

Advisory Council on Adolescent Pregnancy 2006 Report

May 2007



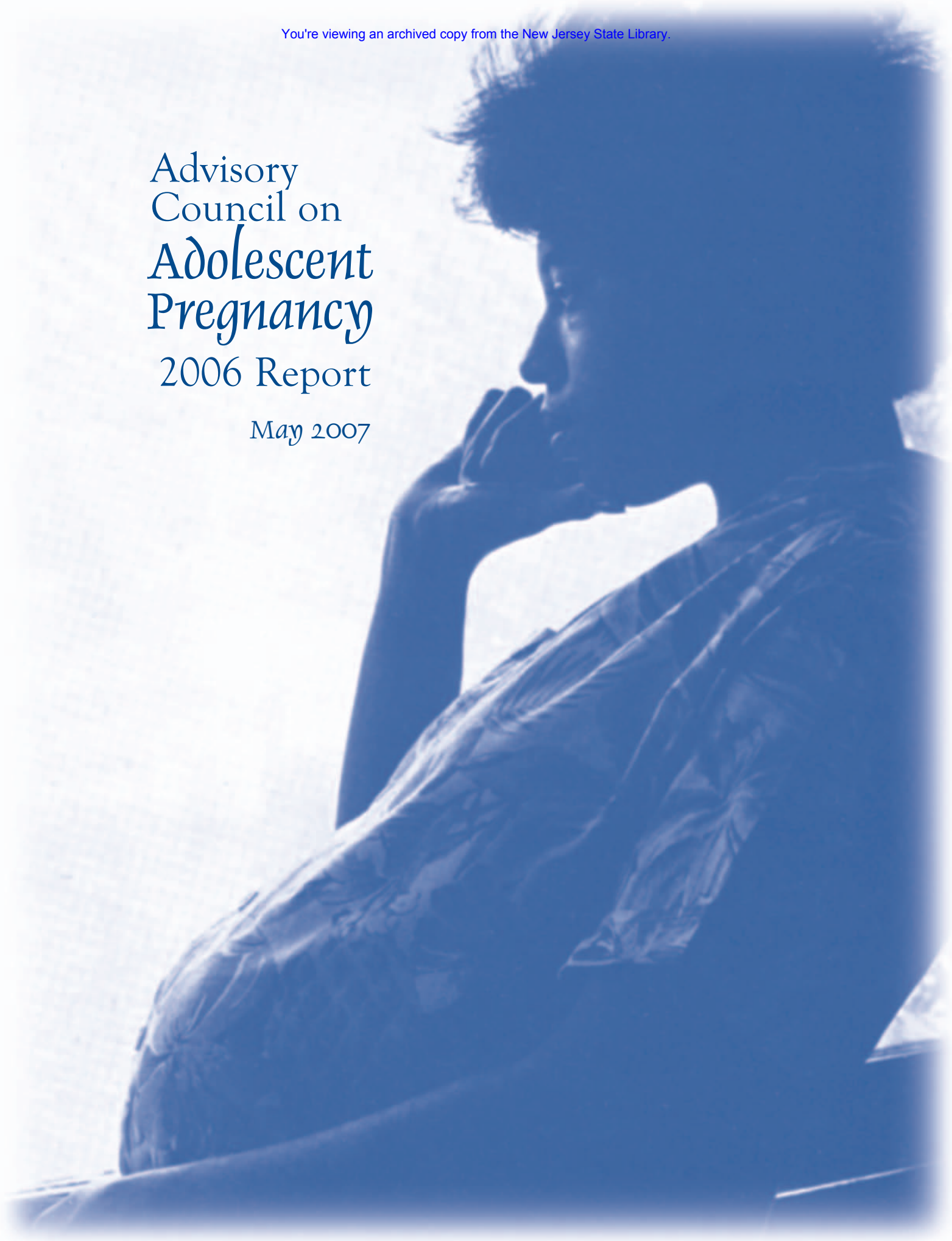
Jon S. Corzine
Governor



Fred M. Jacobs, M.D., J.D.
Commissioner

Advisory
Council on
*Adolescent
Pregnancy*
2006 Report

May 2007



Advisory Council on Adolescent Pregnancy

Summary

The purpose of this report is to advise the Governor and Legislature of the activities of the Advisory Council on Adolescent Pregnancy, including its findings and recommendations for legislation, administrative action or other methods for preventing adolescent pregnancy, reducing out-of-wedlock births in adolescents and improving services for pregnant and parenting teens. This report also contains a review of the responsibilities of the Advisory Council on Adolescent Pregnancy, the activities the Council has undertaken to fulfill its duties, the recommendations of the Council, future activities, and additional data on teen pregnancy. For the purpose of this report, an adolescent is defined as a person age 10 through 19 years of age.

Reports from the Centers for Disease Control and Prevention highlight the continuing decline in teen birth rates for the 13th straight year, with the birth rate among the youngest teens ages 10 to 14 dropping to its lowest level since 1946. The National Campaign for Teen Pregnancy Prevention ranks New Jersey 8th lowest in the rate of teen births nationally.

This statistic, however, masks the fact that the U.S. teen birth rate is substantially higher than birth rates for other developed countries, and has declined less steeply than other developed countries over the last three decades. In spite of the declines, this

still translates into more than 7,000 births to teens each year in New Jersey.

Teenage childbearing has major ramifications not only for the teen mother, father, and their child, but also for society and the structures needed to support the adolescent's family. Having a child while still a child places the teen mother at greater risk for health problems and other consequences. In



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addition to being emotionally and economically unprepared for parenthood, teen mothers are more likely to delay prenatal care until the third trimester or to have no prenatal care at all. They are also more likely to smoke during pregnancy, which in conjunction with other risk factors, increases the likelihood of having a preterm or low birth weight baby. These babies have a much higher risk of serious and long-term illness, developmental delays and dying in the first year of life. The children of teen parents are less likely to receive medical care, receive less cognitive stimulation and parent-child interaction, and suffer from higher rates of abuse and neglect. They are also more likely to perform poorly at school, initiate sex at an early age and to have a teen birth themselves.

Our communities can successfully work together to prevent teen pregnancy. The annual cost associated

with childbearing prior to age 18 is \$6.9 billion, nationally. Various studies have looked at the state and local costs of teen pregnancy and pregnancy prevention. Every study demonstrates that a much larger amount of money is spent on the consequences of teen pregnancy than on prevention. New Jersey has an opportunity to invest in prevention and reduce both the monetary costs and the costs to our youth burdened by the often overwhelming responsibilities of teen pregnancy and parenting.



