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On Literacy and Population Education

ADOLESCENT PREGNANCY

AN ABSTRACT BIBLIOGRAPHY



Indian Adult Education Association
17-B, I.P. Estate, New Delhi-110002

Adolescent Pregnancy

An Abstract Bibliography

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on Literacy and Population Education**

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Bibliographic Database Series
- *Adolescent Reproductive Health*
- *Adolescent in India*

Adolescent Pregnancy
An Abstract Bibliography

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FOREWORD

In every sphere of the life lots of information is being generated which needs to be shared and sharing of information is very important task. It needs some sort of specialized activities. The National Documentation Centre on Literacy and Population Education, was established in IAEA with the financial assistance from UNFPA through Directorate of Adult Education, Govt. of India in 1995. Since its inception the Documentation centre has engaged itself in reaching to its clients with right information at right time, and has tried to become a gateway of information on various aspects of literacy and population education issues.

It is a matter of great satisfaction that over the years Documentation centre has been regularly collecting resource materials, generating bibliographies, publishing journal and newsletter on population education which are highly appreciated. Through information repackaging service it has kept its programme partners abreast of the developments on various issues concerning population education.

I am happy to learn that the Documentation centre has prepared three sets of Bibliographies on issues covering Adolescents. Information on as many as around 150, 120 and 115 researches on the subjects namely **Adolescents in India, Adolescent Reproductive Health and Adolescent Pregnancy** respectively, conducted in the last decade and reported in different books/journals/newsletters/web sites, have been documented in the present bibliographic database series.

I congratulate Shri SC Dua and his team for bringing out these timely relevant bibliographic databases which would be of immense use to research scholars and practitioners of Population Education.

I wish the Documentation Centre to truly become a gateway of information and clearing house on Literacy. Population and Development Education issues as envisaged in its programme objectives.

December 2002
New Delhi

K C Choudhary
President
Indian Adult Education Association

PREFACE

Adolescence is a distinct and dynamic phase of development in the life of an individual. It is a period of transition from childhood to adulthood and is characterized by spurts of physical, mental, emotional and social development.

According to recent statistics, more than 50 per cent of the world's population is below the age of 25 and about, one - fifth of the world population is of adolescents. As this is a large percentage of the population, any change in the pattern of education, behaviour, age at marriage and life style of adolescents would have a significant impact on the societies in which they live.

Keeping in view the above mentioned facts the study of adolescent has gained importance. The Documentation Centre has compiled three different sets of bibliographies around the issues of Adolescents i.e. i). **Adolescent in India** ii). **Adolescent Reproductive health**, and iii). **Adolescent Pregnancy**. The bibliographic database, we hope, will be helpful in undertaking research work/programmes concerned with adolescents.

The National Documentation Centre has compiled this bibliographic database by scanning material from various sources. The Popline Search of John Hopkins University, USA and Reproductive Health Website of UNESCO, Bangkok, were of immense use in locating desired topics. The material has been compiled in chronological order and an abstract for each document has also been provided. Key words have also been enumerated which will provide a good insight into the nature of the documents.

I am thankful to **Shri KC Choudhary**, President, Indian Adult Education Association for his unconditional support and sustained encouragement to accomplish the task.

I am also thankful to Shri SC Dua, Documentation Officer for scanning several sources to collect the material and editing the bibliographies. Shri Vivek Nagpal, research scholar, Department of Adult and Continuing Education and Extension, University of Delhi, also deserves appreciation for assisting in search of the material and helping in preparation of abstracts. At last but not the least, I am also thankful to Shri Vikas Khanna, Ms. Neha Arora for preparing, layout design of the manuscript.

December 2002
New Delhi

RN MAHLAWAT
Hony. General Secretary
Indian Adult Education Association

Adolescent Pregnancy

An Abstract

Bibliography

Title: The Second Chance Club: repeat adolescent pregnancy prevention with a school-based intervention.

Author: Key JD; Barbosa GA; Owens VJ

Source: Journal of Adolescent Health. 2001 Mar;28(3):167-9. **Year:** 2001

Abstract: A retrospective case-controlled cohort study was conducted among 50 study participants and 255 control subjects over 3 years to evaluate the effectiveness of the Second Chance Club, a high-school-based intervention program for pregnant and parenting adolescents, in reducing the number of repeat adolescent births in South Carolina. The study outcome measured was the reappearance of a participant or control subject's name and social security number on a birth certificate in the South Carolina Birth Certificate Data Registry. Findings revealed that within 3 years, repeat births occurred in 3 of the 50 participants (6%), compared with 95 of 255 control subjects (37%) ($p < 0.05$). Of the 3 participants who had a repeat birth, each had only 1 repeat birth, while among the 255 controls, 74 (29%) had 1 repeat births, 18 (7%) had 2 repeat births, and 3 (1%) had 3 repeat births. In conclusion, the Second Chance Club demonstrates a significant decrease in the repeat birth rate among participating teen mothers. It is noted that the unique components of this program are its organization as a school club activity and its focus on service projects by the participants.

Keywords: South Carolina; United States; Research Report; Retrospective Studies; Case Control Studies; Cohort Analysis; Adolescents, Female; Adolescent Pregnancy [Prevention and Control]; School-Based Services;

Title: Promoting teenage sexual health: an investigation into the knowledge, activities and perceptions of gynaecology nurses.

Author: Jolley S

Source: Journal of Advanced Nursing. 2001;36(2):246-55. **Year:** 2001

Abstract: This study was designed to investigate the teenage sexual health service provided by gynecology nurses at Queen's Medical Centre, Nottingham, UK, by assessing their knowledge, activities and perceptions in relation to teenage sexual health. Part of a gynecology nurse's work is caring for teenagers with sexual health problems, including unwanted pregnancies and sexually transmitted infections. Given the current national focus in the UK on improving teenage sexual health, there is clearly a role for gynecology nurses to play, but this is rarely referred to in published literature and appears to be poorly defined. A cross sectional survey of all gynecology nurses at Queen's Medical Centre was carried out, followed by semi-structured interviews with a small random subsample. Results indicated that, although 65% of nurses had worked on the gynecology unit for more than 5 years, there was poor knowledge, an inconsistent pattern of nursing interventions and negative perceptions of the service offered. A majority of the nurses (87%) had not received any specific training in how to nurse teenagers with sexual health problems and 65% considered that the quality of sexual health service offered to teenagers was poor. Unexpected findings included poor general knowledge of local teenage sexual health services, the emotional effect on some nurses caring for young teenagers undergoing medical terminations of pregnancy, and the complete lack of training and protocols for taking a sexual history. The nurses felt that the teenage sexual health service provided could be improved by better staff training, better information for teenagers and better organization. Recommendations have been made as a result of the study but the staff will need management support to ensure that changes are effective. Generalizations cannot be drawn from a study in one hospital but the results could reflect the low profile given to the teenage sexual health aspect of gynecology nurses' work in the UK. (author's)

Keywords: United Kingdom; Research Report; Recommendations; Evaluation; Health Personnel; Nurses and Nursing; Gynecology; Perception; Knowledge; Health Education; Adolescent Pregnancy; Developed Countries; Northern Europe; Europe; Delivery of Health Care; Health; Medicine; Health Services; Psychological Factors; Behavior; Education; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population

Title: Relationship dynamics and teenage pregnancy in South Africa.

Author: Jewkes R; Vundule C; Maforah F; Jordaan E

Source: Social Science and Medicine. 2001 Mar;52(5):733-44. **Year:** 2001

Language: English

Abstract: Teenage pregnancy is extremely common in South Africa. Whilst its "problematic" nature is a subject of debate, it reflects a pattern of sexual activity which puts teenagers at risk of HIV. Currently 1 in 5 pregnant teenagers is infected with the virus. This creates a new imperative to understand teenage pregnancy and the pattern of high risk sexual activity of which it is one consequence. This was an exploratory study undertaken to investigate factors associated with teenage pregnancy amongst

sexually active adolescents in an urban and periurban context. The study used a matched case control design, with 191 cases and 353 school or neighborhood, age-matched controls. Subjects were under 19 years and recruited from township areas of Cape Town. A structured questionnaire was used to obtain information on socioeconomic factors, contraceptive knowledge and use, and sexual behavior. Conditional logistic regression was used to analyze the relationship between teenage pregnancy and the factors investigated. The results presented focus on relationship dynamics and their association with the risk pregnancy. Both groups of teenagers had been dating for a mean of 2.5 years and about half were still with their first sexual partner. The partners of the pregnant teenagers were significantly older, less likely to be in school and less likely to have other girlfriends. The pregnant teenagers were significantly more likely to have experienced forced sexual initiation and were beaten more often. They were much less likely to have confronted their boyfriend when they discovered he had other girlfriends. Multiple modeling shows that both forced sexual initiation and unwillingness to confront an unfaithful partner are strongly associated with pregnancy and also related to each other. The authors argue that the associations are mediated through unequal power relations within the relationship which are reinforced by violence. The authors further discuss indicators of greater intimacy within relationships of the pregnant teenagers which may suggest that more of the pregnancies were wanted than was suggested. Both of these conclusions pose critical challenges for health promoters. (author's)

Keywords: South Africa; Research Report; Case Control Studies; Matched Groups; Adolescent Pregnancy; Adolescents; Urban Population; Violence [Women]; Women; Southern Africa; Africa South of The Sahara; Africa; English Speaking Africa; Developing Countries; Studies; Research Methodology; Control Groups; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Youth; Age Factors; Population Characteristics; Behavior

Title: Teenage moms living in Nova Scotia, Canada: an exploration of influences on their decision to become a mother.

Author: Jackson LA; Marentette H; McCleave H

Source: International Quarterly of Community Health Education. 2001;20(1):17-38. **Year:** 2001

Abstract: Currently, there is an extensive North American literature outlining the social, economic, and cultural background of women who become teen moms. However, relatively little is known about the nature of the influences on teen women's decisions to become mothers. This qualitative study sought to add to the literature on teenage motherhood by exploring, from the perspective of the young women, the social, economic, and cultural influences on their decision to become a mom. The research is based on 40 semi-structured interviews with teen moms living in Nova Scotia, Canada. The results underline the fact that there are multiple and complex reasons why some teens decide to become a mother. In addition, the findings point to the importance of examining the neighborhood and societal-level forces influencing teens' decisions to become a mother. (author's)

Keywords: Canada; Research Report; Interviews; Mothers; Adolescents, Female; Adolescent Pregnancy; Decision Making; Family Relationships; Culture; Economic Factors; Motivation; Northern America; North America; Americas; Developed Countries; Data Collection; Research Methodology; Parents; Family Characteristics; Family and Household; Adolescents; Youth; Age Factors; Population Characteristics;

Title: Pregnancy feelings among adolescents awaiting pregnancy test results.

Author: Hellerstedt WL; Fee RM; McNeely CA; Sieving RE; Shew ML

Source: Public Health Reports. 2001;116 Suppl 1:180-93. **Year:** 2001

Abstract: The authors surveyed adolescent girls about their feelings regarding pregnancy. A survey was administered to 117 13-18 year olds who obtained pregnancy tests at nine clinics in Minneapolis and St. Paul, Minnesota, in 1998. The survey included four measures of pregnancy feelings. The authors used bivariate and multivariate logistic regression analyses to examine the associations of these measures with engagement with school, future expectations, social and environmental characteristics, and perceived partner desire for pregnancy. The four measures of pregnancy feelings were highly correlated ($P = 0.0001$). Participants reported a range of positive, negative, and ambivalent feelings on all measures. Perceived partner desire for pregnancy, limited future expectations, and lack of school engagement were significantly associated with positive pregnancy feelings for the four measures. Successful adolescent pregnancy prevention interventions may include the involvement of partners and key adults as well as strategies to enhance the educational or employment aspirations of girls and adolescents. (author's)

Keywords: United States; Minnesota; Research Report; Surveys; Adolescents, Female; Adolescent Pregnancy; Attitude; Emotions; Northern America; North America; Americas; Developed Countries; Sampling Studies; Studies; Research Methodology; Adolescents; Youth; Age Factors; Population Characteristics; Demographic Factors;

Title: Teens and emergency contraceptive pills: issues for health care providers and educators.

Author: Feijoo AN

Source: Transitions. 2001 Jun;12(4):3-5. **Year:** 2001

Abstract: Known as a method of preventing pregnancy after unprotected intercourse, emergency contraceptive pills (ECPs) is not the only method of emergency contraception available in the US, but it is the method most commonly recommended for teenage women. Although some doctors have been prescribing ECPs for over 30 years, relatively few adolescents know about the use of oral contraceptives. Moreover, teens who do know about ECPs may experience actual (logistical) and perceived barriers to obtaining the pills. A few case studies demonstrate innovative examples of national, state, and local strategies to provide information about and access to emergency contraception, especially ECPs. These include: national initiative by the ProChoice Resource Center; creation of culturally specific campaign in Philadelphia; social marketing in Sacramento; and education provided by the Unintended Pregnancy Project in Boulder County. Finally, actions are taken by health care providers to educate youth about ECPs and ensure their availability by committing themselves to provide ECPs; improve service delivery; provide education to teens about ECPs and to make certain that teens know about ECPs.

Keywords: United States; Adolescents, Female; Adolescent Pregnancy [Prevention and Control]; Pregnancy, Unwanted [Prevention and Control]; Contraceptive Agents, Postcoital; Fertility Control, Postcoital;

Title: Emergency contraceptive pills — a fact sheet.

Author: Feijoo AN

Abstract: Emergency contraceptive pills (ECPs), a method of preventing pregnancy after sexual intercourse, are an important contraceptive option that could annually prevent as many as 50% of pregnancies and subsequent abortions among American teens. Two types of ECPs are commonly used in the US: pills that contain both estrogen and progestin hormones and pills that contain progestin hormones only. Also known as the morning-after pill and postcoital contraception, ECPs are sought by women <25 years old. Their efficacy and safety have been approved by the US Food and Drug Administration and their provision and prescription are supported by all health organizations. When taken within 72 hours after unprotected intercourse, ECPs reduce a woman's risk of pregnancy by 75-94%. However, ECPs do not affect an established pregnancy and numerous studies for risk of birth defects during regular use of oral contraceptives found no increased risk. About one-half of women taking ECPs experience nausea and up to one-fourth vomit. In addition, ECPs are an important option for sexually active adolescents who do not use contraception. However, adolescents face cultural, financial, legal, psychological, and social barriers to accessing contraceptive services. These barriers that unnecessarily limit access to ECPs are outlined in this paper.

Keywords: United States; Literature Review; Adolescents, Female; Adolescent Pregnancy; Contraceptive Agents, Postcoital; Fertility Control, Postcoital; Emergency Contraception; Northern America; North America; Americas; Developed Countries; Adolescents; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Fertility; Population Dynamics; Contraceptive Agents, Female; Contraceptive Agents; Contraception; Family Planning

Title: Young women requesting emergency contraception are, despite contraceptive counseling, a high risk group for new unintended pregnancies.

Author: Falk G; Falk L; Hanson U; Milsom I

Source: Contraception: 2001 Jul;64(1):23-7. **Year:** 2001

Abstract: Since its introduction in Sweden in 1994, emergency contraception (EC) has become a welcome addition to the campaign against unwanted pregnancy. In addition to an unplanned pregnancy, unprotected sexual intercourse may also involve the risk of contracting sexually transmitted diseases (STDs). The aim of this study was to assess the short- and long-term risk of unintended pregnancy and to determine the frequency of chlamydia infections in women receiving EC. Between September 1998 and February 1999 young women aged 15-25 years had the opportunity to obtain EC (Yuzpe method) at a youth clinic in the city of Orebro where the opening hours were extended to include Saturdays and Sundays. A follow-up visit 3 weeks after treatment, which included contraceptive counseling, was offered to all participants. At both visits, a pregnancy test and a chlamydia test were performed, and the women completed a questionnaire. After the initial visit, the young women were monitored for new pregnancies during the following 12 months. One pregnancy occurred in the 134 young women who received EC during the study period. None of the women had a positive chlamydia test. Of those requesting EC, 54% did so because no contraception was used, 32% because of a ruptured condom, 11% because of missed oral contraceptives

(OCs), and 5% had mixed reasons. At long-term follow-up 1 year after the initial visit, 10 of the 134 young women had experienced an unplanned pregnancy that terminated in legal abortion in 9 women. All these women had either started and terminated OC use or had never commenced using the prescribed OC. Young women who request EC are, despite a planned follow-up with contraceptive counseling, a high risk group for new unintended pregnancies. In Sweden they do not seem to be a high risk group for STDs. (author's)

Keywords: Sweden; Research Report; Family Planning Acceptors; Adolescents, Female; Adolescent Pregnancy; Contraceptive Agents, Postcoital; Fertility Control, Postcoital; Sexually Transmitted Diseases; Counseling; Emergency Contraception; Developed Countries; Scandinavia; Northern Europe; Europe; Family Planning Programs; Family Planning; Adolescents; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Fertility; Population Dynamics; Contraceptive Agents, Female; Contraceptive Agents; Contraception; Reproductive Tract Infections; Infections; Diseases; Clinic Activities; Program Activities; Programs; Organization and Administration

Title: Risks among youths who have multiple sisters who were adolescent parents.

Author: East PL; Kiernan EA

Source: Family Planning Perspectives. 2001 Mar-Apr;33(2):75-80.

Year: 2001

Abstract: Past research has revealed that having a sister who gave birth as a teenager is associated with increases in young people's likelihood of engaging in risky sexual behavior. To date, however, no study has determined if having several sisters who were adolescent mothers further raises youth's chances of engaging in risky activities. Data were collected from 1510 predominantly Hispanic and Black 11-17 year olds in a California program for youths who have at least one pregnant or parenting sister. Correlational analyses, analyses of variance and regression analyses were conducted to assess the effects of having multiple teenage parenting sisters on a variety of outcomes that are known risk factors for teenage pregnancy. 24% of participants had two or more sisters who had given birth as teenagers. The likelihood of having multiple adolescent parenting sisters was greatest in large families, but was unrelated to youths' other background characteristics. In analyses controlling for background factors, females with many parenting sisters had increased levels of behavioral problems (school problems, drug or alcohol use, and delinquent behavior) and an elevated likelihood of being sexually experienced. Having lived with two or more parenting sisters (as opposed to having lived with only one) was related to more permissive sexual and childbearing attitudes among young women and to earlier first intercourse among young men. Males with a sister who gave birth at a young age had elevated levels of delinquent behavior and promiscuous sexual behavior. As the number of teenage parenting sisters rises, youths'—particularly females'—risk of pregnancy involvement increases beyond the level associated with having only one teenage parenting sister. Screening for the number, living situation and age at first birth of parenting sisters is likely to be useful for programs seeking to identify youths at high risk of an early pregnancy. (author's)

Keywords: California; United States; Research Report; Interviews; Correlation Studies; Adolescent Pregnancy; Risk Factors; Risk Behavior; Sex Behavior; Family Relationships; Northern America; North America; Americas; Developed Countries; Data Collection; Research Methodology; Statistical Studies; Studies; Reproductive

Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Biology; Behavior; Family Characteristics; Family and Household

Title: Not all teenagers are sexually active [letter]

Author: Duffield K; Josen PK; Low E; Teare K; Wray E

Source: BMJ. British Medical Journal. 2001 Feb 10;322(7282):363.

Year: 2001

Abstract: Churchill et al. in their study dispel the myth that teenagers do not consult their general practitioners about contraception. They also conclude, however, that teenagers who become pregnant have higher consultation rates than their age matched peers, most of the difference owing to consultation for contraception. We do not believe that this claim is justified, as the potential confounder of sexual activity was not controlled for. While the case group (pregnant teenagers) must be sexually active, the same cannot be said of the age matched controls. It is probable that rates of sexual activity were lower among controls, especially at the lower end of the age range used (13-19 years). In a recent survey only 20% of 13-year-olds reported having had full or oral sexual intercourse. Abstinent controls would not be expected to consult about contraception. This would lower the average contraceptive consultation rate per individual within the control group, potentially masking higher consultation rates for sexually active controls. Therefore teenagers who become pregnant could be underconsulting for contraception compared with their sexually active peers. On the basis of this paper it cannot be assumed that teenagers who become pregnant make greater use of general practitioners' contraceptive services. Churchill et al acknowledge in discussion that sexual activity is a confounding variable, but proceed to draw an unjustified conclusion because of their use of inappropriate controls. (full text)

Keywords: Critique; Adolescents; Adolescent Pregnancy; Contraception; Family Planning Programs; Utilization of Health Care; Sex Behavior; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Fertility; Population Dynamics; Family Planning; Health Services; Delivery of Health Care; Health; Behavior

Title: Impact evaluation of the "Not Me, Not Now" abstinence-oriented, adolescent pregnancy prevention communications program, Monroe County, New York.

Author: Doniger AS; Adams E; Utter CA; Riley JS

Source: JOURNAL OF HEALTH COMMUNICATION. 2001 Jan-Mar;6(1):45-60. **Year:** 2001

Abstract: "Not Me, Not Now" is an abstinence-oriented adolescent pregnancy prevention integrated communications program developed by Monroe County, New York. The evaluation utilized a cross-sectional time series approach in the analysis of items from several waves of youth surveys administered to two different age groups: 1) a survey of 7th and 8th graders on awareness, attitudes and intended behavior; 2) the Youth Risk

Behavior Survey administered to 9th through 12th graders. The trends found in the surveys demonstrated high levels of awareness of the program, changing attitudes and intended behaviors consistent with the program's messages. Analysis of pregnancy rates for 15-17 year olds in the county were compared to reductions found in similar geographic areas. Pregnancy rates in Monroe County declined faster than in comparison areas. The authors conclude that there is a strong likelihood that the program had independent effect on the outcome of pregnancies in the population exposed to the program. (author's)

Keywords: New York; United States; Evaluation Report; Cross Sectional Analysis; Surveys; Adolescents; Adolescent Pregnancy; Pregnancy Rate; Integrated Programs; Communication Programs; School Age Population; Northern America; North America; Americas; Developed Countries; Evaluation; Research Methodology; Sampling Studies; Studies; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Fertility; Population Dynamics; Fertility Measurements; Programs; Organization and Administration; Communication

Title: Adolescent contraception and the clinician: an emphasis on counseling and communication.

Author: Davis AJ

Source: Clinical Obstetrics and Gynecology. 2001 Mar;44(1):114-21.

