



NARAL Pro-Choice America Foundation

Teen Pregnancy: A Preventable Epidemic

Despite declines in recent years, the teen-pregnancy rate in the United States remains unacceptably high. To address this challenge, teens must be able to obtain confidential and affordable reproductive-health services. However, President Bush and other anti-choice politicians have stymied efforts to give teens the tools they need to protect themselves against unintended pregnancy and sexually transmitted diseases (STDs). Now, with a pro-choice Congress and a pro-choice President, there is an opportunity for real solutions – instead of divisiveness.

The Facts

In spite of a recent decline, the United States still has the highest rate of teen pregnancy in the western industrialized world.¹ Studies show that the United States' teen-pregnancy rate is nearly twice that in Canada and Great Britain and approximately four times that in France and Sweden.² Approximately 750,000 young women in the U.S. become pregnant each year and nearly one in three becomes pregnant before she reaches the age of 20. Eight in 10 of these pregnancies are unintended³ and nearly a third end in abortion.⁴ In addition to other consequences for young women and their children, teen childbearing costs U.S. taxpayers at least \$9.1 billion annually.⁵

Bush's Failed Approach

Since his first days in office, President Bush and his administration repeatedly failed to offer a meaningful, effective response to the problem of teen pregnancy. He and his allies in Congress spent nearly \$1 billion in taxpayer dollars on "abstinence-only" programs⁶ – programs that have been utterly disproven. Making matters worse, the administration actually *cut* programs that gave much needed assistance to families and teens.

- Research shows that "abstinence-only" programs do not work and that comprehensive sex-education programs do. In 2007, a report commissioned by the U.S. Department of Health and Human Services concluded that students in abstinence-only programs are no more likely to abstain from sex, delay initiation of sex, or have fewer sexual partners.⁷ More recently, an extensive academic evaluation of abstinence-only programs and comprehensive sex education programs found strong evidence supporting the supposition that sex education can both delay initiation of sex and increase condom or other contraceptive use among youth.⁸

- Instead of providing teens with important information and health care, the Bush Administration worked to restrict access to birth control and other health care for teens.⁹
- President Bush slashed funding for after-school programs that keep teens occupied during the hours when they are most likely to engage in risky behavior, like sex, crime, and substance use.¹⁰
- More troubling, this administration neglected the cycle of poverty in the United States by failing to raise the minimum wage and fund programs that assist low-income and other needy families.¹¹

Clearly, the Bush administration's political response to the issue of teen pregnancy didn't work. In fact, these types of policies only continue the cycle of harmful consequences to young women, their children, and communities as a whole:

- Daughters of teen mothers face a much greater risk of ending up teen moms themselves; nearly a third of daughters of teen moms had their first child when they were teens.¹²
- The sons of teen moms are more likely to end up in prison and serve longer prison sentences.¹³
- Teen mothers are more likely to drop out school, increasing the likelihood that young mothers and their children will live in poverty.¹⁴

A Better Way

While anti-choice politicians have supported policies that put teens at risk, NARAL Pro-Choice America has a better plan for helping teens prevent pregnancy: sex-education programs, better access to birth control, and investing in critical after-school programs. These programs are proven to reduce rates of teen pregnancy and STDs, and promote responsible behavior.

- **Teens must be given the information necessary to protect themselves against unintended pregnancy and STDs** – and that begins with honest, age-appropriate, and medically accurate sex education.
 - Comprehensive sex-education programs work. They delay initiation of sex, reduce frequency of sex, and increase contraceptive use.¹⁵
 - Sex education and condom availability *do not* increase sexual activity among teens.¹⁶

