examples that exist are even more interesting as fictional responses to the last decades' polarizing debates in the US over reproductive rights, unplanned pregnancy, and women's sexuality. The juxtaposition of ethical issues and a good romance story offers insights into contemporary ideals of women's sexuality, bodies, responsibilities, and motherhood.

As any reader of romance will know, the genre is so extensive that any kind of motif, trope, or issue can be found: enemies to lovers, friends to lovers, fake dating, and so on. There are several tropes on the themes of pregnancy and babies that are closely related but still different, e.g., secret baby, surprise pregnancy, and unplanned/accidental pregnancy. The difference between these tropes may be small; still, they are crucial. The secret baby plot's meaning lies in its name: The heroine gets pregnant, has a baby, and is keeping it a secret from the hero. A key element here is the surprise, which is usually defined by a scene in which the hero sees the heroine heavily pregnant and figures out that the baby is his. For our study, the unplanned pregnancy trope will be explored. In this case, the unplanned pregnancy is the central element of the plot, which progresses in line with the narrative and the couple's growing relationship.

Notwithstanding that pregnancy is not a particularly popular trope amongst romance readers in general, it still has its fanbase. On BookTok, many readers convey their dislike of the trope, while others actively seek it out, and there seems to be a division between those who hate the trope and those who love it (Haglund 109–110). Elements of romance containing pregnancy are challenging; the pregnant body has to be addressed, it is ethically charged, and choices need to be made. Romance is a culturally sensitive and versatile genre where changes in society can and will be reflected. In this article we argue that unplanned pregnancy and the linked themes of motherhood, sexuality, contraception, and the female body offer insights into contemporary expectations on young women's lives. Furthermore, we argue that pregnancy in the romance novels has a narratological function, which drives the love story and creates forced proximity.

The structure of the article follows the progress of the novels. Initially we discuss and analyze the function of pregnancy in romance novels to give a general introduction to the theme of the novels. Three topics that stand out as salient in the material are then covered: contraception and responsibility, abortion, and the pregnant body. The final section discusses the development of love in the novels and how this is related to the pregnancies.

## Method and Material

The material consists of seven romance novels published between 2016–2022: *The Goal* by Elle Kennedy (2016), *Awk-weird* by Avery Flynn (2019), *One Moment Please* by Amy Daws (2020), *Baby I'm Yours* by Carrie Elks (2020), *The Enemy Trap* by Maren Moore (2021), *Those Three Little Words* by Meghan Quinn (2022), and *One-Timer* by Teagan Hunter (2022). The selection was done in the spring of 2023 through the search term "pregnancy trope" on Goodreads and TikTok. The novels were all marketed as romance, published within the last

ten years, included an unplanned pregnancy as a central theme, and had a minimum of three thousand ratings on Goodreads. The selection criteria were set up to identify novels that were published recently and that have had reasonable visibility on popular social media platforms, meaning the number of ratings on Goodreads indicated an established audience, while on TikTok, these books were the ones most often recommended in videos about the pregnancy trope. There are more examples of pregnancy in romance, but these seven were the only ones that met our criteria. The selection is limited, but their social media presence through Goodreads ratings and TikTok recommendations renders them more popular in the trope of pregnancy romance. All chosen novels are set in the USA except *Those Three Little Words*, which is set in Canada, which most likely affects the discussions on pregnancy and abortion.

The method used is a combination of distant reading and thematic close reading. Distant reading of a larger number of novels provides a general overview of the tropes and themes. Close reading allows us to analyze scenes and events in the novels and is combined with critical theory relating to gender, social norms, and sexuality.

## Theory

The study implements an interdisciplinary approach with theories from sociology, psychology, medicine, film theory, and literary and cultural studies. The theoretical framework is wide in order to place the pregnancy trope in romance in its societal and cultural context. Parley Ann Boswell's concept *pregnancy narrative* is applied together with Kelly Oliver's term *momcom*, a subgenre of romcom where pregnancy is "the vehicle for the couple—a man and a woman—to get together" (9).

Drawing from a variety of theoretical and empirical sources points at the ability romance has in absorbing and contradicting contemporary ideas of love, relationships, and womanhood. Examples of such studies are Laurie James-Hawkins et al. (2018) and Cristen Dalessandro et al. (2019) on gendered contraceptive norms, and Cecilia Caetano et al. (2019) on why millennial women tend to forget taking the contraceptive pill. Similarly, real-life studies are used as comparisons for analyzing the topic of abortion (Kumar et al.; Hanschmidt et al.). Iris M. Young offers insights into the pregnant body in her book *On Female Body Experience* (2005). Two real-life studies (Francisco Fernández-Carrasco et al. "Influence of pregnancy" and "Changes in Sexual Desire") are used in combination with Young to address pregnant female characters' view of their own bodies, but also how other characters view them and what affects these internal and external attitudes toward pregnant bodies.

An underlying theoretical assumption in this article is that romance as a genre is both a means for readers to find enjoyment in reading and escape everyday life (Radway) and a fictional vehicle to develop and consider contemporary issues relevant to women. To specify the nature of love in this study, Anthony Giddens's *The Transformation of Intimacy* (1992) will be used.

## The Function of Pregnancy in Romance

Pregnancy as a central motif, or as Parley Ann Boswell calls it, a *pregnancy narrative*, is one that “inscribes any suggestion of the wide spectrum of women’s physical, emotional, and sexual relationships to pregnancy” (12). Boswell argues that a pregnancy narrative provides ideas, conflicts, and problems entailed in the pregnancy. Correspondingly, Kelly Oliver coined the term *momcom* in an analysis of Hollywood films, which is “defined by the prominence of pregnancy or the pregnant body in the narrative of the film” (56–57). In these films, pregnancy and parenthood is the starting point from which romance and love arise, reversing the typical dramaturgy of a romance story (Oliver 57, 69). The same term is valid for the romance novels of this study; pregnancy propels the story forward and brings the protagonists together.