Year: 2001

Abstract: Adolescent pregnancy continues to be a serious public health problem in the US, resulting in tremendous family upheaval and negative social and economic consequences. Although efforts addressing this issue have been implemented, much still has to be done. Adolescent health care delivery is a challenge to the medical community. According to the Guideline to Adolescent Preventive Visits publication, this may be because the US medical community is inconsistent in their message, are not age-appropriate, and have relied on knowledge-based education. This paper presents several concrete suggestions for clinicians in the application of general principles to adolescent counseling in contraception. It discusses examples of yes/no questioning and skill building in specific contraception, including abstinence, condoms, oral contraceptives, Depo-provera/Norplant, emergency contraception, and involvement of parents. Overall, prevention of teen pregnancy is a societal problem that requires changes in the media, economic opportunity, parental involvement, and improvement in access and delivery of medical care. Clinicians should encourage parental involvement and provide teens consistent messages, and the medical community should provide preventive care rather than reactive care.

Keywords: United States; Literature Review; Adolescents; Parents; Adolescent Pregnancy [Prevention and Control]; Sexuality; Sexual Abstinence; Condom; Oral Contraceptives; Depo-Provera; Contraceptive Implants; Contraceptive Agents, Postcoital; Counseling; Emergency Contraception; Northern America; North America; Americas; Developed Countries; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Family Relationships; Family Characteristics; Family and Household; Reproductive Behavior; Fertility; Population Dynamics; Personality; Psychological Factors; Behavior; Family Planning, Behavioral Methods; Family Planning; Barrier Methods; Contraceptive Methods; Contraception; Medroxyprogesterone Acetate; Contraceptive Agents, Progestin; Contraceptive Agents, Female; Contraceptive Agents; Clinic Activities; Program Activities; Programs; Organization and Administration

Title: Correlates of using dual methods for sexually transmitted diseases and pregnancy prevention among high-risk African-American female teens.
Author: Crosby RA; DiClemente RJ; Wingood GM; Sionean C; Cobb BK
Source: Journal of Adolescent Health. 2001 May;28(5):410-4.
Year: 2001

Abstract: The aim was to identify correlates of consistent dual-method use among African-American female adolescents at risk of sexually transmitted diseases (STDs) and pregnancy. A convenience sample of 522 sexually active female teens attending adolescent medicine clinics, health department clinics, and school health classes volunteered. Recruitment sites were in low-income neighborhoods of Birmingham, Alabama. Adolescents completed a questionnaire and a face-to-face interview and provided vaginal swab specimens for laboratory diagnosis of STDs. Those reporting use of condoms and at least one other method of contraception, for each of the last five occasions they had sex were classified as consistent dual-method users. The questionnaire assessed frequency of adolescents' communication with their parents and partners about sex. The questionnaire also assessed two measures of parental supervision and adolescents' desire to avoid pregnancy. Multiple logistic regression assessed the independent contribution of each correlate of consistent dual-method use. 71 adolescents (13.6%) were classified as consistent dual-method users. A strong desire to avoid pregnancy was the most influential correlate of consistent dual-method use [odds ratio (OR) = 2.3]. Adolescents reporting that their parents generally knew whom they were with (OR = 2.0) and those reporting more frequent communication with parents (OR = 1.9) were also more likely to be consistent dual users. The findings suggest the need for research to examine the efficacy of interventions building on adolescent females' desire to avoid pregnancy. Study findings also suggest that interventions promoting improved parent-adolescent communication and improved parental supervision may contribute to adolescents' use of dual methods for STD and pregnancy prevention. (author's)

Keywords: Alabama; United States; Research Report; Surveys; Correlation Studies; Adolescent Pregnancy [Prevention and Control]; Sexually Transmitted Diseases [Prevention and Control]; Contraceptive Methods Chosen; Sex Behavior; Communication; Parents;

Title: Safer choices: reducing teen pregnancy, HIV, and STDs.
Author: Coyle K; Basen-Engquist K; Kirby D; Parcel G; Banspach S
Source: Public Health Reports. 2001;116 Suppl 1:82-93. **Year:** 2001

Abstract: This study evaluated the long-term effectiveness of Safer Choices, a theory-based, multi-component educational program designed to reduce sexual risk behaviors and increase protective behaviors in preventing HIV, other sexually transmitted diseases (STDs), and pregnancy among high school students. The study used a randomized controlled trial involving 20 high schools in California and Texas. A cohort of 3869 ninth-grade students was tracked for 31 months from fall semester 1993 (baseline) to spring semester 1996 (31-month follow-up). Data were collected using self-report surveys administered by trained data collectors. Response rate at 31-month follow-up was 79%. Safer Choices had its greatest effect on measures involving condom use. The program reduced the frequency of intercourse without a condom during the 3

months prior to the survey, reduced the number of sexual partners with whom students had intercourse without a condom, and increased use of condoms and other protection against pregnancy at last intercourse. Safer Choices also improved 7 of 13 psychosocial variables, many related to condom use, but did not have a significant effect upon rates of sexual initiation. The Safer Choices program was effective in reducing important risk behaviors for HIV, other STDs, and pregnancy and in enhancing most psychosocial determinants of such behavior. (author's)

Keywords: California; Texas; United States; Research Report; Surveys; Adolescent Pregnancy [Prevention and Control]; Students; Sex Behavior; Risk Behavior; HIV Infections [Prevention and Control]; AIDS [Prevention and Control]; Sexually Transmitted Diseases [Prevention and Control] Northern America; North America; Americas; Developed Countries; Sampling Studies; Studies; Research Methodology; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Education; Behavior; Viral Diseases; Diseases; Reproductive Tract Infections; Infections

Title: A World of Difference: Sexual and Reproductive Health and Risks.

Author: Chaya N

Source: Population Policy Watch. 2001 Spring;1(1):3-4. **Year:** 2001

Abstract: The survey released on March 8, 2001 by the Population Action International (PAI) reports that Ethiopia is the most hazardous country for women of reproductive age, while Italy is the safest. The "A World of Difference: Sexual and Reproductive Health and Risks" PAI publication notes that an Ethiopian woman has 1 chance in 7 of dying as a result of pregnancy or childbirth. More than half of these deaths result from unsafe abortions; and early childbearing and high fertility multiply the risks of childbirth in a country where fewer than 10% of births are attended by skilled personnel, and fully 10% of reproductive-age adults are infected with HIV. On the contrary, the percentage of teenage girls giving birth each year, average children per lifetime, HIV prevalence, contraception use, and pregnancy and delivery care mirror the claim on safety for women of reproductive age in Italy. It is noted that "A World of Difference" documents the differences in reproductive health between rich and poor countries, as well as emphasizes actions and interventions for the improvement of reproductive and sexual health, and the prevention of death and disability.

Keywords: World; Technical Report; Adolescent Pregnancy; Maternal Mortality; Reproductive Health [Women]; Women; Risk Factors; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Mortality; Health; Biology

Title: Pregnant adolescents at risk.

Author: Brown B

Source: International Family Planning Perspectives. 2001 Sep;27(3):110.

Year: 2001

Abstract: Adolescent women in Maputo, Mozambique, have a high risk of death from pregnancy-related causes, and the great majority of such deaths are avoidable. Overall, 52 adolescents died of pregnancy-related causes at Maputo Central Hospital between 1989 and 1993, for a rate of 387 deaths per 100,000 live births, compared with a ratio of 294 per 100,000 among older women. Although adolescents were 30% more likely

than older women to die of maternal causes, prenatal records indicate that adolescents who died were significantly less likely than others to have been classified as being at high risk (2% vs. 21%). Of the 19 risk factors listed on prenatal cards at the hospital, only 5 were identified among pregnant adolescents. The investigators note that the low number of risk factors identified on the cards of adolescents who later died suggests that the screening program at the hospital is not sufficiently sensitive. Estimating that 8 of 10 maternal deaths at the hospital could have been prevented, they conclude that "recognizing the existence of avoidable factors in the majority of maternal deaths must be the first step...in designing and implementing reproductive health care programs adequate for young people."

Keywords: Mozambique; Adolescent Pregnancy; Maternal Mortality [Determinants]; Causes of Death; Risk Factors; Eastern Africa; Africa South of The Sahara; Africa; Portuguese Speaking Africa; Developing Countries; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Mortality; Biology

Title: Sex doesn't have to be a gamble.

Author: Brooks-Gunn J

Source: PPFY NETWORK. 2001 Mar;4(1):4-5. **Year:** 2001

Abstract: With the establishment of a national campaign to prevent adolescent pregnancy, studies evidenced that teenage birth rates have declined. The author comments that the knowledge among grown-ups can prove to be of help in the encouragement of a more open and honest discussion with teenagers of the risks and the healthy expression of adolescent sexuality. This shows that early presentation of information promotes preventive behaviors. Being a developmental psychologist, the author discovered through research that girls tend to be vulnerable to sexual advances due to their belief that talking about sexuality is forbidden. The author thinks that a girl ought to be given more attention with regards to getting into terms with their sexuality to help them be ready for whatever sexual circumstances they may face to prevent the consequences.

Keywords: United States; Critique; Adolescent Pregnancy [Prevention and Control]; Adolescents; Sex Behavior; Sex Education; Risk Behavior; Northern America; North America; Americas; Developed Countries; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Youth; Age Factors; Population Characteristics; Behavior; Education

Title: Five-country study points to ways the United States could further decrease teenage pregnancy and STD rates. Across all socioeconomic levels, U.S. youth have similar levels of sexual activity but higher levels of childbearing than teenagers in other developed countries. [Press release].

Author: Anonymous

Corporate Name: Alan Guttmacher Institute [AGI]

Source: New York, New York, AGI, 2001 Nov 29.[3] p. **Year:** 2001

Abstract: This press release from the Alan Guttmacher Institute announces results from a study entitled the "Teenage Sexual and Reproductive Behavior in Developed

Countries: Can More Progress Be Made?" Collaborating research teams carried out case studies in Sweden, France, Canada, Great Britain, and the US, using a common approach to gather information and prepare an in-depth country report using national survey data, government statistics, and information on government policies and programs. The project also included two workshops, analysis of teen pregnancy, and sexually transmitted disease levels in all developed countries, and site visits by the US study team. Overall, the study found that societal assistance to teenagers in their transition to adulthood, combined with acceptance of teenage sexual relationships, clear expectations for responsible sexual behavior and access to sexual and reproductive health services lead to lower teenage pregnancy and as a result, lower the rates of both child-bearing and abortion.

Keywords: United States; Summary Report; Surveys; Case Studies; Youth; Adolescent Pregnancy; Sexuality; Sex Behavior; Reproductive Health; Health Services; Contraception; Northern America; North America; Americas; Developed Countries; Sampling Studies; Studies; Research Methodology; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Fertility; Population Dynamics; Personality; Psychological Factors; Behavior; Health; Delivery of Health Care; Family Planning

Title: Can more progress be made? Teenage sexual and reproductive behavior in developed countries.

Author: Anonymous

Corporate Name: Alan Guttmacher Institute [AGI]

Source: New York, New York, AGI, 2001.6 p. **Year:** 2001

Abstract: This document presents the highlights of an investigation on teenage sexual and reproductive behavior in Sweden, France, Canada, Great Britain, and the US between 1998-2001. The study indicated that the US has higher rates of teenage pregnancy, abortion and sexually transmitted diseases (STDs) than in any other study countries. It was noted that more sexual partners, high prevalence of infection, and less condom use contribute to higher teenage STD rate in the US. Moreover, only in that country do substantial proportions of adolescents lack health insurance and therefore lack access to health care. In countries other than the US, strong and widespread governmental support for young people's transition to adulthood, and for parents, may contribute to low teenage birth rates. Lastly, findings suggest that improving adolescents' prospect for successful adult lives are likely to have a greater impact on their behavior than exhortative messages about childbearing at an early age. Easy access to contraceptives and other reproductive health services means that adolescents know where to obtain information and services, can reach a provider easily, are assured of receiving confidential, nonjudgmental care and can obtain services and contraceptive supplies at little or no cost.

Keywords: United States; Sweden; France; Canada; United Kingdom; Summary Report; Adolescents; Adolescent Pregnancy; Sexually Transmitted Diseases; Abortion Rate; Sex Behavior; Reproductive Behavior; Contraceptive Methods; Socioeconomic Factors; Northern America; North America; Americas; Developed Countries; Scandinavia; Northern Europe; Europe; Western Europe; Mediterranean Countries; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Fertility; Population Dynamics; Reproductive Tract Infections; Infections; Diseases; Abortion; Induced; Fertility Control; Postconception; Family Planning; Behavior; Contraception; Economic Factors

Title: Single women's experiences of premarital pregnancy and induced abortion in Lombok, eastern Indonesia.

Author: Bennett LR

Source: Reproductive Health Matters. 2001 ay;9(17):37-43. **Year:** 2001

Abstract: Induced abortion is widely practiced in Indonesia by both married and unmarried women. This paper draws on ethnographic research, conducted between 1996 and 1998, which focused on reproductive health and sexuality among single young women on the island of Lombok in eastern Indonesia. While abortion for married women is tacitly accepted, especially for women with two or more children, premarital pregnancy and abortion remain a highly stigmatized and isolating experience for single women. Government family planning services are not legally permitted to provide contraception to single women and their access to reproductive health care is very limited. Abortion providers were highly critical of unmarried women who sought abortions, despite their willingness to carry out the procedure. The quality of abortion services offered to single women was compromised by the stigma attached to premarital sex and pregnancy. Women who experienced unplanned premarital pregnancy faced personal and familial shame, compromised marriage prospects, abandonment by their partners, single motherhood, a stigmatized child, early cessation of education, and an interrupted income or career, all of which were not desirable options. Young women were only able to legitimately continue premarital pregnancy through marriage. In the absence of an offer of marriage, single women necessarily resorted to abortion to avoid compromising their futures. (author's)

Keywords: Indonesia; Case Studies; Premarital Pregnancy; Adolescent Pregnancy; Pregnancy, Unplanned; Abortion, Induced; Contraception; Reproductive Health [Women]; Women; Sexuality; Physician-Patient Relations; Marital Status;

Title: Schoolwide effects of a multicomponent HIV, STD, and pregnancy prevention program for high school students.

Author: Basen-Engquist K; Coyle KK; Parcel GS; Kirby D; Banspach SW; Carvajal SC; Baumler

Source: Health Education and Behavior. 2001 Apr;28(2):166-85. **Year:** 2001

Abstract: Few studies have tested school-wide interventions to reduce sexual risk behavior, and none have demonstrated significant school-wide effects. This study evaluates the school-wide effects of Safer Choices, a multicomponent, behavioral theory-based HIV, STD, and pregnancy prevention program, on risk behavior, school climate, and psychosocial variables. 20 urban high schools were randomized, and cross-sectional samples of classes were surveyed at baseline, the end of intervention (19 months after baseline), and 31 months after baseline. At 19 months, the program had a positive effect on the frequency of sex without a condom. At 31 months, students in Safer Choices schools reported having sexual intercourse without a condom with fewer partners. The program positively affected psychosocial variables and school climate for HIV/STD and pregnancy prevention. The program did not influence the prevalence of recent sexual intercourse. School-wide changes in condom use demonstrated that a school-based program can reduce the sexual risk behavior of adolescents. (author's)

Keywords: California; Texas; United States; Evaluation Report; Adolescents; Secondary Schools; Students; HIV Infections [Prevention and Control]; Sexually Transmitted Diseases [Prevention and Control]; **Adolescent Pregnancy** [Prevention and Control]; School-Based Services; Programs; Northern America; North America; Americas; Developed Countries; Evaluation; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Schools; Education; Viral Diseases; Diseases; Reproductive Tract Infections; Infections; Reproductive Behavior; Fertility; Population Dynamics; Organization and Administration

- **Title:** Adolescent pregnancy 1 year later: the effects of abortion vs. motherhood in northeast Brazil.

Author: Bailey PE; Bruno ZV; Bezerra MF; Queiroz I; Oliveira CM

Source: Journal of Adolescent Health. 2001 Sep;29(3):223-32. **Year:** 2001

Abstract: The aim was to determine social and behavioral consequences of pregnancy and how these differed according to the pregnancy outcome (live birth or abortion) 1 year after the event. This was a prospective study of two groups of young women aged 12-18 years, one attending prenatal services and the other admitted for abortion complications at the same hospital in northeast Brazil. Adolescents who gave birth were subsequently classified as having intended or unintended pregnancies, and those who aborted were divided between those who terminated their pregnancies and those who miscarried. Baseline data were collected between 1995 and 1997 from all teens who met the eligibility criteria. Information was collected through one-on-one interviews using a questionnaire that was structured and precoded. Multiple logistic regression was used to identify characteristics that predicted outcomes at 1 year. Teens who terminated their pregnancies were the most likely to be in school or working 1 year later. They also showed the greatest increase in self-esteem. The young mothers, however, had the highest self-esteem but perceived the impact of pregnancy on their lives as being more negative than they did initially. Group affiliation was not associated with the quality of partner relationships, which tended to deteriorate over time. The young mothers used contraception at 1 year at higher rates and had experienced fewer subsequent pregnancies than the two abortion groups. The experience of adolescent pregnancy for this group of teens produced mixed findings, some more negative than others. Interventions to decrease the adolescent's desire to have a baby will have to be tailored differently from those designed to prevent an unintended pregnancy, but both are needed. (author's)

Keywords: Brazil; Research Report; Prospective Studies; Adolescents; Female; **Adolescent Pregnancy**; Pregnancy Outcomes; Abortion, Induced; South America; Americas; Developing Countries; Latin America; Studies; Research Methodology; Adolescents; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Fertility; Population Dynamics; Pregnancy; Reproduction; Fertility Control, Postconception; Family Planning

Title: Teen births down in the United States.

Author: Anonymous

Source: POPULATION TODAY. 2001 May-Jun;29(4):7. **Year:** 2001

Abstract: The National Center for Health Statistics (NCHS) reported recently that the birth rate for US teenagers 15-19 years old declined 3% in 1999, continuing an 8-year

downward trend and reaching a record low. The rate for 1999, the latest year for which data are available, was 49.6 births per 1000 teenage women. In contrast, the birth rate for unmarried women increased slightly, to 44.4 births per 1000 unmarried women ages 15-44. This rate means that one-third of births in the US were to unmarried women.

Keywords: United States; Adolescent Pregnancy; Birth Rate; Unmarried Mothers; Northern America; North America; Americas; Developed Countries; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Fertility Measurements; Mothers; Parents; Family Relationships; Family Characteristics; Family and Household

Title: Sexual behavior and contraception among adolescents.

Author: Anonymous

Source: Contraception Report. 2001 Dec;12(6):6-11. **Year:** 2001

Abstract: Pregnancy, birth, and abortion rates among teenagers have declined steadily over the past decade, although the abortion ratio remains highest of any decade age group. Despite these declines, the US adolescent pregnancy rate far exceeds those of other industrialized nations. The declines have been attributed to changes in sexual experience levels (increased abstinence) and more effective pregnancy avoidance among sexually active teens (better contraceptive practices). Oral contraceptives are the most commonly used birth control method among adolescents; however, increases in the use of injectables, implants, and condoms have been documented. Effective counseling tailored to the unique characteristics of teens can improve contraceptive adherence and decrease the risk of sexually transmitted disease. (author's)

Keywords: United States; Technical Report; Adolescents; Birth Rate; Pregnancy Rate; Adolescent Pregnancy; Sex Behavior; Contraception; Contraceptive Usage; Abortion Rate; Northern America; North America; Americas; Developed Countries; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Fertility Measurements; Fertility; Population Dynamics; Reproductive Behavior; Behavior; Family Planning; Abortion, Induced; Fertility Control, Postconception

Title: Adolescent reproductive health and sexuality in Mongolia: the facts.

Author: Anonymous

Corporate Name: Mongolian Medical University. Adolescent RH Project

Source: [Unpublished] [2001]. World Wide Web address: <http://unesco.bkk.org>. 3 p. **Year:** 2001

Abstract: In Mongolia, adolescents aged 10-19 years old comprise 25% of the population. Surveys have shown that sexual behavior among adolescents, including risky behavior, is common. The majority of girls and boys think that premarital sex is acceptable. Most adolescents get information on reproductive health (RH) and sexuality from inaccurate sources and have insufficient knowledge. Some of the most commonly named sources of information are friends, television and newspapers. Such low levels of knowledge, as well as poor decision-making and communication skills, have a negative impact on adolescent RH. This results in high rates of adolescent pregnancy,

abortion, and sexually transmitted infections. However, the vast majority of adolescents want to receive accurate and relevant information through a school-based program. It is also noted that teenagers lack a healthy facility where they can get RH services and counseling based on their specific needs.

Keywords: Mongolia; Surveys; Adolescents; Adolescent Pregnancy; Reproductive Health; Sexuality; Sex Behavior; Knowledge Sources; Sex Education; Family Planning Programs; Health Services; Eastern Asia; Asia; Developing Countries; Sampling Studies; Studies; Research Methodology; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Fertility; Population Dynamics; Health; Personality; Psychological Factors; Behavior; Communication; Education; Programs; Organization and Administration; Family Planning; Delivery of Health Care

Title: Sexuality and underserved youth in communities of color. Fact sheet.

Author: Anonymous

Source: SIECUS Report. 2001 Jun-Jul;29(5):27-32. **Year:** 2001

Abstract: During the past 20 years, the racial and ethnic make-up of the Hispanic, African-American, American Indian, and Asian adolescents has significantly shifted. Comprising approximately 14% of the US population, projections indicate that these youth of color will constitute 56% of the adolescent population by the year 2050. This Fact Sheet explores the challenges affecting the sexual health and development of these youth of color. School-based surveys and studies involving students of different ages have been conducted on the issues of sexual behavior, sexually transmitted diseases, contraceptive use, and pregnancy. Highlights of the findings of these studies are provided in this paper.

Keywords: United States; Summary Report; Youth; Adolescents; Adolescent Pregnancy; Ethnic Groups; Sex Behavior; Sexuality; Sexually Transmitted Diseases; Contraceptive Usage; Northern America; North America; Americas; Developed Countries; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Fertility; Population Dynamics; Cultural Background; Behavior; Personality; Psychological Factors; Reproductive Tract Infections; Infections; Diseases; Contraception; Family Planning

Title: Repeat use of contraceptive crisis services among adolescent women.

Author: Meyrick J

Source: JOURNAL OF FAMILY PLANNING AND REPRODUCTIVE HEALTH CARE. 2001 an;27(1):33-6. **Year:** 2001

Abstract: Because of the repeated use of pregnancy testing "scares", use of emergency contraception and abortion are increasing among all women. However, there may also be an interaction between this general trend and the difficulties faced by particularly vulnerable groups of teenagers who also have higher rates of teenage parenthood. This paper aims to provide an overview of the research and international statistics in this sparsely researched area. It will draw on the author's own qualitative work with high-risk teenage girls and that of other researchers, in order to attempt to reach an understanding of the mechanisms behind this increasingly common phenomenon. The indications from this work point towards general problems with contraception and services common to all women that may become compounded through structural vulnerability such as deprivation.

