Bonner Institute for Civic and Community Engagement

Issue Brief

**Teen Pregnancy & Delinquency: Trenton**

SCOPE OF THE PROBLEM

Sons of young, teen mothers are **three times more likely to be incarcerated** than men born to non-teen mothers.

Studies have found that children of young (teen) parents are at a higher risk for delinquent and criminal behavior.[[1]](#endnote-1)

* Children of adolescent mothers generally experience poorer health than children of women who are age 20 or 21 when their first child was born.
* Children born to youngest teen mothers are at greater risk for suffering child abuse or neglect than those born to older mothers.
* Children of teen mothers are at higher risk for behavioral problems including aggression and flattened affect (little to no emotion).
* **Only 77% of children born to teen mothers complete high school by early adulthood while 89 percent of children of older mothers successfully graduate.**

Studies have found that 10.3% of men born to mothers age 17 and younger are incarcerated at some point in their lives versus 3.8% of men with mothers 20 years and older.

* New Jersey’s teen birth rate is approximately 20.1% compared to the national 34.25%.
	+ New Jersey was ranked 47 out of 51 (50 states plus the District of Columbia) on 2010 teen birth rates among women aged 15-19.[[2]](#endnote-2)
	+ Teens ages 15 to 17 in New Jersey have a pregnancy rate of 9.6 percent while women ages 18-19 have a pregnancy rate of 37.6%. This is still significantly lower than the national 17.3% and 58.2%, respectively. Approximately 15.2% of youth in New Jersey admit to not using any contraceptive method to prevent pregnancy.[[3]](#endnote-3)
		- 5,793 girls ages 15-19 gave birth in 2010 in New Jersey.[[4]](#endnote-4)
	+ Teen childbearing cost New Jersey approximately $245 million in the yea 2008, according to the National Campaign to Prevent Teen and Unplanned Pregnancy.

In Mercer County, the most recent data shows the teen pregnancy rate is approximately 25%.[[5]](#endnote-5)

* **Approximately 13% of female students in Trenton Central High School dropped out during the 2009-2010 academic year – about eight times the rate in New Jersey.[[6]](#endnote-6) High teen pregnancy rates are one of the leading causes of drop-out rates among female students.**

About **75% of teen mothers** in Mercer County lived in **Trenton** in 2005.

Trenton had the highest rates of teenage births in the state in 2000. In 2005, approximately 75% of teen mothers in Mercer County resided in Trenton.

* In 2007, 397 babies born to teen mothers represented 8.6% of all babies born in Mercer County.

POLICY & FUNDING

**National**

2010 legislation provided the first federal funding exclusively for teen pregnancy prevention initiatives based on best practices.[[7]](#endnote-7) The 111th Congress established federal funding for the following evidence-based teen pregnancy prevention initiatives:

* *Teen Pregnancy Prevention (TPP) program* – provides grants and contracts, on a competitive basis, to public and private entities to fund “medically accurate and age appropriate” programs that reduce teen pregnancy, as well as for federal costs associated with administering and evaluating the programs.
* *Personal Responsibility Education Program (PREP)* – a comprehensive approach to teen pregnancy prevention that educates adolescents on both abstinence and contraception to prevent pregnancy and sexually transmitted diseases. It provides youth with information on several adult preparation subjects such as healthy relationships, adolescent development, financial literacy, parent-child communication, educational and career success, and healthy life skills.
	+ PREP is required by law to replicate effective evidence-based programs or substantially incorporate elements of effective programs.
* Until FY 2010, federal funding was exclusively allocated to abstinence education: the Title V Abstinence Education Block Grant to states; the Community-Based Abstinence Education (CBAE) program; and the ‘prevention’ component of the Adolescent Family Life (AFL) demonstration program.
* Other programs that receive federal funding for teen pregnancy prevention include: Medicaid Family Planning; Title X Family Planning; the Maternal and Child Health block grant; the Temporary Assistance for Needy Families block grant; the Title XX Social Services block grant; and, other HHS programs.

The National Sexuality Education Standards Core Content and Skills, K-12 provides guidance on the essential minimum, core content for sexuality education that is developmentally and age-appropriate for students in grades K-12.[[8]](#endnote-8)

* The report identifies seven topics to be address for students in grades K-12: anatomy and physiology; puberty and adolescent development; identity; pregnancy and reproduction; sexually transmitted diseases and HIV; healthy relationships; and, personal safety.
* The report also identifies characteristics of and establishes key indicators for effective sexuality education.

**State**

*New Jersey Core Curriculum Content Standards for Comprehensive Health and Physical Education*– New Jersey law mandates at least 150 minutes of health education during each school week in grades one through 12. High school students must acquire three and three-quarter credits of health education each year.[[9]](#endnote-9) This is one of more progressive state laws on sexual education in the country.

* The health curricula must meet state requirements that “all students will learn the physical, emotional, and social aspects of human relationships and sexuality and apply concepts to support a healthy, active lifestyle.”
* The Common Core Framework addresses various topics for students in kindergarten through 12th-grade including families, peer pressure, media stereotypes, the reproductive system, pregnancy, HIV/AIDS, abstinence, contraception, gender assumptions, sexual orientation, and marriage.

MODEL PROGRAMS

**New Jersey Prevention Education Program (Teen PEP)**

The New Jersey Teen PEP is a sexual health promotion and peer education initiative that trains high school students to serve as peer health educators, providing them with the knowledge and tools to become effective and capable health advocates and role models.[[10]](#endnote-10)

* The program, established in 1999, is a collaboration of the NJ Department of Health and Senior Services, the Center for Supportive Schools, and HiTOPS, Inc.
* The partners work with participating high schools to implement the Teen PEP sexual health course into the school’s health curricula. The course is aligned with *Core Curriculum Standards*, and serves as an elective or alternative yearlong health class for selected students in their junior or senior year.

