

No Time for COMPLACENCY TEEN BIRTHS IN CALIFORNIA

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The good news is that the teen birth rate in every one of California's forty State Senate Districts has declined since the last *No Time for Complacency* report in April, 2003. In some districts this decline has been substantial. The bad news is that in spite of these declines, rates remain high in most districts. And due to the State's growing teen population, the number of teen births each year and the costs to taxpayers and society have come down only slightly for the state as a whole, and for most senate districts. This update report examines progress and continuing challenges for the State of California and for individual senate districts.

THE PROBLEM

Despite recent improvements, California's teen birth rate is hardly exemplary. In 2004 more than 50,000 teens – four percent of all female teens aged 15 to 19 – gave birth in California, and many more became pregnant. In light of the taxpayer and societal costs associated with teen births, the State's teen birth rate of 39.7 per thousand remains unacceptably high. The tendency to use the national teen birth rate as the comparative norm might be encouraging policymakers and advocates to set California's goal short of a more ambitious reduction that reflects our true potential. Instead, it would be more inspiring to compare California's teen birth rate to other industrialized societies. In doing so we see that teen birth rates for both the U.S. and California are dramatically higher than those for every other industrialized nation in the world. In fact, California's teen birth rate is from 4 to 10 times higher than rates for France, Spain, Italy, the Netherlands, and Japan.



IMPACT ON TEEN MOTHERS AND FAMILIES

Because teens who give birth tend to have preexisting disadvantages compared to those who do not, the perceived consequences of teen births have been subject to considerable debate and some exaggeration. Nevertheless, most experts agree that credible research evidence has demonstrated clear negative consequences of teen childbearing in several areas. For example, adolescent women who become mothers tend to exhibit poorer psychological functioning, lower levels of educational attainment, more single parenthood, and less stable employment than those with similar backgrounds who postpone childbirth. Relative to older mothers, teen mothers tend to experience slightly more pregnancy-related problems and have less healthy infants. Of all age groups, pregnant teens are most likely to smoke during pregnancy—and exposure to environmental tobacco smoke directly increases an infant’s risk of bronchitis, asthma, pneumonia, reduced lung capacity, Sudden Infant Death Syndrome (SIDS), and middle ear disease and infections. Preschool children of teen mothers tend to show some delay of cognitive development as well as more behavioral problems and more aggressive behavior than children of older mothers, while adolescent children of teen mothers experience higher rates of grade failure, delinquency, and early sexual activity. Children of teen mothers also are more likely to experience abuse and neglect and more likely to be placed in foster care. Fathers to children of teen mothers tend to achieve less education and lower earnings over time than do their non-parenting peers, most likely due to the early focus on working at the expense of education. (For references and a more detailed discussion of these issues, see the 2003 *No Time for Complacency* full report at <http://teenbirths.phi.org/TeenBirthsFullReport.pdf>.)

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ECONOMIC IMPACT ON SOCIETY

In addition to the personal challenges and lost opportunities faced by teen mothers and their children, the substantial economic costs to society associated with teen births cannot be ignored.