- **Teens must have access to confidential and affordable reproductive-health services.**
 - Research shows that restricted access to reproductive-health services and parental-involvement mandates have negative consequences on teen health. Studies show that even parental consent for birth control would deter teens from seeking other reproductive-health services, including testing and treatment for STDs.¹⁷
 - A recent study found that 86 percent of the recent decline in teen pregnancy rates was due to more teens using contraceptives.¹⁸
- **After-school programs reduce risky behavior by involving teens in activities that provide safe settings and positive role models.**
 - One study found that the likelihood of teens having sex for the first time increases with the number of unsupervised hours teens have during a week.¹⁹
 - After-school programs help reduce the rate of teen pregnancy by instilling good decision-making skills and positive role models in a supervised setting.²⁰
 - Teenage girls who play sports are more likely to delay sex, have fewer partners, and are less likely to become pregnant.²¹
- **And Americans agree.**
 - Ninety-nine percent of Americans agree that young people should be provided with medically accurate information about STDs, and 94 percent of Americans believe young people should learn about birth control.²²
 - More than eight of 10 Americans believe that young people should be taught how to use, and where to obtain, contraceptives.²³
 - Americans want schools to cover “real-life issues,” such as how to deal with potential consequences of having sex and the emotional consequences of being sexually active.²⁴
 - Seven in 10 Americans oppose the use of federal funds to promote abstinence-only programs that censor information about condoms and contraception.²⁵

Legislative Solutions

Pro-choice lawmakers have a serious, comprehensive plan to prevent teen pregnancy, embodied in a package of legislative proposals. Together the agenda represents a commonsense approach that incorporates honest sex education, promotes abstinence (but not censorship), funds after-school programs, and supports parents.

- The Teen Pregnancy Prevention, Responsibility and Opportunity Act (S.1137/H.R.2097) sponsored by Sen. Robert Menendez and Rep. Steve Rothman (both D-NJ), would help schools and non-profit organizations set up programs that encourage teens to delay sexual activity and help parents communicate with their children about sex. In addition, the proposal would restore proposed funding cuts for essential after-school programs that keep young people on the road to success.²⁶
- The Responsible Education About Life Act, known as the REAL Act (S.972/H.R.1653), has been authored by Sen. Frank Lautenberg (D-NJ) and Reps. Barbara Lee (D-CA) and Christopher Shays (R-CT). This bill would establish the first-ever federal program for comprehensive, medically accurate sex-education programs.²⁷
- The Guarantee of Medical Accuracy in Sex Education Act (S.4059/H.R.5598 in the 109th Congress), sponsored by Sen. Lautenberg and Reps. Luis Gutierrez (D-IL) and James Moran (D-VA) would ensure that federally funded abstinence-only programs are medically accurate. The aim of this legislation is to ensure that taxpayer funds are not spent on the spread of misinformation.²⁸

Conclusion

For too many years, anti-choice politicians have offered up failed, ineffective “abstinence-only” programs as their only solution to the problem of teen pregnancy. What works is clear: providing teens with medically accurate health information, access to reproductive-health services – including contraceptives – and programs outside of school hours. Now is the time to move beyond politically divisive tactics and chart a new course that helps teens avoid unintended pregnancy and plan for their futures.

January 1, 2009

Notes:

¹ The National Campaign to Prevent Teen Pregnancy, *General Facts and Stats* (Nov. 2006) at <http://www.teenpregnancy.org/resources/data/genlfact.asp>.

² Heather Boonstra, *Teen Pregnancy: Trends and Lessons Learned*, THE GUTTMACHER REPORT ON PUBLIC POLICY (Feb. 2002).