Council Responsibilities

The legislation creating the Advisory Council on Adolescent Pregnancy was signed into law on August 25, 1997 by Governor Christine Todd Whitman (P.L. 1997, c. 229) as part of a larger legislative effort to develop a prevention and education outreach strategy for adolescents. The purpose of the Advisory Council is to establish a permanent body to coordinate and improve the services of state and local government, private and voluntary agencies, community organizations, and schools that serve adolescents at high risk for pregnancy, pregnant adolescents, adolescent parents, and their families. Recently, amendments were made to the statute that created the Council. The amendments define the Council as “allocated within the Department of Health and Senior Services, but notwithstanding that allocation, the advisory council shall be independent of any supervision or control by the department or by any board or officer thereof.” The amendments also require the appointment of an ex-officio member from the newly created Department of Children and Families.

The Advisory Council has the following duties:

1. Review past policy proposals, including those contained in the 1988 report of the New Jersey Task Force on Adolescent Pregnancy;
2. Develop policies for the State to prevent adolescent pregnancy, reduce out-of-wedlock births among adolescents, and improve services to at-risk, pregnant and parenting adolescents;
3. Assist with and promote a coordinated and comprehensive approach to the social, economic, and health problems of adolescent pregnancy and parenthood among public and private groups;
4. Collect information on current and new efforts aimed at preventing adolescent pregnancy and improving services to at-risk, pregnant, and parenting adolescents;
5. Promote and encourage broad community input, communication and education regarding adolescent pregnancy;
6. Provide advice to local, public and private

agencies and schools seeking to mobilize local efforts designed to prevent adolescent pregnancies and assist adolescent parents; and

7. Coordinate activities generated by the National Campaign to Prevent Teen Pregnancy and the Family Planning Program in the New Jersey Department of Health and Senior Services.



2005—2006 Recommendations

1. The Advisory Council on Adolescent Pregnancy recommends revising P.L. 1997, chapter 229, to simplify and streamline the appointment of teen members, two teenagers and two teenage parents, to the Advisory Council in order to maintain vital teen representation.
2. The Advisory Council supports the ongoing efforts of School Based Youth Services Programs to expand their outreach to include education and support to parents of teens and pregnant and parenting teens.
3. The Advisory Council recommends that the Department of Education develop a mechanism to assess and monitor local school districts' compliance with the Health and Physical Education Core Curriculum Content Standards, specifically comprehensive family life education. Additionally, the Council recommends the development of a "report card" regarding inclusion of family life issues in local district health curriculum.
4. The Advisory Council recognizes the link between teen parenting and the risk for child abuse. The Council recommends collaboration with the Department of Children and Families, Division of Prevention and Community Partnerships to identify promising approaches to prevent teen pregnancy and/or provide needed family supports to teen parents.
5. The Advisory Council recommends the development and support of regional conferences or workshops targeting school personnel to promote best practices in the delivery of the Health and Physical Education Core Curriculum Standards, specifically in the area of comprehensive family life education.
6. The Advisory Council recommends that resources be allocated to develop *A Parent's Guide to Teen Pregnancy Prevention* that would be disseminated to parents of middle and high school students.
7. The Advisory Council recommends that adequate resources be made available to re-commission the *Children of Children: Portrait and Stories of Teenage Parents* exhibit in calendar year 2008.



Council Activities

This was an extremely busy and productive year for the Advisory Council. Council meetings focused on identifying and addressing vital issues related to teen pregnancy. Two new Council members were appointed and a volunteer recognition event was planned to thank former members who have served since the Council's inception. An ongoing challenge for the council has been the lack of teen representatives. Although teen representatives are included in the makeup of the council, there has been no teen representation for over two years.

This year the primary focus of the council was on bringing the national exhibit, *Children of Children, Portraits and Stories of Teenage Parents* to New Jersey. This interactive multimedia exhibit is a unique collection of portraits and stories from individuals who have been affected by a teen pregnancy. Powerful, riveting and compelling were all adjectives used to describe the experience of viewing Children of Children. The exhibit was developed by photographer Michael Nye and consists of 50 black and white photographs accompanied by audio stories from the individuals in the

portraits. The audio stories tell of the many issues brought on by a teen pregnancy. One goal of this exhibit was to encourage dialogue between parents, educators and youth about teen pregnancy and its effects on all members of a family. Another goal was to provide a forum where New Jersey teens could share their views about teen pregnancy in a non-judgmental forum.

Council members serving on the Children of Children committee spent months preparing to host this national exhibit. One of the major challenges was finding an appropriate location for the exhibit. Over six different sites were explored but did not meet the exhibit criteria. The Council was also dedicated to evaluating the impact of the exhibit on teens and developing a way to collect and review teens' thoughts, opinions, myths and beliefs about



the effects of teen pregnancy. Council members developed an evaluation plan which included a facilitated discussion with teens after each viewing. Teens' thoughts, ideas and feelings were collected and recorded.

The *Children of Children, Portraits and Stories of Teenage Parents* exhibit was open to the public for two weeks, from May 16 -26, 2006 at the Robert Wood Johnson Center for Health and Wellness in Hamilton, New Jersey. The Council targeted middle school & high school students, sending exhibit announcements to every school district in New Jersey.

Television coverage of the exhibit included New Jersey Network and WPVI Philadelphia. Newspaper coverage by the *Trenton Times* also encouraged local attendance at the event.

The Council engaged the Central New Jersey Maternal and Child Health

Consortium and volunteers from the New Jersey Department of Health and Senior Services to assist with organizing, coordinating and evaluating the exhibit.

Who Attended the *Children of Children, Portraits and Stories of Teenage Parents* Exhibit?

A total of 1,336 students attended the exhibit. Of those a total of 958 completed student evaluations from which the following data were compiled. Forty-four percent of students were 16-19 year olds, and forty-three percent were 13-15 year olds. The majority of students were female (71%) and Caucasian (33%) followed closely by Black non-Hispanic (31%).



Students and teachers attended the exhibit from twelve of the state's 21 counties. The exhibit was held in Mercer County, located within the central part of the State. Students came to view the exhibit

Council Activities

from as far south as Camden County, and as far north as Passaic County, with the greatest number of students coming from Essex County.

The types of schools sending students to the exhibit included: high schools (public and private), vocational/technical schools, middle and elementary schools and special interest schools. The special interest schools included a school for pregnant teens and a school for children with learning and behavioral issues. The greatest numbers of students in attendance were from high schools and in either 9th or 12th grade.

