Take Action!
Preventing Teen Pregnancy in Colorado

How to Use?
The Teen Pregnancy Action Guide is intended to help local health agencies and community partners develop evidence-based Specific Measurable Achievable Realistic Time-framed (SMART) goals and good objectives. This guide identifies strategies and action steps to prevent teen pregnancy in Colorado.

Maternal and Child Health (MCH) Action Guides are divided into four (4) sections:
- **“How to Use”** - includes special instructions;
- **“What's at Stake”** - contains background information & data;
- **“What Works”** - outlines best practices or promising strategies;
- **“Resources and Tools”** - lists resources and tools to help prevent teen pregnancy and write SMART objectives.

MCH consultants are available to provide technical assistance to incorporate Action Guide information into local MCH operational plan and consult on specific content material. To contact an MCH consultant about this Action Guide call Anne-Marie Braga, Director of Adolescent Health Initiatives for the Colorado Department of Public Health and Environment at 303-692-2946.

What's at Stake?

**Teen Birth Rates.**
- Birth rates are the number births to females of a specific age group per 1000.
- In 2006, 6829 females under the age of 20 gave birth in Colorado. On average more than 18 babies are born each day to teens in Colorado - or approximately 1 baby born every hour and a half.
- Nationally the teen birth rate for 15-19 year olds declined from 61.8 per 1000 in 1991 to 40.5 per 1000 in 2005 (34%), while the Colorado teen birth rate declined from 55.5 per 1000 to 39.4 per 1000 in 2005 (29%).
- Between 2005 and 2006, the nation’s teen birth rate increased 3% (to 41.9 per 1000). During the same time there was no significant increase in Colorado.
- Health Disparities: In Colorado in 2006, the birth rate to white Hispanic teens ages 15-17 was 69.6 per 1000, while the birth rate for white non-Hispanic and Black teens in the same age group was 10.2 per 1000 and 26.9 per 1000 respectively. Rural counties account for 24 of 29 counties with teen birth rates above the state average of 39.7 per 1000.

**Teen Pregnancy Rate.**
- Pregnancy rates are the estimated number of pregnancies (ending in birth, abortion or fetal loss) to females of a specific age group per 1000.
- Among 15-19 year olds in Colorado, the pregnancy rate in 2000 (the most recent year for which data is available) was estimated to be 82 per 1000.
- Pregnancy rates were estimated to be higher among Hispanic (154 per 1000) and Black (114 per 1000) 15-19 year olds in Colorado in 2000.

**Sexual Behavior.** Among high school youth surveyed in Colorado and nationally:
- 46.7% have ever had sexual intercourse compared to 47.8% nationally.
- 33.0% have had sexual intercourse with one or more people during the past three months compared to 35.0% nationally.
- 58.0% of sexually active students reported using a condom at last intercourse compared to 61.5% nationally.
- 12.2% of sexually active students have had sexual intercourse with 4 or more people compared to 14.9% nationally.

**Challenges for Teen Parents.** Since 2001, nearly 42,000 babies have been born to teens in Colorado. Today, tens of thousands of teen parents in Colorado are facing the challenges of balancing school, finances, childcare, parenting and being parented, and their own physical and emotional development.

According to the National Campaign to Prevent Teen and Unplanned Pregnancy, teen pregnancy is the leading cause of school drop out for girls.

**The Potential Savings from Preventing Teen Childbearing.** An analysis from the National Campaign to Prevent Teen and Unplanned Pregnancy shows that the prevention of teen childbearing (teens 19 and younger) in Colorado could allow taxpayers (federal, state, and local) to have at least $167 million a year in savings to invest in other worthwhile programs. Nationally, taxpayers would have $9.1 billion a year in savings.
Strategy #1: Leverage the Strengths and Assets of Partners

Everyone has a role to play in preventing teen pregnancy in Colorado. Communities can make changes and build solutions by working collaboratively across all sectors. This type of inclusive approach brings multiple perspectives and assets to the table. It is important to align yourself with an existing coalition in order to leverage your communities’ strengths and assets! Make sure these perspectives are included in your efforts:

- Youth
- Family Planning Clinics
- Teen Clinics
- Local Public Health
- Community Health Centers
- Youth-Serving Organizations
- Healthcare Professionals
- Schools
- Faith and Spiritual Communities
- Other Healthcare Organizations
- Local Businesses
- Parents/Families
- Policymakers
- Social Services Providers
- Media
- Civic Organizations
- Tribal Councils
- Cultural-Interest Groups
- Community Leaders
- Foundations
- Non-profit Organizations

ACT!