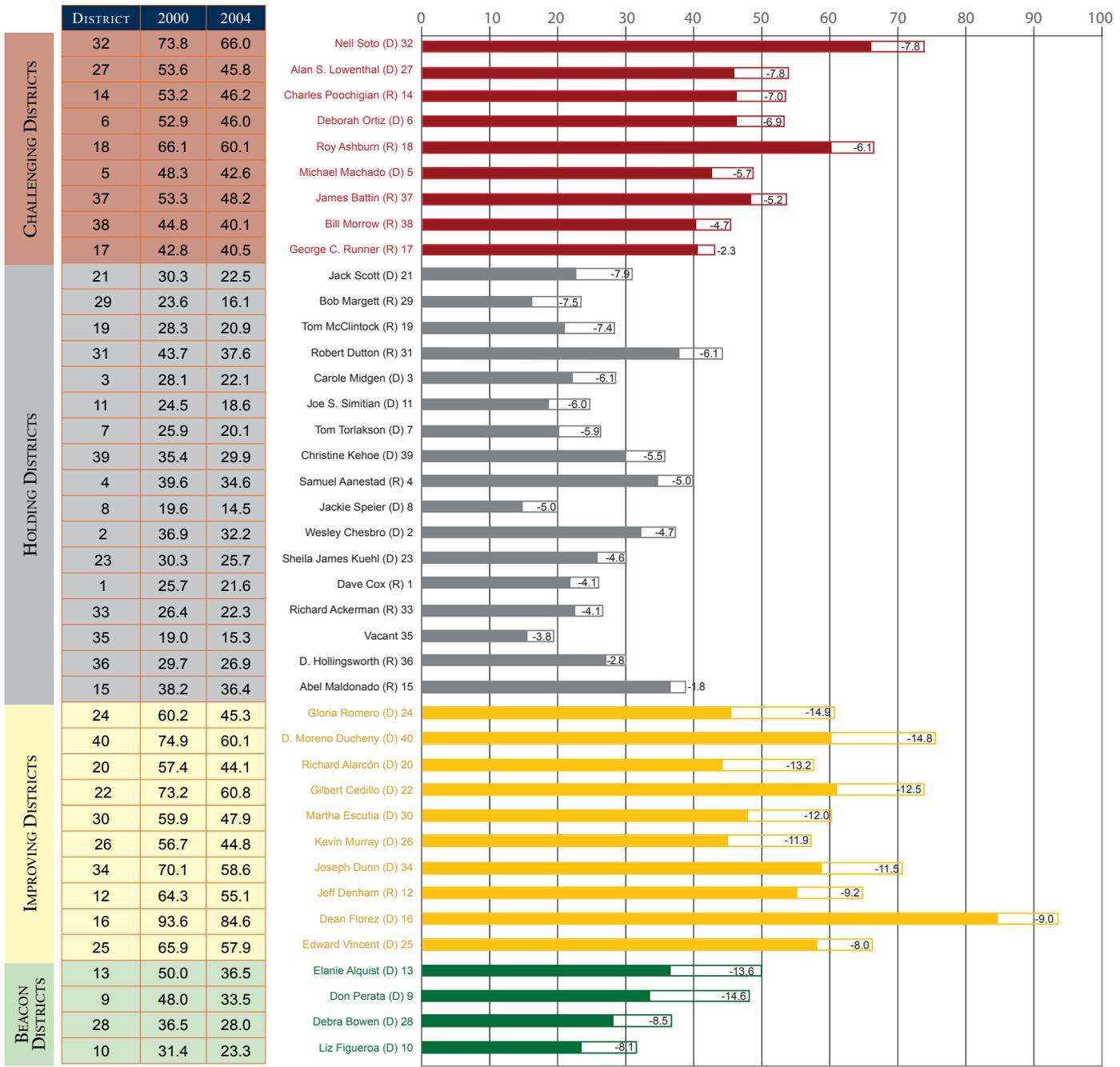
A rigorous and comprehensive series of cost analyses on teen pregnancy and parenting was conducted by a group of nationally prominent researchers from the fields of economics, demographics, family policy, and health policy, led by Rebecca Maynard. Integrating the studies conducted by these researchers, Maynard employed conservative assumptions and estimated net cost per teen birth. The most directly attributable costs were used, including lost tax revenue based on mother’s and father’s lower incomes and consumption, public assistance costs (welfare and medical assistance), costs for increased foster placement and incarceration of children, and tax revenue losses based on children’s incomes and consumption when they reach young adulthood. These were adjusted for estimated costs in the same categories had the teen mother delayed her birth until after age 20. In addition to taxpayer costs, Maynard estimated total costs to society, which also included estimated losses in earnings of the teen mothers, fathers, and children when they reached young adulthood, as well as privately paid medical costs.

