

State Policy Options

Connecting the Dots

Teen pregnancy, educational achievement, economic wellbeing and child welfare are closely related. Policies that affect one of these issues often influence the others as well. Taking steps to address high teen pregnancy and birth rates in Oklahoma has the potential to reduce high school drop-out rates, improve college completion and overall educational attainment, boost tax contributions through higher earnings, and improve the economy. 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 Oklahoma 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 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 [35 rigorously evaluated programs](#) proven to reduce teen pregnancy and change risk-taking behaviors by, for example, abstaining from or delaying the initiation of sexual intercourse, or improving contraceptive use among sexually active youth. With a strong commitment to evaluation, these programs are using approaches with proven results while also expanding evidence about what works.

Various federal grant programs are available to state



and local organizations to implement evidence-based programs; develop, replicate and refine new innovative models to reduce teen pregnancy; and support pregnant and parenting teens. Oklahoma is currently the [recipient of some of these federal funds](#). These [sources include](#) the Personal Responsibility Education Program (PREP) grant, which the Oklahoma State Department of Health receives; Tribal PREP funds to three tribes in Oklahoma; and the Personal Responsibility Education Innovative Strategies Program. The Choctaw Nation of Oklahoma and a Tulsa-based community group also receive funds through the [Pregnancy Assistance Fund and the Teen Pregnancy Prevention Program](#), respectively.

In addition, the federal Title V Abstinence Education Grant program, of which the Oklahoma State Department of Health is a recipient, provides funding to states for abstinence education, mentoring, counseling and adult-supervised programs that promote abstinence. Title V encourages, but does not require, states to use evidence-based programs. In addition, programs must be medically accurate. More information on federally funded programs is available [here](#).

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Make Efficient Use of Scarce Resources. Targeting limited resources to communities that have the highest teen birth rates can make a considerable difference. In Oklahoma, this might mean focusing on specific geographic areas with higher rates or numbers of teen births. For example, national research by the National Campaign to Prevent Teen and Unplanned Pregnancy found that teens in rural counties had higher birth rates than those in urban or suburban areas. It could also mean focusing on certain high-risk populations, such as older teens, certain racial or ethnic groups, teens who already have a child, or youth in foster care. Through the federal funds the state receives, Oklahoma is already focusing on some high-risk groups.

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 parental conversations don't always occur, for a variety of reasons. Some states and communities are facilitating forums to start such discussions; others offer informational sessions for parents. There are also proven programs that focus on parent-child communication, such as Families Talking Together.

Enlist a Broad Range of Stakeholders. Teen pregnancy affects entire communities and by engaging a wide range of partners, a state can address the issue on various fronts. Legislators may wish to consider supporting or getting involved with the following options:

- Develop a broad coalition to address teen pregnancy. Engage community leaders and organizations, businesses, religious leaders and the faith community, parents, education leaders, judges and others to prevent adolescent pregnancy. Encourage collaboration among state agencies, including health, education, child welfare, juvenile justice and the courts. Oklahoma has partners in engaged teen pregnancy prevention efforts in Oklahoma City and

Tulsa through the Central Oklahoma Teen Pregnancy Prevention Collaboration and the [Tulsa Campaign to Prevent Teen Pregnancy](#), as well as through state and local health departments and community organizations.

- 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 it part of their economic development strategy. In addition, Mississippi and the Arkansas General Assembly recently passed bills requiring community colleges and universities to develop a plan to address teen and unintended pregnancies for those who attend their campuses. Many states and localities are also taking the “positive youth development” (PYD) approach to programs, which builds on young people's strengths.
- Start a discussion. Pregnancy prevention is often a difficult topic 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. Groups in Indiana, Hawaii and Oklahoma, for example, have launched statewide teen pregnancy prevention media campaigns in the past few years. And recent campaigns in cities such as Milwaukee 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. The state legislature may wish to consider the following policy options to help all teens make healthy, responsible decisions:

- Provide evidence-based sex education programs. Oklahoma does not have a policy requiring sex education but does require teaching of HIV/AIDS prevention that also stresses abstinence. According to the 2013 Youth Risk Behavior Survey, 50 percent of Oklahoma high school students have had sexual inter-

course. Some evidence-based teen pregnancy prevention programs are being implemented in Oklahoma City, Tulsa and other Oklahoma counties.

- Authorize child welfare agencies to provide foster youth with age-appropriate information about reproductive health. This group of young people has a high risk of teen pregnancy, and there are evidence-based programs specifically tailored to their circumstances.
- Support youth-friendly health care providers and practices, such as public health clinics or school-based health centers. It is estimated that without the preventive contraceptive services provided through Title X family planning clinics, which serve low-income individuals, teen pregnancies in Oklahoma would have been 44 percent higher in 2010.
- Ensure that programs focused on supporting young parents, including home visiting programs, also focus on helping delay a subsequent pregnancy. Colorado, New Mexico and South Carolina allow Medicaid to reimburse for highly effective methods of contraception—such as long-acting reversible contraceptives—immediately postpartum. Through Colorado's Family Planning Initiative, which provided highly effective contraceptives at no or low cost to low-income women and teens, the state saw a drop of more than 50 percent in repeat teen birth rates from 2009 to 2013. Colorado also experienced other benefits, such as reductions in teen birth and abortion rates and millions of dollars in Medicaid and health care savings.
- Maintain access to affordable and effective family planning services for low-income teens and young adults to help avoid unplanned pregnancy. These include, for example, the option to expand Medicaid eligibility for family planning through a State Plan amendment, Medicaid expansion, and subsidized insurance. Oklahoma's State Plan amendment expands family planning services to women with incomes up to 138 percent of poverty, and includes women under age 19.

Resources

National Conference of State Legislatures

- Teen Pregnancy in Oklahoma—links to this and three additional briefs
www.ncsl.org/Default.aspx?tabid=28980
 - Teen Pregnancy Prevention
www.ncsl.org/default.aspx?tabid=23141
 - State Policies on Sex Education in Schools
www.ncsl.org/default.aspx?tabid=17077
- The National Campaign to Prevent Teen and Unplanned Pregnancy
www.thenationalcampaign.org