Keywords: Literature Review; Adolescents, Female; Adolescent Pregnancy; Contraceptive Agents, Postcoital; Fertility Control, Postcoital; Abortion, Induced; Emergency Contraception; Adolescents; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Fertility; Population Dynamics; Contraceptive Agents, Female; Contraceptive Agents; Contraception; Family Planning; Fertility Control, Postconception

Title: Family relationships and adolescent pregnancy risk: a research synthesis.

Author: Miller BC; Benson B; Galbraith KA

Source: *Developmental Review*. 2001;21(1):1-38. **Year:** 2001

Abstract: This article summarizes 2 decades of research about family, and especially parental, influences on the risk of adolescents becoming pregnant or causing a pregnancy. Research findings are most consistent that parent/child closeness or connectedness, parental supervision or regulation of children's activities, and parents' values against teen intercourse (or unprotected intercourse) decrease the risk of adolescent pregnancy. Largely because of methodological complexities, research results about parent/child sexual communication and adolescent pregnancy risk are very inconsistent. Residing in disorganized/dangerous neighborhoods and in a lower SES family, living with a single parent, having older sexually active siblings or pregnant/parenting teenage sisters, and being a victim of sexual abuse all place teens at elevated risk of adolescent pregnancy. Several biological factors (timing of pubertal development, hormone levels, and genes) also are related to adolescent pregnancy risk because of their association with adolescent sexual intercourse. (author's)

Keywords: United States; Literature Review; Adolescent Pregnancy; Risk Factors; Family Relationships; Parents; Adolescents; Northern America; North America; Americas; Developed Countries; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Biology; Family Characteristics; Family and Household; Youth; Age Factors; Population Characteristics

Title: Premarital sex, schoolgirl pregnancy, and school quality in rural Kenya.

Author: Mensch BS; Clark WH; Lloyd CB; Erulkar AS

Source: *Studies in Family Planning*. 2001 Dec;32(4):285-301. **Year:** 2001

Abstract: Using data from nearly 600 adolescents aged 12-19 in combination with data collected from 33 primary schools that the adolescents attended, this report explores whether certain aspects of the school environment affect the initiation of premarital sex among girls and boys in three districts of Kenya. The results suggest that, although neither the school nor the home appears to influence whether boys engage in sex prior to marriage, for girls, a school characterized by a gender-neutral atmosphere appears to reduce the risk of their engaging in premarital sex. Furthermore, although policy-makers in Kenya are clearly concerned with the problem of "schoolgirl pregnancy," the data indicate that in this sample, pregnancy is not the primary reason that girls leave school. (author's)

Keywords: Kenya; Research Report; Adolescents, Female; Adolescent Pregnancy; Primary Schools; Rural Population; Premarital Sex Behavior; Eastern Africa; Africa South of The Sahara; Africa; English Speaking

Title: Teenage childbearing in Great Britain and the spatial concentration of poverty households.

Author: McCulloch A

Source: Journal of Epidemiology and Community Health. 2001 Jan;55(1):16-23. **Year:** 2001

Abstract: The study aim was to investigate the association between the spatial concentration of deprived households and teenage nonmarital childbearing. Associations with area deprivation are tested before and after allowing for levels of personal deprivation. The individual data are derived from the 2% sample of anonymized records (SAR) from the census of 1991 in Great Britain, and are combined with area data from the 278 districts of residence identifiable in the SAR. Sample is restricted to unmarried women living at home (with at least one parent) and aged 16-19 years. The results suggest generally higher risk of teenage childbearing for women who are economically inactive, women from households with no access to a car or households resident in local authority accommodation. Without adjusting for personal circumstances, the risk of teenage pregnancy shows a clear, significant and approximately linear association with social deprivation of area of residence in 1991. Residual analysis shows that many urban areas have much higher levels of teenage childbearing than expected. When adjustment is made for personal disadvantage the simple association with local area deprivation is attenuated. A higher risk of teenage childbearing is still seen in urban areas while the areas having the highest differentials are heterogeneous. Both individual and spatial characteristics are important in influencing levels of teenage childbearing. Teenage childbearing shows an association in more deprived areas. The association seems to be largely because residence in more deprived areas is associated with personal disadvantage, which increases the risk of teenage childbearing. Area characteristics are of lesser significance in determining teenage nonmarital childbearing than individual and household characteristics. (author's)

Keywords: United Kingdom; Research Report; Adolescents, Female; Adolescent Pregnancy; Low Income Population; Households; Geographic Factors; Developed Countries; Northern Europe; Europe; Adolescents; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Fertility; Population Dynamics; Social Class; Socioeconomic Status; Socioeconomic Factors; Economic Factors; Family and Household

Title: Sexual initiation and childbearing among adolescent girls in KwaZulu, Natal, South Africa.

Author: Manzini N

Source: Reproductive Health Matters. 2001 May;9(17):44-52. **Year:** 2001

Abstract: A girl's first sexual intercourse is often unplanned and may put her at risk of sexually transmitted diseases (STDs) and HIV infection as well as unwanted pregnancy. The high prevalence of HIV among 15-24 year olds in KwaZulu Natal suggests that sex is initiated at an early age. This paper is based on a 1999 survey in South Africa which identified age of sexual debut and child-bearing among adolescent girls in KwaZulu Natal. Of a sample of 796 girls, almost half had already had first sexual intercourse at a mean age of 16. Of these, 44% reported having communicated with their first partner about preventing pregnancy, of whom 36% were able to use a contraceptive method.

The majority used a male condom, the pill or injectable. Similarly, 30% had used a method, almost all of them male condom, to prevent a STD at first sex. About half of the girls had ever been pregnant and a large percentage of these indicated that the pregnancy had been unwanted. If sexuality education were to begin before puberty, at age 9-10 and in primary school, then many more girls would be in a better position to make informed choices about their sexual activities by the time they begin to engage in sex or reach menarche. (author's)

Keywords: South Africa; Research Report; Surveys; Adolescent Pregnancy; First Intercourse; Contraception; HIV Infections; AIDS; Sexually Transmitted Diseases;

Title: Why do they start it? Explaining reported early-teen sexual activity.
Author: Little CB; Rankin A **Source:** Sociological Forum. 2001 Dec;16(4):703-29. **Year:** 2001

Abstract: This paper seeks an account of why young teens initiate consensual sexual activity. It does so by constructing statistical models aimed at distinguishing those who report having initiated sexual activity from those who have not in four samples of eighth graders from an upstate New York county. Theoretical selection of the model variables is guided by insights from "problem syndrome," control and differential association theories. From the authors' findings, they conclude the following: 1) Risk behaviors foreseen by the "problem syndrome" approach, including having used marijuana and having been drunk, are significant, powerful predictors of early-teen sexual activity. 2) The social setting of consensual sexual activity differs by sex at the eighth grade level. For example, having a boyfriend is a more consistent, powerful predictor variable for girls than having a girlfriend for boys and there is evidence to support the hypothesis that boys initiate sexual activity in the context of status-seeking while girls are more likely to do so as a way of attaining approval. 3) The authors' findings do not give clear primacy to parents or peers as an influence on early-teen consensual sexual activity. Both control theory, usually associated with "parental-influence" variables, and differential association theory, usually associated with "peer-influence" variables, receive support. 4) The results of the research spanning a 2-year period of intensive community anti-teen-pregnancy efforts by a Zero Adolescent Pregnancy campaign are consistent with the conclusion that such a multi-faceted approach might help lower early-teen initiation of sexual activity. (author's)

Keywords: New York; United States; Research Report; Adolescents; Adolescent Pregnancy; Sexuality; Sex Behavior; Risk Behavior; Peer Groups; Northern America; North America; Americas; Developed Countries; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Fertility; Population Dynamics; Personality; Psychological Factors; Behavior; Knowledge Sources; Communication

Title: A practical guide to prescribing OCs for teens.
Author: Mansbach JM; Emans SJ
Source: Contemporary Ob/Gyn. 2001 Nov;46(11):87-92, 95, 99-104.
Year: 2001

Abstract: Among developed countries, the US has the highest teen pregnancy rate

among developed countries, with almost 1 million pregnancies a year. In addition, the 1999 Youth Risk Behavior Survey reports that 33% of girls and 45% of boys in the 9th grade, and 66% of girls and 64% of boys in the 12th grade, have had sexual intercourse. These figures underscore the importance of knowing how to counsel and provide appropriate care for sexually active adolescents. It is noted that oral contraceptives (OCs) are a safe and reliable choice of birth control for most teenage girls. This paper presents essential information on how to prescribe OCs appropriately and effectively counsel patients. Discussions are focused on the initial contraceptive visit; clearing up the myth of weight gain; health benefits of OCs; how OCs work; types of OCs; getting started; side effects; blood pressure changes; headache; venous thromboembolism; emergency contraception; sexually transmitted diseases; and birth control.

Keywords: United States; Teaching Materials; Adolescents, Female; Adolescent Pregnancy [Prevention and Control]; Oral Contraceptives; Prescriptions; Counseling; Northern America; North America; Americas; Developed Countries; Adolescents; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Fertility; Population Dynamics; Contraceptive Methods; Contraception; Family Planning; Distributional Activities; Program Activities; Programs; Organization and Administration; Clinic Activities

Title: Incident pregnancy rates in HIV infected and HIV uninfected at-risk adolescents.

Author: Levin ; Henry-Reid L; Murphy DA; Peralta L; Sarr M

Source: Journal of Adolescent Health. 2001 Sep;29(3S):101-8.

Year: 2001

Abstract: The aim was to compare pregnancy incidence between HIV infected and HIV uninfected adolescents over a 3-year period and to characterize factors that differentiate pregnant from nonpregnant HIV infected females. Female adolescents enrolled in Reaching for Excellence in Adolescent Care and Health, a national cohort study, and non-pregnant at baseline comprised the sample (n = 345). Subject information on pregnancy, risk behavior, and psychosocial characteristics was obtained through interview, chart review, physical examination and laboratory data collected every 3 months. Incident pregnancy rate was analyzed using Cox proportional hazards modeling; the predictors of incident pregnancy were evaluated using repeated measures analysis. 94 pregnancies were identified over 3 years. No significant difference in pregnancy incidence was detected between HIV infected and uninfected females (20.6 and 28.4 per 100 person-years, respectively, p = 0.16). However, for adolescents with living children at entry, HIV infected females were significantly less likely to become pregnant than HIV uninfected (hazard ratio = 0.45; p = 0.03). Among HIV infected adolescents, significant predictors of incident pregnancy were older age (p = 0.01) and not using hormonal contraception (p = 0.00), whereas increased spiritual hope and passive problem-solving capacity were protective against pregnancy (p = 0.02 and 0.05, respectively). Multivariate analysis revealed pregnancy prior to study entry to be predictive for (OR = 3.0; 95% CI: 1.2-7.7), and increased spiritual hope to be protective (OR = 0.4; 95% CI: 0.2-0.9) against incident pregnancy in HIV infected females without the hormonal contraceptive variable in the model. The pregnancy rate is high in this study population. Further research is needed into its determinants and attenuating factors, particularly the role of spiritual elements, to design better contraceptive services and reproduction-related education targeting high-risk youth. (author's)

Keywords: United States; Research Report; Comparative Studies; Adolescents, Female; Adolescent Pregnancy; Pregnancy Rate; HIV Infections; Northern America; North America; Americas; Developed Countries; Studies; Research Methodology; Adolescents; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Fertility; Population Dynamics; Fertility Measurements; Viral Diseases; Diseases

Title: Why do they start it? Explaining reported early-teen sexual activity.

Author: Little CB; Rankin A

Source: Sociological Forum. 2001 Dec;16(4):703-29. **Year:** 2001

Abstract: This paper seeks an account of why young teens initiate consensual sexual activity. It does so by constructing statistical models aimed at distinguishing those who report having initiated sexual activity from those who have not in four samples of eighth graders from an upstate New York county. Theoretical selection of the model variables is guided by insights from "problem syndrome," control and differential association theories. From the authors' findings, they conclude the following: 1) Risk behaviors foreseen by the "problem syndrome" approach, including having used marijuana and having been drunk, are significant, powerful predictors of early-teen sexual activity. 2) The social setting of consensual sexual activity differs by sex at the eighth grade level. For example, having a boyfriend is a more consistent, powerful predictor variable for girls than having a girlfriend for boys and there is evidence to support the hypothesis that boys initiate sexual activity in the context of status-seeking while girls are more likely to do so as a way of attaining approval. 3) The authors' findings do not give clear primacy to parents or peers as an influence on early-teen consensual sexual activity. Both control theory, usually associated with "parental-influence" variables, and differential association theory, usually associated with "peer-influence" variables, receive support. 4) The results of the research spanning a 2-year period of intensive community anti-teen-pregnancy efforts by a Zero Adolescent Pregnancy campaign are consistent with the conclusion that such a multi-faceted approach might help lower early-teen initiation of sexual activity. (author's)

Keywords: New York; United States; Research Report; Adolescents; Adolescent Pregnancy; Sexuality; Sex Behavior; Risk Behavior; Peer Groups; Northern America; North America; Americas; Developed Countries; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Fertility; Population Dynamics; Personality; Psychological Factors; Behavior; Knowledge Sources; Communication

Title: Emerging answers. Research findings on programs to reduce teen pregnancy.

Author: Kirby D

Source: Washington, D.C., National Campaign to Prevent Teen Pregnancy, 2001 May.viii, 186 p. **Year:** 2001

Abstract: The National Campaign to Prevent Pregnancy is a non-profit, non-partisan initiative in the US supported almost entirely by private donations. The Campaign's mission is to improve the well-being of children, youth, and families by reducing teen pregnancy. Organized into six chapters, this document reports the research findings on programs to reduce teen pregnancy. Chapter one examines statistics on teen pregnancy, childbearing, sexually transmitted diseases, and related problems. Chapter

two identifies and summarizes the important risk and protective factors associated with teen sexual behavior. Chapter three discusses some of the criteria for judging the strength of evidence from evaluation studies. Chapter four provides a review and summary on the numerous evaluations of specific programs signed to reduce sexual risk-taking, teen pregnancy, and HIV and other sexually transmitted diseases. Chapter five offers summary observations about the state of research in this field and then about what the research tells about the effectiveness of programs. Finally, chapter six deals with recommendations about program implementation and evaluation.

Keywords: United States; Summary Report; Recommendations; Adolescent Pregnancy [Prevention and Control]; Adolescent Pregnancy [Statistics]; Adolescent Pregnancy [Determinants]; Campaigns; Evaluation; Programs; Risk Behavior; Northern America; North America; Americas; Developed Countries; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Communication Programs; Communication; Organization and Administration; Behavior

Title: Emerging answers. Research findings on programs to reduce teen pregnancy. Summary.

Author: Kirby D

Source: Washington, D.C., National Campaign to Prevent Teen Pregnancy, 2001 May.vi, 21 p. **Year:** 2001

Abstract: This document presents a summary of research findings on programs to reduce adolescent pregnancy. It outlines some facts that explain why communities must remain vigilant about teen pregnancy, childbearing, and sexually transmitted diseases. It also outlines the criteria for including studies in this review. Furthermore, it discusses some of the antecedents of teen sexual risk-taking. Finally, it summarizes the findings of the research review and their implications for communities. It notes that programs that prevent teen pregnancy can be divided into three types: 1) those that focus on the sexual antecedents of teen pregnancy; 2) those that focus on non-sexual antecedents; and 3) programs that focus on both sexual and non-sexual antecedents.

Keywords: United States; Summary Report; Adolescent Pregnancy [Prevention and Control]; Campaigns; Programs; Sexually Transmitted Diseases; Risk Behavior; Northern America; North America; Americas; Developed Countries; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Communication Programs; Communication; Organization and Administration; Reproductive Tract Infections; Infections; Diseases; Behavior

Title: Involving youths: a view from the national campaign to prevent teen pregnancy.

Author: Sanden I

Source: PPFY NETWORK. 2001 Jun;4(2):5-6. **Year:** 2001

Abstract: Teen involvement and attention to teen issues must be taken seriously. This is because teen pregnancy prevention programs would be stronger and more effective if a diverse group of teens from local organizations, schools, after-school groups, and faith communities is purposefully involved. It is noted that involving the youth in the early planning of a program's goals and activities is an excellent way for teens to feel involved and valued, thus gaining credibility for and increasing the program's "cool"

quotient within the teen community. However, providing teens with the appropriate training and information is vital. An integral part of involving teens in an organization or activity is setting goals and giving concrete instructions about the end result. It is in the engaging of teens and including them long-term in the organization that the commitment to recognize and respond to the teens' want could be proven.

Keywords: United States; Adolescents; Adolescent Pregnancy [Prevention and Control]; Programs; Northern America; North America; Americas; Developed Countries; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Fertility; Population Dynamics; Organization and Administration

Title: Pregnancy in adolescents: a study of risks and outcome in eastern Nepal.

Author: Sharma AK; Verma K; Khatri S; Kannan AT

Source: Indian Pediatrics. 2001 Dec;38:1405-9. **Year:** 2001

Abstract: This case control study was carried out to assess the maternal risks and fetal outcome of pregnancy among adolescents as compared to women aged 20 years and above in eastern Nepal. A pretested, structured questionnaire was given to 70 primigravida adolescent women (index group) and 70 primigravida women of 20-29 years of age (control group) delivered at B.P Koirala Institute of Health Science to collect information about antenatal period. The determinants of maternal risks were duration of gestation, prevalence of anemia, complications of pregnancy and delivery. Fetal outcome, on the other hand, was measured in terms of live births, birth weight, and APGAR score. In the study, teenage pregnant women were married at a mean age of 16.71 years, which was significantly lower than that in the control group. Though overall antenatal supervision was similar in both groups, early registration and check up in first trimester was more common among the elder women, which indicates that young girls were less careful about their pregnancies. In terms of complications of pregnancy, it was observed that risk of pregnancy complications was 2.5 times higher among the adolescent pregnant women compared to the controls. The study also found that about 25% of the index group were moderately anemic compared to only 9% of control group ($p < 0.02$). It may be concluded that teenage pregnancy is a high-risk condition. However, definite conclusions cannot be drawn from the study as the sample size is small.

Keywords: Nepal; Research Report; Pregnant Women; Adolescents, Female; Adolescent Pregnancy; Risk Factors; Pregnancy Outcomes; Southern Asia; Asia; Developing Countries; Population Characteristics; Demographic Factors; Population; Adolescents; Youth; Age Factors; Reproductive Behavior;

Title: The social patterning of teenage pregnancy.

Author: Spencer N

Source: Journal of Epidemiology and Community Health. 2001 Jan;55(1):5. **Year:** 2001

Abstract: Concerns about teenage pregnancy have been increasing over the years.

This problem tends to show social gradients in the expected direction, with high rates associated with high levels of deprivation. The paper by Andrew McCulloch confirms these gradients and contributes to the debate on the relative strength of individual- and area-level factors in determining social gradients in health. Results show an association between nonmarital teenage childbearing and residence in deprived areas that is largely attributable to personal disadvantage. Moreover, McCulloch's paper contributes to the debate on health inequalities and explanations for social gradients. The findings tend to support the neo-materialist explanations for social gradients in health. However, inequalities and social gradients in different health outcomes will not necessarily all be sensitive to same social and health policy changes. Health inequalities research should continue to clarify the determinants and mediators of specific outcomes, particularly area-level measures of socioeconomic status.

Keywords: Adolescents; Female; **Adolescent Pregnancy** [Determinants]; Socioeconomic Status; Adolescents; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Fertility; Population Dynamics; Socioeconomic Factors; Economic Factors

Title: Psychological distress and substance use by adolescent mothers: associations with parenting attitudes and the quality of mother-child interaction.

Author: Spieker SJ; Gillmore MR; Lewis SM; Morrison DM; Lohr MJ

Source: Journal of Psychoactive Drugs. 2001 Jan-Mar;33(1):83-93.

Year: 2001

Abstract: This study examines associations between psychological distress and alcohol and drug use across the first 5 years of raising a child and parenting quality at child age 6 for 185 adolescent mothers. Overall, alcohol and other drug use in this sample was relatively low, but drug use was associated with more mother-reported unrealistic expectations of child behavior and more attributions of child intent to annoy parent by misbehaving. Maternal psychological distress was associated with maternal reports of negative control (yelling, pushing, spanking, etc.), and alcohol use moderated the association between psychological distress and negative control. At low levels of alcohol use, more maternal distress was associated with greater negative control; at higher levels of alcohol use, maternal distress was not related to negative control, but the absolute level of negative control was similar to that reported by more distressed mothers. Neither psychological distress nor alcohol and other drug use were related to maternal behavior during an interaction task. Overall, much stronger associations with parenting outcomes were found for an index of maternal vocabulary, compared with maternal psychological distress or maternal alcohol and other drug use. (author's)

Keywords: Washington; United States; Research Report; Longitudinal Studies; Adolescents; Female; **Adolescent Pregnancy**; Premarital Pregnancy; Child; Unmarried Mothers; Psychological Factors; Depression; Parenting Education [Women]; Women; Alcohol Use and Abuse [Women]; Women;

Title: (Sexuality) politics creates strange bedfellows.

Author: Taylor T

Source: EDUCATOR'S UPDATE. 2001 Jun;5(6):1-3. **Year:** 2001

Abstract: In 1987, the Adolescent Pregnancy Prevention Coalition (APPC), together with anti-choice volunteers, employees, and physicians from organizations such as Birthright, Aid to Women, and other Catholic charities, initiated a sexuality survey, which was conducted later in 1988. The data collected from the survey on teens' attitudes and behaviors related to sexuality and adolescent pregnancy gave the APPC solid, local data to make its case regarding teen pregnancy. Other sets of data were later collected in 1992 and 1998 with the addition of few questions regarding abstinence until marriage. During the first and second distributions of the survey, some parents, principals, teachers and superintendents reacted negatively to the seemingly controversial questions posed to the children. With the revision of the questions by Josh McDowell, a well-known abstinence-only supporter, the parents accepted the surveys, which became a product of finding common ground between opposing factions. Overall, the survey found that more than half of the 12th-graders had engaged in intercourse before graduation. Young men were slightly more likely to have had intercourse than young women and also had more sexual partners. The survey also revealed that adolescents who were involved in extracurricular school activities and enjoyed school were significantly less likely to have had intercourse. Additionally, it showed that peers were the number one source of information on sex for adolescents.

