



Teen Pregnancy

A Research Brief by Girls Inc. of Chattanooga

Executive Summary

While teen pregnancy and teen birth rates have generally declined in the last few decades, the United States continues to have the highest rates of teenage pregnancy and births among fully-industrialized countries. Furthermore, Hamilton County is one of two counties in the Metro Area with the highest rates of teen pregnancy and Tennessee's birth rates are among the highest in the country.

According to an analysis by The National Campaign to Prevent Teen and Unplanned Pregnancy, the cost of teen childbearing in the United States to federal, state and local taxpayers was at least *\$10.9 billion* in 2008. These increased costs do not include the cost of teen motherhood. Rather, this cost is *just* for the children of teen mothers and includes health care, public assistance, foster care, incarceration, and lost taxpayer revenue.

In the United States, *three in ten girls are pregnant by 20 years old*. According to 2007 data for Tennessee, the birth rate for girls younger than 20 was nearly one and half times higher. For teens ages 15-19, there is a significant difference in birth rates between the United States and Tennessee. For Non-Hispanic Whites, the teen birth rate in Tennessee is more than one and a half times higher than for the U.S. For Blacks, the teen birth rate is 20% higher. The Hispanic teen birth rate is more than double that of the United States.

In 2009, Tennessee and Arizona were tied for ninth place for 15-19 year olds, the 9th highest birth rate in the country. According to a recent National Center for Health Statistics report, state-specific teen birth rates are highest across the Southeast. Among these 12 states, Tennessee is tied with Kentucky for the seventh highest teen birth rate per 1,000 teens ages 15-19 in the nation. The state is also in the "top ten" for highest birth rates among Black teens (8th), Non-Hispanic White teens (6th) and Hispanic teens (2nd). In Tennessee, the birth rate for African American teens is 71% higher than that of Non-Hispanic White teens. For Hispanics, the rate is nearly four times higher than for Non-Hispanic Whites.

In 2008, 12.5% of all births in Hamilton County were to mothers between the ages of 10-19. **Among African Americans, nearly one in four babies were born to a teenage mother (23%) – more than two and a half times the percentage for Whites and more than double the percentage for Hispanics.**

Executive Summary

According to the Ochs Center, the percentage of births to teenage mothers varies greatly from neighborhood to neighborhood in Hamilton County. Based on birth data for 2005 to 2008, in four of the county's thirty-six subregions, more than one-quarter of all births were to teenage mothers: Amnicola/East Chattanooga (29.3%), Downtown (26.5%), Bushtown/Highland Park (26.1%) and Glenwood/Eastdale (25.4%).

Successful prevention programs are now focusing on tools that help children and young adults succeed in school and make better life decisions, not just on a single message. In fact, for the first time in over a decade, the federal government is funding sex education programs that do not focus solely on abstinence.

Girls Inc., the parent organization of Girls Inc. of Chattanooga, developed the research and outcome-based Preventing Adolescent Pregnancy curriculum in the mid-1980s as a coordinated, age-appropriate, abstinence-based series of program components to meet the specific needs and issues facing girls and young women concerning sexuality and sexual decision-making.

The Preventing Adolescent Pregnancy curriculum is one component of the Girls Inc. program which provides girls ages 6-18 with the tools to become strong, smart and boldsm – healthy, educated and independent.



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Introduction

Teenage pregnancy continues to be a serious health, social and economic issue nationally, in Tennessee, and in Hamilton County. While teen pregnancy and teen birth rates have generally declined in the last few decades,¹ the United States continues to have the highest rates of teenage pregnancy and births among fully-industrialized countries. Furthermore, Hamilton County is one of two counties² in the Metro Area with the highest rates of teen pregnancy and Tennessee's birth rates are among the highest in the country.³

Teen Pregnancy in the United States

Despite teen birth rates at an historic low, the rates continue to be at a crisis level. The birth rate in the United States is two and half times that of Canada, ten times higher than the Netherlands and one and half times higher than the United Kingdom.⁴