Applying these rigorous cost estimates to California, after adjusting for inflation and teen mothers’ ages, yields an age-weighted average annual cost in year 2004 dollars to taxpayers for each teen birth of \$2,336, and average annual costs to society of \$5,211. Based on number of teen births in 2004 applied across 13 yearly cohorts of teen births in the pipeline, as per Maynard’s methodology, this yields an annual total net cost to taxpayers of \$1.5 billion and an annual total net cost to society of \$3.4 billion. (For references and a more detailed discussion of this methodology, see the 2003 *No Time for Complacency* full report at <http://teenbirths.phi.org/TeenBirthsFullReport.pdf>.)

DISTRICT	SENATOR	COUNTIES	TEEN BIRTHS	TEEN BIRTH RATE (PER 1000)	TEEN BIRTH RATE RANK	EST'D ANNUAL TAXPAYER COSTS	EST'D ANNUAL SOCIETAL COSTS
1	Dave Cox (R)	Alpine, Amador, Calaveras, El Dorado, etc.	671	21.6	34	\$20,000,000.00	\$45,000,000.00
2	Wesley Chesbro (D)	Humboldt, Lake, Mendocino, Napa, etc.	985	32.2	25	\$30,000,000.00	\$67,000,000.00
3	Carole Midgen (D)	Marin, San Francisco, Sonoma	446	22.1	33	\$14,000,000.00	\$30,000,000.00
4	Samuel Aanestad (R)	Butte, Colusa, Del Norte, Glenn, etc.	1,222	34.6	23	\$37,000,000.00	\$83,000,000.00
5	Michael Machado (D)	Sacramento, San Joaquin, Solano, Yolo	1,551	42.6	17	\$47,000,000.00	\$105,000,000.00
6	Deborah Ortiz (D)	Sacramento	1,534	46.0	12	\$47,000,000.00	\$104,000,000.00
7	Tom Torlakson (D)	Contra Costa	583	20.1	36	\$18,000,000.00	\$39,000,000.00
8	Jackie Speier (D)	San Francisco, San Mateo	320	14.5	40	\$10,000,000.00	\$22,000,000.00
9	Don Perata (D)	Alameda, Contra Costa	882	33.5	24	\$27,000,000.00	\$60,000,000.00
10	Liz Figueroa (D)	Alameda, Santa Clara	635	23.3	30	\$19,000,000.00	\$43,000,000.00
11	Joe S. Simitian (D)	San Mateo, Santa Clara, Santa Cruz	498	18.6	37	\$15,000,000.00	\$34,000,000.00
12	Jeff Denham (R)	Madera, Merced, Monterey, San Benito, etc.	2,130	55.1	8	\$65,000,000.00	\$144,000,000.00
13	Elanie Alquist (D)	Santa Clara	984	36.5	21	\$30,000,000.00	\$67,000,000.00
14	Charles Poochigian (R)	Fresno, Madera, Mariposa, San Joaquin, etc.	1,618	46.2	11	\$49,000,000.00	\$110,000,000.00
15	Abel Maldonado (R)	Monterey, S. Luis Obispo, Santa Barbara, etc.	1,080	36.4	22	\$33,000,000.00	\$73,000,000.00