Keywords: Iowa; United States; Surveys; Adolescent Pregnancy; Adolescents; Sexuality; First Intercourse; Sex Behavior; Attitude; Northern America; North America; Americas; Developed Countries; Sampling Studies; Studies; Research Methodology; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Youth; Age Factors; Population Characteristics; Personality; Psychological Factors; Behavior

Title: Care for adolescent pregnancy and childbirth. Special communication from the World Health Organization.

Author: Treffers PE; Olukoya AA; Ferguson BJ; Liljestrand J

Source: International Journal of Gynecology and Obstetrics. 2001 Nov;75(2):111-21. **Year:** 2001

Abstract: The rise in adolescent pregnancy in the 20th century has been influenced by declining age at menarche, increased schooling, delay of marriage, inadequate contraception and poverty. The main problems are preterm labor, hypertensive disease, anemia, more severe forms of malaria, obstructed labor in very young girls in some regions, poor maternal nutrition and poor breast-feeding. In many regions HIV infection is an important problem. The infants of adolescent mothers are more prone to low-birth-weight and increased neonatal mortality and morbidity. Antenatal care is often inadequate. The most important problem is the increased incidence of preterm labor and delivery, the youngest age groups running the highest risk. Technically, care of adolescents during labor need not differ from care of older women; most adolescents are not at increased risk during labor, although, they are more in need of empathic support. Generally, care of pregnant adolescents should be adjusted to their specific needs. (author's)

Keywords: World; Literature Review; Adolescent Pregnancy; Infant Mortality; Prenatal Care; Childbirth; Pregnancy Outcomes; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Mortality; Maternal Health Services; Maternal-Child Health Services; Primary Health Care; Health Services; Delivery of Health Care; Health; Pregnancy; Reproduction

Title: Characteristics of males who father babies born to adolescents versus older adult women in Taiwan.

Author: Wang CS; Chou P

Source: Journal of Adolescent Health. 2001 Jun;28(6):509-12. **Year:** 2001

Abstract: The aim was to identify characteristics of males who father babies born to adolescent mothers in southern Taiwan. This was a population-based cross-sectional study of male partners of 1145 primigravidas (555 adolescent primigravidas and 590 adults) in Kaohsiung County, Taiwan, which compared their reports of their male partners' characteristics. Data were collected by a questionnaire that included demographic characteristics, health behavior problems, and attitudes toward the pregnancy. In multiple logistic regression analyses, the males who father babies born to adolescent primigravidas achieved a lower level of education; a greater age discrepancy between themselves and the mothers; a greater unemployment rate; less financial independence; more smoking, drinking, and drug abuse; less supportive attitude toward pregnancy; poorer attendance at childbirth; less provision of postpartum care for mothers and infants; and greater domestic violence than adult primigravidas ($p < 0.05$). These negative findings persist even after stratification by age discrepancy. Male partners of the adolescent mothers with an age difference of 5 years or more were more likely to report drug abuse and domestic violence than those of adult primigravidas. Males who father babies born to adolescent primigravidas were found to have many negative characteristics that place their partners and offspring at risk. Questions asked of or about the father of the baby during prenatal visits may help identify pregnant adolescents who need support during pregnancy and after delivery. (author's)

Keywords: Taiwan; Research Report; Cross Sectional Analysis; Surveys; Adolescent Pregnancy; Adolescents, Female; Adult [Men]; Men; Fathers; Age Factors; China; Eastern Asia; Asia; Developing Countries; Research Methodology; Sampling Studies; Studies; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Adolescents; Youth; Population Characteristics; Parents; Family Relationships; Family Characteristics; Family and Household

Title: Teenage pregnancy: on the road to social death.

Author: Whitehead E

Source: International Journal of Nursing Studies. 2001;38(ER4):437-46.

Year: 2001

Abstract: This paper describes research into perceptions of teenage pregnancy at two different demographical locations in the UK. 95 semi-structured interviews were conducted on a teenage pregnant population and a non-pregnant teenage population. Thematic analysis revealed three levels of influence causing social pressures on the teenage pregnancy and were structured as primary, secondary and subordinate depending on the emphasis within the discourse analysis. From this binary oppositions were identified which formed the theoretical constructs relating to the transition from one state to another which can be termed 'becoming'. When these states are negatively perceived they cause a form of impending doom and create social exclusion for the recipient. Finally, it was revealed that they succumb to the weight of social sanction and feel the prophecy of a 'social death.' (author's)

Keywords: United Kingdom; Technical Report; Adolescents, Female; Interviews; Adolescent Pregnancy;

Perception [Women]; Women; Educational Status; Women's Status; Developed Countries; Northern Europe; Europe; Adolescents; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Data Collection; Research Methodology; Reproductive Behavior; Fertility; Population Dynamics; Psychological Factors; Behavior; Socioeconomic Status; Socioeconomic Factors; Economic Factors

Title: Poor adolescent expectant mothers: can we assess their potential for child abuse?

Author: Zelenko MA; Huffman L; Lock J; Kennedy Q; Steiner H

Source: Journal of Adolescent Health. 2001 Oct;29(4):271-8. **Year:** 2001

Abstract: The aim was to explore the correlates of high scores on the Child Abuse Potential Inventory in adolescent expectant mothers. Child Abuse Potential scores and data on demographics, pregnancy desire, history of maltreatment, psychological functioning, and perceived social support were obtained by self-report and semi-structured interview. The sample consisted of 50 poor single adolescents recruited from prenatal clinics during the second half of the pregnancy. The relationships among the variables were assessed using Pearson product-moment correlation and multiple regression strategies. Higher Child Abuse Potential scores were associated with higher maternal psychological distress, maternal history of psychiatric diagnosis, and lack of perceived support by the father of the baby. Older pregnant teenagers were more likely to report childhood history of maltreatment, higher psychological distress, and perceived and expected less support by the maternal mother. Expectant mothers who were raised by a single parent were more likely to have a history of childhood maltreatment, less likely to live with the father of the baby during their pregnancy and to expect less support from him. Child Abuse Potential scores, obtained during pregnancy in a sample of poor single adolescents provide a marker of maternal prenatal functioning and perceived social support. Further studies are warranted to validate prenatal use of the Child Abuse Potential Inventory (CAPI), which may help identify populations at particularly high risk for child abuse during pregnancy and inform strategies for early preventive interventions. Adolescent education on family planning, child rearing, and social support programs should address the importance of the fathers' role. (author's)

Keywords: California; United States; Research Report; Adolescent Pregnancy; Child Abuse; Child Support; Low Income Population; Northern America; North America; Americas; Developed Countries; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Crime; Social Problems; Child Rearing; Behavior; Social Class; Socioeconomic Status; Socioeconomic Factors; Economic Factors

Title: Demographic characteristics of adolescents. Case study: Cambodia.

Author: Anonymous

Corporate Name: UNESCO

Source: [Unpublished] [2000]. World Wide Web address: <http://www.unescobkk.org>. [10] p. **Year:** 2000

Abstract: This document presents a snapshot of the demographic characteristics of adolescents in Cambodia. The specific topics are: 1) population composition of adolescents; 2) age at marriage; 3) educational level; 4) health and nutrition; 5) fertility, teen pregnancy and abortion; 6) sexually transmitted diseases/HIV/AIDS; 7) practice of contraception and family planning; and 8) knowledge, attitude and behavior on

sexuality and reproductive health (RH). It is noted that about 61% of Cambodia's population is 24 years and younger. These young Cambodians tend to marry at a much younger age than their contemporaries in Thailand, with young women married at 18.8 years and having at least one live birth by the age of 20.

Keywords: Cambodia; Adolescents; Demographic Factors; Population Characteristics; Marriage Age; Educational Status; Adolescent Pregnancy; Abortion, Induced; Sexually Transmitted Diseases; HIV Infections; Family Planning; Reproductive Health; KAP Surveys; Southeastern Asia; Asia; Developing Countries; Youth; Age Factors; Population; Marriage Patterns; Marriage; Nuptiality; Socioeconomic Status; Socioeconomic Factors; Economic Factors; Reproductive Behavior; Fertility; Population Dynamics; Fertility Control, Postconception; Reproductive Tract Infections; Infections; Diseases; Viral Diseases; Health; Surveys; Sampling Studies; Studies; Research Methodology

Title: Demographic characteristics / profile of adolescents. Case study: Bangladesh.

Author: Anonymous

Corporate Name: UNESCO

Source: [Unpublished] [2000]. World Wide Web address: <http://www.unescobkk.org>. [5] p.

Year: 2000

Abstract: This paper presents a snapshot of the demographic characteristics of adolescents in Bangladesh. Data sources include the 1995 census, the 1998 Bangladesh Country Report on Adolescents' Health and Development, Bangladesh Development and Health Surveys, and studies by the Population Council. The specific topics are: 1) population composition of adolescents; 2) age at marriage; 3) educational level; 4) health and nutrition; 5) fertility, teen pregnancy and abortion; 6) sexually transmitted diseases/HIV/AIDS; 7) practice of contraception and family planning; and 8) knowledge, attitude and behavior on sexuality and reproductive health (RH). According to the 1995 census, the adolescent population numbered 31 million or almost 26% of the country's population. About 63% of girls aged 15-19 are married and undernourished, often leading to high mortality and morbidity in the country. However, declines in the overall trend of adolescent pregnancy indicate a reduction in fertility among the teenage group. In terms of education, about half of female adolescents are illiterate, which accounts for the early motherhood of girls. Finally, the prevailing sociocultural norms inhibit the disclosure of information about the sexual activities of adolescents, thus preventing accurate information on their RH to be obtained.

Keywords: Bangladesh; Adolescents; Demographic Factors; Population Characteristics; Marriage Age; Educational Status; Adolescent Pregnancy; Abortion, Induced; Sexually Transmitted Diseases; HIV Infections; Family Planning; Reproductive Health; Southern Asia; Asia; Developing Countries; Youth; Age Factors; Population; Marriage Patterns; Marriage; Nuptiality; Socioeconomic Status; Socioeconomic Factors; Economic Factors; Reproductive Behavior; Fertility; Population Dynamics; Fertility Control, Postconception; Reproductive Tract Infections; Infections; Diseases; Viral Diseases; Health

Title: Demographic characteristics / profile of adolescents. Case study: Malaysia.

Author: Anonymous

Corporate Name: UNESCO

Source: [Unpublished] [2000]. World Wide Web address: <http://www.unescobkk.org>. [6] p.

Year: 2000

Abstract: This document presents a snapshot of demographic information on adolescents in Malaysia. It is noted that the number of adolescents in Malaysia has increased from 20.9% in 1991 to 21.2% in 1998, and by the year 2000 they are expected to comprise 21.1% of the total population. In terms of marriage, the average age at marriage was 23.2 years among Malaysians. Education and the changing socioeconomic conditions have, however, resulted in changing norms on marriage and family structures. This paper also presents information about fertility, pregnancy and abortion, as well as sexually transmitted diseases/HIV/AIDS. A study on the practice of contraception and family planning revealed that there was a high contraceptive knowledge among sexually active respondents. Finally, facts about knowledge, attitude, and behavior on sexuality and reproductive health are presented.

Keywords: Malaysia; Adolescents; Demographic Factors; Population Characteristics; Marriage Age; Educational Status; Adolescent Pregnancy; Abortion, Induced; Sexually Transmitted Diseases; HIV Infections; Family Planning; Reproductive Health; KAP Surveys; Southeastern Asia; Asia; Developing Countries; Youth; Age Factors; Population; Marriage Patterns; Marriage; Nuptiality; Socioeconomic Status; Socioeconomic Factors; Economic Factors; Reproductive Behavior; Fertility; Population Dynamics; Fertility Control, Postconception; Reproductive Tract Infections; Infections; Diseases; Viral Diseases; Health; Surveys; Sampling Studies; Studies; Research Methodology

Title: Demographic characteristics / profile of adolescents. Case study: Mongolia.

Author: Anonymous

Corporate Name: UNESCO

Source: [Unpublished] [2000]. World Wide Web address: <http://www.unescobkk.org>. [10] p. **Year:** 2000

Abstract: This paper presents a snapshot of the demographic characteristics of adolescents in Mongolia. In Mongolia, adolescents (ages 10-19) numbered 581,188 or 24% of the total population of 2.4 million in 1998. Regarding age at marriage, official statistics showed that among married couples, about 11-13% comprised of women aged 18-19 and 5% of men in the same age group. The educational level of the population in Mongolia is high with 90% literate adults and three-fourths of the population having completed middle education. Although Mongolia has achieved much success in the protection of children's health, adolescent health remains weak due to an unsound environment. This paper also highlights facts about fertility, teen pregnancy and abortion in Mongolia, knowledge, attitude and behavior on sexuality and reproductive health of adolescents, sexually transmitted diseases/HIV/AIDS, and practice of contraception and family planning among adolescents.

Keywords: Mongolia; Adolescents; Demographic Factors; Population Characteristics; Marriage Age; Educational Status; Adolescent Pregnancy; Abortion, Induced; Sexually Transmitted Diseases; HIV Infections; Family Planning; Reproductive Health; KAP Surveys; Eastern Asia; Asia; Developing Countries; Youth; Age Factors; Population; Marriage Patterns; Marriage; Nuptiality; Socioeconomic Status; Socioeconomic

Title: Demographic characteristics / profile of adolescents. Case study: Philippines.

Author: Anonymous

Corporate Name: UNESCO

Source: [Unpublished] [2000]. World Wide Web address: <http://www.unescobkk.org>. [6] p. **Year:** 2000

Abstract: This paper presents a snapshot of the demographic characteristics of adolescents in the Philippines. In 1995, the population census recorded 13.7 million adolescents in the Philippines. It is noted that those below 20 years of age comprised 49% of the country's total population. Filipino women marry late compared to women in other developing countries. In terms of education, the increase of enrollment rates in both primary and secondary schools has led to an improvement in the literacy rates. However, adolescents in this country face problems related to health, with only a few services that address the specific health concerns of the youth. This paper also highlights some facts about adolescent employment; fertility, teen pregnancy and abortion; sexually transmitted diseases/HIV/AIDS; practice of contraception and family planning; and finally, knowledge, attitude and behavior on sexuality and reproductive health.

Keywords: Philippines; Adolescents; Demographic Factors; Population Characteristics; Marriage Age; Educational Status; Adolescent Pregnancy; Abortion, Induced; Sexually Transmitted Diseases; HIV Infections; Family Planning; Reproductive Health; KAP Surveys; Southeastern Asia; Asia; Developing Countries; Youth; Age Factors; Population; Marriage Patterns; Marriage; Nuptiality; Socioeconomic Status; Socioeconomic Factors; Economic Factors; Reproductive Behavior; Fertility; Population Dynamics; Fertility Control, Postconception; Reproductive Tract Infections; Infections; Diseases; Viral Diseases; Health; Surveys; Sampling Studies; Studies; Research Methodology

Title: Demographic characteristics / profile of adolescents. Case study: Sri Lanka.

Author: Anonymous

Corporate Name: UNESCO

Source: [Unpublished] [2000]. World Wide Web address: <http://www.unescobkk.org>. [6] p.

Year: 2000

Abstract: This paper presents a snapshot of the demographic characteristics of adolescents in Sri Lanka. It is noted that rate of growth of adolescent population in Sri Lanka has gradually declined, estimated at 1.5 million by the year 2008. On the other hand, the marrying age of females has increased from 20.9 years in 1953 to 25.5 years in 1993. This has resulted in a decline in the proportion of women married in the age group of 15-19. Furthermore, the overall literacy rate of the population steadily increased from about 17% in 1981 to 87% in 1994. In the field of health and nutrition, it is cited that the nutritional status of adolescent girls is a cause for concern in terms of their own growth needs as well as for childbearing. This paper also presents data on fertility, teen pregnancy and abortion; sexually transmitted diseases/HIV/AIDS. A study on contraception and family planning revealed that awareness about contraceptives and where to obtain them is satisfactory. Finally, the knowledge, attitude and behavior on

sexuality and reproductive health among adolescents are highlighted in this paper.

Keywords: Sri Lanka; Adolescents; Demographic Factors; Population Characteristics; Marriage Age; Educational Status; Adolescent Pregnancy; Abortion, Induced; Sexually Transmitted Diseases; HIV Infections; Family Planning; Reproductive Health; KAP Surveys; Southern Asia; Asia; Developing Countries; Youth; Age Factors; Population; Marriage Patterns; Marriage; Nuptiality; Socioeconomic Status; Socioeconomic Factors; Economic Factors; Reproductive Behavior; Fertility; Population Dynamics; Fertility Control, Postconception; Reproductive Tract Infections; Infections; Diseases; Viral Diseases; Health; Surveys; Sampling Studies; Studies; Research Methodology

Title: Demographic characteristics / profile of adolescents. Case study: Thailand.

Author: Anonymous

Corporate Name: UNESCO

Source: [Unpublished] [2000]. World Wide Web address: <http://www.unescobkk.org>. 6 p. **Year:** 2000

Abstract: This paper presents a snapshot of the demographic characteristics of adolescents in Thailand. In mid-1999, there were approximately 10.5 million adolescents and 11.5 million youth in the country. Thai women and men are marrying increasingly late. At the time of the 1990 Census, it is noted that the mean age at marriage among women was 23.5. To some extent, the growing gap between sexual maturation and marriage is being filled with more extensive educational participation. This has been brought about by the increasing participation in higher levels of education in the country. This paper also highlights some facts about fertility, teen pregnancy and abortion in Thailand; sexually transmitted infections/HIV/AIDS; the practice of contraception and family planning as well as knowledge, attitude and behavior on sexuality and reproductive health.

Keywords: Thailand; Adolescents; Demographic Factors; Population Characteristics; Marriage Age; Educational Status; Adolescent Pregnancy; Abortion, Induced; Sexually Transmitted Diseases; HIV Infections; Family Planning; Reproductive Health; KAP Surveys; Southeastern Asia; Asia; Developing Countries; Youth; Age Factors; Population; Marriage Patterns; Marriage; Nuptiality; Socioeconomic Status; Socioeconomic Factors; Economic Factors; Reproductive Behavior; Fertility; Population Dynamics; Fertility Control, Postconception; Reproductive Tract Infections; Infections; Diseases; Viral Diseases; Health; Surveys; Sampling Studies; Studies; Research Methodology

Title: Teenage motherhood and infant mortality in Bangladesh: maternal age-dependent effect of parity one.

Author: Alam N

Source: JOURNAL OF BIOSOCIAL SCIENCE.2000 pr;32(2):229-36.
Year: 2000

Abstract: Nuptiality norms in rural Bangladesh favor birth during the teenage years. An appreciable proportion of teenage births is, in fact, second births. This study examines the relationship between teenage fertility and high infant mortality. It is hypothesized that if physiological immaturity is responsible, then the younger the mother, the higher would be the mortality risk, and the effect of mother's teenage on mortality in infancy,

particularly in the neonatal period, would be higher for the second than the first births. Vital events recorded by the longitudinal demographic surveillance system in Matlab, Bangladesh, in 1990-92 were used. Logistic regression was used to estimate the effects on early and late neonatal (0-3 days and 4-28 days, respectively) and postneonatal mortality of the following variables: mother's age at birth, parity, education and religion, sex of the child, household economic status and exposure to a health intervention program. The younger the mother, the higher were the odds of her child dying as a neonate and the odds were higher for second children than first children of teenage mothers. First-born children were at higher odds of dying in infancy than second births if mothers were in their 20s. Unfavorable mother's socioeconomic conditions were weakly, but significantly, associated with higher odds of dying during late neonatal and postneonatal periods. The results suggest that physical immaturity may be of major importance in determining the relationship between teenage fertility and high neonatal mortality. (author's)

Keywords: Bangladesh; Research Report; Adolescent Pregnancy; Adolescents, Female; Mothers; Fertility; Infant Mortality; Maternal Age; Southern Asia; Asia; Developing Countries; Reproductive Behavior; Population Dynamics; Demographic Factors; Population; Adolescents; Youth; Age Factors; Population Characteristics; Parents; Family Relationships; Family Characteristics; Family and Household; Mortality; Parental Age

Title: Contraceptives and teens: what are the options?

Author: Anonymous

Source: CONTRACEPTIVE TECHNOLOGY UPDATE. 2000 Sep;21(9):109-11. **Year:** 2000

Abstract: This article focuses on the contraceptive options of adolescents to prevent unintended pregnancy. Based on the Contraceptive Technology Update 2000 Contraceptive Survey involving health care providers, 90% of the respondents will provide injectable depot medroxyprogesterone acetate (Depo-Provera or DMPA) to young teens. Meanwhile, in surveying providers' practices with regard to the possible link between DMPA use and diminishing bone mass, about half of the providers inform patients of such an effect and about 30% use other methods, such as counseling on calcium supplementation and weight-bearing exercise. However, just-released research revealed that DMPA's impact on bone density might be a short-term or current-user effect, apparently without long-term implications. On the other hand, when providers were asked for the treatment of severe dysmenorrhea in women who are not sexually active and have no plans to engage in such activity, 45% of respondents said they would prescribe an oral contraceptive and a prostaglandin inhibitor.

Keywords: United States; Surveys; Adolescents; Adolescent Pregnancy [Prevention and Control]; Contraceptive Methods; Contraceptive Availability; Family Planning Personnel; Northern America; North America; Americas; Developed Countries; Sampling Studies; Studies; Research Methodology; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Fertility; Population Dynamics; Contraception; Family Planning; Family Planning Programs

Title: Peers may help reduce teen pregnancy. Programs bring sex education to underserved areas.

Author: Anonymous

Source: FUTURIST. 2000 Jan-Feb;34(1):10. **Year:** 2000

Abstract: Pregnancy has become the leading cause of death among adolescent girls in the Dominican Republic, according to the UN Population Fund (UNFPA). Nearly one-quarter of girls aged 15-19 years are either pregnant or have already given birth; yet access to reproductive health services is limited outside the major cities, putting these young mothers at risk. To help solve the problem, UNFPA is working with nongovernmental organizations to develop peer-education programs, expanding young people's access to sexual education and services in 36 neighborhoods of Santo Domingo and in three smaller cities. The project has trained some 360 adolescents as volunteer peer counselors, who distribute educational material and—with parental consent—condoms, spermicides, and contraceptive pills (if girls have prescriptions from a physician). "Teens are encouraged to postpone their first sexual encounter or to maintain a faithful relationship with one partner," according to the UNFPA report, *The State of the World Population 1999*. In addition to reducing unwanted pregnancies, the program aims to cut infection rates of AIDS and other sexually transmitted diseases. "In 2 years, the project has counseled nearly 9000 young people, 30% of whom are not in school," says the report. By reducing the rate of early childbearing, the project could help expand the life opportunities of girls; in many countries girls who become pregnant are not permitted to return to school—if they were in school in the first place. (full text)

Keywords: Dominican Republic; Adolescents, Female; Adolescent Pregnancy; Reproductive Health [Women]; Women; Program Accessibility; Health Services; Caribbean; North America; Americas; Developing Countries; Latin America; Adolescents; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Fertility; Population Dynamics; Health; Program Evaluation; Programs; Organization and Administration; Delivery of Health Care

Title: Postponing second birth may help lower fertility rate.