In addition to the students who viewed the exhibit, there were also 119 people who viewed the exhibit during the time the exhibit was open to the public. The majority of the viewers rated the exhibit good or excellent and described it as powerful and well done. For the public it provided a better understanding of the impact of teen pregnancy and confirmed that it is a serious issue.





Children of Children Exhibit Evaluation

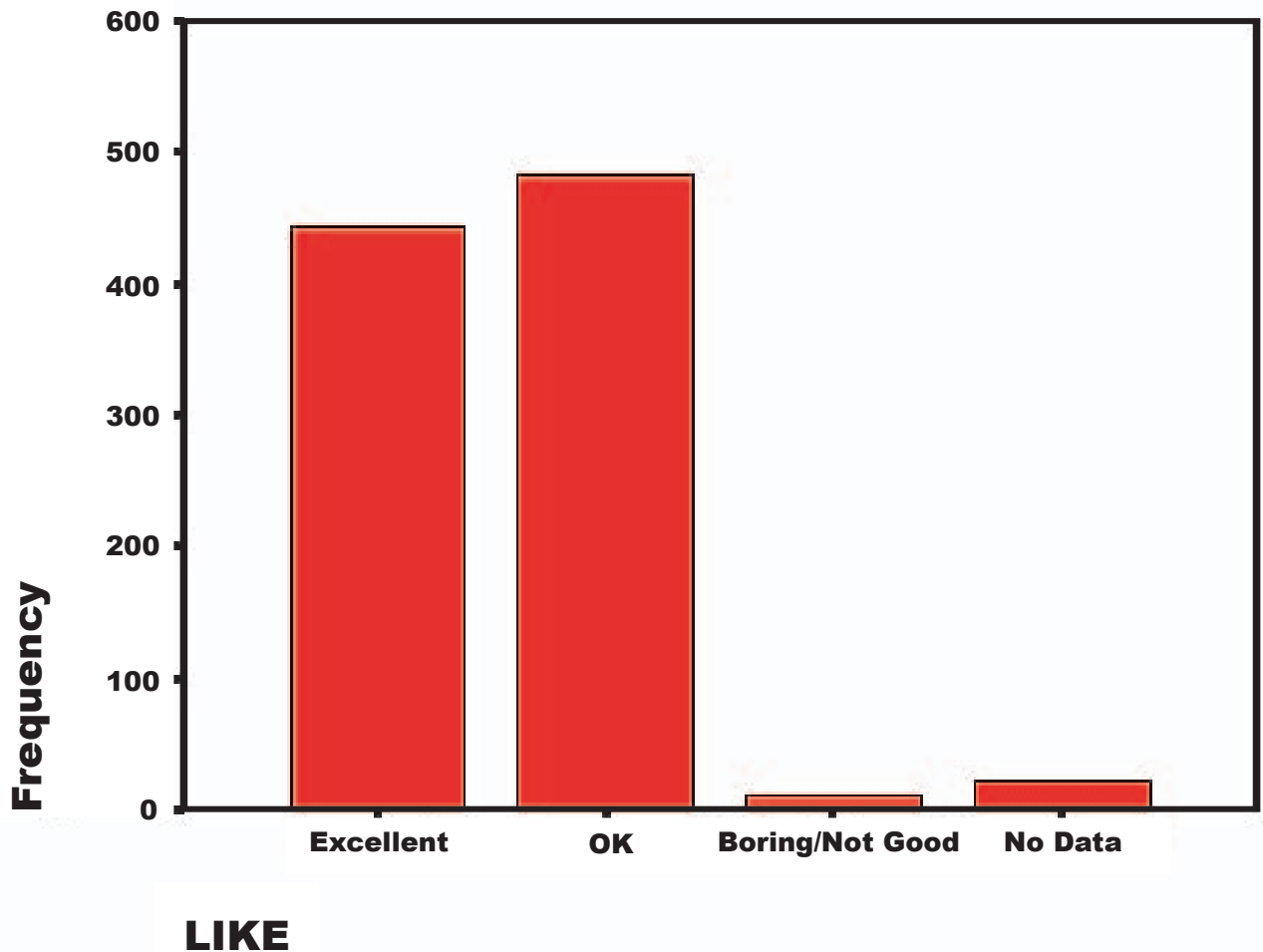


*Children of Children: Portraits &
Stories of Teenage Parents* by
photographer Michael Nye
www.michaelnye.org



Children of Children Evaluation (N=938)

Question 1-Did you like the exhibit?