-
- ³ The National Campaign to Prevent Teen Pregnancy, *General Facts and Stats* (Nov. 2006) at <http://www.teenpregnancy.org/resources/data/genlfact.asp>.
- ⁴ Guttmacher Institute, *Facts on American Teens' Sexual and Reproductive Health* (Sept. 2006).
- ⁵ Saul D. Hoffman, Ph.D., *By the Numbers; The Public Costs of Teen Childbearing*, THE NATIONAL CAMPAIGN TO PREVENT TEEN PREGNANCY (Oct. 2006).
- ⁶ Sharon Jayson, *Study: Abstinence classes don't stop sex*, USA TODAY, Apr. 13, 2007.
- ⁷ Mathematica, *Impacts of Four Title V, Section 510 Abstinence Education Programs; Final Report* (Apr. 2007).
- ⁸ Leslie Kantor et al., *Abstinence-Only Policies and Programs: An Overview*. 5 SEXUALITY RES. & SOC. POL'Y 6-17 (2008).
- ⁹ *FDA delays decision on OTC emergency contraception*, USA TODAY, Feb. 2, 2004.
- ¹⁰ Sharon Parrott and Jennifer Mezey, *Bush Administration Projects That the Number of Children Receiving Child Care Subsidies Will Fall By 200,000 During the Next Five Years; Actual Loss in Child Care Subsidies Likely Would Be Far Greater*, CENTER FOR BUDGET AND POLICY PRIORITIES (Feb. 5, 2003).
- ¹¹ Coalition on Human Needs, *The Bush Budget Less Help for People in Need; Needless Help for Those with High Incomes* (Feb. 16, 2007).
- ¹² Saul D. Hoffman, Ph.D., *By the Numbers; The Public Costs of Teen Childbearing*, THE NATIONAL CAMPAIGN TO PREVENT TEEN PREGNANCY (Oct. 2006).
- ¹³ Saul D. Hoffman, Ph.D., *By the Numbers; The Public Costs of Teen Childbearing*, THE NATIONAL CAMPAIGN TO PREVENT TEEN PREGNANCY (Oct. 2006).
- ¹⁴ Saul D. Hoffman, Ph.D., *By the Numbers; The Public Costs of Teen Childbearing*, THE NATIONAL CAMPAIGN TO PREVENT TEEN PREGNANCY (Oct. 2006).
- ¹⁵ Kirby, Douglas, Ph.D., *Emerging Answers; Research Findings on Programs To Reduce Teen Pregnancy*, THE NATIONAL CAMPAIGN TO PREVENT TEEN PREGNANCY (May 2001).
- ¹⁶ Kirby, Douglas, Ph.D., *Emerging Answers; Research Findings on Programs To Reduce Teen Pregnancy*, THE NATIONAL CAMPAIGN TO PREVENT TEEN PREGNANCY (May 2001).
- ¹⁷ Cynthia Dailard and Chinué, *Teenagers' Access to Confidential Reproductive Health Services*, THE GUTTMACHER REPORT ON PUBLIC POLICY (Nov. 2005).
- ¹⁸ News Release, Guttmacher Institute, *U.S. Teen Pregnancy Rates Are Down Primarily Because Teens Are Using Contraceptives Better* (Dec. 1, 2006).
- ¹⁹ Jennifer Manlove, Ph.D., Kerry Franzetta, Krystal McKinney, Angela Romano Papillo, M.A., Elizabeth Terry-Humen, M.P.P., *A Good Time: After-School Programs to Reduce Teen Pregnancy*, THE NATIONAL CAMPAIGN TO PREVENT TEEN PREGNANCY (Jan. 2004).
- ²⁰ Afterschool Alliance, *Afterschool Alert Issue Brief; Afterschool and Pregnancy Prevention* (Jul. 2002).
- ²¹ Jennifer Manlove, Ph.D., Kerry Franzetta, Krystal McKinney, Angela Romano Papillo, M.A., Elizabeth Terry-Humen, M.P.P., *A Good Time: After-School Programs to Reduce Teen Pregnancy*, THE NATIONAL CAMPAIGN TO PREVENT TEEN PREGNANCY (Jan. 2004).

²² National Public Radio/Kaiser Family Foundation/Kennedy School of Government, *Sex Education in America; General Public/Parent Survey* (Jan. 2004).

²³ National Public Radio/Kaiser Family Foundation/Kennedy School of Government, *Sex Education in America; General Public/Parent Survey* (Jan. 2004).

²⁴ National Public Radio/Kaiser Family Foundation/Kennedy School of Government, *Sex Education in America; General Public/Parent Survey* (Jan. 2004).

²⁵ National Public Radio/Kaiser Family Foundation/Kennedy School of Government, *Sex Education in America; General Public/Parent Survey* (Jan. 2004).

²⁶ S. 1137, 110th Cong. § 1 (2007); H.R. 2097, 110th Cong. § 1 (2007).

²⁷ S. 972, 110th Cong. § 1 (2007); H.R. 1653, 110th Cong. § 1 (2007).

²⁸ S. 4059, 109th Cong. § 2 (2006); H.R. 5598, 109th Cong. § 2 (2006).