Teen mothers are more likely deliver a low birthweight or pre-term baby, live in poverty, have lower levels of educational achievement and poorer health outcomes for themselves and their child(ren), and more interaction with the child welfare and criminal justice systems.⁵ In addition, pregnant teens have a higher likelihood of gestational hypertension, anemia and inadequate weight gain.⁶ According to an analysis by The National Campaign to Prevent Teen and Unplanned Pregnancy, the cost of teen childbearing in the United States to federal, state and local taxpayers was at least *\$10.9 billion* in 2008. These increased costs do not include the cost of teen motherhood. Rather, this cost is *just* for the children of teen mothers and includes health care, public assistance, foster care, incarceration, and lost taxpayer revenue.⁷

In the United States, three in ten girls are pregnant by 20 years old. In 2009, there were 410,000 births to girls ages 15-19 -- 39.1 births for every 1,000 teens.⁸ Only 59% of teen pregnancies resulted in a live birth, 27% ended in an abortion and 14% were miscarriages. Just 3% of babies

¹ "State Disparities in Teenage Birth Rates in the United States," U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Health Statistics Data Brief No. 46, October 2010. Teen births did increase somewhat between 2005 and 2007, but otherwise have been consistent in their decline.

² Walker County in Georgia is the other county.

³ Early Childhood, Ochs Center for Metropolitan Studies, Dr. Eileen Robertson-Rehberg, August 2008

⁴ Quick Facts on Teen and Unplanned Pregnancy and Birth, The National Campaign to Prevent Teen and Unplanned Pregnancy

⁵ Counting It Up: The Public Costs of Teen Childbearing, June 9, 2011, The National Campaign to Prevent Teen and Unplanned Pregnancy

⁶ County Health Rankings organization (www.countyhealthrankings.org)

⁷ Ibid

⁸ Vital Signs: Teen Pregnancy --- United States 1991-2009, Centers for Disease Control and Prevention

born to teens are given up for adoption. Women and girls under age 20 account for 17% of all abortions.⁹

There are significant disparities by race. In 2009, the teen pregnancy rates among Hispanic and Black teen girls ages 15-19 were more than two times higher (25.6%) than the teen pregnancy rate among non-Hispanic white teen girls ages 15-19.¹⁰ Fifty-one per cent of African American girls become pregnant by 20 years old at least once. Fifty-three percent of Hispanic teens fall into the same category. The lowest pregnancy rates are for non-Hispanic white teens at 19%.¹¹

While the rate that 15-19 year old girls first have sex is declining, the rate for girls 14 and younger is increasing. The rate for youth of color is higher than that for Non-Hispanic Whites as is the number of sexual partners.¹²

Teen Pregnancy in Tennessee

In 2007, the national rate of birth to teen moms younger than 20 years old was 10.5 per 1,000. In Tennessee, the birth rate in the same age group was nearly one and half times higher at 14.7.¹³ For teens ages 15-19, there is a significant difference in birth rates between the United States and Tennessee. For Non-Hispanic Whites, the teen birth rate in Tennessee is more than one and a half times higher than for the U.S. For Blacks, the teen birth rate is 20% higher. The Hispanic teen birth rate is more than double that of the United States.

Table 1
Birth Rate per 1,000 Teens Ages 15 to 19 Years Old
Centers for Disease Control and Prevention¹⁴

Demographic group	U.S. (2008)	Tennessee (2007)
All	41.5	55.6
Black	64.2	77.2
Non-Hispanic White	27.2	45.2
Hispanic	81.8	174.8

In 2009, Tennessee and Arizona were tied for ninth place at a rate of 50.6 per 1,000 for 15-19 year olds, the 9th highest birth rate in the country.¹⁵

⁹ Quick Facts on Teen and Unplanned Pregnancy and Birth, The National Campaign to Prevent Teen and Unplanned Pregnancy

¹⁰ Op Cit

¹¹ Ibid

¹² Racial and Ethnic Disparities in Adolescent Reproductive Health, Barbara W. Sugland, Resource Center for Adolescent Pregnancy Prevention