16	Dean Florez (D)	Fresno, Kern, Kings, Tulare	3,235	84.6	1	\$98,000,000.00	\$219,000,000.00
17	George C. Runner (R)	Los Angeles, San Bernardino, Ventura	1,374	40.5	18	\$42,000,000.00	\$93,000,000.00
18	Roy Ashburn (R)	Inyo, Kern, San Bernardino, Tulare	2,126	60.1	5	\$65,000,000.00	\$144,000,000.00
19	Tom McClintock (R)	Los Angeles, Santa Barbara, Ventura	664	20.9	35	\$20,000,000.00	\$45,000,000.00
20	Richard Alarcón (D)	Los Angeles	1,425	44.1	16	\$43,000,000.00	\$97,000,000.00
21	Jack Scott (D)	Los Angeles	584	22.5	31	\$18,000,000.00	\$40,000,000.00
22	Gilbert Cedillo (D)	Los Angeles	1,928	60.8	3	\$59,000,000.00	\$131,000,000.00
23	Sheila James Kuehl (D)	Los Angeles, Ventura	613	25.7	29	\$19,000,000.00	\$42,000,000.00
24	Gloria Romero (D)	Los Angeles	1,578	45.3	14	\$48,000,000.00	\$110,000,000.00
25	Edward Vincent (D)	Los Angeles	1,929	57.9	7	\$59,000,000.00	\$131,000,000.00
26	Kevin Murray (D)	Los Angeles	1,351	44.8	15	\$41,000,000.00	\$92,000,000.00
27	Alan S. Lowenthal (D)	Los Angeles	1,464	45.8	13	\$44,000,000.00	\$99,000,000.00
28	Debra Bowen (D)	Los Angeles	685	28.0	27	\$21,000,000.00	\$46,000,000.00
29	Bob Margett (R)	Los Angeles, Orange, San Bernardino	547	16.1	38	\$17,000,000.00	\$37,000,000.00
30	Martha Escutia (D)	Los Angeles	1,689	47.9	10	\$51,000,000.00	\$110,000,000.00
31	Robert Dutton (R)	Riverside, San Bernardino	1,439	37.6	20	\$44,000,000.00	\$97,000,000.00
32	Nell Soto (D)	Los Angeles, San Bernardino	2,592	66.0	2	\$79,000,000.00	\$176,000,000.00
33	Richard Ackerman (R)	Orange	603	22.3	32	\$18,000,000.00	\$41,000,000.00
34	Joseph Dunn (D)	Orange	1,837	58.6	6	\$56,000,000.00	\$124,000,000.00
35	Vacant	Orange	398	15.3	39	\$12,000,000.00	\$27,000,000.00
36	D. Hollingsworth (R)	Riverside, San Diego	872	26.9	28	\$26,000,000.00	\$59,000,000.00
37	James Battin (R)	Riverside	1,677	48.2	9	\$51,000,000.00	\$114,000,000.00
38	Bill Morrow (R)	Orange, San Diego	1,134	40.1	19	\$34,000,000.00	\$77,000,000.00
39	Christine Kehoe (D)	San Diego	833	29.9	26	\$25,000,000.00	\$56,000,000.00
40	D. Moreno Ducheny (D)	Imperial, Riverside, San Diego	2,204	60.1	4	\$67,000,000.00	\$149,000,000.00
STATEWIDE TOTAL			50,433	39.7		\$1,532,000,000	\$3,417,000,000