In all the novels of the study, a one-night stand and a subsequent pregnancy leaves the protagonists in a new situation. As part of the solution, in almost all the examples, the male character insists that the mother-to-be moves in with him: “‘You can move in here until things sort themselves out.’ I cough a shocked laugh. ‘Move in with you? I don’t even know you!’” (Daws 94). Josh in *One Moment Please* suggests that Lynsey moves in with him, allowing him to keep an eye on her and the pregnancy. Similar ideas are expressed by Hayes in *The Enemy Trap*, James in *Baby I’m Yours*, and Cole in *Awk-weird*. These characters’ solution to the situation is to take control. According to Oliver, in early pregnancy films from the 1940s and 1950s, the pregnancy is dealt with as a problem, but one that will bring the couple together (70). Likewise, the novels’ male protagonists’ proposition to stay in the same house encourages the relationship, forcing the couple to be near one another. This proximity allows them to eventually develop feelings for one another.

However, similar to Lynsey’s views in the quote above, most of the female characters are hesitant to move in with the male protagonist. Before they can agree, the male character has to prove himself trustworthy. Oliver observes that momcoms reiterate how a man must transform into a caring father who is ready to take on parental responsibility and commit to both mother and baby (78). Such ideas are abundant in the romance novels as well. The male protagonists must become reliable before a woman can truly trust them:

‘I know this isn’t what either of us expected, but I’m willing to do whatever it takes to be a good father. I won’t let you down Sophia, I promise.’ I give him a small smile before I nod. I want to believe Hayes, and part of me does think he would be a great father, but the jaded, bruised part of me refuses to believe that he’ll stick around for anything other than the bachelor lifestyle he’s used to living. (Moore 106)

Sophia from *The Enemy Trap* initially does not trust Hayes. As Oliver argues, the playboy must give up his womanizing and be faithful, and the lazy slacker must become responsible and mature (63–64, 72). Annika Rosanowski found a similar male domestication in Harlequin romance novels. She claims that pregnancy narratives provide a fantasy in which men would do anything but abandon their child (16). The essential character of fathers being a part of their child’s life is also expressed by Eli in *Those Three Little Words*: “I’m not carrying the baby, but at least I can be present, as present as my schedule will allow. [...] All that I care about is being supportive to you and making sure I’m a part of this baby’s life” (Quinn 84). In

the novel, Eli recognizes his responsibility and reassures Penny that the most important thing for him is to be present and supportive. He mirrors the men in Rosanowski's sample: ideal men who would go to any lengths to be a part of their child's life.

Moving in with the male protagonist serves another purpose. Rosanowski observes that the heroines will do anything to provide their child with two parents (preferably married), financial security, and a home. Not only the fathers, but also the mothers in the novels have to prove that they are willing to give up their lives and let their child come first (Rosanowski 9):

But, here I am. Packing up everything I own [...] Did I particularly want to do this? Of course not. I'd rather get a Brazilian every day for the next year than to do this. I place my hand over my non-existent bump and think of the life growing inside of me. The choices I make from this point on are for her, not for me. (Moore 113)

Sophia reassures the reader that all her choices are for the sake of her child, not herself. Thus, the pregnancy narrative raises expectations on the female characters to set aside their own lives.

The playboy archetype and his reformation of becoming a father is common in the romance novels of this study. These men's lifestyles lead the female protagonists to believe that child-rearing will fall solely on them. Penny conveys such thoughts about Eli: "Trust me, he won't want to know. We both made it quite clear that we didn't want anything serious. I mean, think about it. He doesn't ever date; he just hooks up. This is the last thing he wants." (Quinn 57) Eli is described as the typical playboy, never settling down, going from woman to woman, leading Penny to the conclusion that he will not partake in child-rearing. Kristen Hoerl and Casey Ryan Kelly discuss expectations on women and men in their article "The Post-Nuclear Family and the Depoliticization of Unplanned Pregnancy in *Knocked Up*, *Juno*, and *Waitress*" (2010). In the movies they analyze, women experience themselves as mothers at the moment of conception, while men have the option to decide if they want to become fathers or not. This gender difference emphasizes a common belief that child-rearing responsibilities fall predominantly on women (Hoerl & Kelly 373–74). It is a gender bias that is still dominant today, one Harper from *Baby I'm Yours* articulates:

'He said he would call later when he has a day off, but I'm not banking on it. I mean it's not like he wants this baby; he hadn't planned it or anything.' [...] 'He didn't look like he was overjoyed at the idea of being a daddy. Not that I can blame him.' [...] 'I guess it's up to him whether he wants to be part of the baby's life.' (Elks, ch. 7)

Harper is exceptionally understanding, repeatedly stressing that it is male protagonist James's choice if he wants to be part of the baby's life. As Hoerl & Kelly noticed, men are allowed much more leeway regarding child-rearing than women. James is given plenty of time to choose if he wants to commit to Harper and their baby. Harper, on the other hand, understood her situation the moment she found out about the pregnancy.