¹³ U.S. Census, Table 89

¹⁴ State Disparities in Teenage Birth Rates in the United States, U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, Center for Health Statistics Data Brief No. 46, October 2010

¹⁵ U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, Center for Health Statistics, Vital Statistics Reports

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According to a recent Center for Health Statistics report, state-specific teen birth rates are the highest across the Southeast. Among these 12 states, Tennessee is tied with Kentucky for the seventh highest teen birth rate (per 1000 teens ages 15-19) in the nation¹⁶. The state is also in the “top ten” for highest birth rates among Black teens (8th), Non-Hispanic White teens (6th) and Hispanic teens (2nd). In Tennessee, the birth rate for African American teens is 71% higher than that of Non-Hispanic White teens. For Hispanics, the rate is nearly four times higher than for Non-Hispanic Whites.¹⁷

Teen Pregnancy in Hamilton County

In 2006, among the four largest counties in Tennessee, Hamilton County ranked second in teen pregnancy rates and third in birth rates for 10-17 year olds.¹⁸

Table 2
2006 Pregnancy and Birth Rates
Centers for Disease Control and Prevention¹⁹

Tennessee	Pregnancy	Birth
Davidson	17.6	16
Hamilton	16.3	13
Knox	12.5	14.7
Shelby	15.7	9.9

Based on data from the Ochs Center’s State of Chattanooga Region Report on Health, the overall percentage of births to teenage mothers in Hamilton County has declined after a period of increase – consistent with national data on teenage pregnancy rates.²⁰

In 2008, 12.5% of all births in Hamilton County were to mothers between the ages of 10-19--down from 14.8% in 2006. Despite this good news, **among African Americans, nearly one in four babies were born to a teenage mother (23%) – more than two and a half times the percentage for whites and more than double the percentage for Hispanics.**²¹

The percentage of births to teenage mothers varies greatly from neighborhood to neighborhood in Hamilton County. Based on birth data for 2005 to 2008, in four of the county’s thirty-six subregions, more than one-quarter of all births were to teenage mothers: Amnicola/East Chattanooga (29.3%), Downtown (26.5%), Bushtown/Highland Park (26.1%) and Glenwood/Eastdale (25.4%).²²

¹⁶ State Disparities in Teenage Birth Rates in the United States,” U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, Center for Health Statistics Data Brief No. 46, October 2010.

¹⁷ Ibid

¹⁸ Teen Pregnancy in Hamilton County, Hamilton County Health Department, 2008

¹⁹ State Disparities in Teenage Birth Rates in the United States,” U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, Center for Health Statistics Data Brief No. 46, October 2010

²⁰ State of the Region Report on Health, 2010, Ochs Center for Metropolitan Studies.

²¹ Ibid

²² Ibid

Pregnancy Prevention Programs

Successful prevention programs are now focusing on tools that help children and young adults succeed in school and make better life decisions, not just on a single message. In fact, for the first time in over a decade, the federal government is funding sex education programs that do not focus solely on abstinence.

This new holistic focus replaces abstinence-only-until marriage programming. A federally funded study of federal Title V abstinence only programs commissioned during the Bush Administration found that they had little impact on outcomes. Comparing youth who participated in the programs with a control group, the study by Mathematica Research found that:

- Program and control group youth were equally likely to have remained abstinent. About half of both groups of youth reported remaining sexually abstinent.
- Program and control group youth did not differ in their rates of unprotected sex: 23 percent of both groups reported having had sex and always using a condom; 17 percent of both groups reported having had sex and only sometimes using a condom; and 4 percent of both groups reported having had sex and never using a condom.
- For both groups, the mean age of first intercourse was 14.9 years old.²³

Girls Inc.'s Preventing Adolescent Pregnancy® Curriculum

Girls Inc., the parent organization of Girls Inc. of Chattanooga, developed the Preventing Adolescent Pregnancy curriculum in the mid-1980s as a coordinated, age-appropriate, abstinence-based series of program components to meet the specific needs and issues facing girls and young women concerning sexuality and sexual decision-making.