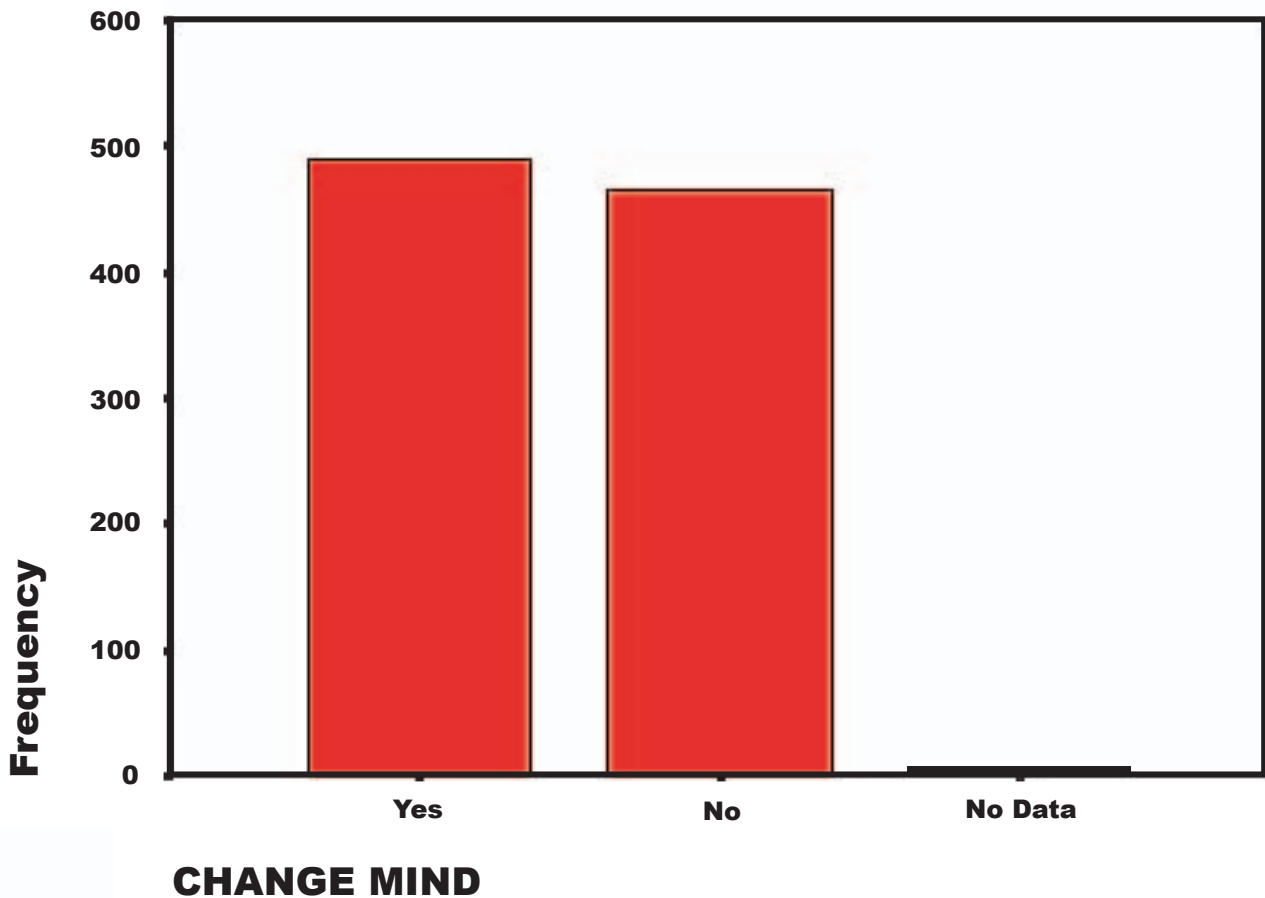


"The pictures in black and white are very compelling..."

*"I really enjoyed this exhibit, I learned a lot and
I will remember this experience."*

Children of Children Evaluation (N=938)

Question 2–Did seeing the exhibit change your mind about teen pregnancy?

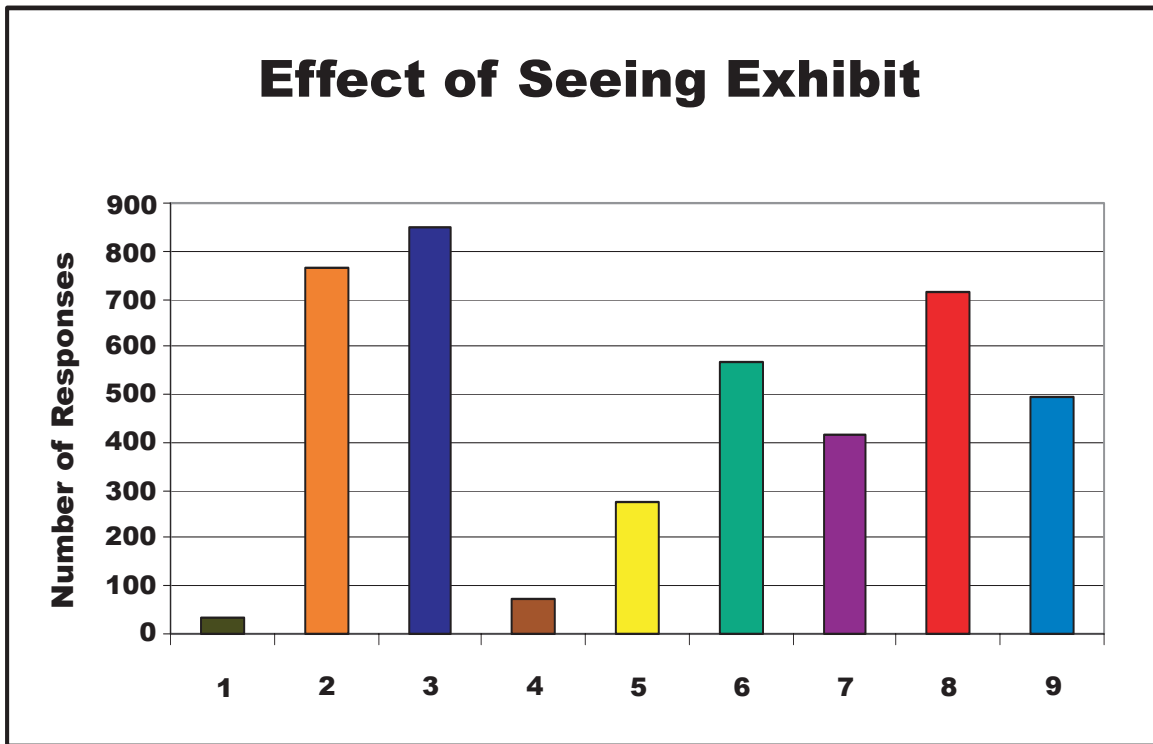











"It changed my mind by showing how it affects the people around you."

*"Well, I have always thought that it was a bad idea,
this just made my opinion stronger."*

Children of Children Evaluation (N=938)