## Contraception and Responsibility

One of the first topics to stand out in the selected novels is the central role contraception plays. In five of the novels, the couple used condoms, and in one of them the female protagonist was on the pill. Julie Lynn Fennell discusses different expectations on men and women when it comes to contraception. According to her, these are based on gendered division where women assume sole responsibility for family planning (Fennell 497). Her findings show that men and women learn about contraception in different ways, which leads to a mutual expectation that men should bring condoms while women should be on the pill (Fennell 50). This notion is visible, for example, in *One Moment Please*, when Lynsey and Josh are about to have sex: “He looks back at me with a pained look on his face. ‘I don’t have any condoms.’ ‘What?’ I shriek, my jaw dropped. ‘How could you *not* have any condoms?’” (Daws 51). Since Josh is a man, Lynsey expects him to supply condoms. The participants in Fennell’s study expressed similar views: One man said that when he was young and sexually active, guys were to bring the condoms, and one woman stated that a man she had a one-night stand with “did not even have a condom” but that she had still come prepared (Fennell 508). Just like Lynsey expects Josh to have condoms, so did the woman in Fennell’s study. Similarly to her, Lynsey was (surprisingly) prepared:

He watches me curiously as I dig into the side pocket and nearly scream when my hands touch a familiar square object. My smile is victorious as I hold it out in front of him. He frowns at the wrapper. ‘Mercedes Lee Loveletter?’ I roll my eyes. ‘It’s my friend’s pen name. She’s an erotic romance novelist, and she passes these out at book signings.’ ‘What kind of author passes out condoms?’ (Daws 51–52)

While it may have been a fluke, Lynsey was the one bringing the condom. Fennell also observes that bringing condoms is not an exclusively male responsibility (508). However, the overall attitude toward condom use, both in the novels and in Fennell’s study, seems to be that men are expected to provide condoms.

Maren Moore’s *The Enemy Trap* is the only novel where the characters did not use any form of protection. Laurie James-Hawkins et al. interviewed men on contraceptive methods, and in their responses, the interviewed men often stated that contraceptive decision-making should be equal, while they also relied on women making contraceptive decisions or initiating contraceptive discussion (269). Similar thoughts appear in *The Enemy Trap* when Sophia is adamant about discussing their lack of protection, while Hayes waves it off:

‘You. I vaguely remember my head between your legs,’ he pauses, shaking his head then scratching it, ‘You on top of me, maybe? Maybe that was just a dream.’ He smirks. ‘Stop,’ I screech, dropping my head into my hands once more. [...] ‘Sorry.’ He walks over to the table, where the completely empty bottle of tequila sits. ‘Seems like we both drank way too much.’ ‘We have to talk about this, Hayes. We had sex without protection.’ (Moore 76)

For Hayes, the one-night stand was a fun evening with no repercussions, while for Sophia, having sex without protection, as a woman, can have serious consequences. Hayes is thus able to eschew responsibility because he is not the one who will experience the ramifications of unprotected sex. Cristen Dalessandro et al. describe similar findings and coin the term *strategic silence*, which entails “men’s silence in communication around condoms and other contraceptives before and/or after sexual activity” (773). According to their study, men partake in strategic silence to defer responsibility on STIs and pregnancies to women, which Dalessandro et al. argue “upholds hegemonic masculinity ideals that privilege men’s sexual desires” (777). Hayes thus avoids any discussion on contraception, as he is unbothered by the consequences, while for Sophia it is crucial. Before Sophia initiates the topic, Hayes only cares about how good the sex was: “‘What? Have the best sex of your life?’ he says, a wide grin gracing his lips. [...] ‘Don’t look so upset, I’m sure you came more times than you ever have’” (Moore 72–73). Hayes engages in strategic silence since he is not worried, contrary to Sophia. One of James-Hawkins’s interviewees claimed that pregnancy is a “bigger problem” for women, and they should therefore make contraceptive choices (269–70). By relinquishing responsibility in contraceptive decisions, this interviewee supports the idea that it is culturally acceptable for men to be uninvolved in a pregnancy, similar to Hayes.

Furthermore, in James-Hawkins et al.’s study, several men insisted on respecting women’s bodily autonomy and thus letting women choose a contraceptive method. The authors argue that these men navigate between equal participation in contraceptive decisions, while also trying to ensure that women maintain bodily autonomy (James-Hawkins et al. 270). This struggle is seen in Hayes as he wants to support Sophia, while also trying to partake in the decision-making: “‘Look, if it makes you feel any better, we can get a Plan B pill.’ [...] ‘I wasn’t being an asshole, Sophia. I’m just letting you know that if it came to that, I would support you. Whatever you need’” (Moore 77). Hayes balances between their next move and tries to respect Sophia’s wishes. Hayes’s dilemma echoes that of the men in James-Hawkins et al.’s study: Men want to take equal part in contraceptive decisions and adhere to women’s bodily autonomy.

Another aspect in the above quote is Hayes’s offer to get a Plan B pill. Dalessandro et al. found that men assume that women seek out Plan B if they thought there was a risk of pregnancy. Some of the interviewees offered to buy it for their partner, however, whether these women bought or took it was never something the men followed up on. According to Dalessandro et al., men trust women to take responsibility in avoiding pregnancy, further employing strategic silence (785–86). Hayes shares these views, assuming that Sophia would *want* to avoid a pregnancy and that Plan B would relieve any worries. However, Sophia quickly discards these ideas: “‘Don’t you dare say that. If I’m pregnant from a night of carelessness with the world’s biggest man-whore, then I’ll be responsible and raise my baby. I won’t need your help’” (Moore 77). Sophia acknowledges the situation and reasserts herself in the notion that she will be responsible for a baby. While the above-mentioned studies investigate real-life events and people, their findings were similar to the ideas in the romance novels. Moreover, these studies employ men’s perspective on contraceptive decisions while concluding that women are more responsible. This obligation is shown in Sophia’s quote but is also visible in the romance novels in other ways.

When it comes to the contraceptive pill, the female characters take sole responsibility for it and berate themselves if they have not taken them accordingly: “Maybe [the condom] broke and neither one of us realized it. Maybe it’s all my fault because I genuinely can’t

remember the last time I took my birth control pill because I've been too distracted by everything else going on in my life" (Hunter, ch. 5). Hollis in *One-Timer* tries to discern how she could be pregnant since she and Lowell used protection. Her claim that it may be all her fault shows that the responsibility for contraception is once again placed on women, while also explaining why she has forgotten to take the pill. In the article "Millennials and contraception: Why do they forget?" Cecilia Caetano et al. study unintended pregnancies and the correlation with millennial women's stressful lives impacting their ability to take contraceptive pills consistently. One conclusion is that unintended pregnancies are common among young women, which may be a result of young women not taking the birth control pill correctly or consistently (Caetano et al. 31). From their survey, the researchers found that the most common reason for not taking the contraceptive pill correctly was having a busy schedule (33). Similarly to these women, Hollis also has a lot going on in her life.