Author: Anonymous

Source: POPULATION BRIEFS. 2000 Sep;6(3):3. **Year:** 2000

Abstract: In South Africa, adolescent childbearing is common; however, fertility has dropped to fewer than 3 births per woman. In the study conducted by the Population Council and the Reproductive Health Research Unit of Baragwanath Hospital, the researchers found that educational and employment opportunities compel adolescent mothers to postpone having a second child. This conclusion is based on the focus group discussions among teenage mothers, women in their 20s having their first child before 20, parents of adolescent mothers, and young men in their 20s, some of whom were fathers. Most of the respondents dismissed the possibility that girls became pregnant because of ignorance. Nevertheless, some felt their parents had not been frank enough with them regarding the risks of sex. Abortion was also a consideration in most girls. The findings of the study suggests the importance of completion of studies, financial security and a stable relationship were the most mentioned requirements to meet before having a second child.

Keywords: South Africa; Adolescent Pregnancy; Delayed Childbearing; Fertility Determinants; Employment Status; Educational Status; Southern Africa; Africa South of The Sahara; Africa; English Speaking Africa; Developing Countries; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Socioeconomic Status; Socioeconomic Factors; Economic Factors

Title: Teen birth rate continues to drop.

Author: Anonymous

Source: POPULATION TODAY. 2000 Jan;28(1):3-4. **Year:** 2000

Abstract: The two surveys on teens, namely, the National Survey of Family Growth and the National Survey of Adolescent Males, reported that teenage birth rate continued its decline after rising sharply between 1986 and 1991. These declines may be linked to a decrease in sexual activity, an increase in the use of condoms and injectable contraceptives that offset a decline in pill use, the impact of AIDS prevention education, and declining approval among teens of premarital sex. The increased usage of condom during the 1980s and early 1990s may be related to another finding—near universal HIV prevention education. Therefore, these declines in teen birth rates cannot be linked to any one factor, but rather to multiple factors: changes in sexual activity and increases in condom and injectable contraceptive use.

Keywords: United States; Critique; Adolescent Pregnancy; Birth Rate [Changes]; Sex Behavior [Changes]; Contraceptive Usage [Changes] Northern America; North America; Americas; Developed Countries; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Fertility Measurements; Behavior; Contraception; Family Planning

Title: Teens' contraceptive use marked by inconsistency.

Author: Anonymous

Source: CONTRACEPTIVE TECHNOLOGY UPDATE. 2000 Jun;21(6):74-5. **Year:** 2000

Abstract: According to a report, statistics have shown that there is a decrease in the percentage of teens who have had sex and an increase in contraceptive use at first sex among teens. However, it also found that teens are inconsistent in contraceptive use. 1 in every 2 teens surveyed by the National Campaign to Prevent Teen Pregnancy cites pressure from partners as a main reason for not using contraception. Drinking and drug use also play a large role, as noted by more than 50% of the teens. The nationally representative survey questioned 515 teens aged 12-17 years. While the poll showed that nearly 9 of 10 teens believe it is important to use contraception each and every time they have sex, they are not following through in their actions. In addition, the report notes that Hispanic and very young teens are at particularly high risk of unplanned pregnancy. In view of this, it remains challenging to ensure adequate access to contraceptive care, particularly care provided in a confidential and nonjudgmental manner. The priority should always be to encourage teens to delay sexual activity and to protect their physical health, their emotional health, and their opportunities for the future.

Keywords: United States; Technical Report; Adolescent Pregnancy; Sex Behavior; Pregnancy, Unplanned; Contraceptive Usage; Northern America; North America; Americas; Developed Countries; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Behavior; Contraception; Family Planning

Title: On the relationship between country sex ratios and teen pregnancy rates: a replication.

Author: Barber N

Source: CROSS-CULTURAL RESEARCH. 2000 Feb;34(1):26-37.

Year: 2000

Abstract: The hypothesis that a low ratio of men to women both destabilizes marriages and makes it more likely that young women will reproduce early outside of marriage was supported by an analysis of 42 societies for which the UN published detailed information on population structure and teen childbearing. This study attempted to replicate the earlier finding using sex ratios for 0-14 year olds (as proxy for teen sex ratios) and a larger sample of 185 countries. Several measures of economic development, population density, and latitude were used as control variables in the regression analyses. Teen births were inversely related to the sex ratio, to urbanization, and to attitude. The sex ratio explained 38% of the variance in teen birth rates, thus providing a clear replication of the earlier study. Early childbearing can be seen as an adaptive response to poor marital opportunity. (author's)

Keywords: World; Research Report; Sampling Studies; Adolescents, Female; Adolescent Pregnancy; Sex Ratio; Birth Rate; Studies; Research Methodology; Adolescents; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Fertility; Population Dynamics; Sex Distribution; Sex Factors; Fertility Measurements

Title: National medical organizations and teen pregnancy.

Author: Brookman RR

Source: PPFY NETWORK. 2000 Sep;3(3):2-3. **Year:** 2000

Abstract: National medical organizations generally have been established to foster the training and professional development needs of their members. However, their mission is to improve the health and well-being of the specific population cared for by their members. To accomplish their mission, a need to create and maintain practice guidelines or standards of care is needed, as well as educating professionals at all stages of their career in the designated specialty. In addition, advocating for vulnerable or underserved populations and unmet health needs is important to achieve their goal. Moreover, specific attention to the health needs of adolescents arose in the 1960s and 1970s in response to large numbers of alienated, runaway, rebellious youth engaging in behaviors with significant health risks. These medical organizations have also attended the needs of pregnant and parenting teens. They called for actions to improve the care available to them.

Keywords: United States; Adolescent Pregnancy; Organizations; Medicine; Programs; Public Health; Maternal-Child Health Services; Northern America; North America; Americas; Developed Countries; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Health Services; Delivery of Health Care; Health; Organization and Administration; Primary Health Care

Title: Consultation patterns and provision of contraception in general practice before teenage pregnancy: case-control study.

Author: Churchill D; Allen J; Pringle M; Hippisley-Cox J; Ebdon D;

Macpherson M; Bradley S

Source: BMJ. British Medical Journal. 2000 Aug 19-26;321(7259):486-9.

Year: 2000

Abstract: In western Europe, UK has the highest teenage pregnancy rate among 15-19 year olds. Although general practice is one source of provision of contraception, it has been suggested that teenagers are reluctant to seek advice because of difficulty in gaining access and fears about confidentiality. This case-control study determined patterns of consultation in general practice and provision of contraception before teenage pregnancy. A total of 240 cases with a recorded conception before age 20 and 719 matched controls were identified. Overall, results show that most teenagers who became pregnant attended a general practice in the year before pregnancy, and many had sought contraceptive advice. Cases were more likely to have consulted a doctor in the year before conception than controls (odds ratio, 2.70; 95% confidence interval, 1.56-4.66). An association between provision of emergency contraception and pregnancy ending in termination was found. This finding emphasizes the need for continuing follow-up of teenagers consulting for this form of contraception.

Keywords: United Kingdom; Research Report; Case Control Studies; Adolescent Pregnancy; Pregnancy Rate; Contraceptive Agents, Postcoital; Fertility Control, Postcoital; Family Planning Programs; Utilization of Health Care; Emergency Contraception; Developed Countries; Northern Europe; Europe; Studies; Research Methodology; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Fertility Measurements; Contraceptive Agents, Female; Contraceptive Agents; Contraception; Family Planning; Health Services; Delivery of Health Care; Health

Title: The African-American church: a potential forum for adolescent comprehensive sexuality education.

Author: Coyne-Beasley T; Schoenbach VJ

Source: Journal of Adolescent Health. 2000 Apr;26(4):289-94. **Year:** 2000

Abstract: The aim was to investigate the attitudes and beliefs of clergy from African-American churches towards sexuality education and the provision of sexuality education in their churches. A pilot study was designed to survey a convenience sample of clergy leaders from African-American churches about their young adolescent members. The survey asked about priority health topics, prevalence of sexual and drug risk behavior and the clergy's desire for health education programs. The churches were located in a county (1990 population approximately 200,000, 40% African-American) in the southeastern US. The respondents' highest priority issues were drugs, violence, HIV/AIDS, pregnancy and alcohol. Many (76%) had discussed one or more of these issues in church. All respondents wanted additional health seminars for their adolescents, though some clergy (30%) excluded some sexual topics (i.e., anal sex, bisexuality, homosexuality, masturbation, oral sex). Only 6% would make condoms available in their churches, but all would allow contraceptive education. Many African-American churches are open to including sexuality education among their health education offerings for young adolescents. The church should be considered as a potential forum for providing comprehensive sexuality education for African-American adolescents. (author's)

Keywords: United States; Research Report; Surveys; Adolescents; Sex Education; Attitude; Beliefs; Religion; Risk Behavior; AIDS [Prevention and Control]; HIV Infections [Prevention and Control]; Sexually Transmitted Diseases [Prevention and Control]; Adolescent Pregnancy [Prevention and Control]; Alcohol Use and Abuse; Contraception;

Title: Reviving interest in policies and programs to help teens prevent repeat births.

Author: Dailard C

Source: Guttmacher Report on Public Policy. 2000 Jun;;1-2, 11.

Year: 2000

Abstract: Repeat births represent more than one in five births to teenagers in the US, or approximately 110,000 births in 1998. These repeat births come at a great cost to the teenage mothers themselves, their children, and society at large. However, significant decreases have been noted during the 1990s, primarily due to increased abstinence and improved contraceptive use among sexually active teenagers. Although few programs have demonstrated their ability to reduce second births to teenagers, there is mounting evidence suggesting that one long-term, integrated, health-based approach can yield results in diverse communities. In addition, a review of programs for teenage mothers highlights the fact that only those that adopt an overall health focus, with a strong family planning component, are successful in reducing repeat pregnancy rates. Title X and other federal programs that provide subsidized family planning services play a vital role in serving teenage mothers. Not surprisingly, the director of the federal Office of Adolescent Pregnancy Programs is calling for more support for programs for pregnant and parenting adolescents, revealing that the office is receiving many more requests for care projects than it can fund.

Keywords: United States; Critique; Adolescent Pregnancy; Birth Intervals; Birth Spacing; Family Planning; Sexual Abstinence; Programs; Policy; Northern America; North America; Americas; Developed Countries; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Fertility Measurements; Family Planning; Behavioral Methods; Organization and Administration

Title: A Journey Toward Womanhood: Effects of an Afrocentric approach to pregnancy prevention among African-American adolescent females.

Author: Dixon AC; Schoonmaker CT; Philliber WW

Source: Adolescence. 2000 Fall;35(139):425-9. **Year:** 2000

Abstract: A Journey Toward Womanhood is an Afrocentric pregnancy prevention program for adolescent females developed by Sisterhood Agenda in Durham, North Carolina. In the present study, 33 past participants in the program were compared with 32 non-participants. Results suggested that the program had a positive impact, delaying the initiation of sexual intercourse, increasing contraceptive use among those who were having intercourse, and reducing the incidence of teen pregnancy. (author's)

Keywords: North Carolina; United States; Research Report; Comparative Studies; Surveys; Blacks [Women]; Women; Adolescents; Female; Adolescent Pregnancy [Prevention and Control]; Program Effectiveness; Programs; Northern America; North America; Americas; Developed Countries; Studies; Research Methodology; Sampling Studies; Ethnic Groups; Cultural Background; Population Characteristics; Age Factors;

Title: American Medical Association and the prevention of teenage pregnancy.

Author: Elster A

Source: PPFY NETWORK. 2000 Dec;3(4):2-3. **Year:** 2000

Abstract: Over the last decade, the American Medical Association (AMA) has addressed the prevention of teenage pregnancy through both policy advocacy and programs. Its policy on the prevention of teenage pregnancy includes emphasis on providing of both education and reproductive health services. Moreover, AMA recognizes that the primary responsibility for family life education is in the home. Also, AMA supports comprehensive family life and sexuality education programs in schools at all levels. In addition to promoting policies to reduce teenage pregnancy, the AMA pursues a program of activities to integrate comprehensive adolescent preventive services into routine medical care. Furthermore, the AMA Guidelines for Adolescent Preventive services program includes a set of 24 recommendations, various materials to aid physicians and other health providers these recommended services, a Web site, and a training program.

Keywords: United States; Adolescent Pregnancy [Prevention and Control]; Reproductive Health; Health Education; Integrated Programs; Sex Education; Northern America; North America; Americas; Developed Countries; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Health; Education; Programs; Organization and Administration

Title: In Mexico, abortion rights strictly for the books.

Author: Farmer A

Source: REPRODUCTIVE FREEDOM NEWS. 2000 Jun;9(6):3.
Year: 2000

Abstract: This paper characterizes the Mexican abortion laws using the case of a girl aged 14 years, Paulina Ramirez Jacinta, who was raped, became pregnant, and chose to terminate the unwanted pregnancy, yet was denied an abortion. This case clearly showed that Mexican abortion law, despite its legality, is highly restrictive in nature and, in a way, violated the human rights of Paulina. Even though it permits first-trimester abortion procedures for rape victims or women whose lives are endangered by the pregnancy, many pregnant women still resort to illegal abortion. To further aggravate the restrictive nature of the law, Baja California state Rep. Martin Dominguez Rocha made a proposal to eliminate the rape exception in the state's penal code. The case of Paulina will be handled by the lawyers at the Center for Reproductive Law and Policy in order to arrive at a settlement favorable to Paulina.

Keywords: Mexico; Case Studies; Adolescents, Female; Adolescent Pregnancy; Rape; Abortion Law; Abortion, Legal; Human Rights [Women]; Women; North America; Americas; Developing Countries; Latin America; Studies; Research Methodology; Adolescents; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Fertility; Population Dynamics; Crime; Social Problems; Abortion, Induced; Fertility Control, Postconception; Family Planning

Title: Teenage pregnancy and female educational underachievement: a prospective study of a New Zealand birth cohort.

Author: Fergusson DM; Woodward LJ

Source: JOURNAL OF MARRIAGE AND THE FAMILY. 2000 Feb;62(1):147-61. **Year:** 2000

Abstract: This paper examines the relationship between teenage pregnancy and educational underachievement in a cohort of 520 young women studied from birth to 21 years. Results showed that young women who became pregnant by the age of 18 years were at increased risk of poor achievement in the national School Certificate examinations, of leaving school without qualifications, and of failing to complete their sixth-form year at high school. In addition, pregnant teenagers had lower rates of participation in tertiary education and training than their nonpregnant peers. Subsequent analyses showed that the links between teenage pregnancy and tertiary education participation were largely noncausal and reflected the earlier academic ability, behavior, and family circumstances of young women who became pregnant. In contrast, antecedent child and family factors only partially explained associations between teenage pregnancy and high school participation and achievement. After adjustment for these factors, significant associations remained between teenage pregnancy and educational achievement at high school. An examination of the diverse life histories of young women who became pregnant revealed that for the majority of young women, pregnancy occurred after they had left school before finishing. These findings suggest that rates of teenage pregnancy might be elevated among young women who leave school early, rather than rates of early school leaving being elevated among young women who become pregnant during their teenage years. (author's)

Keywords: New Zealand; Research Report; Prospective Studies; Cohort Analysis; Adolescents, Female; Adolescent Pregnancy; Educational Status [Women]; Women; Developed Countries; Oceania; Studies; Research Methodology; Adolescents; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Fertility; Population Dynamics; Socioeconomic Status; Socioeconomic Factors; Economic Factors

Title: Listening to youth: teen perspectives on pregnancy prevention.

Author: Hacker KA; Amare Y; Strunk N; Horst L

Source: JOURNAL OF ADOLESCENT HEALTH. 2000 Apr;26(4):279-88. **Year:** 2000

Abstract: This survey determined the views of public high school students on teen pregnancy prevention. The authors hypothesized that students at varying risk for pregnancy would have differing views, which would have implications for future pregnancy prevention programming. A 75-question anonymous survey was designed and administered in 6 Boston high schools. A total of 1000 10th- and 11th-grade students from diverse racial and ethnic backgrounds completed the questionnaire. The overall analysis showed that 63% of the students had had sexual intercourse: 72% of males and 54% of females. Among these, 35% were consistent contraceptive users and 65% were inconsistent. Teens enumerated the factors that will prevent teen pregnancy. These include having more information on pregnancy and birth control (52%), education about relationships (33%), parental communication (32%), improved contraceptive access (31%), and education about parenting realities (30%). Moreover, abstinent, consistent contraceptive users, and inconsistent contraceptive users had different preferences regarding

strategies. Such findings have important implications for educational content and policy discussions.

Keywords: Massachusetts; United States; Research Report; Adolescents; Adolescent Pregnancy [Prevention and Control]; Adolescent Pregnancy [Determinants]; Contraceptive Usage; Northern America; North America; Americas; Developed Countries; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Fertility; Population Dynamics; Contraception; Family Planning

Title: Association between teenage pregnancy rates and the age and sex of general practitioners: cross sectional survey in Trent 1994-7.

Author: Hippisley-Cox J; Allen J; Pringle M; Ebdon D; McPhearson M; Churchill D; Bradley S

Source: BMJ : BRITISH MEDICAL ASSOCIATION.2000 Mar 25;320(7238):842-5. **Year:** 2000

Abstract: This cross-sectional study examined variations in teenage pregnancy rates in the Trent region, UK, and determined possible associations with local general practice characteristics such as the age and sex of the doctors. The study sample included all pregnancies of teenagers, aged 13-19 years, between 1994 and 1997 that resulted in a hospital admission. It also included all 826 general practices in the Trent region between 1994 and 1997. Upon a multivariate analysis, lower teenage pregnancy rates were associated with the presence of a female or young doctor and more nurse time. Practices in deprived areas had higher teenage pregnancy rates. Overall, general practices with female doctors, young doctors, or more nurse time had lower teenage pregnancy rates. These findings may have implications for the mix of health professionals within primary care.

Keywords: United Kingdom; Research Report; Cross Sectional Analysis; Adolescents, Female; Adolescent Pregnancy; Health Personnel; Pregnancy Rate; Developed Countries; Northern Europe; Europe; Research Methodology; Adolescents; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Fertility; Population Dynamics; Delivery of Health Care; Health; Fertility Measurements

Title: Adolescent pregnancy and parenthood in South Africa.

Author: Kaufman CE; de Wet T; Stadler J

Source: New York, New York, Population Council, 2000.41 p.Policy Research Division Working Papers No. 136 **Year:** 2000

Abstract: South Africa's total fertility rate is estimated to be one of the lowest in sub-Saharan Africa, less than 3.0 births per woman nationally and declining. At the same time, adolescent childbearing levels remain high; more than 30% of 19-year-old girls are reported to have given birth at least once. Using evidence from focus groups conducted in urban and rural areas in South Africa with young Black women and men, and with the parents of teenage mothers, the authors consider the experience of early parenthood. Specifically, the analysis explores four aspects of teenage childbearing as it relates to key transitions into adulthood: the advent of a pregnancy and the decision to terminate or carry the pregnancy to term; the conditions under which "damages" (a fine for the boy's behavior that also effectively assigns paternity even if no marriage

follows) are denied, paid, or refused; the impact of early childbearing on school, work, and marriage; and consequences of premarital childbearing on future relationships, including subsequent fertility. The authors find that in South Africa, in contrast to many other settings, teenage mothers may return to school once they have given birth and that this opportunity is strongly related to a long delay before the birth of a second child. Education is also strongly associated with the valuation of brideprice: girls who are better educated bring a higher price, which may encourage parents to support their daughters' schooling, and perhaps also their return to school following early pregnancy and childbirth. Babies born to teenage parents are extremely vulnerable. Because the baby is usually born premaritally and subsequent marriage between mother and father is uncommon, the support and maintenance of the child are subject to paternal recognition and commitment. The presence of a baby also generally means a lower brideprice for a future marriage; first-born children are sometimes kept secret from prospective grooms to maintain higher brideprice. (author's)

Keywords: South Africa; Research Report; Adolescents, Female; Adolescent Pregnancy; Sex Factors; Premarital Pregnancy; Educational Status; Socioeconomic Factors; Culture; Marriage Patterns; Southern Africa; Africa South of The Sahara; Africa; English Speaking Africa; Developing Countries; Adolescents; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Fertility; Population Dynamics; Socioeconomic Status; Economic Factors; Marriage; Nuptiality

Title: Kenyan adolescents at risk.

Author: Kiragu J

Source: INITIATIVES IN REPRODUCTIVE HEALTH POLICY. 2000 Jul;3(2):11-2. **Year:** 2000

Abstract: In Kenya, population policy is unclear regarding adolescent rights to sexual and reproductive health education and services. Consequently, many Kenyan adolescents who are sexually active, with little information or protection against unwanted pregnancies and sexually transmitted diseases, resort to unsafe abortion and suffer disproportionately from abortion-related mortality. It is also noted that the laws restricting abortion discriminate most against the young and the poor because they have the least access to safe abortion services. Hospital records of women seeking unsafe abortions show that abortion is mainly sought by women who are young, unmarried, either in school or unemployed, and not using any method of contraception. In view of this, it is suggested that access to safe abortion within the existing law regardless of age or social class should be enhanced to reduce the number of abortion-related deaths and the number of cases of incomplete abortion.

Keywords: Kenya; Adolescents, Female; Adolescent Pregnancy; Pregnancy, Unwanted; Risk Behavior; Abortion, Induced [Complications]; Abortion, Illegal; Social Discrimination; Policy; Eastern Africa; Africa South of The Sahara; Africa; English Speaking Africa; Developing Countries; Adolescents; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Fertility; Population Dynamics; Behavior; Fertility Control, Postconception; Family Planning; Social Problems

Title: Contradictions in human rights and social attitudes: case studies of abortion in Uganda.