TABLE. SENATE DISTRICT TEEN BIRTHS, BIRTH RATES, RANKS, AND ESTIMATED ANNUAL COSTS, YEAR 2004

IMPROVEMENTS IN TEEN BIRTH RATES BY SENATE DISTRICT



CHALLENGING DISTRICTS: <i>(teen birth rates greater than state average, declines less than state average)</i>	HOLDING DISTRICTS: <i>(teen birth rates lower than state average, declines less than state average)</i>	IMPROVING DISTRICTS: <i>(teen birth rates greater than state average, declines greater than state average)</i>	BEACON DISTRICTS: <i>(teen birth rates lower than state average, declines greater than state average)</i>
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SENATE DISTRICT ANALYSIS

As in the 2003 *No Time for Complacency* report, we analyzed teen birth rates by California State Senate District, this time employing year 2004 rather than year 2000 data¹. This analysis helps address the question of whether the problem is limited to a few geographical or political areas, or is more widespread.

The Table provides teen births, birth rates, birth rate ranks, and estimated costs for each of California's forty State Senate Districts for 2004. Across all districts, teen birth rates ranged from a high of 84.6 (in the 16th District) to a low of 14.5 (in the 8th District). Of the forty districts, 19 had teen birth rates higher than the overall California teen birth rate of 39.7. While most regions of the state include high teen birth rate districts, these high-rate districts are most frequently found in Los Angeles County (Districts 20, 22, 24, 25, 26, 27, 30, and 32), the Central Valley (Districts 12, 14, 16, and 18), and the Imperial Valley (District 40). Estimated annual taxpayer

costs ranged from \$10 million (District 8) to \$98 million (District 16), with total costs to society more than twice as high as taxpayer costs in each district.

We now have the opportunity to also compare the four-year changes in teen birth rates between 2000 and 2004. Overall, the State's teen birth rate has declined from 47.7 per 1,000 in 2000 to 39.7 per 1,000 in 2004—a substantial decrease of 8 percentage points. Individual senate district decreases ranged from the largest decrease of 14.9 percentage points in District 24, to the smallest decrease of 1.8 percentage points in District 15.

To compare districts based on a combination of their 2004 teen birthrate and their progress during the last four years, we designated four categories of districts as presented in the Figure. Four districts have been classified as **Beacon Districts** (represented in green), having teen birth rates lower than the state average, together with four-year improvements greater than the state average. **Improving Districts** (represented in yellow) are those ten districts with teen birth rates greater than the state average, and with improvements greater than the state as a whole. Most of these districts have had substantial improvements since 2000. Seventeen districts are designated as **Holding Districts** (represented in grey), having teen birth rates lower than the state average, with declines also less than the state average. Finally, the nine **Challenging Districts** are those with greater-than-average teen birth rates combined with less-than-average improvements. While all 40 districts need improvement, these nine Challenging Districts, together with the three Improving Districts (Districts 16, 22, and 40) that still have rates above 60 teen births per 1,000, are especially ripe for further local action.

While the overall picture clearly has been improving, much more remains to be done—for the state as a whole and within every one of California's forty

State Senate Districts. This can be seen by comparing these district-level results to other developed nations, showing that every one of California's districts had higher teen birth rates than, for example, Japan (3.9), the Netherlands (5.8), Italy (6.9), France (10.0), and Germany (13.2).

These comparisons illustrate the opportunity for improvement across the entire state and in all types of communities and locations, as well as the special need in high-rate areas. The comparisons demonstrate the

need for a holistic approach that starts at the impacted community level and percolates up to the state and national level.

Another useful comparison is to examine the differences between racial/ethnic groups within California, and for the U.S. as a whole. The most recent federally compiled race-specific data that are available by state are for 1999. As illustrated in the original 2003 No Time for Complacency report:

- in California the Latina teen birth rate was more than three times higher than the White non-Latina and Asian/Pacific Islander rates;
- in California the African-American teen birth rate was more than two times higher than the White non-Latina rate and Asian/Pacific Islander rates; and
- although U.S. teen birth rates were higher than the California rates within every racial/ethnic group, the same relative pattern held nationally: the Latina rate was highest, followed by African-American, White non-Latina, and Asian/Pacific Islander, with approximately the same relative proportions across groups.

THE SOLUTION

It would be naive to assume that there is any single solution to resolve the complex issue of teen childbearing. Nevertheless, there can be little doubt that California's unprecedented investment in teen pregnancy prevention has contributed to its achievement over the last decade of the largest decline in teen birth rates of all fifty states.

During the past decade, California has been the national leader in focusing on and investing in research-based policies and programs for positive adolescent development and teen pregnancy prevention. This leadership spans the administrations of three governors across both political parties. California's leadership is evidenced in several areas: (1) refusal to participate in the federal abstinence-only education program; (2) state-funded reproductive health programs administered by the California Department of Health Services; (3) state-funded teen pregnancy prevention programs administered by the California Department of Health Services, the California Department of Social Services, and the California Department of Education, and (4) program and policy grant initiatives funded by philanthropic foundations in California, led by The California Wellness Foundation.