The main reason for Hollis's forgetfulness is that she had recently gotten divorced: "After I explained that I've always had erratic periods and have been under a lot of stress since my divorce, she understood. [...] I just got divorced three months ago, and the first guy I sleep with—completely on a whim—gets me pregnant" (Hunter, ch. 5). Caetano et al. argue that there are correlations between stress and memory. Major life events affected their participants' forgetfulness to take the pill, as disruptions alter stress levels and disturb women's ability to remember (Caetano et al. 33). Hollis's divorce overturned her entire life. Her forgetfulness leads to the pregnancy, and while she blames herself for forgetting to take the pill, her male partner is absolved of accountability. Both in fiction and in reality, women are expected to be responsible for contraception.

Moreover, Dalessandro et al. and James-Hawkins et al.'s studies show that men forgo discussions on contraception and transfer that responsibility to their female partners, going as far as only using condoms if the woman insisted on it (Dalessandro et al. 785; James-Hawkins et al. 27). However, their findings differ from the depictions in the romance novels. In nearly all novels, the male protagonist does not hesitate to use a condom, sometimes even insisting on it himself:

'Wait,' he barks, but it's too late. I suck in my lower lip as the broad head slowly penetrates me. Greedily, I push down, wanting to fill myself up. His hands find my hips, and I breathe out a sigh of anticipatory satisfaction only to yelp with dismay when he pushes me off. 'Condom,' he says grimly. I glance down between us in surprise. I never make that mistake. Never. My hand flies to my mouth. 'I'm sorry. I wasn't thinking...' He fumbles in his jeans, finds his wallet and tosses it to me. 'No big deal. It was just the tip.' (Kennedy, ch. 3)

Sexual desire overtakes Sabrina from *The Goal* to the point where she forgets about the condom. Instead, the male protagonist, Tucker, has to remind her, something the participants in neither study would do. Indeed, an interviewee in Dalessandro et al.'s study would not bring up condom use prior to a hookup because he saw it as a "buzzkill" and instead stayed silent, relying on his privilege and the assumption that the woman would be proactive if needed (784–85). Similarly, the men in James-Hawkins et al.'s study assumed that responsible women would insist on a condom. Their reasoning indicated that transferring responsibility of contraceptive use and pregnancy prevention to women turned the issue to "women being 'responsible' or 'smart' because men would not" (James-Hawkins



et al. 272–73). According to these men, if a woman is smart, she will insist on a condom, yet they themselves would never voluntarily suggest it.

Such notions are different from Tucker's actions in the sexual encounter with Sabrina; Tucker even *stops* Sabrina in order to put on the condom. The men in the aforementioned studies would not hesitate to stop a sex act in preference for being safe and protected. Thus, the fictional world of romance prioritizes safe sex above men's sexual desires, which greatly conforms to the genre's traits. Romance fiction puts female pleasure first, and the romance hero always identifies a woman's needs and desires (Regis 29). Thus, the ideal man would never act as the men interviewed by Dalessandro et al. or James-Hawkins et al.; they would put the heroine's interests and safety first, as Tucker does. Real-life gendered social patterns are not preferred in the fictive world of romance. Romance responds to changes in society but does not necessarily mirror them. Often, the genre is instead proactive, as Jonathan A. Allan observes: "In the popular romance novel, particularly those in contemporary settings, the condom is everywhere. The condom is a part of not only the sex act, but is a part of the relationship and the novel" (5). For a modern male character to be a perfect man, he must put the woman's sexual health and protection at the center.

## Abortion: A Non-Choice

A further topic that stands out as essential in our material is abortion. The pregnancies in the novels are all unplanned, still, abortion as an option is barely brought up. The novels take place in the USA, apart from *Those Three Little Words*, which is set in Canada. The setting most likely affects the way the topic of abortion is (or is not) addressed. Abortion is in many places and cultural contexts a sensitive subject, likewise in the US where it has been legally banned or restricted in several states after the American Supreme Court overturned the case *Roe v. Wade* in 2022, the law that made abortion a constitutional right in the country. Not surprisingly, as Lisa Grahn notes in *Narratives of Motherhood and Mothering in Fiction and Life Writing*, abortion is often avoided in American literature. Scholars have suggested that this is due to the fear of "making the topic too complex and thereby unintentionally creating arguments for the pro-life movement" (Grahn 18). The nonexistent topic of abortion in the novels must be understood with this backdrop, but from an outside perspective, it is a surprising lack of a given narrative element that could deepen the sense of choice and female empowerment.

A prevalent topic that arises when the female protagonists consider their choices is instead the question of a support system. The issue is what kind of life the women think they can provide their child. Such thoughts are expressed by Tess in *Awk-weird* upon finding out she's pregnant:

She had options. It was too late for Plan B, but she could get an abortion. She could have the baby but give it up for adoption. Keep it and start her own family. So which one was the right answer for her, right now, in this moment? Abortion made sense. Beyond her girls, she didn't have a support system. Was she really ready to be a single mom without one? (Flynn 28–29)

Tess carefully considers her options, from abortion to adoption. She realizes that without a solid support system, she will have to raise a child by herself. In their study “Mental health problems among single and partnered mothers” (2007), Timothy Crosier et al. interviewed single and partnered mothers about their socio-demographic, financial, and social support circumstances. They found that twice as many single mothers than partnered mothers perceived low levels of social support. This lack of support led to them experiencing more mental health issues than partnered mothers (Crosier et al. 11). Tess’s questions echo the participants’ accounts of the hardships they face as single mothers. Like them, Tess is concerned with how she would cope as a single mother without the existence of a support system beyond her friends. In the end, Tess concludes that she is ready: “But was she ready? Even with her doubts, she couldn’t ignore that feeling that she was. She was staring down her thirtieth birthday, owned her own business, had an apartment, didn’t have *that* much debt, and a family was pretty high up there on her want list” (Flynn 29).

