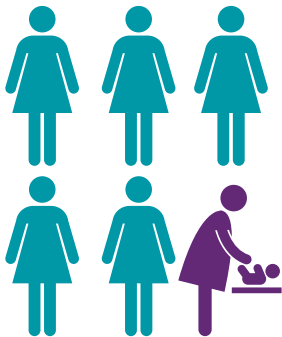


InFOCUS

Expanding the Evidence: Uncovering Effective Methods to Prevent Teen Pregnancy

Teen Births in the U.S.

One in six adolescent females currently gives birth before age 20.



About **one in four** adolescent mothers has a second birth during her teenage years.



Teen pregnancy and birth rates in the United States have declined significantly since 1990, but teen parenting is still a national problem with far-reaching repercussions. One in six adolescent females currently gives birth before age 20, and about one in four adolescent mothers has a second birth during her teenage years. Teen mothers face a host of adverse circumstances—compared to older mothers, they are more likely to have obstetric and neonatal difficulties, receive welfare, and have children with developmental and behavioral issues. Furthermore, those who are pregnant again within 18 months are at even higher risk of having a still- or preterm birth; they are also less likely to stay in or complete high school, work, or maintain economic self-sufficiency.

Policy responses have included interventions delivered in health clinics, community-based settings, and the homes of individual program participants to delay repeat teen pregnancies and increase the use of effective methods of birth control. The T.O.P.P. program employs a unique approach using care coordination, motivational interviewing, and logistical support to address barriers to contraceptive use and consistency, and focuses on long-acting reversible contraceptive (LARC) methods such as intrauterine devices (IUDs) and contraceptive implants.

FINDINGS IN BRIEF

- The T.O.P.P. program was highly successful in increasing use of LARC methods and reducing the incidence of unprotected sexual intercourse after the first six months of participation. These impacts support the recent emphasis by health professionals and social policy researchers to increase the use of these methods among adolescents.
- There was no evidence that the program had unintended spillover effects on other sexual risk behaviors that the program did not target. Specifically, participants in the treatment

group were no more likely than those in the control group to have had sexual intercourse or sex without a condom in the previous three months.

- Participants in both groups reported similar numbers of sexual partners.

The study suggests that the T.O.P.P. program influenced rates of LARC use and unprotected sex primarily by increasing exposure to information on birth control methods and sources, and by increasing access to contraceptive services. By contrast, the research team found no evidence that the program impacted other mediating

Impacts on sexual risk behaviors targeted by T.O.P.P

Measure	Treatment group	Control group	Difference
Percentage of respondents reporting use of the following birth control methods in the past 3 months			
LARC	38.3	21.4	16.9
Any hormonal method or IUD	75.3	67.8	7.5
Any effective method of birth control	84.4	80.7	3.6
Had unprotected sex in the past 3 month	14.4	24.8	-10.4

Table 1

factors, such as knowledge, attitudes, and intentions. However, the survey only measured knowledge of condoms and birth control pills, in addition to attitudes toward condoms and more general “birth control methods.” As a result, we cannot draw conclusions about the program’s impacts on knowledge of or attitudes toward LARC methods, or other specific methods of birth control that T.O.P.P. nurse educators may have discussed with participants.

Consistent with other research, these findings suggest that facilitating access to contraceptive services is a potentially important mechanism for increasing LARC use among adolescents. The study also highlights the importance of considering barriers such as a lack of awareness of these contraceptive methods, lack of reliable or convenient transportation, and poor access to a regular, convenient health care provider. These additional barriers may be especially important for programs that serve a relatively low-income or high-risk population.

This brief is based on the full report, “[Teen Options to Prevent Pregnancy](#),” by Kimberly Smith, Dana Rotz, Brian Goesling, Elizabeth Cook, Kelly Murphy, and Jack Stevens.

ABOUT THE STUDY

This study reports interim findings from an evaluation of Teen Options to Prevent Pregnancy (T.O.P.P), an 18-month clinic-based intervention for pregnant and parenting adolescents. OhioHealth, a large, faith-based health system in Columbus, developed the program to address high repeat birth rates and low family planning rates for teens in the area. The program features (1) telephone-based care coordination, (2) facilitated access to contraceptive services, and (3) a risk assessment and referrals by a social worker. The study is part of a larger [Evaluation of Adolescent Pregnancy Prevention Approaches](#), funded by the U.S. Department of Health and Human Services, Office of Adolescent Health, to expand evidence on effective ways to prevent and reduce pregnancy and related sexual risk behaviors for teens in the United States. We use data from a rigorous random assignment evaluation involving nearly 600 low-income adolescent mothers to look at program impacts on sexual risk behaviors and other short-term outcomes, measured six months after they enrolled. A future report will examine longer-term impacts on repeat pregnancy and sexual risk behaviors at the end of the program.

For more information, contact Brian Goesling, project director and associate director of Human Services Research, 609-945-3355.

Follow us on:   

Mathematica® is a registered trademark of Mathematica Policy Research, Inc.



Scan this QR code to visit our website.