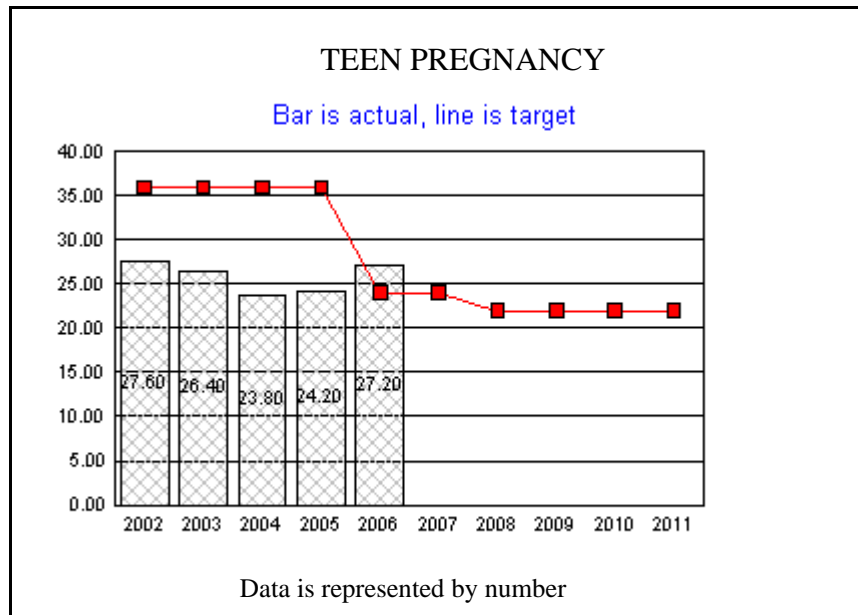


KPM #8	TEEN PREGNANCY – The number of female Oregonians ages 15 – 17, per 1,000 who are pregnant.	2000
Goal	Self-Sufficient – People are able to support themselves and their families.	
Oregon Context	This performance measure links to the DHS goal, “People are able to support themselves and their families.” This measure also links to Oregon Benchmark #39 and the DHS high-level outcome, “Pregnancy rate per 1,000 females ages 15-17.”	
Data Source	DHS Health Services and PSU Center for Population and Census estimates....Based on births and induced terminations and population estimates provided by the Center for Population and Census.	
Owner	Children, Adults and Families Division, Belit Stockfleth (503) 947-5389	



1. OUR STRATEGY

The Governor approved a proposal for a new permanent, statewide Teen Pregnancy Prevention and Adolescent Sexual Health Partnership (TPP/SHP) to create a new strategic action plan for Oregon. The partnership includes the following:

- DHS/Children, Adults and Families Division (CAF)
- Commission on Children and Families
- Oregon Teen Pregnancy Task Force
- DHS/Office of Family Health
- Planned Parenthood Health Services of SW Oregon
- DHS/HIV Program
- Multnomah County Health Department, Adolescent Health Promotion
- Jackson County Health and Human Services
- Benton County Health Department
- Oregon Department of Education

2. ABOUT THE TARGETS

Teen pregnancy is still a major problem. Continuing to reduce the rate of teen pregnancy is a good investment. Oregon uses the 15-17 year-old category for its teen pregnancy KPM. This age group of females is usually still in high school and is targeted for intervention and education programs along with their male peers.

The number of pregnancies and population is small in many counties in Oregon. An aggregate rate was calculated for the 5 year period from 1998 to 2002. Five years of pregnancies were divided by 5 years of population data. This allowed for stabilization of rates in smaller counties. Aggregation allowed analysis of the smaller population areas of the state using rates and average number of pregnancies.

3. HOW WE ARE DOING

The State's teen pregnancy rate has consistently been lower than the national rate and the State has made great progress in reducing it even further over the past decade. Among 15-17 year-olds in Oregon, the pregnancy rate rose from 24.2 in 2005 to 27.2 in 2006.

4. HOW WE COMPARE

The most recent national teen pregnancy information available is for 2002, this is due to the delay in the reporting from states across the country. The national teen pregnancy rate was 42.3 for 2002 and the Oregon teen pregnancy rate for 2002 was 27.6.

5. FACTORS AFFECTING RESULTS

When dealing with teen pregnancy and prevention we will always be working with data that is at least 1 year behind. The factors affecting teen pregnancy that need to be addressed are not factors that can be changed quickly, because the factors that contribute to change in pregnancy trends are human behaviors - behavior changes that contribute to adolescents making healthy choices about sexuality.

6. WHAT NEEDS TO BE DONE

We will continue to use new and existing data that examine our statistics, trends, demographics and behavioral factors related to adolescent sexual health.

We have learned that successful strategies to reduce teen pregnancy must:

- Be long-term
- Be comprehensive
- Reach young people before they are sexually active and continue after they begin sexual activity
- Consider underlying risks and contributing factors, such as poverty and sexual abuse
- Utilize culturally sensitive approaches

7. ABOUT THE DATA

Reporting cycle - calendar year. The data are generally 1 ½ to 2 years behind. The data, which are collected locally and out-of-state, cannot be pulled until the end of the full year. The data used here reflects the prevalence of pregnancy among teens aged 15-17.

Oregon data for 2006 is located here <http://www.dhs.state.or.us/dhs/ph/chs/data/arpt/06v1/section4.shtml>

National pregnancy data is found at <http://www.guttmacher.org/pubs/2006/09/12/USTPstats.pdf>