Harper from *Baby I’m Yours* has similar concerns: “Caitie was right, she always was. There was no way Harper could do this alone. [...] this baby would always feel wanted. Forever be loved. And she would never feel as though she’d ruined somebody’s life. If that meant accepting the kindness of friends until Harper got back on her feet, then that’s what she’d do” (Elks, ch. 5). Like Tess, Harper does not have a supportive family. Instead, her friends are her support, and Harper realizes that she will need all the help she can get if she is to be a single mother. However, Harper does not have a stable job or income: “A little matter of me having no steady income. I still haven’t found a permanent job, and being pregnant isn’t going to help. I’ve got no medical insurance, and I have no way of paying for all the bills this pregnancy is going to bring me. I can’t even afford to pay the rent” (Elks, ch. 5). Without financial stability, Harper would be more affected in terms of her mental health than a partnered mother, like Crosier et al.’s study showed. Both Tess and Harper exemplify that having financial challenges, without a stable support system, can increase anguish about having a baby. They both decide to continue the pregnancy, which admittedly is necessary in order for there to be a romance narrative.

In these novels, having an abortion would not lead to a romance story. It would also mark the characters as bad women/mothers. In “Bad Mothers in Popular Fiction Since 1968,” Imelda Whelehan explores the nonexistence of abortion in popular women’s fiction. Whelehan concludes that in contemporary popular women’s fiction, discussions of abortion are seemingly absent. This, she claims, is because a woman who has an abortion would automatically be a bad mother (Whelehan 155). Similar to Whelehan, the beginning of this section stated that abortion discourse in the romance novels is brief or absent. For example, Penny in *Those Three Little Words* says the following about abortion: “I’m not going to do that. I don’t think I could” (Quinn 54). Meanwhile, Lynsey from *One Moment Please* simply states, “‘Yes, I’m keeping *it*.’ The thought of giving up my baby never even entered my mind” (Daws 82). Clearly, having an abortion is out of the question for the characters.

Kelly Oliver has shown that the same goes for Hollywood movies. Oliver says that in pregnancy films from the late 2000s, abortion is not a viable option even for an unplanned pregnancy. Instead, unplanned pregnancies become “wanted and loved babies” (Oliver 87). A similar conclusion is applicable to chick lit, and Whelehan observes that when motherhood is not planned, accidental pregnancies do not resolve in abortion but are instead presented as the heroine accepting the pregnancy as a longed-for event (157–58). Such sentiments are also visible in our material, for example in Harper’s reaction, when she gets asked about

abortion: “Even at nine weeks pregnant she felt different; protective. This little smaller-than-a-bean human growing inside her was Harper’s responsibility” (Elks, ch. 5). Harper immediately feels a connection to her baby; nothing else is possible since, as Whelehan pointed out, any other reaction would instantly make her a bad mother. Keeping the pregnancy and renouncing abortion is a given in these novels.

Another explanation for the characters to reject abortion can be the social stigma surrounding abortions. Anuradha Kumar et al. define abortion stigma as a social phenomenon that ascribes negative attributes “to women who seek to terminate a pregnancy that marks them, internally or externally, as inferior to ideals of womanhood” (628). Abortion stigma is clearly visible in *The Goal*, when Sabrina tries to decide what to do with her pregnancy:

For the first time in my life, I feel like I’m completely without direction. I haven’t seen Tucker since our day in the park, and I stopped answering his texts about a week ago. These days, I can’t focus on anything other than the impending decision that’s hanging over my head. (Kennedy, ch. 22)

Sabrina’s doubts take the form of internalized stigma. Franz Hanschmidt et al. divide abortion stigma into three categories: *perceived* stigma is a women’s awareness of the devaluing attitudes toward abortion by others, *internalized* stigma entails when a woman incorporates those negative beliefs and attitudes into her self-image, and *enacted* stigma describes actual experiences of discrimination toward women who seek abortions (169–70). Internalized stigma often induces feelings of shame, guilt, and self-blame. Due to such feelings, the women in the study often kept their pregnancy a secret, which led to isolation, loneliness, and suppression of emotions (Hanschmidt et al. 173).

The same can be said for Sabrina. As she cannot decide what to do, she isolates herself from her family, friends, and the male protagonist: “I reminded myself that Tuck had said I’ve got you, that he’d support whatever I chose to do. But none of that had succeeded in ridding me of the fear clinging to my throat” (Kennedy, ch. 19). Sabrina’s internalized stigma affects her decision on the pregnancy. The easiest option for her is to ignore the problem, isolating herself from the people around her in the process: “And it’s not just Tucker I’ve been ducking. I’ve only been to one weekly lunch with Hope and Carin since Beau’s death. I’ve blamed it on increased work hours, but I don’t think they’re buying it” (Kennedy, ch. 22). Sabrina’s experience with internalized and perceived stigma leads her to keep the pregnancy a secret. For example, when Sabrina tells her thesis supervisor about the pregnancy, the social stigma is visible: “‘Oh, Sabrina.’ There’s a question implicit in her sigh. I nod. She closes her eyes, and when she opens them, all traces of judgment are gone. But I saw that initial flicker of disappointment, and it stings.” (Kennedy, ch. 22) In Hanschmidt et al.’s study, women experienced perceived stigma from friends, family, community, and society (171). Sabrina experiences perceived stigma as her supervisor slips for a second, showing her disappointment. While the people around her are supportive, Sabrina still experiences abortion stigma, making it hard for her to decide what to do.