**Crossroads Programs Capable Adolescent Mothers (CAM)**

Capable Adolescent Mothers is a program sponsored by Crossroads Programs, a non-profit organization founded in 1978, that offers longer-term residence for pregnant and parenting teens and their infants.[[11]](#endnote-11)

* CAM serves youth mothers from sixteen to twenty-one years of age that do not have a healthy or stable home for themselves or their child or children.
* Mothers voluntarily enter the program and receive housing, a positive mentoring relationship with staff persons, and other trauma-sensitive services.
* Infants of CAM receive 24-hour supervision, nursing care, an infant stimulation program, childcare, access to pediatric care, and nutritional oversight.

**Project Teen Education and Child Health (Project TEACH)**

Project TEACH is an educational program that aims to provide pregnant and parenting teenagers with the needed resources to create a positive life for themselves and their children.[[12]](#endnote-12) The program goals revolve around ensuring that each student will receive a diploma from her local high school or return to their local school districts to complete their education.

* The program provides each student with a supportive educational curriculum that tries to limit class size, formulate an educational program for each individual student, and provide Child Study Team and other community resources.
* On-site childcare is also provided by trained “educares” for infants six weeks to two-and-a-half years of age.

**Carrera P.R.I.D.E. Program**

Carrera P.R.I.D.E. is a pregnancy prevention after-school program, serving Bridgeton Public Schools, focused on increasing sexual literacy while at the same time encouraging students to avoid risky sexual behaviors and to focus on personal goals and a productive future.[[13]](#endnote-13)

* Carrera P.R.I.D.E. is sponsored by the Inspira Health Network, and meets five days a week after regular school hours, as well as some Saturdays, during the school year.  In addition, a yearly summer program is also offered.
* Carrera P.R.I.D.E. offers counseling and resources for students to focus on personal goals and self-improvement in areas such as homework, employment, mental health, family life, sexuality education, athletic sports, and different types of medical care.

|  **Key Organizations** |  |
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| * National Campaign to Prevent Teen Pregnancy and Unplanned Pregnancy
* United States Administration for Children and Families
* United States Department of Health and Human Services
	+ Office of Adolescent Health
* United States Department of Education
* New Jersey Department of Health and Senior Services
* New Jersey Department of Education
* Mercer County Human Services
 | * Mercer County Youth Services Commission
* Mercer County Community College, Career Training Institute
* Planned Parenthood of Mercer County
* HiTOPS, Inc.
* Isles Youth Institute
* NJ YouthCorps, Trenton
* Trenton Central High School Career Center
* Trenton Department of Housing and Economic Development
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Endnotes

1. “Fact Sheet: Children of Teen Parents.” 2005. Center for Prevention and Early Intervention Project, *Florida State University*, <http://www.cpeip.fsu.edu/resourceFiles/resourceFile_78.pdf>. [↑](#endnote-ref-1)
2. “New Jersey Adolescent Reproductive Health Facts.” Department of Health and Human Services, *State of New Jersey*, <http://www.hhs.gov/ash/oah/adolescent-health-topics/reproductive-health/states/nj.html>. [↑](#endnote-ref-2)
3. “Mercer County, NJ Community Health Assessment Report.” July 2012. *Greater Mercer Public Health Partnership*, <http://www.uwgmc.org/sites/uwgmc.org/files/Final_Mercer_CHAReport_July122012.pdf>. [↑](#endnote-ref-3)
4. “Fact Sheet: Teen Pregnancy.” 2011. HiTOPS. [↑](#endnote-ref-4)
5. “Mercer County, NJ Community Health Assessment Repot.” [↑](#endnote-ref-5)
6. Gibson, Sandy. June 2012. “Shaping the Future: Women and Girls in Central New Jersey.” Fund for Women and Girls, *Princeton Area Community Foundation*, <http://pacf.org/wp-content/uploads/Shapingthefuture.pdf>. [↑](#endnote-ref-6)
7. “Teenage Pregnancy Prevention: Statistics and Programs.” June 2013. *Congressional Research Service*, <http://www.fas.org/sgp/crs/misc/RS20301.pdf>. [↑](#endnote-ref-7)
8. “National Sexuality Education Standards: Core Content and Skills, K-12.” 2011. *Future of Sex Education*, <http://www.futureofsexed.org/documents/josh-fose-standards-web.pdf>. [↑](#endnote-ref-8)
9. “New Jersey State Profile Fiscal Year 2009.” *Sexuality Information and Education Council of the United States*, <http://www.siecus.org/index.cfm?fuseaction=Page.ViewPage&PageID=1234>. [↑](#endnote-ref-9)
10. “New Jersey State Profile Fiscal Year 2009.” [↑](#endnote-ref-10)
11. “Capable Adolescent Mothers.” 2013. *Crossroad Programs*, <http://www.crossroadsprograms.org/who_we_serve/capable_adolescent_mothers.html>. [↑](#endnote-ref-11)
12. “Project TEACH.” 2013. *New Jersey Department for Children and Families*, <http://www.nj.gov/dcf/families/educational/teach/>. [↑](#endnote-ref-12)
13. “Adolescent Pregnancy Prevention Program.” 2013. *Inspira Health Network*, <http://www.inspirahealthnetwork.org/?id=2259&sid=1>. [↑](#endnote-ref-13)