Author: Kyamureku PT

Source: INITIATIVES IN REPRODUCTIVE HEALTH POLICY. 2000 Jul;3(2):8. **Year:** 2000

Abstract: In Africa and in many developing countries, there are many unwritten rules that apply to women. These unwritten rules and regulations, though referred to as culture or tradition, keep women in bondage and in a subservient status to men. Moreover, these regulations limit women's right, health, and development and determine women's access to abortion and other health care. In contrast to these traditional views, many countries, including Uganda, have written constitutions with sections that provide the "Protection and Promotion of Fundamental and Other Human Rights and Freedoms". In this article, two case studies are presented that highlight contradictions between culture and written law and explore questions of human rights as they confront social attitudes in Uganda. Both stories relate the sufferings of two teenagers who became pregnant out of wedlock. It is noted that Ugandan women seeking abortion face severe punishments, which are more often the result of traditions and culture than a requirement of the law. Society and women in particular do not know or understand legal codes and women's rights, thus they act out of ignorance and fear of how society might judge them. Given the increasing effects of these structural adjustments policies in Africa, safe and legal abortion should be an issue of immediate concern.

Keywords: Uganda; Adolescent Pregnancy; Human Rights [Women]; Women; Social Behavior; Abortion, Induced [Complications]; Policy; Eastern Africa; Africa South of The Sahara; Africa; English Speaking Africa; Developing Countries; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Behavior; Fertility Control, Postconception; Family Planning

Title: Long-term outcomes of an abstinence-based, small-group pregnancy prevention program in New York City schools.

Author: Lieberman LD; Gray H; Wier M; Fiorentino R; Maloney P

Source: Family Planning Perspectives. 2000 Sep-Oct;32(5):237-45.

Year: 2000

Abstract: Despite drops in US teenage birth rates, questions continue to arise about how best to reduce the country's adolescent birth rate. School-based programs continue to be considered one of the best ways to reach adolescents at risk of early sexual activity. A total of 312 students completed a pre-test, a post-test, and a follow-up 1 year after the post-test: 125 who had participated in a 3-4 month-long abstinence-based small-group intervention led by trained social workers, and 187 in a comparison group that received no special services. There were few significant differences between the intervention and comparison groups at posttest. At the 1-year follow-up, however, intervention students had significantly better scores on locus of control, their relationship with their parents, and (among males only) their attitudes about the appropriateness of teenage sex. Measures of depression, self-esteem, intentions to have sex, attitudes toward teenage pregnancy, and various behaviors did not differ significantly between groups. By the time of the 1-year follow-up, there was no difference between study groups among females in the initiation of sexual intercourse. Among the males, initiation of sexual intercourse appeared to be higher in the intervention group than in the comparison group, but the difference was not statistically significant. Positive outcomes were especially limited among students who were already sexually active at the start

of the study, a finding that emphasizes the difficulties of reaching adolescents who are already at high risk for pregnancy. A small-group abstinence-based intervention focusing on mental health can have some impact on adolescents' attitudes and relationships (particularly with their parents). Long-term evaluations are important for determining the effects of an intervention, as it is difficult to change adolescent risk behavior. (author's)

Keywords: New York; United States; Research Report; Surveys; Adolescents; Adolescent Pregnancy [Prevention and Control]; Programs; Sexual Abstinence; School-Based Services; Mental Health; Sex Behavior; Risk Behavior; Northern America; North America; Americas; Developed Countries; Sampling Studies; Studies; Research Methodology; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Fertility; Population Dynamics; Organization and Administration; Family Planning; Behavioral Methods; Family Planning; Health; Behavior

Title: The Teen Choice model: a small group mental health approach to pregnancy prevention.

Author: Lieberman LD; Maloney P

Source: PPFY NETWORK. 2000 Sep;3(3):3-4. **Year:** 2000

Abstract: This paper evaluates the effectiveness of Teen Choice model in preventing pregnancy among teenagers in New York and New Jersey. Developed by the Inwood House's Teen Choice program, the model has two assumptions: individuals need the opportunity to question the validity or applicability of new information in terms that make sense to them, and decisions to adopt or reject new ways of thinking and doing are best achieved through guided interaction with people whose opinion matter. When applied in studies, it showed that the school-based, small group mental health program can impact on adolescents' self-reports regarding their communication and relationship with their parents; their sense of control over their lives; and that young people benefit from the support of a trained and experienced adult, as well as interaction with their peers, around issues important to them.

Keywords: New York; New Jersey; United States; Evaluation Report; Adolescents; Mental Health; Adolescent Pregnancy [Prevention and Control]; School-Based Services; Northern America; North America; Americas; Developed Countries; Evaluation; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Health; Reproductive Behavior; Fertility; Population Dynamics; Programs; Organization and Administration

Title: Adolescent sexual and reproductive health in Canada: a review of national data sources and their limitations.

Author: Maticka-Tyndale E; Barrett M; McKay A

Source: Canadian Journal of Human Sexuality. 2000 Spring;9(1):41-65. **Year:** 2000

Abstract: Canada has a reliable national database on rates of teen pregnancy and reportable sexually transmitted infections (STIs), and these measures are often used as indicators of trends in adolescent sexual health. In contrast, access to routinely gathered, national-level information on the sexual health-related behavior of adolescents and young adults is more limited. This paper used data from the 1996 National

Population Health Survey to track for various age groups, the age at first intercourse, number of intercourse partners in the past year, and condom use at last intercourse. The findings were then employed to determine the association of these measures with immigrant status, household income, and school/work status. In addition, the 1995 General Social Survey provided data on trends in currently-used contraceptive method across age groups as a basis for comparison with the few other national studies available on contraceptive practices in Canada. Median age at first intercourse has not only declined in the last 40 years, it is now almost the same for females and males. Both this measure and the other behavioral indicators were shown to be associated, to varying degrees in both males and females, with the social and economic indicators. The findings demonstrate the value of such national information for the planning of interventions to prevent STIs and unintended pregnancies among teens and young adults. They also highlight the need for better national data on a wider range of sexual behaviors pertinent to reproductive health. (author's)

Keywords: Canada; Adolescents; Adolescent Pregnancy; Reproductive Health; Sex Behavior; First Intercourse; Contraceptive Usage; Northern America; North America; Americas; Developed Countries; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Fertility; Population Dynamics; Health; Behavior; Contraception; Family Planning

Title: Using randomized designs to evaluate client-centered programs to prevent adolescent pregnancy.

Author: McBride D; Gienapp A

Source: Family Planning Perspectives. 2000 Sep-Oct;32(5):227-35.

Year: 2000

Abstract: An experimental design, in which clients were randomized to treatment and control groups, was used to evaluate the effects of a "client-centered" approach to reducing pregnancy among high-risk young people in seven communities in Washington State. Four projects served 1042 youth (clients aged 9-13), and three served 690 teenagers (primarily clients aged 14-17). Projects offered a wide variety of services tailored to individual clients' needs, including counseling, mentoring and advocacy. On average, clients in the treatment group at youth sites received 14 hours of service, and their teenage counterparts received 27 hours; controls received only 2-5 hours of service. At one youth site, clients were less likely to intend to have intercourse after the intervention than before; at another, they became less likely to intend to use substances. Clients at one teenage project reported reduced sexual behavior and improved contraceptive use after receiving services; teenagers at another site reported reduced sexual intentions and drug use, and a greater intention to use contraceptives. The programs showed no other effects on factors that place young people at risk of becoming pregnant, including their sexual values and educational aspirations, communication with their parents (measured at youth sites only), and sexual and contraceptive behavior (assessed for teenagers only). High-risk clients likely need considerably more intervention time and more intensive services than programs normally provide. Rigorous evaluation designs allow continued assessment that can guide program modifications to maximize effects. (author's)

Keywords: Washington; United States; Research Report; Focus Groups; Adolescents; Adolescent Pregnancy [Prevention and Control]; Programs; Program Evaluation; Sex Behavior; Contraceptive Usage; Northern America;

North America; Americas; Developed Countries; Data Collection; Research Methodology; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Fertility; Population Dynamics; Organization and Administration; Behavior; Contraception; Family Planning

Title: The effectiveness of targeted social marketing to promote adolescent reproductive health: the case of Soweto, South Africa.

Author: Meekers D

Source: JOURNAL OF HIV / AIDS PREVENTION AND EDUCATION FOR ADOLESCENTS AND CHILDREN. 2000;3(4):73-92. **Year:** 2000

Abstract: Adolescents and young adults in South Africa increasingly face reproductive health problems, including unplanned pregnancy and exposure to infection with HIV and sexually transmitted diseases (STDs). Hence, there is much interest in the effectiveness of policies and interventions that specifically address adolescent reproductive health. This study uses a quasi-experimental control group design to assess the effect of a targeted social marketing program on reproductive health beliefs and behavior among young women in Soweto. In response to adolescents' concerns, the intervention was developed with a focus on pregnancy prevention. The findings indicate that the intervention increased young women's awareness of the risk of pregnancy, awareness that condoms are effective for pregnancy and HIV/AIDS prevention, awareness that other contraceptives are effective for pregnancy prevention, discussions about contraception, and increased the percentage of women who have used condoms. These results suggest that the intervention was more effective in changing beliefs related to pregnancy prevention than those related to STD/HIV prevention, consistent with the program design. (author's)

Keywords: South Africa; Research Report; Adolescents; Reproductive Health; Adolescent Pregnancy [Prevention and Control]; AIDS [Prevention and Control]; Sexually Transmitted Diseases [Prevention and Control]; HIV Infections [Prevention and Control]; Social Marketing; Program Evaluation; Southern Africa; Africa South of The Sahara; Africa; English Speaking Africa; Developing Countries; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Health; Reproductive Behavior; Fertility; Population Dynamics; Viral Diseases; Diseases; Reproductive Tract Infections; Infections; Marketing; Economic Factors; Programs; Organization and Administration

Title: Beginning too soon: adolescent sexual behavior, pregnancy, and parenthood. A review of research and interventions.

Author: Moore KA; Miller BC; Sugland BW; Morrison DR; Gleit DA

Source: [Unpublished] [2000]. Internet address: <http://aspe.hhs.gov>.8 p.

Year: 2000

Abstract: This is an overview of two related reports that describe, respectively, recent research findings regarding adolescent sexual and fertility behavior and intervention programs aimed at reducing adolescent pregnancy and parenthood in the US. The reports were commissioned by the Assistant Secretary for Planning and Evaluation, US Department of Health and Human Services. The reports emphasize original studies conducted in the late 1980s and 1990s that have high research standards with respect to study design, sampling, and measurement, and that employ multivariate analyses.

Detailed explanations and elaborations which can not be included here because of space limitations are provided in the individual reports: "Adolescent Sex, Contraception and Child-bearing: A Review of Recent Research" and "Adolescent Pregnancy Programs: Interventions and Evaluations."

Keywords: United States; Summary Report; Adolescents; Parents; Adolescent Pregnancy; Sex Behavior; Northern America; North America; Americas; Developed Countries; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Family Relationships; Family Characteristics; Family and Household; Reproductive Behavior; Fertility; Population Dynamics; Behavior

Title: Statutory rape law and enforcement in the wake of welfare reform.
Author: Oliveri R
Source: STANFORD LAW REVIEW. 2000 Jan;52(2):463-508. **Year:** 2000

Abstract: The recent national efforts at reforming the welfare system and new research on the connection between teen pregnancy and statutory rape have led many states to enact stricter laws against statutory rape and to increase the enforcement of existing laws. Punitive statutory rape laws are being viewed more and more as a mechanism for shrinking the welfare rolls by reducing teen pregnancy. Rigel Oliveri documents the resurgence of statutory rape law and enforcement and explores the ramifications it will have on teen parents. In particular, Oliveri approaches the issue from several analytical frameworks, discussing arguments for consent-based standards, the privacy and substantive due process rights of both teens and offenders, and the practical needs of parenting teens. She also examines some of the theoretical tensions and pitfalls inherent in the criminal prosecution of teen pregnancies. This discussion leads to suggestions for possible improvements in the prosecution of statutory rape cases, as well as to the more radical proposal to eliminate many statutory rape laws altogether. (author's)

Keywords: United States; Critique; Adolescent Pregnancy; Rape [Legal Aspects]; Legislation; Human Rights; Low Income Population; Social Policy; Northern America; North America; Americas; Developed Countries; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Crime; Social Problems; Social Class; Socioeconomic Status; Socioeconomic Factors; Economic Factors; Policy

Title: Adolescents and their need for sex-education.
Author: Saha S
Source: HEALTH FOR THE MILLIONS. 2000 Sep-Oct;26(5):10-2.
Year: 2000

Abstract: Young individuals aged 10-19 years comprise over one-fifth of India's population. Studies show that many of these rural and urban adolescents indulge in sexual activity, consequently increasing the prevalence of sexually transmitted diseases (STDs) and HIV infections. In addition, trends in high fertility rates, early marriage and early pregnancy, and a huge proportion of unwanted teenage pregnancies have been noted. Studies further show that adolescents are inadequately informed about their own sexuality, physical well-being, and health. They need the opportunity to express positive relationships and constructive behaviors and to learn skills and acquire knowledge. Moreover, they need access to information, counseling and services that

will help them establish healthy relationships and protect them from unwanted pregnancy and STDs. Although several orientation and training initiatives are being carried out by a number of institutions, the demand for sustainable sex education is still high. Specific recommendations for the adoption of sexuality education are cited.

Keywords: India; Adolescents; Sex Education; Health Education; Adolescent Pregnancy [Prevention and Control]; HIV Infections [Prevention and Control]; Sexually Transmitted Diseases [Prevention and Control] Southern Asia; Asia; Developing Countries; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Education; Reproductive Behavior; Fertility; Population Dynamics; Viral Diseases; Diseases; Reproductive Tract Infections; Infections

Title: MAMA — a mentor program supporting pregnant and parenting teenagers.

Author: Scholl MF

Source: PPFY NETWORK. 2000 Mar;3(1):4-5. **Year:** 2000

Abstract: This article describes MAMA—a mentoring program supporting pregnant and parenting teenagers in Arlington, Virginia. The Mentoring Adolescent Mothers to Achieve, otherwise known as MAMA, is a school/business partnership in Arlington's public schools. Its purpose is to increase a young mother's chances of academic, personal, and career success by addressing the more immediate obstacles to educational achievement: poor attendance, low self-esteem, and lack of parenting skills. But its primary goal is to empower the teenage mother to take charge of her life in a positive way. With its comprehensive activities, the program was able to raise the percentage of pregnant or parenting teens graduating from high school to over 65%. In fact, the MAMA program received several awards for its exemplary performance.

Keywords: Virginia; United States; Progress Report; Adolescent Pregnancy; Parenting Education; Program Activities; Northern America; North America; Americas; Developed Countries; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Education; Programs; Organization and Administration

Title: Prevalence of home pregnancy testing among adolescents.

Author: Shew ML; Hellerstedt WL; Sieving RE; Smith AE; Fee RM

Source: AMERICAN JOURNAL OF PUBLIC HEALTH. 2000 Jun;90(6):974-6. **Year:** 2000

Abstract: This study estimated the prevalence of home pregnancy testing among adolescents. A survey was administered in 11 urban clinics to 600 females aged 13-19 years. The prevalence of home pregnancy test use was 34% among 474 sexually experienced youths; 77% of the users had received at least one negative pregnancy test result, and 48% took no further action for confirmation. Compared with those who had never used such tests, users were older, younger at sexual debut, less likely to consistently use effective birth control, and more likely to have ever been pregnant. Health care clinics are important sources for pregnancy prevention, but clinics may have limited opportunity to intervene with some youths who use home pregnancy tests.

Keywords: United States; Research Report; Prevalence; Adolescents, Female; Adolescent Pregnancy; Pregnancy Tests; Northern America; North America; Americas; Developed Countries; Measurement; Research

Methodology; Adolescents; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Fertility; Population Dynamics; Laboratory Procedures; Laboratory Examinations and Diagnoses; Examinations and Diagnoses

Title: Adolescent pregnancy and childbearing: levels and trends in developed countries.

Author: Singh S; Darroch JE

Source: FAMILY PLANNING PERSPECTIVES.2000 Jan-Feb;32(1):14-23. **Year:** 2000

Abstract: This article examines levels of adolescent childbearing, abortion and pregnancy in developed countries in the mid-1990s, as well as trends over recent decades. Birth, abortion and population data from national vital statistics reports, official statistics, published national and international sources, and government statistical offices were analyzed. Analysis results show that level of adolescent pregnancy varies by a factor of almost 10 across developed countries, from a very low rate in the Netherlands to an extremely high rate in the Russian Federation. A pattern of decline in the adolescent birth rate in industrialized countries over the past 25 years was well documented. Part of the overall decline in childbearing across industrialized countries is the general trend of declining teenage fertility. In addition, a decline in abortion rates has been reported, although little information is available on trends in adolescent abortion specifically. The general trend reflects the increased importance of achieving higher levels of education and training, and greater centrality of goals other than motherhood and family formation for young women. However, a number of factors are likely to have had a greater impact on teenagers.

Keywords: Developed Countries; Research Report; Adolescents; Adolescent Pregnancy; Fertility; Abortion Rate; Pregnancy Rate; Birth Rate; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Population Dynamics; Abortion, Induced; Fertility Control, Postconception; Family Planning; Fertility Measurements

Title: For and against: Doctors should advise adolescents to abstain from sex.

Author: Stammers T; Ingham R

Source: BMJ. British Medical Journal. 2000 Dec 16;321(7275):1520-2. **Year:** 2000

Abstract: Against a background of high rates of teenage pregnancy and an increasing prevalence of sexually transmitted infections, the sexual conduct of young people is vigorously debated. Many teenagers later say that they had sexual intercourse "too early"—but should doctors be advising young people to abstain from sex? Trevor Stammers, who is a tutor in general practice and an author and broadcaster on sexual health, and Roger Ingham, who has done research on sexual conduct and sex education in Britain and other countries, consider whether advising abstinence is an effective response to teenage sexual health. (author's)

Keywords: Critique; Adolescents; Sexual Abstinence; Counseling; Physicians; **Adolescent Pregnancy** [Prevention and Control]; Sexually Transmitted Diseases [Prevention and Control] Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Family Planning, Behavioral Methods; Family Planning; Clinic Activities; Program Activities; Programs; Organization and Administration; Health Personnel; Delivery of Health Care; Health; Reproductive Behavior; Fertility; Population Dynamics; Reproductive Tract Infections; Infections; Diseases

Title: The timing of Norplant insertion and postpartum depression in teenagers.

Author: Stevens-Simon C; Kelly L; Wallis J

Source: Journal of Adolescent Health. 2000 Jun;26(6):408-13. **Year:** 2000

Abstract: This study tested the hypothesis that teenagers who have Norplant inserted during the puerperium report more depressive symptoms during the first postpartum year than their peers who do not receive Norplant. The authors studied the prevalence of depressive symptoms in a group of 212 mothers aged 19 years or less in relation to the timing of the Norplant insertion. The participants were divided into 3 groups: 100 (47%) had Norplant inserted during the puerperium (early Norplant users); 72 (34%) had Norplant inserted during the next 10 months (late Norplant users); and 40 (19%) used other contraceptives (40%, oral contraceptives; 17%, condoms; 43%, nothing). Depressive symptoms were measured with the Center for Epidemiologic Studies - Depression Scale. Postpartum depression was defined as a scale score of 16 or higher 6-12 months after Norplant insertion or delivery. Variables examined as potential confounders were identified a priori from a review of the literature and controlled for in analysis of variance. At delivery, members of the 3 contraceptive groups did not differ significantly with regard to age, race, parity, educational, marital, or socioeconomic status. Late Norplant users were, however, more apt to have new boyfriends ($p = 0.03$), to rate the support they received from the baby's father as poor ($p = 0.004$), and experience depression prior to Norplant insertion ($p = 0.02$). Contrary to the study hypothesis, late rather than early Norplant insertion was associated with postpartum depression. Multivariate analyses identified 3 independent predictors of the severity of depressive symptoms at follow-up (depression prior to Norplant insertion, a new boyfriend at delivery, and late Norplant insertion); $R^2 = 41.3\%$. Contrary to the study hypothesis, puerperal Norplant insertion did not exacerbate postpartum depression. Delaying Norplant insertion may increase the risk of depression during the first postpartum year, particularly in teenagers with other psychosocial risk factors. (author's)

Keywords: Colorado; United States; Research Report; **Adolescent Pregnancy**; Adolescents; Female; Mothers; Contraceptive Implants [Side Effects]; Levonorgestrel [Side Effects]; Insertion; Depression [Women]; Women; Northern America; North America; Americas; Developed Countries; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Adolescents; Youth; Age Factors; Population Characteristics; Parents; Family Relationships; Family and Household; Contraception; Family Planning; Contraceptive Agents; Female [Side Effects]; Contraceptive Agents [Side Effects]; Treatment; Mental Disorders; Diseases

Title: Abstinence-based programs for prevention of adolescent pregnancies. A review.

Auhor: Thomas MH

Source: JOURNAL OF ADOLESCENT HEALTH. 2000 Jan;26(1):5-17.

Year: 2000

Abstract: This article assesses the abstinence-based programs developed by family life educators and the factors associated with positive results through a review of abstinence promotion programs of the federal government. In 1996, Section 510 was added to Title V of the Social Security Act allocating US\$50 million annually from 1998-2000 to fund abstinence education programs, while in 1997, a National Strategy to Prevent Teen Pregnancy was launched by the Office of Adolescent Pregnancy Prevention to provide teen pregnancy programs to at least 25% of the communities. Presented in this paper is a discussion of the Abstinence Only programs, which focus on the prevention of pregnancy and sexually transmitted disease among adolescents, and the Abstinence Plus programs, which emphasize other prevention methods as well as abstinence. Evaluation of Abstinence Only programs include Success Express, Project Taking Charge, Sex Respect, Teen Aid, Values and Choices and Facts and Feelings. Moreover, programs such as Reducing the Risk, Postponing Sexual Involvement, Project Education Now, and Babies Later were evaluated under the Abstinence Plus programs. Several programs evaluated have shown to have a positive effect on attitudes among adolescents, but are not proven to have a significant effect on sexual behavior. In conclusion, this article encourages exploration of new approaches to address teen pregnancy and the increasing incidence of sexually transmitted diseases among adolescents, while the federal government must utilize the implementation of existing programs with positive effects.

Keywords: United States; Evaluation Report; Adolescents; Sexual Abstinence; Programs; Adolescent Pregnancy [Prevention and Control]; Sexually Transmitted Diseases [Prevention and Control]; HIV Infections [Prevention and Control]; Government Programs; Program Evaluation; Northern America; North America; Americas; Developed Countries; Evaluation; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Family Planning, Behavioral Methods; Family Planning; Organization and Administration; Reproductive Behavior; Fertility; Population Dynamics; Reproductive Tract Infections; Infections; Diseases; Viral Diseases

Title: Perceived consequences of teenage childbearing among adolescent girls in an urban sample.