✓ Include diverse perspectives in your community coalition.
✓ Ensure that youth are represented on your coalition
✓ Consider starting with a community needs assessment
✓ Use the information and strategies in this MCH Action Guide to develop and implement a culturally responsive action plan and goals with S.M.A.R.T. objectives addressing teen pregnancy.

Questions to Ask:
✓ What coalitions exist in your area?
✓ What is the value of working with a variety of partners?
✓ What are you trying to accomplish?
✓ What tangible results will show that you are meeting your goals?
✓ What will your group actually do to create these outcomes?

Strategy #2: Promote Positive and Healthy Youth Development

Adolescence is an unprecedented time of growth and opportunity. Adolescents experience changes in the way they look, think, feel, and interact with others. As youth enter puberty, defining their own sexual identity is at the forefront of normal developmental challenges. Part of normal development for a healthy adolescent is to explore his or her own sexuality and learn to live responsibly. Sexual activity can be defined in many ways. Risky sexual behavior can lead to serious health consequences. Risky sexual behavior includes sexual intercourse initiated at an early age, unprotected sexual intercourse, sex with multiple partners, inconsistent or absent contraceptive practices, and combining sexual activity with other risk behaviors such as use of alcohol or other drugs. Health-compromising results of risky sexual activity include unwanted pregnancy, childbearing at an early age, sexually transmitted infections and negative effects on the adolescent’s social and psychological development.

ACT!

✓ Engage Youth! Fully engage teens in activities that promote prosocial values – such as service-learning experiences, after-school activities, mentoring, and participation in school activities.
✓ Use interventions that improve decision making – such as engaging youth in problem solving to learn prosocial behavior and how to resist inappropriate peer pressure.
✓ Involve youth as part of your coalition; avoid making decisions for youth – make decisions with them.

Questions to Ask:
✓ What barriers are preventing you from involving youth in a meaningful way in your program or initiative? How can you remove those barriers?
✓ Who do you know that can be a champion and provide expertise in this area?
✓ What resources are available to help prevent teen pregnancy?
✓ What risks and protective factors do teens have in our community?
✓ What resources are available to help teens who are parenting?
Strategy #3: Partner with Parents

While parents clearly cannot determine their children’s decisions about sex, the quality of their relationships with their children can make a real difference. More than two decades of robust research — supplemented by common sense, recent public opinion polls and the voices of teens themselves — provides parents with some guiding themes. Parents who (1) clearly communicate their values and expectations to their children, (2) express their concern and love for them early and often, and (3) exercise supervision — including their child’s selection of friends and role models — raise children who are more likely to avoid a host of risky behaviors than parents who do not. The overall strength and closeness of parent/child relationships seems to be the best protection of all.

- Involve parents in your coalitions and initiatives.
- Promote and enhance positive parental involvement in their children’s lives from early on.
- Encourage parents to really listen, respect, monitor and guide their teens.
- Encourage and teach teens how to talk to their parents or another trusted adult or family member.
- Encourage and teach parents to talk to their teens.
- Reach out to parents where they are. Don’t expect them to come to you.

Questions to Ask:
- Who are the parent leaders in your community? How can you partner with them?
- Are there groups in the community that are already working with parents? Can your program integrate into what is already being done?
- Connect with parent liaisons in the schools.