The decision to terminate or keep a pregnancy is rarely straightforward, and many aspects need to be considered. David S. Cohen and Carole Joffe discuss the difficulties of having an abortion in America in their book *Obstacle Course*. They refer to a study of a large group of abortion patients who were asked about the reason behind their choice. The two

most common reasons were that having a baby would interfere with work or education or that having a baby was not affordable. The reality of abortion decisions is that women carefully choose what is best for their future, whether that be future career, education, or family plans (Cohen & Joffe 27–28). This is a reality that also Sabrina relates to when she considers her options: “If I had a good job right now, maybe I’d keep this baby. I think that if I’d gotten pregnant at the end of law school instead of the beginning, I’d view things differently” (Kennedy, ch. 22). Like the participants, Sabrina’s decision will affect her future. Her pregnancy would drastically affect her goal to go to law school: “The potential of losing everything I planned for all my life because of this pregnancy has paralyzed me” (Kennedy, ch. 22). Being a college student, without support from her family, Sabrina has had to make her own way in life. Thus, if she were to keep the pregnancy, all that she has worked for has the potential to dissipate. The same kind of considerations that Sabrina is deliberating were visible in the study of real-life women, but generally, abortion is not extensively discussed in romance novels with an unplanned pregnancy trope. Unlike real life, it is a nontopic, most likely due to the sensitive and often polarizing nature of an abortion stance.

## The Pregnant Body

Following the structure of the novels in the material, the female protagonists’ bodies begin to show signs of pregnancy during the second trimester of the pregnancy. Their belly expands and they become visibly larger. Iris M. Young argues in *On Female Body Experience* that in a pregnant state, women may be released of sexual objectification. The gaze on a woman’s growing belly is not one of desire, Young says, but that of recognition and approval. Cultural desexualization of the pregnant body thus removes women from certain objectification (Young 54). While it may be true in real life, it is not the case in romance novels. In these novels, the male character gawks at the pregnant woman and feels sexual arousal upon seeing her pregnant belly: “Every time I look at her, I’m struck anew with awe at the fact that my little girl is inside of her body. It also makes me fucking horny as hell” (Kennedy, ch. 30). Tucker from *The Goal* expresses his arousal upon seeing Sabrina’s growing belly. Contrary to Young’s observations, fictional men desire the female body even in a pregnant state. Thus, not even a pregnancy can remove women from being sexually objectified.

The pregnant body as a desired object has been a common theme in popular culture since film star Demi Moore was naked and pregnant on the cover of *Vanity Fair* in 1991. Clare Henson believes that this image “inaugurated an era in which the pregnant body began to be construed in terms of glamour and desirability” (173). The female characters in these romance novels have become just that, appealing to men’s sexual ideas: “What you’re doing...growing this baby inside of you...it’s magical. Sexy. *You’re* sexy. I need you to realize that, okay? I need you to realize that seeing your stomach grow and knowing that’s *my* baby in there is the hottest thing I have ever had the pleasure of witnessing” (Hunter, ch. 13). In *One-Timer*, Hollis’s growing body causes her angst, which Lowell is quick to debunk since his male gaze never left her body even after it changed due to her pregnancy.

The pregnant body of the female characters is not only sexualized by men but is also on display for others to gaze at. Lynsey experiences this firsthand: “I ask as her eyes shift from my face to my watermelon-sized belly, just like everyone else’s do these days. A

pregnant belly this size is like a car crash—people can't help but stare" (Daws 250). Parley Ann Boswell discusses the pregnant body, and in her examples, as the female body grows, the pregnancy becomes a visual fetish that enters the public discourse. As the pregnant woman loses control of her own body, she also loses control of how other people interpret her (Boswell 13–14). This depiction is similar to Lynsey in *One Moment Please*, where she is bothered by her body being on public display, or, as she calls it "a car crash." The pregnant women's bodies seem to exist for anyone to scrutinize.

Another focal point of the pregnant bodies in the novels are breasts: "Fuck yes, they've gotten bigger. 'Are they bigger?' They're fucking soft. They're round. They're everything I fucking remember but slightly bigger. Clearing my throat, I say, 'Uh, yeah, they seem bigger'" (Quinn 306). Eli, from *Those Three Little Words*, is aroused by the growth of Penny's breasts following her gestation. Similar reactions are frequent in these romance novels; the male protagonists notice and get aroused by the female characters' growing breasts. Annika Rosanowski makes a comparable observation in Harlequin novels: The heroines' pregnancies soften them, making them more attractive and feminine. Most visibly, attention is paid to the enlarged breasts, making the woman more desirable, which "perpetuates stereotypical views on what makes women attractive" (Rosanowski 11). As in Rosanowski's sample, male characters in romance act on stereotypes of what makes women attractive. Hence, the pregnant body is still subject to the male gaze. The novels refute Young's notion that in pregnancy, women are free from being sexual objects.

These bodily changes greatly affect the female characters emotionally as well: "Nothing fits. Everything makes me look fat.' I'm officially at the stage of pregnancy where things no longer fit, and my bump is becoming prominent" (Moore 155). Jane M. Ussher discusses the notion of women feeling "fat" during pregnancy. She writes that the pregnant body takes up space both literally and metaphorically, where the tight, small body of a young girl, which grown women are expected to maintain through exercise and diet, is lost as the fetus grows. Meanwhile, pregnancy can also legitimize women taking up space, since it is expected during a pregnancy, which functions to absolve women from feeling guilty over "eating for two" (Ussher 84–85). However, such validation is not always easy to accept, which Sabrina from *The Goal* expresses upon meeting a thin friend: "My gaze involuntarily falls to her slender waist, and a twinge of envy hits me. I wonder if mine will ever be the same" (Kennedy, ch. 24). As her body grows, Sabrina has a hard time not feeling self-conscious when she sees her thin friend. While pregnant bodies are socially acceptable, the changing pregnant body is still hard for many women to come to terms with, as the societal expectations of a feminine body are ingrained in women's minds.