Author: Unger JB; Molina GB; Teran L

Source: Journal of Adolescent Health. 2000 Mar;26(3):205-12. **Year:** 2000

Abstract: The purpose of this study was to examine the perceived positive consequences of teenage child-bearing among female adolescents, and to determine whether perceived consequences of teenage child-bearing are associated with other attitudes and sexual risk behaviors. The sample consisted of 584 female students attending three urban high schools in Los Angeles, California. The respondents' mean age was 15.8 years, and 72% were Hispanic/Latina. Respondents completed a paper-and-pencil survey assessing their attitudes and risk behaviors relevant to teenage pregnancy. Multiple regression and logistic regression analyses were used to examine the associations between perceived consequences of teenage child-bearing and demographic variables, educational variables, parental characteristics, psychosocial variables, attitudes, and sexual behavior. Higher scores on a scale of perceived positive consequences of teenage child-bearing were associated with increased risk of sexual intercourse and unprotected sexual intercourse. Higher scores on this scale were found among girls who were Latinas, were non-US natives, had low levels of expected educational attainment, had low parental monitoring, had good communication with

parents, and wished to have many children. Potential strategies for preventing adolescent pregnancy include educating girls about the difficulties of teenage child-bearing, countering their positive illusions about the expected benefits, and teaching them more adaptive ways to meet their emotional needs. (author's)

Keywords: California; United States; Research Report; Surveys; Urban Population [Women]; Women; Adolescents, Female; Adolescent Pregnancy; Perception [Women]; Attitude [Women]; Sex Behavior [Women]; Risk Behavior [Women] Northern America; North America; Americas; Developed Countries; Sampling Studies; Studies; Research Methodology; Population Characteristics; Demographic Factors; Population; Adolescents; Youth; Age Factors; Reproductive Behavior; Fertility; Population Dynamics; Psychological Factors; Behavior

Title: Replication of a community-based multicomponent teen pregnancy prevention model: realities and challenges.

Author: Vincent ML; Paine-Andrews A; Fisher J; Devereaux RS; Dolan HG; Harris KJ; Reiningger B

Source: Family and Community Health. 2000 Oct;23(3):28-45. **Year:** 2000

Abstract: Health education curricula and the delivery of specific health services have been evaluated as to their replicability in other settings. Formal studies to evaluate replication of multicomponent community-based program models are scarce. Moreover, the literature does not address the challenges in implementing complex program models and documenting replication. This article describes an initiative to transport and replicate the School/Community Sexual Risk Reduction Model, created in South Carolina, in three Kansas communities over a 4-year period. Objective and subjective assessments of achieving fidelity to the model core components were determined as was a description of factors that enhance or inhibit replication efforts. Assessing replication will be improved when detailed monitoring and process evaluation is in place in the development of the original program and in the replication effort. (author's)

Keywords: South Carolina; Kansas; United States; Literature Review; Adolescent Pregnancy [Prevention and Control]; Adolescents; Health Education; Safer Sex; Northern America; North America; Americas; Developed Countries; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Youth; Age Factors; Population Characteristics; Education; Behavior

Title: Differential risk perceptions for unintended pregnancy, STDs, and HIV / AIDS among urban adolescents: some preliminary findings.

Author: Whaley AL

Source: Journal of Genetic Psychology. 2000 Dec;161(4):435-52. **Year:** 2000

Abstract: Two pilot studies tested the hypothesis that adolescents perceive differential risks for unintended pregnancy (UP), sexually transmitted diseases (STDs), and HIV/AIDS. The 1st study used a college sample consisting of 14 adolescents (21 years or younger) and 64 adults (over 21) who rated the likelihood that they and others would experience 15 health problems. The 2nd study used a community sample of 48 adolescent between 16 and 21 years of age who rated 11 health problems in a similar manner. Optimistic bias and uniqueness of risk in adolescents' perceived susceptibility

to adverse sexual outcomes were examined. Optimistic bias is the difference between ratings of risk to self and risk to others, reflecting lower risk to self. Uniqueness of risk is the difference between ratings of risk and a baseline risk estimate (i.e., the mean rating for all non-sex-related health problems). Consistent with the hypothesis, adolescents perceived differential risks for UP, STDs, and HIV/AIDS. Implications for adolescent prevention programs are discussed. (author's)

Keywords: New York; United States; Research Report; Sampling Studies; Pilot Projects; Adolescent Pregnancy; Pregnancy, Unplanned; Risk Behavior; HIV Infections; AIDS; Sexually Transmitted Diseases; Northern America; North America; Americas; Developed Countries; Studies; Research Methodology; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Behavior; Viral Diseases; Diseases; Reproductive Tract Infections; Infections

Title: Pregnant adolescents: experiences and behaviors associated with physical assault by an intimate partner.

Author: Wiemann CM; Agurcia CA; Berenson AB; Volk RJ; Rickert VI

Source: MATERNAL AND CHILD HEALTH JOURNAL. 2000 Jun;4(2): 93-101. **Year:** 2000

Abstract: The aim was to better understand the experiences and behaviors of battered pregnant adolescents and the characteristics of their intimate partners. As part of a longitudinal multiracial/ethnic study of drug use among pregnant and parenting adolescents, 724 adolescents up to 18 years of age completed face-to-face interviews in the postpartum unit between April 1994 and February 1996. Adolescent mothers reported on demographic characteristics, social support and peer contact, level of substance use before and during pregnancy, nonconforming behaviors, and both lifetime and concurrent exposure to violence. Information about the father of her baby included his level of substance use, gang and police involvement, and intimate partner violence. Chi-square and Student's t tests were used to identify victim, partner, and relationship characteristics associated with being assaulted by the father of her baby during the preceding year. 86 (11.9%) adolescents reported being physically assaulted by the fathers of their babies. Assaulted adolescents were significantly more likely than nonassaulted adolescents to have been exposed to other forms of violence over the same 12-month period, including verbal abuse, assault by family members, being in a fight where someone was badly hurt, reporting fear of being hurt by other teens, witnessing violence perpetrated on others, and carrying a weapon for protection. A history of nonconforming behavior and frequent or recent substance use was more common among both battered adolescents and their perpetrator partners. The age and race/ethnicity of the pregnant adolescent and the length of her relationship with the father of her baby were not associated with assault status. Pregnant adolescents who are assaulted by intimate partners appear to live in violence-prone environments and to have partners who engage in substance use and other nonconforming behaviors. Comprehensive assessments are critical for all adolescent females at risk of assault, and direct questions about specific behaviors or situations must be used. (author's)

Keywords: Mexico; Research Report; Longitudinal Studies; Adolescent Pregnancy; Adolescents, Female; Violence [Women]; Women; Behavior; Sexual Partners; North America; Americas; Developing Countries;

Title: Teenage pregnancy: overall trends and state-by-state information.

Author: Anonymous

Corporate Name: Alan Guttmacher Institute [AGI]

Source: New York, New York, AGI, 1999 Apr.[7] p. **Year:** 1999

Abstract: This booklet provides national level statistical data on pregnancy, birth, and abortion rates per 1000 women aged 15-19 years during 1986-96 in the US. The adolescent pregnancy rate is also provided at the state level for 1996. State level pregnancy, birth, and abortion rates per 1000 women aged 15-19 years are provided for specific age ranges of 15-19 years, 15-17 years, and 18-19 years. Pregnancy, birth, and abortion rates are available by state for 1985, 1988, and 1996. Data were obtained from National Center for Health Statistics reports for birthrates. Abortion rates were calculated and adjusted to reflect permanent residence rather than place of occurrence. Abortion rates are based on a survey of all abortion providers conducted by the Alan Guttmacher Institute. Data on ages 15-17 and 18-19 are estimates. Population figures are from the US Bureau of the Census. Nationally, the adolescent pregnancy rate declined by 4% during 1995-96, by 9% during 1986-96, and by 17% during 1990-96. Adolescent abortion rates declined by 3% during 1995-96 and by 31% during 1986-96. The proportion of adolescent pregnancies ending in abortion declined by 24% during 1986-96. California had the highest number of adolescent pregnancies, followed by Texas, New York, Florida, and Illinois. Teenage abortion rates were highest in New York, Nevada, New Jersey, Maryland, and California. 35% of pregnancies ended in abortion in 1996.

Keywords: United States; Research Report; Tables and Charts; Multiregional Analysis; Adolescent Pregnancy [Statistics]; Abortion, Induced [Statistics]; Birth Rate [Statistics]; Adolescents; Northern America; North America; Americas; Developed Countries; Research Methodology; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Fertility Control, Postconception; Family Planning; Fertility Measurements; Youth; Age Factors; Population Characteristics

Title: Adolescent pregnancy — current trends and issues: 1998.

Author: Anonymous

Corporate Name: American Academy of Pediatrics. Committee on Adolescence

Source: PEDIATRICS.1999 Feb;103(2):516-20. **Year:** 1999

Abstract: A new statement issued by the American Academy of Pediatrics in 1998 reviewed current trends and issues on adolescent pregnancy to update practitioners on this topic. This statement provided pediatricians with more recent data on adolescent sexuality, contraceptive use, and childbearing as well as recommendations for addressing adolescent pregnancy in their communities and practices. The percentage of American adolescents who are sexually active has increased significantly in recent years. At present, 56% of girls and 73% of boys have had sexual intercourse before 18 years of age. In the context of contraceptive use, adolescent women have changed in their preferences for contraceptive methods in recent years, with decreases in pill use and increases in injectable contraceptive use. Moreover, adolescent childbearing constitutes an approximate of 1 million pregnant teenagers every year. The medical risks of adolescent pregnancy are also discussed. Furthermore, recommendations

focused on the need to encourage adolescents to postpone early coital activity and on pregnancy prevention interventions.

Keywords: United States; Summary Report; Adolescent Pregnancy; Adolescents; Premarital Sex Behavior; Northern America; North America; Americas; Developed Countries; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Youth; Age Factors; Population Characteristics; Sex Behavior; Behavior

Title: Adolescent reproductive rights. Laws and policies to improve their health and lives.

Author: Anonymous

Corporate Name: Center for Reproductive Law and Policy

Source: New York, New York, Center for Reproductive Law and Policy, 1999 Feb.24 p. **Year:** 1999

Abstract: Adolescence is a period of rapid physical, emotional, social, and sexual maturing. Thus, adolescents need a full range of quality reproductive health (RH) as well as information and counseling. However, governments and societies have tended to either ignore adolescent health issues or consider them indistinguishable from childhood health concerns. The 1994 International Conference on Population and Development (ICPD) has raised the international community's awareness of the reproductive rights of adolescents. In this connection, this briefing paper aims to highlight the major sexual and RH issues affecting adolescents in the context of their reproductive rights. For each area of concern, the paper addresses its particular relevance for adolescents and then recommends a critical legal and policy measure that all governments should strive to achieve. Moreover, it presents a comprehensive summary of post-ICPD laws or policies that represent a best practice. It comprises of sections that discusses the framework for the reproductive rights for adolescents; adolescent access to RH care; education and adolescents; early marriage; early child bearing and contraception; unsafe abortion; HIV/AIDS and other sexually transmitted infections; sexual violence and adolescents; and feale circumcision/female genital mutilation.

Keywords: Recommendations; Adolescents; Adolescent Pregnancy; Reproductive Rights; Policy; Education; Marriage Age; Abortion, Induced; AIDS; Sexual Abuse; Female Genital Mutilation; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Fertility; Population Dynamics; Human Rights; Marriage Patterns; Marriage; Nuptiality; Fertility Control, Postconception; Family Planning; HIV Infections; Viral Diseases; Diseases; Crime; Social Problems

Title: The Young Adult Reproductive Health (YARH) Rapid model: projecting reproductive health outcomes for adolescents.

Author: Anonymous

Corporate Name: Pathfinder International. FOCUS on Young Adults; Futures Group International. Policy Project

Source: Washington, D.C., Pathfinder International, FOCUS on Young Adults, [1999].[1] p.FOCUS on Young Adults **Year:** 1999

Abstract: The Young Adult Reproductive Health (YARH) Rapid is a computer simulation program which allows reproductive health advocates, health policy makers, and program planners to use national data to assess how different program and policy actions specific to adolescents and young adults could affect adolescent pregnancy, childbearing and other reproductive health outcomes. The program can be used to set goals, to evaluate the feasibility of existing goals, or to identify adolescent reproductive health programmatic inputs. YARH computer module was developed through the collaboration of the FOCUS on the Young Adults Program and the POLICY project. It is available as part of the Spectrum system of policy models supported by The Futures Group International.

Keywords: Youth; Reproductive Health; Computer Programs and Programming; Program Evaluation; Adolescent Pregnancy; Pregnancy; Programs; Policy; Age Factors; Population Characteristics; Demographic Factors; Population; Health; Information Processing; Information; Organization and Administration; Reproductive Behavior; Fertility; Population Dynamics; Reproduction

Title: After a teenage daughter has become pregnant or given birth, mothers monitor all their children less closely.

Author: Althaus F

Source: FAMILY PLANNING PERSPECTIVES. 1999 Nov-Dec;31(6):307-8. **Year:** 1999

Abstract: This article presents the findings of a study revealing family factors associated with teenage childbearing and show how families may be affected when an adolescent becomes pregnant. Data for analysis came from 174 mothers in an urban area of southern California. These mothers had a teenage daughter, 15-19 years old, who was either pregnant or parenting and a younger daughter or son (aged 11-16 years) who had been living in the same house as the older sister for at least the previous 5 years. Initial interviews were conducted with the mothers between July 1993 and February 1995, and follow-up interviews were conducted 13 months later, which included only 145 mothers. Analysis between the baseline and follow-up scores indicated that over time, the mothers of pregnant teenagers supervise their children less closely, became more accepting of teenage sex and communicate less frequently and less easily with their younger children about sex and contraception. Compared with mothers of never-pregnant adolescents who have higher expectations and monitor all their children more closely, it is important to point out that the changes of behavior in mothers of pregnant and parenting adolescents may create a prime context for younger siblings to engage in delinquent or sexual behavior. Thus, interventions that include all family members were suggested to help them deal with the daughter's pregnancy.

Keywords: California; United States; Evaluation Report; Adolescent Pregnancy; Adolescents, Female; Behavior [Changes]; Family Relationships; Mothers; Siblings; Northern America; North America; Americas; Developed Countries; Evaluation; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Adolescents; Youth; Age Factors; Population Characteristics; Family Characteristics; Family and Household; Parents

Title: Young, pregnant and pleased.

Author: Baker K

Source: PRACTISING MIDWIFE. 1999 Mar;2(3):14-6. **Year:** 1999

Abstract: This article presents the factors associated with the increased risk of poor obstetric outcome. The incidence of pregnancy is certainly higher among young women who are achieving poorly in school or in care. Women under the age of 17 are often seen as being obstetrically at high risk. However, the majority of studies on the physiology of teenage pregnancy found no correlation between age alone and poor obstetric outcome. The seemingly poor birth outcomes of teenage mothers appear to result largely from their adverse socioeconomic circumstances and not from young maternal age per se. Poverty, poor nutrition, and poor housing have all been shown to be associated with poor outcomes in pregnancy. Since pregnancy and childbearing have been matters of national concern, a particular slant has consistently been adopted. The focus was on the quality of mothering and sex education. However, this was opposed, since what young people learn about sex at school will inevitably only be a fraction of what they actually assimilate about sex and sexuality. Peer group, the media, their immediate family, and broader social and cultural influences will all have a part to play in how adolescents behave. This article also presents teenage adolescents' experiences during their pregnancy.

Keywords: United Kingdom; Critique; Adolescent Pregnancy; Pregnancy Outcomes; Risk Factors; Socioeconomic Factors; Adolescents; Developed Countries; Northern Europe; Europe; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Pregnancy; Reproduction; Biology; Economic Factors; Youth; Age Factors; Population Characteristics

Title: Peer effects on adolescent girls' sexual debut and pregnancy risk.

Author: Bearman P; Bruckner H

Source: PPFY NETWORK. 1999 Sep;2(3):3-4. **Year:** 1999

Abstract: This study analyzes peer effects on adolescent girls' sexual debut and pregnancy risk for five different levels of peer contexts: single best friends; immediate friendship circle; larger peer group; leading crowd of the school; and the school itself. A baseline model of sexual debut (for 5070 girls) and pregnancy risk (for 3015 sexually active girls), controlling for sociodemographic, family, and individual characteristics, as well as adolescents' risk status and involvement in romantic relationships, was presented. The study then identified peers' characteristics in terms of the most important individual risk factors for sexual debut and pregnancy. Some of the relevant findings observed in the study are the following: 1) peer influence on sexual behavior is a significant factor; 2) peer influence operates at multiple levels of peer context, with the single best friends level as the least important; 3) risk status of friends matter less for sexual debut than for pregnancy; 4) most of the peer influence observed is positive; 5) effect of male and female friends' risk status may be different; 6) how close children are to their parents is as important as how close their friends are to their parents.

Keywords: United States; Summary Report; Surveys; Adolescents, Female; Adolescent Pregnancy; Risk Factors; Peer Groups; Sex Behavior [Women]; Women; First Intercourse [Women] Northern America; North America; Americas; Developed Countries; Sampling Studies; Studies; Research Methodology; Adolescents; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Fertility; Population Dynamics; Biology; Knowledge Sources; Communication; Behavior

Title: Outcomes in action: How relevant to clinical practice are health out-

come measures such as the rate of unintended pregnancies in young teenagers?

Author: Bigrigg A

Source: *Advances in Contraception*. 1999;15(4):245-56. **Year:** 1999

Abstract: Scientific evidence shows that correct contraceptive use will prevent unintended pregnancy and the provision of contraceptives is recognized as a cost-effective intervention. This could encourage health authorities to keep investing more resources in family planning until the target rate of unintended pregnancies is reached, but if this was the only approach taken, the target rate never would be reached. Clinicians and their public health colleagues need to examine their practice in the light of all available evidence. Once desirable changes of practice are identified, local relevant health outcomes measures need to be used to assess the effectiveness of the chosen approaches. Blunt factors, such as the unintended pregnancy rate in a city or region, will not suffice to inform individuals whether they are contributing to the overall picture. (author's)

Keywords: United Kingdom; Pregnancy, Unplanned; Pregnancy Rate; Adolescent Pregnancy; Contraceptive Usage; Family Planning Program Evaluation; Health Services; Evaluation Indexes; Developed Countries; Northern Europe; Europe; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Fertility Measurements; Contraception; Family Planning; Family Planning Programs; Delivery of Health Care; Health; Quantitative Evaluation; Evaluation

Title: Building for the future: adolescent pregnancy prevention.

Author: Brindis C

Source: *JOURNAL OF THE AMERICAN MEDICAL WOMEN S ASSOCIATION*.1999 Summer;54(3):129-32.

Year: 1999

Abstract: This article documents the current decreases in birth rates among adolescents, rates of unprotected sexual intercourse, and refers to elements of successful pregnancy prevention programs. Although almost 500,000 teenagers deliver babies every year in the US, adolescent birth trends in the late 1990s have clearly reversed the dramatically rising rates of the previous decade. US birth rate for teenagers in 1997 was 52.3 live births per 1000 women aged 15-19 years, a reduction of 16% from 1991. This reduction may be the result of change in sexual behavior and use of contraception among teenagers. Recent efforts aimed at reducing the incidence of early childbearing include 1) providing accurate information about the risks of unprotected intercourse and ways to avoid an unintended pregnancy; 2) using a variety of teaching methods designed to involve the participants; and 3) providing models of good practice in communication, negotiation, and refusal skills. However, if there is no coordinated effort from the political, economic, medical, educational, and religious institutions whose systems profoundly influence the conditions that lead to adolescent pregnancy, there is little hope in resolving the problem of teenage pregnancy.

Keywords: United States; Summary Report; Adolescent Pregnancy [Prevention and Control]; Birth Rate; Contraception; Sex Behavior; Program Activities; Northern America; North America; Americas; Developed Countries; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Fertility Measurements; Family Planning; Behavior; Programs; Organization and Administration

Title: How peers matter: a research synthesis of peer influences on adolescent pregnancy.

Author: Brown BB; Theobald W

Source: [Unpublished] [1999].[54] p. **Year:** 1999

Abstract: This chapter presents a research synthesis of studies conducted for the past 15 years that have examined peer influences on sexual activity and other behaviors that increase the risk of adolescent pregnancy in the US. First, an overview on the structure of adolescent peer relationships in the US is presented; these include 1) levels of peer interaction; 2) types of peer influences; and 3) implications for studying peer influence. Second, sources of similarity between adolescents and friends are discussed. The influence of peers on adolescent behavior can be attributed primarily to the inclination of adolescents to select like-minded people as friends. Third, an empirical examination defines the various mechanisms on how peers influence behaviors related to adolescent pregnancy. Peer influence was measured through the following parameters: effects of peer pressure, and peer modeling, setting norms, and structuring opportunities. Fourth, the impact of the status of the adolescent within the peer group on behavior related to sexual activity and pregnancy, as well as the relationship between family and peer influences are discussed. Lastly, the major conclusions and implications for intervention efforts are presented.

Keywords: United States; Literature Review; Adolescents; Peer Groups; Sex Behavior; Adolescent Pregnancy; Family Relationships; Northern America; North America; Americas; Developed Countries; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Knowledge Sources; Communication; Behavior; Reproductive Behavior; Fertility; Population Dynamics; Family Characteristics; Family and Household

Title: Statement[s to the] ICPD Plus 5 Forum, The Hague, 8-12 February 1999. Reproductive health: a health priority.

Author: Brundtland GH

Source: Geneva, Switzerland, World Health Organization [WHO], 1999. 17 i. **Year:** 1999

Abstract: Dr. Gro Harlem Brundtland has represented the WHO in its commitment to make reproductive health a health priority into the 21st century. The organization supported those committed women, men and constituencies who speak for the right of all people to lead a healthy reproductive life. The significant role of Cairo in facing the challenges of sexually transmitted diseases pandemics; adolescent pregnancies; sexual abuse, rape, and pregnancy-related deaths and disabilities was alluded. Despite the efforts of Cairo, the Program of Actions is confronted with problems that limit them to implement these programs. One major issue of concern is the decline of real resources. The global resources for public health interventions in reproductive health have also failed to keep up with the increasing demand. As a result, there is a tendency to move away from the comprehensive definition of reproductive health developed in Cairo. In the future, two issues demand urgent and undivided attention, which are the unfinished agenda in maternal health and the emerging challenge of adolescent sexual and reproductive health. To address the reproductive health needs of women and children, there is a need for strategic alliances among agencies, division of labor, and create real partnerships to achieve real outcomes.

