



Addressing Adolescent Pregnancy With Legislation

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Over the past 40 years, the pregnancy rate of U.S. adolescents ages 15 to 19 has decreased by 57 percent. This decline is due, in part, to the availability of contraception for adolescents, adolescents' use of long-acting reversible contraception and delayed initiation of sexual activity (Hillard, 2013; Jones, Mosher, & Daniels, 2012;

Mosher, Jones, & Abma, 2012). In 1970, the adolescent pregnancy rate was 68.3 per 1,000, with rates of 38.8 per 1,000 among 15- to 17-year olds and 114.7 per 1,000 among 18- to 19-year olds (Martin, Hamilton, Osterman, Curtin, &

Abstract Adolescent pregnancy is a concern among many women's health practitioners. While it is practical and appropriate to work to prevent adolescent pregnancy by educating adolescents in health care clinics, schools and adolescent-friendly community-based organizations, suggesting and supporting legislative efforts to reduce adolescent pregnancy can help address the issue on an even larger scale. This article aims to help nurses better understand current legislation that addresses adolescent pregnancy, and to encourage support of future adolescent pregnancy prevention legislation. DOI: 10.1111/1751-486X.12133

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Mathews, 2013). Between 1970 and 1979, there was a consistent decrease noted in the adolescent pregnancy rate. Over the next 30 years, the rate continued to decrease, with small increases noted intermittently. The most recent increase in the adolescent pregnancy rate occurred between 2005 (39.7 per 1,000) and 2007 (41.5 per 1,000), but since that time the rate has resumed its decline. In 2012, the adolescent pregnancy rate hit an all-time low of 29.4 per 1,000, with rates of 14.1 per 1,000 among 15- to 17-year olds and 51.4 per 1,000 among 18- to 19-year olds (Martin et al., 2013).

Despite this decline, the United States still has one of the highest adolescent pregnancy rates compared with other industrialized countries. More than 305,000 babies were born to 15- to 19-year-old adolescents in 2012 (Martin et al., 2013); most of those pregnancies were unintended or unplanned (Mosher et al., 2012). Many adolescent mothers also have a second

complete the requirements for a high school diploma until they're in their 20s (Hoffman & Maynard, 2008). Adolescent mothers experience lower levels of self-esteem and are at greater risk for depression, substance abuse and intimate partner violence than nonparenting adolescents (Ruedinger & Cox, 2012). Children born to adolescent parents are at greater risk for abuse and neglect, may have lower cognitive abilities and are more likely to be adolescent parents themselves (Ruedinger & Cox, 2012). Moreover, a significant number of incarcerated adolescents were born to adolescent mothers (CDC, 2012).

In addition to its impact on adolescent mothers and their children, adolescent pregnancy has a significant impact on society, affecting both short- and long-term economic resources. Lost revenue associated with adolescent pregnancy totaled an estimated \$3.2 billion in 2008, and researchers have found that children born to adolescent mothers pay lower taxes through-

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child before reaching 20 years of age, with approximately 23 percent of repeat pregnancies occurring within 2 years of the birth of the first child (Ruedinger & Cox, 2012).

Adolescents of ethnic minorities become pregnant at much higher rates than their white counterparts. With rates of 46.3 and 44 per 1,000, Hispanic and non-Hispanic black adolescents, respectively, have the highest adolescent birth rates, compared with the white adolescent birth rate of 27.4 per 1,000 (Martin et al., 2013). In addition to their higher birth rates, Hispanic and non-Hispanic black women, irrespective of age, also have a higher rates of abortions than their white counterparts—17.8, 28.2 and 8.1 per 1,000, respectively (Centers for Disease Control and Prevention [CDC], 2013).

Consequences of Adolescent Pregnancy

The consequences of adolescent pregnancy are far-reaching, having an impact on the adolescent mother, the child and society. Many adolescent mothers drop out of school and don't

out their adult life as a result of less education and lower earnings (The National Campaign to Prevent Teen and Unplanned Pregnancy, 2011). In 2010, adolescent pregnancy in the United States cost \$9.4 billion (The National Campaign to Prevent Teen and Unplanned Pregnancy, 2013). Of this amount, public sector health care cost \$2.1 billion, child welfare cost \$3.1 billion and incarceration cost \$2 billion.

State Legislation

One of the aims of *Healthy People 2020* is to decrease the rate of adolescent pregnancy (United States Department of Health and Human Services, 2012). Many state and local government agencies have implemented policies and programs aimed at reducing adolescent pregnancy. Some states provide funding to educate parents of adolescent children to help them feel more comfortable initiating sexual health conversations. States also provide education for adolescents on pregnancy, sexually transmitted infections (STIs) and contraception; condom-use skill building and partner communication

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