Another aspect of Sabrina's comment is that her body feels foreign: "My body is starting to feel alien. The hard bump in my stomach isn't something I can diet away. There's a human being in there. And that mound is only going to grow" (Kennedy, ch. 24). The expectation of keeping her body in check through diets, as Ussher pointed out, is prevalent in Sabrina. Young argues that the pregnant subject is "decentered, split, or doubled in several ways," experiencing her body both as her own and not. The inner movements belong to another while they are also her own (Young 46). These double feelings are conveyed by Sabrina when she recognizes that it is her body, yet there is another being inside her. Young continues by saying that the body after birth is one that may both be desired and feared by the woman. She may feel a loss of identity as the birth transforms her so that she may never be or look the same again (Young 55). Sabrina experiences these emotions, wondering

whether she will ever look the same as before her pregnancy. The changing pregnant body becomes an ambivalent transformation, making Sabrina feel both displaced in her own body and legitimate in creating human life. The complexity of women's feelings around their pregnant and postnatal bodies in these romance novels offers emotional and practical views on being a young woman in society today.

## The Development of the Romantic Relationship

All the romance novels in this study explore the same narrative: As the pregnancy progresses, so does the relationship between the protagonists. The protagonists will, as part of the narrative suspense, deny all feelings. The couples are clearly attracted to each other, but to create emotional tension, they are unwilling to give in to this appeal. That is, until the female protagonists experience a hormonal shift and a subsequent heightened sex drive: "If it wasn't for all these hormones I wouldn't have jumped him as soon as he walked through the door.' She'd been a woman possessed; desperate, needy, and so ready to feel a body against hers" (Elks, ch. 14). Harper from *Baby I'm Yours* explains that her sexual attraction to James is only due to her hormones. She is not the only female protagonist who does this. Nearly all of them experience heightened sex drive due to hormonal changes. In *The Enemy Trap*, Sophia's doctor confirms, "During pregnancy, a lot of women experience an increase in libido and have healthy sexual appetites" (Moore 152). These female protagonists are described as highly aroused due to their pregnancy.

Gestational hormonal changes relating to higher sex drive among pregnant couples have been studied by Francisco Javier Fernández-Carrasco et al. (Changes in Sexual). One of the results was that sexual desire generally decreased as the pregnancy progressed with a slight recovery among women in the second trimester (Fernández-Carrasco et al., Changes in Sexual, 8–12). Thus, while there is a slight increase in sexual desire during the second trimester, overall, real women's sexual needs decrease during pregnancy. Such findings contradict the women's experiences in the romance novels. For example, Penny from *Those Three Little Words* says the following: "My window of being able to wear my regular clothes is closing, but oddly, I don't think I've ever felt sexier" (Quinn 309). When Penny's body changes, she claims to have never felt sexier before, and her sexual desire only grows with her pregnancy. Even during the third trimester, Penny requires sex: "You can't do that to a horny pregnant woman who needs the help of your penis at least three times a day" (Quinn 482). In a separate study, Fernández-Carrasco et al. report that in the third trimester, sexual desire usually decreases due to different reasons, such as the stomach getting in the way or a fear of hurting the baby or the mother. Therefore, many couples have less sex, and some stop having sex completely (Fernández-Carrasco et al., Influence of pregnancy, 9). This is not the case for the couples in the romance novels. In fact, most of them have more sex as the pregnancy progresses. This is mainly due to plot development, since the love story and the pregnancy evolve simultaneously. As the characters continue having sex throughout the female character's pregnancy, their feelings for each other become more palpable:

As Tucker strokes my hair, the words of love that sit like lead in my throat fight to get out, but I swallow them back. It was just sex. We both needed the release, that's all. I can't read anything more into it, and I can't even trust my own

feelings these days, not with all the pregnancy hormones running rampant in my blood. (Kennedy, ch. 27)

Sabrina considers telling Tucker that she loves him, but hinders herself, blaming the momentary lapse on her pregnancy hormones. The pregnancy, and its symptoms, act as a barrier between the protagonists. Pamela Regis defines barriers in romance novels as external or internal elements that prevent the couple from being together which motivate the plot (32). The pregnancy both unites and separates the protagonists, as Harper in *Baby I'm Yours* explains: "Yes, she liked him. More than she'd realized until this moment, but she was also certain nothing could come of it. And she wasn't planning on risking her relationship with her baby's father for the sake of caveman biology and her raging second trimester hormones" (Elks, ch. 10). Harper feels attraction toward the male protagonist, James, and starts to develop feelings for him, but her pregnancy inhibits her from giving in.

In each novel, sex is a catalyst for acknowledging emotions, but it is also an obstacle: "Sex complicates things. You and I still have a lot to learn about each other and a lot of things to figure out before this peanut is born. I'm fine doing that under your roof, but that means no sex" (Daws 132). Lynsey from *One Moment Please* tells Josh that if she moves in with him, it means they will not be sleeping together, because sex complicates things. Pregnancy and sex are barriers for the romance to develop, but they are simultaneously elements that drive the story. In *Happily Ever After*, Catherine Roach remarks that the best advice she got as a romance writer was to make sex worsen the conflict between the protagonists. Sex should not solve their issues but instead "complicate the plot and intensify the conflict keeping the lovers apart" (Roach 151–52)—a script clearly used in all these romance novels. The sexual acts of the novel operate both as a generator and a complication in developing a solid love:

'I'm tired of fighting it, Hayes.' 'I'm glad we're on the same page, baby, because I am fucking done. From this second on, we're both done pretending.' His lips crash with mine, and even though I hate that we stopped the frenzy the second we walked through the door, it feels right to know how each of us feel. To not wonder or question what the other is thinking. Instead, I know exactly how Hayes feels about me, and that just makes me want this more. (Moore 192)

As they are about to have sex, Sophia and Hayes in *The Enemy Trap* declare their love for each other. Sex has been the barrier in the novel; it is also a key to acknowledging mutual feelings.