Keywords: Switzerland; Conferences and Congresses; Child; Adolescents; Reproductive Health; Sexuality; Sexually Transmitted Diseases; Reproductive Rights; Adolescent Pregnancy; Sexual Abuse; Developed Countries; Western Europe; Europe; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Health; Personality; Psychological Factors; Behavior; Reproductive Tract Infections; Infections; Diseases; Human Rights; Reproductive Behavior; Fertility; Population Dynamics; Crime; Social Problems

Title: Teen pregnancy prevention: do any programs work?

Author: Card JJ

Source: ANNUAL REVIEW OF PUBLIC HEALTH.1999;20:257-85.

Year: 1999

Abstract: The US has the highest teen birth rate in the developed world, about 4 times higher compared to countries in Europe. Broad social and environmental factors, such as poverty and social disorganization, high residential turnover, high divorce rates, and poor parental support and supervision put teens at greater risks of pregnancy. Individual characteristics, such as poor school performance, low expectations for the future, high aggression, difficulty getting along with peers, and early pubertal development make particular teens additionally vulnerable. New developments described in this document include: 1) renewed emphasis on abstinence; 2) moving toward a more positive view of teen sexuality; 3) development of new prevention initiatives, such as sexually transmitted disease (STD) and HIV/AIDS prevention programs, community-wide teen pregnancy prevention collaboratives, broad-based youth development programs, and state and local government initiatives; 4) launching of the National Campaign to Prevent Teen Pregnancy. An analysis of the different ways in which the problem can be framed and the implications for solutions of the problem follow. Furthermore, this study presents several examples of STD and HIV/AIDS prevention programs. This paper ends with a recommendation for an eclectic approach to framing the problem and possible solutions.

Keywords: United States; Summary Report; Adolescents, Female; Adolescent Pregnancy [Prevention and Control]; HIV Infections [Prevention and Control]; Sexually Transmitted Diseases [Prevention and Control]; Program Evaluation; Program Effectiveness; Programs; Northern America; North America; Americas; Developed Countries; Adolescents; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Fertility; Population Dynamics; Viral Diseases; Diseases; Reproductive Tract Infections; Infections; Organization and Administration

Title: Ecological factors associated with adolescent pregnancy: a review of the literature.

Author: Corcoran J

Source: ADOLESCENCE.1999 Fall;34(135):603-19. **Year:** 1999

Abstract: This article analyzes the literature on psychosocial factors associated with adolescent pregnancy using Bronfenbrenner's ecological model. Bronfenbrenner's ecological model of human development conceptualizes ecological space as operating on different levels of systems, each of which is incorporated in the next. Social influences within the macrosystem, mesosystem and microsystem that affect American adolescents aged 19 years and under were examined. At the macrosystem level, socioeconomic status including the parental educational background and occupation, and racial and ethnic differences were observed to directly influence adolescent

pregnancy. On the other hand, factors like education, family, peers and social support categorized under the mesosystem affect adolescent pregnancy outcomes. Furthermore, at the microsystem level, which comprises increased age, psychological variables particularly, self-esteem is significantly correlated with pregnancy. In conclusion, this paper suggests that interventions must be focused at macrosystems and mesosystems rather than on the individual's knowledge. Educational policy and efforts toward improving family functioning were among the interventions suggested in this article.

Keywords: United States; Literature Review; Theoretical Studies; Adolescent Pregnancy; Models, Theoretical; Socioeconomic Status; Education; Family Relationships; Peer Groups; Social Networks; Northern America; North America; Americas; Developed Countries; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Research Methodology; Socioeconomic Factors; Economic Factors; Family Characteristics; Family and Household; Knowledge Sources; Communication; Friends and Relatives

Title: Short-term impact of Safer Choices: a multicomponent, school-based HIV, other STD, and pregnancy prevention program.

Author: Coyle K; Basen-Engquist K; Kirby D; Parcel G; Banspach S; Harrist R; Baumler E; Weil M

Source: JOURNAL OF SCHOOL HEALTH.1999 May;69(5):181-8.

Year: 1999

Abstract: Safer Choices is a theoretically based, multicomponent HIV, sexually transmitted disease (STD), and pregnancy prevention program for high school youths. This study assessed the effectiveness of this program 1 year after its implementation. The study conducted a randomized trial involving 20 schools (10 from California and 10 from Texas), with a cohort of 3869 ninth-grade students. Five schools in each state were randomly assigned to the Safer Choices program while the other five were assigned to a comparison program. Baseline and follow up data were then collected using student self-report surveys. 3677 students (95%) in the final cohort were surveyed. The results showed significant differences, which favored the intervention schools. Safer Choices enhanced 9 of 13 psychosocial variables, including knowledge, self efficacy for condom use, normative beliefs and attitudes regarding condom use, perceived barriers to condom use, risk perceptions, and parent-child communication. Furthermore, Safer Choices reduced selected risk behaviors such as the frequency of intercourse without using condoms in the three months prior to the survey; increased use of condoms at last intercourse; and increased use of other contraceptives at last intercourse. Overall, the first year of Safer Choices was successful in changing most of the behavioral determinants under the study and in enhancing protective behaviors.

Keywords: California; Texas; United States; Evaluation Report; Students; Secondary Schools; Program Evaluation; Program Effectiveness; Health Education; Health Services; HIV Infections [Prevention and Control]; Sexually Transmitted Diseases [Prevention and Control]; Adolescent Pregnancy [Prevention and Control]; Northern America; North America; Americas; Developed Countries; Evaluation; Education; Schools; Programs; Organization and Administration; Delivery of Health Care; Health; Viral Diseases; Diseases; Reproductive Tract Infections; Infections; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population

Title: Family planning services in adolescent pregnancy prevention: the views of key informants in four countries.

Author: Cromer BA; McCarthy M

Source: FAMILY PLANNING PERSPECTIVES.1999 Nov-Dec;31(6): 287-93. **Year:** 1999

Abstract: The provision of family planning services in the US was compared with that of other developed countries. Data for analysis were gathered by face-to-face, semi-structured interviews among 75 key informants in Great Britain, the Netherlands, Sweden, and the US. Optimal family planning services for adolescents were observed in all four countries; the services of which include accessible, comprehensive and multidisciplinary care provided in confidence by nonjudgmental staff with good counseling and communication skills. Respondents in Sweden and Netherlands defined a close liaison between family planning services and local schools, while key informants in the US reported parental resistance to such coordination. Family planning staffs in Netherlands and Sweden were observed to have a clear sense of "ownership" of family planning services and better job-related prestige than in Great Britain. Respondents in all countries except Sweden claimed that providers are not always comfortable extending confidential care to teenagers. Respondents in all countries except the US thought that a "user-friendly" procedure for contraceptive provision should not require a pelvic examination. Finally, interviewees perceived that governmental support in the Netherlands and Sweden appears to have led to adequate funding of family planning services, while in the US, there seems to be little governmental, medical or familial support for preventive health care, including family planning services.

Keywords: United States; United Kingdom; Sweden; Netherlands; Research Report; Cross-Cultural Comparisons; Adolescent Pregnancy; Family Planning Programs; Reproductive Health; Northern America; North America; Americas; Developed Countries; Northern Europe; Europe; Scandinavia; Western Europe; Comparative Studies; Studies; Research Methodology; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Family Planning; Health

Title: Age differences between sexual partners in the United States.

Author: Darroch JE; Landry DJ; Oslak S

Source: FAMILY PLANNING PERSPECTIVES.1999 Jul-Aug;31(4): 160-7. **Year:** 1999

Abstract: Data from the 1995 National Survey of Family Growth (NSFG), a nationally representative survey of 10,847 women aged 15-44 years, and the 1994-95 Alan Guttmacher Institute Abortion Patient Survey, together with supplemental data from other sources, were used to estimate 1994 pregnancy rates for women by their age and marital status, according to the age difference between the women and their partner. Among all sexually active women, 10% had a partner who was 3 or more years younger, 52% a partner within 2 years of their age, 20% a partner 3-5 years older, and 18% a partner 6 or more years older. 64% of sexually active women aged 15-17 years had a partner within 2 years of their age, 29% a partner 3-5 years older, and 7% a partner 6 or more years older. Among women under 18 years old, the pregnancy rate among those with a partner 6 or more years older was 3.7 times higher than the rate among those whose partner was no more than 2 years older. Among women under age 18 who

became pregnant, those with a partner 6 or more years older were less likely to have an unintended pregnancy or to terminate an unintended pregnancy than were those whose partner was no more than 2 years older. Among women under age 18 at risk of unintended pregnancy, 66% of those with a partner 6 or more years older used contraction at most recent sex, compared with 78% of those with a partner within 2 years of their own age. Young Catholic women and those who had first had sex with their partner within a relatively committed relationship were less likely to be involved with a man who was 6 or more years older than were young women who were Protestants and those who first had sex with their partner when they were dating, friends, or had just met.

Keywords: United States; Research Report; Age Factors; Sexual Partners; Contraceptive Usage [Women]; Women; Adolescent Pregnancy; Pregnancy, Unplanned; Northern America; North America; Americas; Developed Countries; Population Characteristics; Demographic Factors; Population; Sex Behavior; Behavior; Contraception; Family Planning; Reproductive Behavior; Fertility; Population Dynamics

Title: Why is teenage pregnancy declining? The roles of abstinence, sexual activity and contraceptive use.

Author: Darroch JE; Singh S

Source: New York, New York, Alan Guttmacher Institute [AGI], 1999 Dec.24 p.Occasional Report No. 1 **Year:** 1999

Abstract: This report presents results of several analyses to document the magnitude of decline in teenage pregnancy and to examine the contributions to these trends of changes in abstinence, the sexual behavior of those who ever had intercourse and contraceptive use. The analyses were based on information from the 1988 and 1995 cycles of the National Survey of Family Growth and information on rates of teenage pregnancies, births and abortions in the US. By documenting the components of change in teenagers' reproductive behavior, it is shown that the teenage birth rate has decreased since 1991 because of lower pregnancy rates among sexually experienced women aged 15-19. Improvements in pregnancy prevention among sexually experienced teenagers that occurred during the 1970s and early 1980s were counterbalanced by steady increases in the proportions of young women who had had sex. Findings also indicate that reduction in sexual activity and use of more effective contraceptive methods both played roles in the decline in teenage pregnancy rates and birth rates. Both of these behavioral changes were undoubtedly influenced by broader societal changes in policy and programs, and in attitudes and values. However, it is suggested that the best strategy for continuing the declines in teenage pregnancy levels is a multifaceted approach.

Keywords: United States; Technical Report; Adolescent Pregnancy; Pregnancy Rate; Contraceptive Usage; Sex Behavior; Northern America; North America; Americas; Developed Countries; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Fertility Measurements; Contraception; Family Planning; Behavior

Title: The first teenage pregnancy in the family: does it affect mothers' parenting, attitudes, or mother-adolescent communication?

Author: East PL

Source: JOURNAL OF MARRIAGE AND THE FAMILY. 1999 May;61:306-19. **Year:** 1999

Abstract: The consequences of an adolescent pregnancy and childbearing for the teen's family were assessed in interviews with 189 primarily Hispanic mothers from southern California (US) during 1993-95. These mothers represented three types of families: those in which no teenage daughters had ever been pregnant, families in which only one teenage daughter was currently pregnant, and families in which only one teenage daughter had delivered a baby within the previous 6 months. In the latter two family types, the index pregnancy or childbearing was the first to occur in the family. Mothers were interviewed twice, 13 months apart, to assess changes over time. Compared with mothers of never-pregnant teens, the mothers of parenting teens monitored their children less, expected less of their oldest daughters, and were more accepting of adolescent parenting. Interviews 13 months later revealed that, in families in which a teenager was initially pregnant, mothers monitored and communicated less with other children and were more accepting of teenage sex after the older daughter gave birth. In families in which the teenager was initially parenting, mothers perceived more difficulty for their teenage daughters and reported they were less strict with other children across time. At both assessments, mothers of never-pregnant teens viewed early childbearing as more problematic, perceived older ages as appropriate for when girls should first have sex and start a family, and ascribed lower status to the parenting role than did mothers of parenting teens. These differences may represent pre-existing family risk factors that contributed to the daughter's pregnancy and childbearing or adaptations to the daughter's pregnancy and parenting that occurred over time. Regardless of origin, these maternal changes may trigger several processes through which the younger siblings of pregnant and parenting teens become vulnerable to adolescent pregnancy.

Keywords: United States; California; Research Report; Comparative Studies; Hispanics [Women]; Women; Mothers; Adolescents, Female; Adolescent Pregnancy; Interpersonal Relations; Child Rearing; Attitude; Northern America; North America; Americas; Developed Countries; Studies; Research Methodology; Ethnic Groups; Cultural Background; Population Characteristics; Demographic Factors; Population; Parents; Family Relationships; Family Characteristics; Family and Household; Adolescents; Youth; Age Factors; Reproductive Behavior; Fertility; Population Dynamics; Behavior; Psychological Factors

Title: Adolescent pregnancy and substance use.

Author: Flanagan P; Kokotailo P

Source: Clinics in Perinatology. 1999 Mar;26(1):185-200. **Year:** 1999

Abstract: This paper describes the existing understanding of adolescent substance use, adolescent pregnancy, and the covariation of the two behaviors. It examines the literature pertaining to studies of substance use among pregnant and parenting adolescents. Although the true nature of the relationship between early pregnancy and childbearing and substance use among adolescents remains unclear, the studies indicate that these health risk behaviors appear to be linked. Adolescent women who become pregnant before they complete high school represent a particular group of women who may be at higher risk of substance use, at least cigarettes, alcohol, and marijuana, than the general population. However, it is possible that for some young

women pregnancy may be used as an opportunity and a chance to intervene to decrease the risk of initiating use and to decrease use among those already using substances. Further research studies, especially longitudinal studies, are needed to address the complex issues of adolescent pregnancy and substance use.

Keywords: United States; Literature Review; Adolescents, Female; Adolescent Pregnancy; Drug Use and Abuse [Women]; Women; Risk Behavior [Women]; Women;

Title: Teenagers' pregnancy intentions and decisions: a study of young women in California choosing to give birth.

Author: Frost JJ; Oslak S

Source: New York, New York, Alan Guttmacher Institute [AGI], 1999 Dec.44, 37 p.Occasional Report No. 2 **Year:** 1999

Abstract: This study investigated the factors influencing the pregnancy options considered by young women and the factors that play a decisive role in the young women's decision to carry out pregnancy to term. Interviews and structured questionnaires administered to 187 pregnant women between 15 and 18 years from four counties in California, US, were conducted. Findings indicated that factors contributing to pregnancy outcomes include background characteristics, heterosexual relationships, and socioeconomic status. Majority of these women claimed of having unintended pregnancy, and childbearing was a result of behaviors and attitudes that have been directly or indirectly influenced by their disadvantaged backgrounds and limited expectations for the future. These findings suggest that interventions must be tailored depending on the overall life experience of the young women. In addition, the significance of partners and their influence on young women must also be addressed, as well as interventions focusing on improving contraceptive behavior. Lastly, youth counseling on effective contraceptive use and pregnancy prevention is needed to reduce the number of teenagers who find themselves in the position of choosing to bear an unintended child.

Keywords: California; United States; Adolescent Pregnancy; Adolescents, Female; Pregnant Women; Pregnancy, Unwanted; Decision Making [Women]; Women; Northern America; North America; Americas; Developed Countries; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Adolescents; Youth; Age Factors; Population Characteristics; Behavior

Title: Fathering pregnancies: marking health-risk behaviors in urban adolescents.

Author: Guagliardo MF; Huang Z; D'Angelo LJ

Source: JOURNAL OF ADOLESCENT HEALTH. 1999 Jan;24(1):10-5.
Year: 1999

Abstract: Findings are presented from a study conducted to establish self-reported rates and associated correlates of fathering pregnancies among urban male teenagers, and to explore the possibility of using their pregnancy history (PH) as a marker for other

health risk behaviors. A blinded, self-administered questionnaire was given to a convenience sample of 399 young, nonvirgin men aged 12-19 years old, of mean age 16.3, recruited from April 1994 through March 1996 at an inner-city adolescent outpatient clinic. 93.8% of the subjects were African-American and 24.2% reported causing a PH. A urine sample was collected from 73.5% of the study participants and tested for 5 drugs of abuse. 27.7% of these men had traces of drugs in their urine, of whom more than 97% were positive for cannabinoids. Compared to the young men with no pregnancy history, those with a PH were 13.8 times more likely to report 3 or more lifetime sex partners, 5.4 times more likely to report a history of STDs, 3.1 times more likely to test positive for consuming drugs, and more 2.7 times more likely to be inconsistent or nonusers of condoms. No support was found for an association between violent behavior and PH.

Keywords: United States; District of Columbia; Research Report; Urban Population; Adolescents, Male; Adolescent Pregnancy; Pregnancy History; Fathers; Drug Use and Abuse; Sexually Transmitted Diseases; Condom; Safer Sex; Northern America; North America; Americas; Developed Countries; Population Characteristics; Demographic Factors; Population; Adolescents; Youth; Age Factors; Reproductive Behavior; Fertility; Population Dynamics; Fertility Measurements; Parents; Family Relationships; Family Characteristics; Family and Household; Behavior; Reproductive Tract Infections; Infections; Diseases; Barrier Methods; Contraceptive Methods; Contraception; Family Planning

Title: Family risk factors associated with adolescent pregnancy: study of a group of adolescent girls and their families in Ecuador.

Author: Guijarro S; Naranjo J; Padilla M; Gutierrez R; Lammers C; Blum RW

Source: JOURNAL OF ADOLESCENT HEALTH. 1999 Aug;25(2):166-72. **Year:** 1999

Abstract: This paper presents the study on the family risk factors associated with adolescent pregnancy among adolescent girls and their families in Quito, Ecuador. The study aimed to identify characteristics within the family associated with adolescent pregnancy. A total of 135 female adolescents (aged 12-19 years) and their families were separately interviewed. 47 were pregnant and attending prenatal care at an inner city hospital in Quito, and 88 were nonpregnant students from schools located within the same geographical area. Results showed that when compared to their pregnant peers, more nonpregnant adolescents lived with their biological parents ($p < 0.002$); they showed higher school performance ($p < 0.001$); and more values and religiosity ($p < 0.0001$). Pregnant adolescents reported lower mother-daughter and father-daughter communication ($p < 0.02$), lesser life satisfaction in general, and more school and economic difficulties ($p < 0.001$). Moreover, they were less likely to find support for their problems in or outside the family ($p < 0.0001$) and showed higher levels of depression (68.8%) and sexual abuse (14.9%). Parental education was higher in the families of nonpregnant adolescents and both parents worked to provide financial support for the family.

Keywords: Ecuador; Research Report; Adolescents, Female; Family Relationships; Adolescent Pregnancy; Family Characteristics; South America; Americas; Developing Countries; Latin America; Adolescents; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Family and Household; Reproductive Behavior; Fertility; Population Dynamics

Title: Condom use and contraception non-use amongst 16-19 year olds: a within subjects comparison.

Author: Harden A; Ogden J

Source: PSYCHOLOGY AND HEALTH. 1999;14(4):697-709. **Year:** 1999

Abstract: The present study used a within subject design to examine which situation specific factors discriminated between the use of condoms and non-use of contraception in the context of preventing unwanted pregnancy. Adapting the methodology of Gold et al. (1991, 1992), 215 16-19 year olds completed a questionnaire concerning the most recent time they had experienced sexual intercourse without using contraception (the "without contraception" encounter) and the most recent time they had experienced sexual intercourse using a condom (the "with a condom" encounter). The results showed that although past behavior did not differentiate between the two encounters, situational factors relating to preparation for action, affect and interpersonal interaction were important. However, when analyzed for men and women separately most of the differences were only found for women. In particular, the results suggest that women report non-contraception use as associated with feeling more guilty, having a partner who is less motivated to use contraception than they are, with neither themselves nor their partner raising the desire to use contraception, not expecting to have sex and not discussing contraception and not having contraception available. In contrast, for men, only the availability of contraception appeared to differentiate between the two encounters. The results are discussed in terms of the usefulness of the methodology and the associated shift in emphasis from users and non-users of contraception to use and non-use. The implications of the results in terms of health education interventions are also considered. (author's)

Keywords: United Kingdom; Research Report; Surveys; Adolescents; Adolescent Pregnancy; Contraception; Condom; Sex Education; Developed Countries; Northern Europe; Europe; Sampling Studies; Studies; Research Methodology; Youth; Age Factors; Population Characteristics; Demographic Factors; Population; Reproductive Behavior; Fertility; Population Dynamics; Family Planning; Barrier Methods; Contraceptive Methods; Education

Title: Geographic mapping demonstrates the association between social inequality, teen births and STDs among youth.

Author: Hardwick D; Patychuk D

Source: Canadian Journal of Human Sexuality. 1999 Summer;8(2):77-90. **Year:** 1999

Abstract: This paper uses geographic mapping to illustrate the distributions of social inequality, teen births, and sexually transmitted disease (STD) among 15-24 year olds in Toronto. The incidence rates for teen births and for chlamydia and gonorrhoea among 15-24 year olds are much higher in Toronto than in the province of Ontario as a whole. There is a public health requirement to lower these rates. Risk conditions associated with poverty, teen births and STDs also provide challenges to public health program planners. This study documents the need for geographically targeted public health programs to reduce the incidence of births to 15-19 year olds and of chlamydia and gonorrhoea among 15-24 year olds. It also demonstrates the association between these indicators and social inequality. Maps highlighting census tracts with high numbers of

low-income families, teen births, genital chlamydia and gonorrhea among 15-24 year olds are used to illustrate these associations. The authors suggest that the maps, along with local community knowledge, provide the basis for geographically targeted, evidence-based sexual health program planning. (author's)

Keywords: Canada; United States; Research Report; Retrospective Studies; Census; **Adolescent Pregnancy**; Social Class; Inequalities; Sexually Transmitted Diseases; Northern America; North America; Americas; Developed Countries; Studies; Research Methodology; Population Statistics; Reproductive Behavior; Fertility; Population Dynamics; Demographic Factors; Population; Socioeconomic Status; Socioeconomic Factors; Economic Factors; Reproductive Tract Infections; Infections; Diseases