Strategy #4: Implement Effective Programs or Strategies

There are many programs and strategies that aim to reduce teen pregnancy. However, not all of them are effective. Researchers such as Douglas Kirby, PhD, have done hard work to determine which programs are proven to be effective at changing risky sexual behavior or reducing teen pregnancy. Programs that have been proven effective, through rigorous research, at changing sexual risk-taking behavior are considered “science-based” teen pregnancy, HIV, and STI prevention programs. For more information on science-based programs and approaches, visit the CDC website at:

- Conduct a needs assessment to gather information and understand youth in your community and what they need in order to avoid unintended pregnancy.
- Research the science-based programs that might meet the needs of the population you serve. Determine which one(s) would be the best fit for your community.

Questions to Ask:
- Has the teen pregnancy prevention program in your community or school been proven effective, through rigorous research, at changing sexual risk-taking behaviors for a sustained period of time?
- How was the research conducted on the program and with whom?
- Does the program deliver science-based, medically-accurate, age-appropriate, and culturally-appropriate information on abstinence and condoms and contraception?
Data Resources

- Maternal and Child Health County Data Sets These contain recent data for Colorado counties for Maternal and Child Health Performance and Outcome Measures as well as for other measures of interest in the Maternal and Child Health populations. [http://www.cdphe.state.co.us/ps/mch/mchdatasets.html](http://www.cdphe.state.co.us/ps/mch/mchdatasets.html)

- Colorado Health Information Dataset (CoHID) CoHID allows access to local-level health data compiled by the Colorado Department of Public Health and Environment to help users determine the health status of a neighborhood, community, county or region in Colorado. [http://www.cdphe.state.co.us/cohid/](http://www.cdphe.state.co.us/cohid/)

- Pregnancy Risk Assessment Monitoring Systems (PRAMS) PRAMS is a population-based risk factor surveillance system designed to identify and monitor behaviors and experiences of women before, during, and after pregnancy. Information is collected by surveying a sample of women who have recently given birth. [http://www.cdphe.state.co.us/hs/prams/index.html](http://www.cdphe.state.co.us/hs/prams/index.html)

- Healthy Kids Colorado Survey and Colorado Youth Risk Behavior Survey (YRBS) In Colorado, the YRBS is a component of the Healthy Kids Colorado Survey. The Healthy Kids Colorado Survey effort is a collaborative involving several state agencies and other organizations. The Colorado results are representative of all students in grades 9-12. [http://www.cde.state.co.us/cdepvention/healthykidscolo.htm](http://www.cde.state.co.us/cdepvention/healthykidscolo.htm)

- Colorado Organization on Adolescent Pregnancy, Parenting and Prevention (COAPPP) COAPPP creates and provides county and zip-code specific birth and STI data upon request. [www.coappp.org](http://www.coappp.org)

- The Alan Guttmacher Institute Provides data and research about sexual and reproductive health topics, including items specific to adolescents. [http://www.guttmacher.org/sections/adolescents.php](http://www.guttmacher.org/sections/adolescents.php)

Fact Sheets & Toolkits

- The National Campaign to Prevent Teen and Unplanned Pregnancy Provides data, resources and information on preventing teen pregnancy at both the national and state levels. [www.thenationalcampaign.org](http://www.thenationalcampaign.org)


- Sexual Risk and Protective Factors – Factors Affecting Teen Sexual Behavior, Pregnancy, Childbearing, and Sexually Transmitted Disease: Which Are Important? Which Can You Change? By identifying and targeting those factors that both affect adolescents' decisions about sex and can be changed by interventions, the chances of reducing sexual risk-taking among teens are greatly improved. This newly updated paper provides an exhaustive analysis of the hundreds of factors that can affect teen sexual behavior. Readers can review and download the executive summary, the entire document, and the matrix listing all 400+ risk and protective factors. [http://etr.org/recapp/theories/RiskProtectiveFactors/index.htm](http://etr.org/recapp/theories/RiskProtectiveFactors/index.htm)

- Colorado’s Youth Partnership for Health (YPH) YPH is a diverse group of 14-18 year olds from across Colorado, recruited from a variety of schools, local health agencies and community programs. The youth work directly with adults to help make decisions affecting all youth in Colorado. [www.healthyouthcolorado.org](http://www.healthyouthcolorado.org)
Reviews & Reports