- * For girls ages 9 to 11, *Growing Together*SM [*Crecer juntas*SM] provides girls and their parents (or other caring adult in their lives) with opportunities and skills to learn together and communicate about development, relationships, gender roles, and expectations and values. Throughout all programs, communication with and support of parents is considered vitally important and is encouraged by staff working with participants.
- * For girls ages 12 to 14, *Will Power/Won't Power*SM [*Querer/Poder decir "no"*SM] engages participants in fun and exciting activities to strengthen assertiveness and resistance skills so that they can say no to sexual intercourse without losing friends. The program helps build positive support for being abstinent, but also begins to introduce girls to the need to avoid pregnancy and protect their health if they do have sexual intercourse (as 25–30% of girls in this age group have done.)

²³ Impacts of Four Title V, Section 510 Abstinence Education Programs Final Report, Mathematica Policy Research, April 2007

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- * For young women ages 15 to 18, *Taking Care of BusinessSM* helps them think about goals, values, relationships, and their futures and about the impact that getting pregnant or becoming infected with an STD could have. Activities in Taking Care of Business help them face reality, improve communication skills, and plan accordingly.

A rigorous, three year evaluation of the original program found that the individual components had promising results:

- * Girls who completed the Growing Together and Will Power/Won't Power programs were more likely to postpone sexual intercourse than those who participated less or not at all.
- * Older teens who completed Taking Care of Business were less likely to get pregnant than those who participated less or not at all.

The Preventing Adolescent Pregnancy curriculum is one component of the Girls Inc. program which provides girls ages 6-18 with the tools to become strong, smart and boldsm – healthy, educated and independent.

The Next Steps

While progress has been made in decreasing teen pregnancy and birth rates in Chattanooga and Hamilton County, much more still needs to be done. If this progress is to continue and increase, the public, private and non-profit sectors must work closely to fund and implement prevention programs like those offered by Girls Inc. of Chattanooga. Such programs focus on “above the waist” skills for teens and reach out with research and outcome-based curriculum to vulnerable populations and neighborhoods. Without adequate funding for such programs, vulnerable teens will make choices that will negatively impact their future and the life of their child. Prevention programs are critical if girls are going to have the opportunity to complete secondary and post-secondary education and realize a future of economic stability.

ADDENDUM

Preventing Adolescent Pregnancy:[®]

Girls Inc. developed Preventing Adolescent Pregnancy in the mid 1980s as a coordinated, age-appropriate, abstinence-based series of program components to meet the specific needs and issues facing girls and young women concerning sexuality and sexual decision-making. Counter to impressions from television shows and movies, the vast majority of girls and young women do not want to get pregnant or get infected with a Sexually Transmitted Infection (STI), but do need and want practical information and strategies for avoiding these consequences of sexual activity. While for some this means not having sexual intercourse, for many it means responsible decision-making about contraceptive use. The primary messages of the Preventing Adolescent Pregnancy program are that abstinence is best *and* that anyone who has sexual intercourse needs to use contraception and protection effectively to avoid pregnancy and STIs, including HIV.

Since its publication in the late-1980s, the series has been implemented with close to 250,000 girls and young women and has won praise for its effectiveness from principals, guidance counselors, youth advocates, community leaders, youth-serving professionals, national organizations, girls, and parents. In 1998, revised editions of the curriculum-based components were released, with increased emphasis on practical skill building, peer support, HIV/AIDS education, and with special attention to cultural diversity. This included two components translated into Spanish, which, like the English counterparts, underwent pilot testing and professional review by bilingual facilitators working with this population.

In 2001, the Second Edition of the program was released, with additional resource materials to assist facilitators with implementation and with a full evaluation section containing pre- and post-tests, plus all necessary scoring sheets and instructions for local assessment of program outcomes. Another rigorous national evaluation to assess the program's continued effectiveness is currently underway.

The three Preventing Adolescent Pregnancy curriculum-based programs use a variety of role plays, games, skits, presentations, videos, and other engaging activities to guide girls and young women in learning key information, gaining important skills, and increasing their motivation to act responsibly.