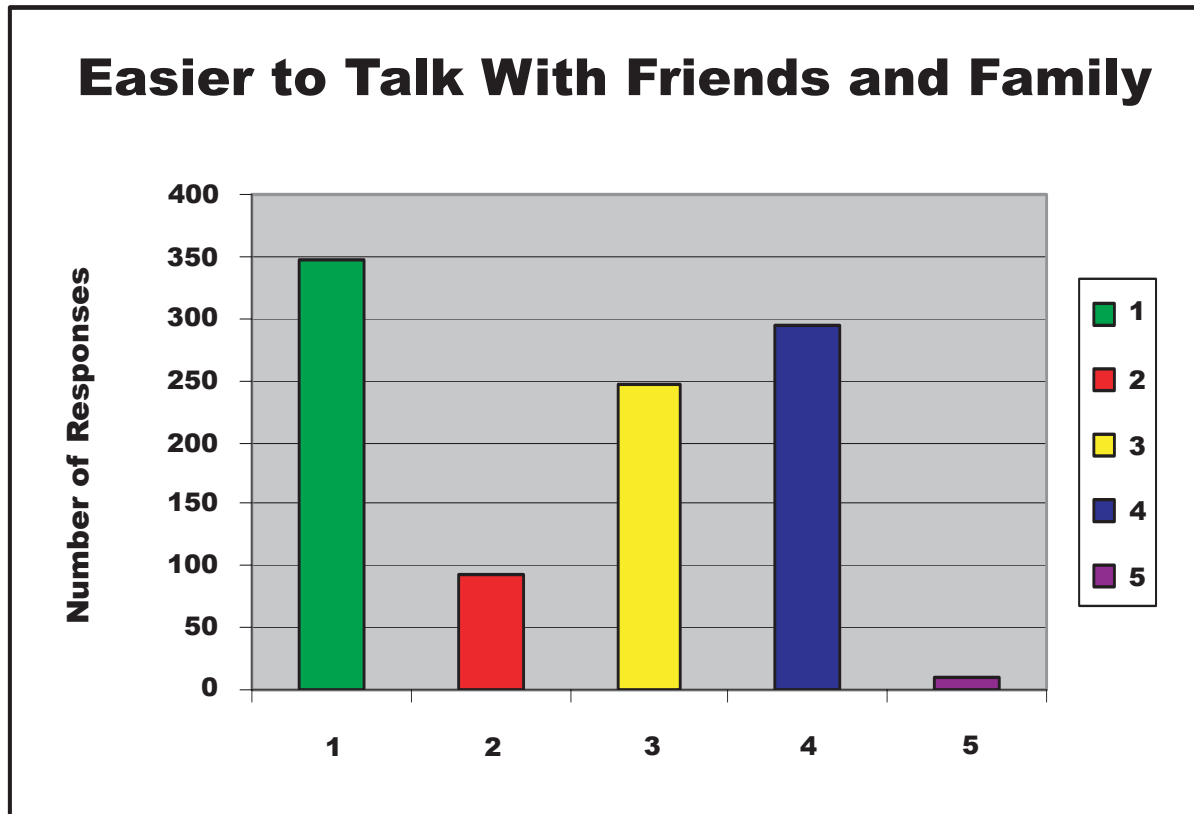
Question 3–What effect do you think that seeing this exhibit will have on people like you?
Check all statements that apply to you.



- | | | |
|---|---|--|
| 1 |  | make them want to become a parent |
| 2 |  | make them want to be sure they do not become a parent until they are older |
| 3 |  | make them realize how hard it is to be a teen parent |
| 4 |  | make them happy they are teen parents |
| 5 |  | make them sad or worried that they are teen parents |
| 6 |  | make them think that teen parents should have been more responsible so they don't get pregnant |
| 7 |  | make them respect teen parents more |
| 8 |  | make them want to learn more about ways to prevent pregnancy |
| 9 |  | make them afraid they might become a parent before they are ready |

Children of Children Evaluation (N=938)

Question 4–Will seeing the exhibit make it more likely for you to talk to your friends or family about teen parenting?



1	<div></div>	Yes
2	<div></div>	No
3	<div></div>	Maybe
4	<div></div>	I already do
5	<div></div>	No data

*Please note that student data was compiled on 958 completed student evaluations. This represents 72% of the total student attendance.

Children of Children Feedback and Evaluation

Council members were dedicated to recording as much feedback about teen pregnancy as possible from the teens themselves. A facilitated discussion guide was developed and trained volunteers, experienced in working with teens, led the discussion groups. All major responses were recorded on flipcharts after each group of teens finished viewing the Children of Children exhibit. Here is a sampling of the questions and responses:

1. Why do you think teens get pregnant?

Teens responded:

- ❖ want own life
- ❖ know everything!! (consequences, responsibilities)
- ❖ It can't happen to me....
- ❖ ignorant
- ❖ think it's cool
- ❖ unloved at home; need love
- ❖ peer pressure
- ❖ substance abuse
- ❖ wanting to be an adult
- ❖ player lines
- ❖ don't believe in abortion
- ❖ oops!
- ❖ comfort (love)
- ❖ curious, feels good

2. What would help teens avoid pregnancy?

Teens responded:

- ❖ think before you act
- ❖ don't use sexual activity
- ❖ tell your friends not to get pregnant
- ❖ tell them about how it affects their future
- ❖ tell them how hard it is – cost
- ❖ financial cost
- ❖ advertise on TV and media billboards
- ❖ commercials
- ❖ get info in schools and teen hang-outs
- ❖ teach about sexual activity at a younger age.....you cannot teach us when we're already active
- ❖ have MTV stories about teenage pregnancy
- ❖ have people come to schools telling personal stories



Children of Children Feedback and Evaluation

- ❖ condoms available at schools – we can't afford but need – too embarrassed to buy them
- ❖ meet with parents and kids to talk
- ❖ think nothing will happen
- ❖ lack of childhood education
- ❖ fear of expressing one's self
- ❖ better communication with parents & teachers

3. What should New Jersey do to prevent teen pregnancy?

Teens responded:

- ❖ teach abstinence and birth control
- ❖ free vasectomies
- ❖ learn to say "no"
- ❖ pass out free condoms
- ❖ other choices (of) birth control, "outer"-course
- ❖ teach how to use a condom
- ❖ have more job training programs
- ❖ mentor programs
- ❖ after school programs
- ❖ more exhibits
- ❖ increase education on the negatives of teen pregnancy
- ❖ more free youth centers
- ❖ use mechanical baby as early as 5th grade
- ❖ programs on negativity of abortions
- ❖ keep kids busy, more summer jobs
- ❖ increase awareness
- ❖ 1:1 teen pregnancy programs
- ❖ offer programs within communities



- ❖ provide information where teens hang-out
- ❖ offer exhibits like this at schools
- ❖ incentives for those who do not get pregnant
- ❖ hotline & website available to teens
- ❖ have teen parents speak out

Children of Children Feedback and Evaluation

4. What impact did this exhibit have on you?

Teens Responded:

"It made me not think about sex, and to start practicing abstinence till I am older."

"It changed my mind making me think twice about all pregnant women."

"I see how hard it is to be a teen parent & I don't want to go through the drama of teen pregnancy."

"It changed my mind by showing how it affects the people around you."

"I didn't think about all the hard times and consequences that teens face. It's a rough time."

"This truly taught me more that I don't want to take any chances because it's not worth it."



Children of Children Feedback and Evaluation

"It allowed me to see how hard it really is to be a teen parent."

"It has made me realize how much it takes to take care of a child."

"The exhibit opened my eyes to more of the emotional aspects of being a teen-age parent."

"It made me want to be careful."

"Gives a more personal feel and helps to give you a better idea of what the parents go through personally."



"I never knew how many responsibilities there were in teen pregnancy."



"Before I used to think teen pregnancy was normal and cute, now I understand that it is not cute or easy."

"Because now I know not to have sex until I am stable and can afford to take care of a baby."

"That teen pregnancy is no fun and games it really hurts you and your family."

"To be responsible and don't get pregnant fast."