- **Emerging Answers 2007 – Research Findings on Programs to Reduce Teen Pregnancy and Sexually Transmitted Diseases** This review summarizes research results on sexual risk behavior and its consequences. It identifies the particular types of adolescent sexual risk-taking behavior that affect pregnancy and STDs. It provides an overview of important factors that influence such risk-taking. The report goes on to describe the programs and approaches that have reduced teen sexual risk-taking and teen pregnancy or STD. It expands the list of programs with strong evidence of impact, describes the characteristics of effective sex and STD/HIV education programs contributing to their success and provides new evidence for other promising approaches to reducing sexual risk. Finally, this report describes promising strategies for organizations and communities that want to select, adapt, design or implement prevention programs for their own teens. [http://www.thenationalcampaign.org/ea2007/](http://www.thenationalcampaign.org/ea2007/)

- **Science and Success – Sex Education and Other Programs that Work to Prevent Teen Pregnancy, HIV and Sexually Transmitted Infections** This 2008 publication highlights 26 U.S.-based programs that have been proven effective at delaying sexual initiation or reducing sexual risk taking among teens. [http://www.advocatesforyouth.org/programsthatwork/index.htm](http://www.advocatesforyouth.org/programsthatwork/index.htm)

- **Parent Power: What Parents Need to Know and Do to Help Prevent Teen Pregnancy** Whether they believe it or not, parents have a very important influence on whether their teenagers become pregnant or cause a pregnancy. Parent Power offers good news for parents and those who work with, care for, and write about young people. It compiles much of what is known about parental influences and offers parents practical things they can do to help their children delay sexual activity and avoid teen pregnancy. English: [http://www.thenationalcampaign.org/resources/pdf/pubs/ParentPwr.pdf](http://www.thenationalcampaign.org/resources/pdf/pubs/ParentPwr.pdf) Spanish: [http://www.thenationalcampaign.org/resources/pdf/pubs/ParentPwr_Spa.pdf](http://www.thenationalcampaign.org/resources/pdf/pubs/ParentPwr_Spa.pdf)

Technical Assistance


- To develop goals and S.M.A.R.T. objectives, visit this interactive website: [http://apps.nccd.cdc.gov/dashoet/writing_good_goals/page002.html](http://apps.nccd.cdc.gov/dashoet/writing_good_goals/page002.html)

Clinical Services

- **Colorado Title X Family Planning Clinics** Colorado Title X Family Planning clinics provide a range of preventive health services, including reproductive health exams; contraceptive supplies; pregnancy testing and counseling; screening for cancer and STDs, including HIV; basic infertility services; and referrals to other health and social services. In addition, clients receive education and counseling about contraception (including abstinence), sexually transmitted infections, and general preventive health practices. Family planning services are confidential. Clinic charges are based on a sliding fee scale that slide to $0. It is not necessary to live in the county where services are received and no client may be turned away for inability to pay. Directory of clinic sites: [http://www.cdphe.state.co.us/pp/womens/FPmanuals/admin/FPPNPNHDirectory102008.pdf](http://www.cdphe.state.co.us/pp/womens/FPmanuals/admin/FPPNPNHDirectory102008.pdf) General program information: [http://www.cdphe.state.co.us/pp/womens/famplan.html](http://www.cdphe.state.co.us/pp/womens/famplan.html)
Clinical Services Cont’d

- Colorado School-Based Health Centers A school-based health center (SBHC) is a health-care facility located within or on school grounds. It is staffed by a multi-disciplinary team of medical and behavioral health specialists. The provision of family planning services at School-Based Health Centers is determined by each site. Check with the school nurse or the onsite SBHC to see if these services are offered. Directory of clinic sites: http://www.casbhc.org/SBHC/ClinicLocations.asp

- Colorado Family Healthline Helps pregnant women, families with children, or individuals find free or low cost health care and other services. 1-800-688-7777

*This Action Guide was made possible with funds from a Title X grant to the Colorado Department of Public Health and Environment from the Department of Health and Human Services, Office of Population Affairs. The CDPHE Family Planning Program is supported 43% by non-governmental sources.*