Sex in much of the genre of contemporary romance has become a form of communication that is valuable and necessary for a romantic partnership. It is through sex that most female protagonists recognize their feelings:

I was a fool when I tried to tell myself I could handle a sex-only relationship. I was a fool when I tried not to notice all the mornings I'd wake up to find him watching me sleep. I was a fool when I ignored the butterflies in my belly when he kissed me goodbye before going to work. And I was a fool for acting like I haven't been picturing a family with this man from the moment I found out I was pregnant and completely in love with his child. (Daws 215)

Lynsey in *One Moment Please* has tried to maintain a sex-only relationship with Josh. Meanwhile, due to their intimacy, Lynsey recognized her longing for a romantic relationship. An essential part of love, culturally and socially, is sex. Sociologist Anthony Giddens argues in *The Transformation of Intimacy* (1992) that there has been a cultural shift from romantic love to what he calls confluent love. Romantic love is the archetypal kind that most people imagine when asked about the nature of love: love at first sight, feeling complete, and the promise of forever (Giddens 40). Meanwhile, confluent love is active and contingent, in which sex plays a more central role. Giddens argues that romantic love has been unbalanced in gender terms, thus, for women, the fantasy of romantic love has often led to domestic subjugation. Contrarily, confluent love presents equality in emotional give-and-take. Love in this case develops only so far as both parties allow it, to the degree to which they reveal their needs, concerns, and vulnerability to the other. Furthermore, sexual pleasure is prioritized in confluent love, as it “makes the achievement of reciprocal sexual pleasure a key element in whether the relationship is sustained or dissolved” (Giddens 62). In the novels, confluent and romantic love have merged. It is visible in the quote above from *One Moment Please*, and from Eli’s realization of his love for Penny in *Those Three Little Words*:

‘I love you,’ I say again, the words falling off my tongue with ease now. ‘Just you and me, Penny. Just you and me.’ She reaches for my hardening cock and starts stroking me. ‘You and me.’ [...] And then I enter her, and I can feel my world changing around me with each deep stroke. With each connection of our eyes. With every beautiful sound that falls past her lips. She’s mine. Forever. (Quinn 479)

The love between Eli and Penny is at last consummated. Sex here does not complete marriage, as it has done in traditional notions of love in romance novels, nor does it follow Giddens’s definition of romantic love. In *Those Three Little Words*, sex instead functions as acknowledgment and recognition of love.

The pregnancy narratives in these novels assure the reader that women can indeed achieve romantic love because of an unplanned pregnancy. As Oliver states, pregnancy becomes “the vehicle through which romance, love, and marriage are delivered” (78). Traditionally, romance fiction has provided images of marriage and family deriving from relationships of true love (Regis 30). Pregnancy narratives, on the other hand, reverse this idea. Instead, pregnancy precedes romantic love, or as Oliver phrases it, “reproduction leads to romance; even sex with strangers can produce a happy ending if a romantic pregnancy brings the couple together” (80). In *Baby I’m Yours*, Harper asks herself, “Was it possible to have it all? The baby, the man, and the career she’d always hoped for?” (Elks, ch. 20). The answer, as has been demonstrated, is undoubtedly yes.

## Conclusion

The article is a study of unplanned pregnancy as a romance novel trope. The topic addresses many issues important to young women reading contemporary romance, i.e., the consequences of casual sex, contraception, abortion, responsibility, and motherhood. The findings in the novels were compared to a variety of studies on sexual health, pregnancy, and



being a single mother that showed many similarities but also discrepancies. Among all the interesting aspects that appeared in our study we focused on contraception, abortion, the pregnant body, and love in a conflicting relationship. It is, however, worth mentioning that topics of being a mother as well as a father, fears of motherhood, one-night stands, and hookup culture are other topics that were found and would be worth exploring.

Compared to real-life studies on contraception, we showed that the novels support the idea that men are expected to bring condoms while women are expected to be on the pill. However, our sample of romance novels contradicted the real-life studies on one important point, which is that men in real life often forgo using a condom unless their female partner insists upon it. This view was not shared by the male protagonists in the romance novels. They are adamant about using protection because heroes in romance will always put the heroines' interests and safety first.

Moreover, discussions of abortion in the romance novels were fairly absent, and the choice to keep the pregnancy was almost always immediate. This, we argued, is due to abortion being a sensitive subject in the USA and is often avoided to not contribute to a polarized political discourse. The female protagonists' main concern regarding their decision is their (lack of) support and financial stability. The decision can also be attributed to the notion that abortion makes a woman a bad mother, which was found in other works of fiction and film.

All the novels employ Parley Ann Boswell's pregnancy narrative and have many similarities to Kelly Oliver's term *momcom*. Pregnancy in these stories functions as the instigator of the story, the reason for the fictional couple to remain together and develop feelings. Related to this theme, the female protagonists' pregnant bodies were also discussed. We demonstrated that the female characters are often self-conscious about their pregnant bodies, specifically feeling fat and alien, but also that enlarged breasts and bellies were sexualized. Furthermore, the couple's developing feelings tend to be ignited by the sexual tension and attraction; the establishment of love is commonly consummated through sex.

Now more than ever, the representation of young women experiencing unplanned pregnancies is a highly relevant theme of romance fiction. In comparison to real-life studies in psychology, sexual health, and sociology, we observed that romance fiction responds to female fears and desires surrounding pregnancy and motherhood. Pregnancy in these stories is not simply a marketing trope for readers, but a vital part of the narrative that induces the issues and complications that have been presented in this study and relays particular aspects of women's lives.

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