"Because you will have to change your whole life plan."

"Well, I have always thought that it was a bad idea, this just made my opinion stronger."

Children of Children Feedback and Evaluation

"Teen parents aren't always disappointed with their lives."

"It showed me that people can become stronger and actually happier by becoming a teen parent, and can give their life a sense of direction."

"It tells me that I am not ready to be a teen parent I just have to wait for the right time to come."

"The pictures in black and white are very compelling-you can feel the subjects personalities."

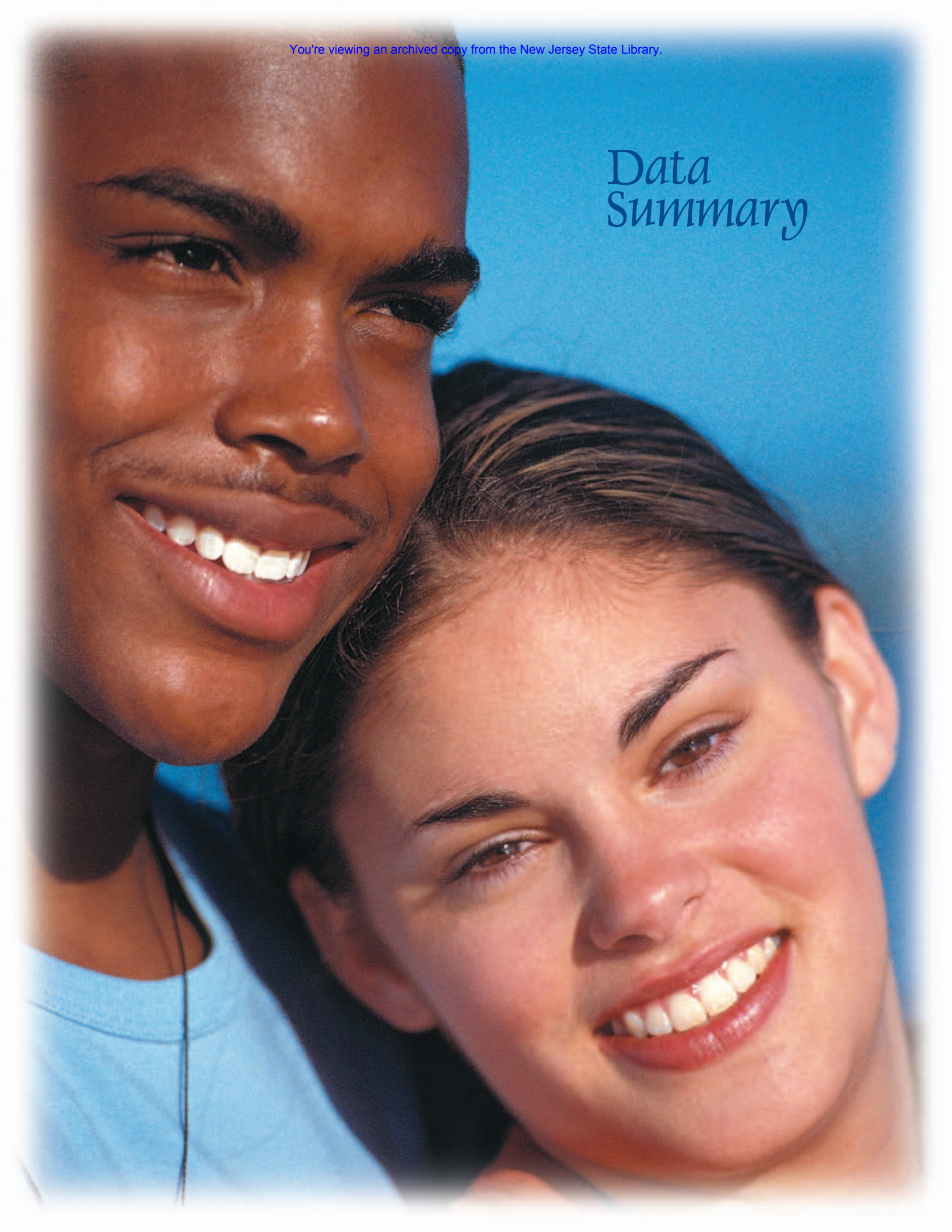
"I take the issue very seriously & would love to see more adults involved with teens as far as mentoring is concerned. Teens need & want adults who are not related to them to take an interest in their lives."

"I really enjoyed this exhibit, I learned a lot and I will remember this experience."





Data Summary





Data Summary

Council

New Jersey Data Summary	1997	1998	1999	2000	2001	2002	2003*
Total Female Population							
10-14	259,762	264,690	272,615	287,615	297,208	303,131	304,381
15-19	247,049	251,468	252,339	254,196	266,190	274,077	279,639
Number of Births to Teens under 20							
10-14	197	160	167	125	143	144	90
15-17	3,211	3,082	2,756	2,642	2,539	2,478	2,364
18-19	5,413	5,579	5,469	5,385	5,113	4,850	4,755
Total	8,821	8,821	8,392	8,152	7,795	7,472	7,209
Percent of Total Births to Teens	7.8%	7.7%	7.4%	7.1%	6.7%	6.5%	6.2%
Birth Rate (per 1,000 population)							
15-17	21	20.1	18	16.6	15.5	14.7	13.8
18-19	56.3	56.5	55.2	56.9	49.9	45.9	43.9
15-19	34.7	34.1	32.6	31.6	28.8	26.7	25.5
Repeat Births to Teens < 20 (1)	20.6%	20.3%	20.1%	19.0%	18.3%	18.3%	17.7%
Births to Unmarried Teens < 20	90.0%	89.5%	89.4%	89.3%	88.3%	88.9%	88.4%
Percent of Teens Who Received First Trimester Prenatal Care	54.2%	53.8%	52.7%	50.4%	50.6%	51.6%	52.3%
Percent of Teens Who Received No Prenatal Care	2.5%	2.0%	2.2%	1.8%	3.3%	2.6%	2.9%
REPORTED INFECTIOUS DISEASE FACTORS							
Chlamydia Rate (per 100,000 females aged 15-19)	1671.7	1856.7	1684.2	1593.1	1875	2026	1003.5
Gonorrhea Rate (per 100,000 females aged 15-19)	602.7	622.7	590.9	554.4	596	681	419.8
All Teens 13-19 Living w/HIV/AIDS (3)	324*	351*	177**	199**	208	270	307

(1) The Right Start for America's Newborns: A Decade of City and State Trends (1990-2003). 2006. The Annie E. Casey Foundation, Baltimore, MD.