The cost of these investments have not been small—the estimated combined total for state-funded or administered programs and services focused directly on primary or secondary teen pregnancy prevention during the 2005-2006 budget year is more than \$209 million (See Policy Review for details). Yet had California continued to experience its alarming teen birth rate of 66 per 1,000 from ten years ago—the teen birth rate that the State of Texas still

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experiences today—we would have had an additional 32,567 teen births in 2004. Translated into cost savings, our success represents an annual savings to California taxpayers of \$988 million, and a total annual savings to society of \$2.2 billion.

To build on California's success—to maintain our progress, to accommodate new challenges, and most ambitiously and importantly, to expand on these levels of success by further decreasing teen birth rates—requires courage, wisdom, and persistence. This is especially so in a time of limited state funds and increasing drift of federal support away from effective research-based strategies. Yet the enormous need, and tremendous expected return on investment, is abundantly clear from our experiences of the last decade.

Coupled with the reality that demographic changes and poverty rates are combining in ways that further threaten our ongoing progress, it is essential that California support existing strategies with strong track records and investigate additional ways to move its teen birth rate to meet its potential, as modeled by other industrialized societies.

KEY RECOMMENDATIONS

All levels of government are faced with unprecedented challenges that force them to examine their priorities. At this time, the prevention of births to teen mothers is more important than ever. Investments in this area are productive for their immediate payoff in terms of decreased health and welfare costs, as well as their contribution to the stability of the social fabric and to California's economic future. In this light, the Public Health Institute and its Center for Research on Adolescent Health and Development provide the following recommendations in the areas of leadership, programs, educational policy, and schools and communities.

CALIFORNIA LEADERSHIP

- Elected officials initiate or continue community dialogues by bringing together parents, adolescents, and other school and community stakeholders to address the issue of high teen birth rates, especially where these rates are substantially higher than rates in other areas of the state.

CALIFORNIA PROGRAMS

- At a minimum, maintain all program services funding aimed at reducing teen pregnancies and births, with annual adjustments for inflation.
- Require all state-funded or administered programs, whether school- or community-based, to comply with the provisions of SB 71, the California Comprehensive Sexuality and HIV/AIDS Prevention Act of 2003, to provide comprehensive, age-appropriate, and medically accurate information.

- Continue to fund effective school- and community-based programs that provide education, outreach, and services to support teens in delaying childbearing.
- Continue to decline participation in and contribution of matching funds for the federal abstinence-only-until-marriage education program.

CALIFORNIA EDUCATIONAL POLICY

- Provide for education on and enforcement of SB 71, the California Comprehensive Sexuality and HIV/AIDS Prevention Act of 2003, in terms of comprehensive, age-appropriate, and medically accurate information in school-based sexuality education.
- Begin discussion and development of a legislative mandate for California public middle schools, high schools, and alternative schools to teach research-based comprehensive sexuality education.
- Support reliable and complete confidential school-based survey research that will elicit scientific understanding of teen health risk behaviors, including sexual risk behaviors.

CALIFORNIA SCHOOLS AND COMMUNITIES

- Provide multi-level comprehensive sexuality education and youth development programs, with school, parent, youth, and community components working in synergy.
- Review and monitor school policies and curricula to assess compliance with SB 71, the California Comprehensive Sexuality and HIV/AIDS Prevention Act of 2003, and bring these policies and curricula into compliance as necessary.

¹ Analysis methods were described in detail in Appendix C of the 2003 *No Time for Complacency* full report. The same methods were employed for the current analyses, except that a more powerful matching procedure was used to allocate zip-code-level birth date to Senate Districts. As a result, the percent of unclassified births was reduced from 9% to 1.5%. For comparison purposes, this new matching procedure was also applied to the 2000 data, and these results used in the calculation of district improvements between 2000 and 2004.



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