

State Policy Options

Connecting the Dots

Given the close relationship between teen pregnancy and educational achievement, economic wellbeing and child welfare, policies that affect one of these issues often influence the others as well. Taking steps to address high teen pregnancy and birth rates in Nevada has potential to reduce high school dropout rates, improve educational attainment, boost tax contributions through higher earnings, and improve the economy overall. In addition, reducing births to adolescents can help strengthen families, improve child wellbeing and assist young people in achieving their goals, all of which reduce the likelihood that the cycle of teen pregnancy, economic hardship and poverty will continue.

Policy Options for Nevada State Lawmakers to Consider

Numerous policies and programs are available to help policymakers prevent teen pregnancy in the state and their communities. This fact sheet highlights various options states and localities — including a few in Nevada — have undertaken to reduce teen pregnancy and the associated economic, social and human costs.

Invest in Evidence-Based Programs. The good news for states is that there is no need to reinvent the wheel. The federal Office of Adolescent Health has identified more than [30 rigorously evaluated programs](#) proven to reduce teen pregnancy and change sexual risk-taking behaviors by, for example, delaying the age of sexual intercourse; increasing condom and contraceptive use among sexually active youth; or reducing the number of sexual partners.

Various federal grant programs are available to state and local organizations. The Personal Responsibility Education Program (PREP), the Teen Pregnancy Prevention (TPP) program, and the Pregnancy Assistance Fund offer funding to implement evidence-based programs; develop, replicate and refine new innovative models to reduce teen pregnancy; and support pregnant and parenting teens. Nevada State Health Division, Big Brothers Big Sisters of Northern Nevada, University of Nevada, Las Vegas, and Southern Nevada Health District have all received federal grants to implement evidence-based programs.



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In addition, the Title V Abstinence Education Grant program, of which Nevada is a recipient, provides funding to states for abstinence education, mentoring, counseling and adult supervised programs that promote abstinence. Title V requires a 43 percent state match and encourages, but does not require, states to use evidence-based programs. Programs must be medically accurate and focus on youth at high risk of teen pregnancy. More information on federally funded programs is available [here](#).

Make Efficient Use of Scarce Resources. Targeting limited resources to areas that have the highest teen birth rates can make a considerable difference. In Nevada, this might mean focusing on specific geographic areas, such as rural areas, where teen birth rates are high. Or, it might mean targeting areas such as Clark County, which accounts for the majority of teen births in the state. Efforts can further be focused on high-risk populations such as racial and ethnic minorities, youth in foster care or the juvenile justice system, and/or 18- and 19-year olds.

Southern Nevada Health District, for example, is using federal funding to replicate two evidence-based

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programs for high-risk teens in seven Clark County zip codes with the highest teen birth rates. In addition, Clark County Department of Family Services has federal funding to implement and evaluate a program for youth in foster care. DREAMR (Determined, Responsible and Empowered Adolescents Mentoring Relationships) aims to reduce pregnancy, build relationship capacity for those already pregnant or parenting, and improve relationship skills for youth in foster care. In other states, innovative work is underway with community colleges and universities to help prevent unplanned pregnancy among older teens as a way to improve college completion.

Consider the Role of Parents and Trusted Adults.

In national surveys, more than three in four teens say it would be easier to postpone sexual activity and avoid pregnancy if they could have open, honest conversations with their parents. Teens consistently say it is their parents — not their peers, partners or popular culture — who have the most influence on their decisions about sex. But these conversations don't always occur, for a variety of reasons. Some states and communities are facilitating forums to start these discussions; others offer informational sessions for parents.

Enlist a Broad Range of Stakeholders. Teen pregnancy affects entire communities and by engaging a wide range of partners — from schools and faith communities to health care providers and businesses — a state can address the issue on various fronts. To improve community involvement in preventing teen pregnancy, legislators may wish to consider the following options:

- Develop a broad coalition to address teen pregnancy. Engage community leaders and organizations, businesses, religious leaders and the faith community, parents, media, education leaders, judges and others to prevent adolescent pregnancy. All have an interest in reducing teen pregnancy — whether or not they realize it. Educators, who want to improve educational achievement, for example, or faith leaders, who want to encourage strong families and healthy development of young people, can work towards their own goals by helping reduce teen pregnancy.
- Encourage collaboration among state agencies, including health, education, child welfare, juvenile justice and the courts. Consider expanding collaboration to include private and nonprofit sectors.
- Embed teen pregnancy prevention strategies in dropout prevention, college readiness and completion, economic development, foster care and juvenile justice policies and programs. For example, business and community leaders in Mississippi and Milwaukee identified high rates of teen pregnancy as a workforce competitiveness issue and have made addressing teen pregnancy part of their economic development strategy. Many states and localities are also taking the “positive youth development” (PYD) approach, which builds on young people’s strengths and focuses on helping youth acquire the knowledge and skills they need to become healthy, productive adults.
- Start a discussion. Pregnancy prevention is often a difficult topic for people to broach. Many states and

cities have used media or public awareness campaigns to get people talking about the reality — and costs — of teen pregnancy. Recent campaigns in Chicago, Milwaukee and New York City, for example, have received nationwide attention.

Improve Access to Information and Services. Teens often cite their lack of knowledge and information about how to prevent pregnancy or a lack of access to reproductive health services, as challenges to preventing early pregnancy. And, according to a recent survey by the National Campaign to Prevent Teen and Unplanned Pregnancy, the majority of American adults (69 percent) believe that teens should be getting more information about both abstinence and contraception. The state legislature may wish to consider the following policy options to help ensure all teens make healthy, responsible decisions.

- Authorize child welfare agencies to provide foster youth with age-appropriate information about reproductive health.
- Support youth-friendly health care providers, such as public health clinics or school-based health centers.
- Ensure that programs focused on supporting young parents, including home visiting programs, also focus on helping young women delay a subsequent pregnancy until they are ready by, for example, providing information about and access to effective contraception. Colorado, New Mexico and South Carolina allow Medicaid to reimburse for highly effective methods of contraception — such as long-acting reversible contraceptives — immediately postpartum. For example, Colorado’s 2009 family planning initiative increased the number of women receiving services, increased the availability of long acting reversible contraceptive methods, and reduced high up-front costs. The state has seen significant drops in teen and young adult birth rates. Repeat teen birth rates declined by 45 percent and post-partum contraceptive use improved among teen mothers— more than 50 percent reported using a long acting method. In addition, an estimated \$23 million in Medicaid costs were avoided due to the decline in births in 2010-2011.
- State Medicaid expansion, implementation of a state health insurance exchange, and other provisions in the Affordable Care Act offer opportunities to ensure that low-income teens and young adults have access to affordable and effective family planning services to help avoid unplanned pregnancy.

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Resources

National Conference of State Legislatures

- Teen Pregnancy Prevention; <http://www.ncsl.org/default.aspx?tabid=23141>
- State Policies on Sex Education in Schools; <http://www.ncsl.org/default.aspx?tabid=17077>

The National Campaign to Prevent Teen and Unplanned Pregnancy; www.thenationalcampaign.org

- Survey Says: Complementary Not Contradictory; <http://www.thenationalcampaign.org/resources/surveysays/August2013/August.pdf>
- Survey Says: Parent Power; <http://www.thenationalcampaign.org/resources/surveysays/October2013/October.pdf>