(2) New Jersey Department of Health and Senior Services, Division of Communicable Diseases, Trenton, NJ.

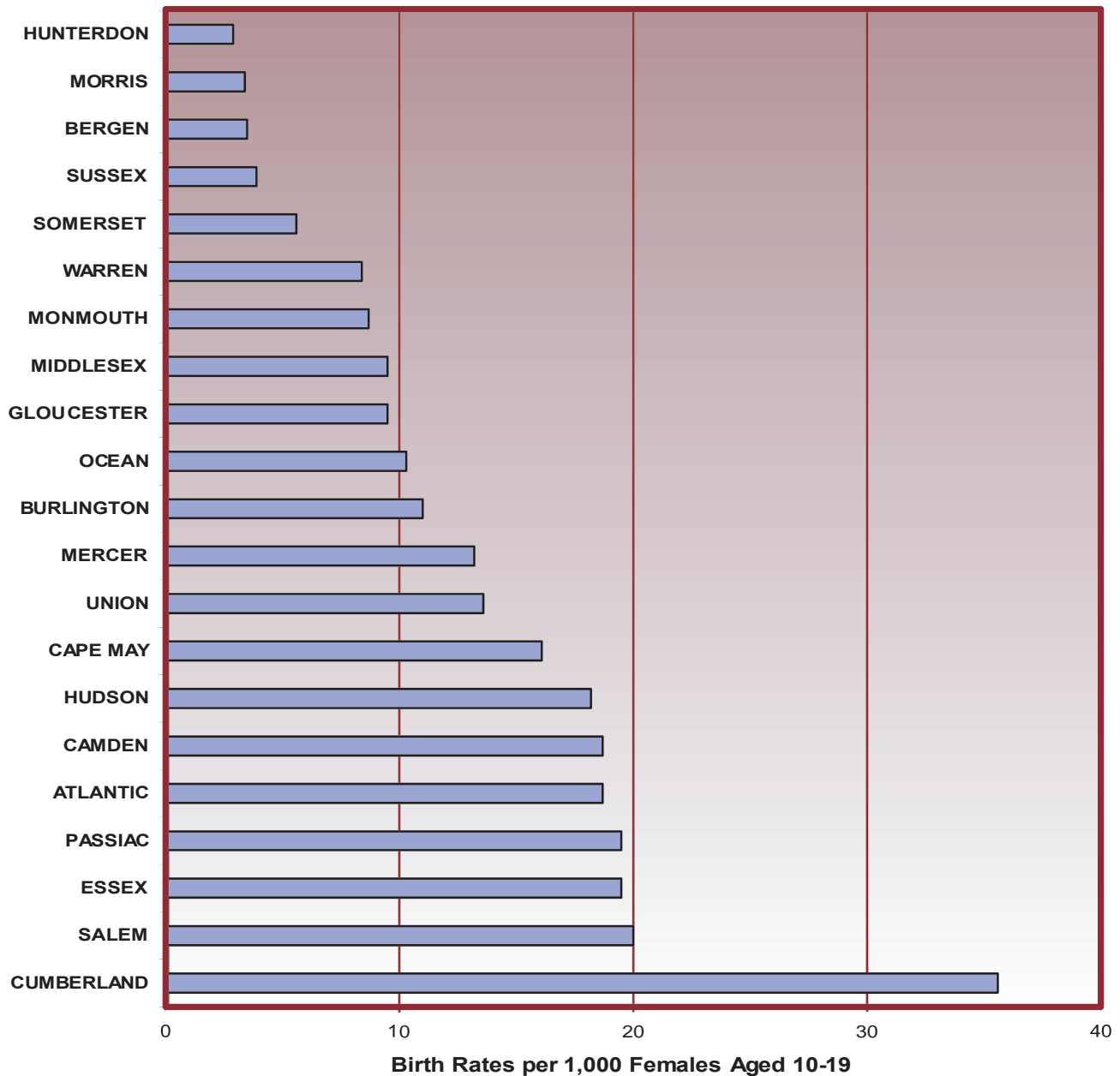
(3) New Jersey Department of Health and Senior Services, Division of AIDS Prevention and Control. January 2003 - December 2003. Trenton, NJ.

* 1997 and 1998 were persons who were classified at time of AIDS diagnosis or first HIV report.

** 1999 and 2000 represent the current age of persons with HIV/AIDS

Council

Teen Birth Rates by County of Residence New Jersey, 2003

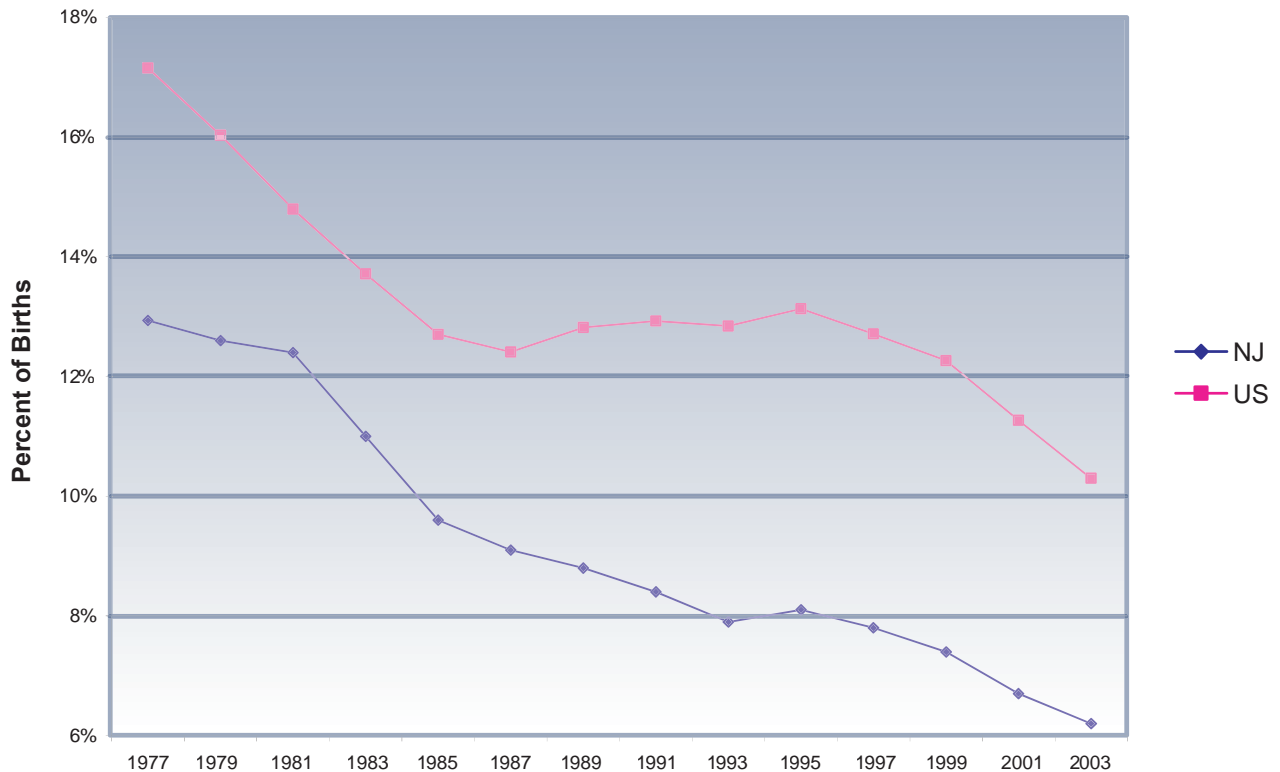


Teen birth rates vary considerably by county in New Jersey. Cumberland County continues to have the highest rate at 35.6 and Hunterdon County the lowest for the past several years at 2.9.

Data Summary

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Percent of Births to Women Under 20, 1977-2003



BIRTHS TO PRE-TEENS AND TEENS BY AGE GROUP NEW JERSEY, 1993-2003							
Age	1993	1995	1997	1999	2001	2002	2003
10-14	279	226	197	167	143	144	90
15-17	3586	3585	3211	2756	2,539	2478	2364
18-19	5470	5512	5413	5469	5,113	4850	4755
Total	9335	9323	8821	8392	7795	7472	7209
% of Total	7.9	8.1	7.8	7.4	6.7	6.5	6.2
Total State Births	117,184	114,935	113,332	113,810	115,769	114,642	116,996
Data Source: Center for Health Statistics, New Jersey Department of Health and Senior Services							

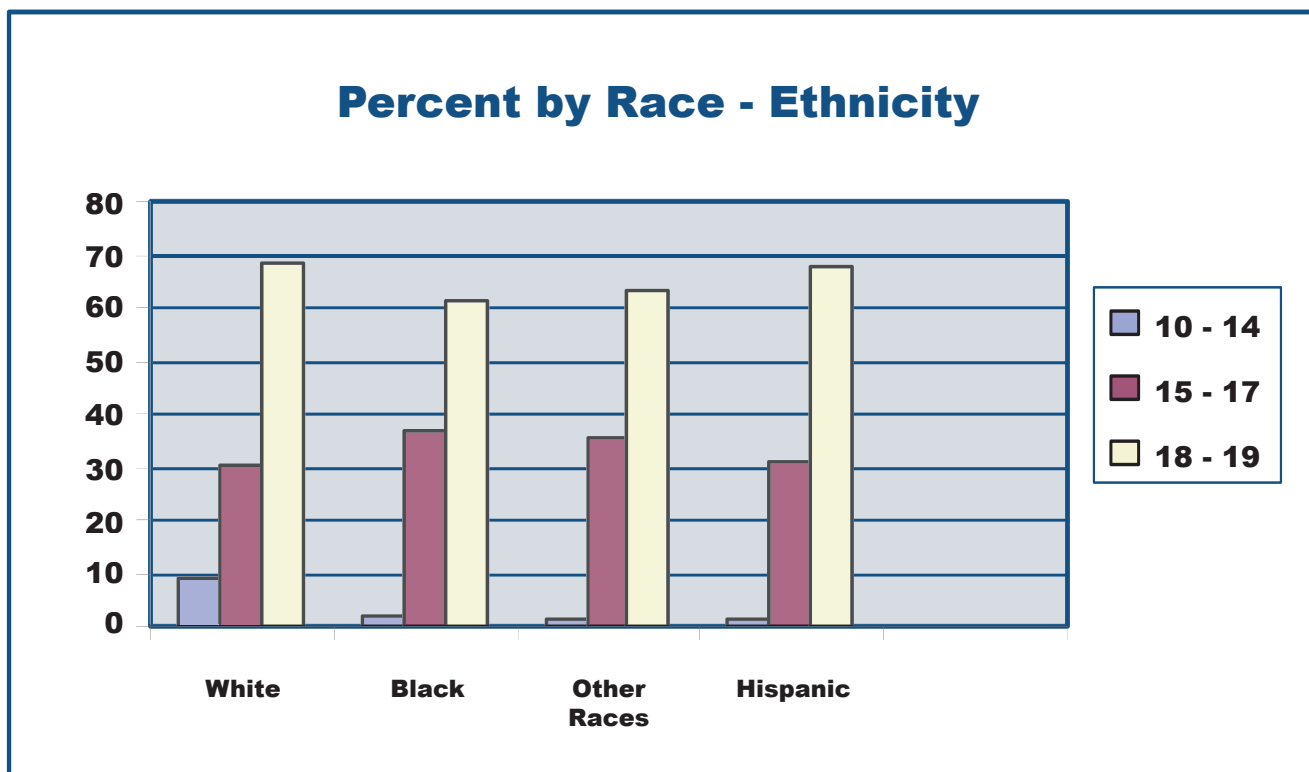
In 2003, 66 percent of teen births were to women age 18 through 19 years in New Jersey, 32.8 percent were to teens age 15 through 17 years and 1.2 percent were to girls 10 through 14 years of age.

Council

Percent Change in Births to Teens by Age Group 2003 New Jersey			
Age	% change 1991-2001	% change 1991-2002	% change 1991-2003
10-14	-41.15	-40.74%	-62.96%
15-17	-30.63	-32.30%	-35.41%
18-19	-17.43	-21.67%	-23.21%
Total Teens	-22.78	-25.98%	-28.59%

Data Source: New Jersey Health Statistics, Center for Health Statistics

Between 1992 and 2003, the largest and most consistent decline in the number of adolescent births in New Jersey has been among 10 - 14 year olds, which decreased by almost 63 percent.



Data Summary

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Percent of Births to Unmarried Mothers by Age New Jersey, 1993 - 2003		
Age of Mother	1993	2003
<20 Years	87.5%	88.4%
20+ Years	22.0%	25.0%
Total Births	27.2%	29.0%
Data Source: Center for Health Statistics, 1993 and 2003, Department of Health and Senior Services		

The percentage of births to unmarried mothers has continued to increase for all age groups.





Current Advisory Council Members

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