SECTION 4: TEEN PREGNANCY

Teen Pregnancy

Introduction

In 2009, 5,738 pregnancies occurred among Oregon females under the age of 20. Seventy-two pregnancies occurred among females under age 15. Thirty-nine girls aged 10 to 14 gave birth during 2009, one more than the previous year. (See Table 4-2.) The youngest female to give birth was 13 and the youngest female to obtain an abortion was also 13.

Due to differences in risk and severity of outcomes, this report bases its analysis on two separate age groups to aid in understanding teen pregnancy trends, females aged 15 to 17 and females aged 18 to 19. These two groups are compared to each other and to women aged 20 and older. The number of pregnancies is determined by adding the numbers of births and abortions reported for Oregon residents. Because some neighboring states (e.g., California) do not exchange abortion reports with Oregon, those who obtain an out-of-state abortion are not always included in this count. (See Appendix B.)

Oregon females 15 to 17

Efforts to prevent teen pregnancies focus primarily on females aged 15 to 17. During 2009, 1,696 pregnancies were

Figure 4-1. Teen Pregnancy Rates, Oregon Residents Age 15-17, 1985-2009 60 Pregnancy Rate Rate per 1,000 Females 15-17 Oregon Benchmark 1987 1989 1991 1993 1995 1997 2001 2003 2005 2007 Year

Pregnancy rates for Oregonians ages 15 to 17 decreased by 12.5% from 2008.

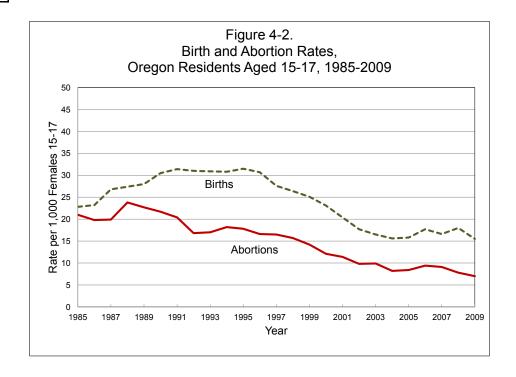
Table 4-A. Oregon Benchmark Teen Pregnancy Rates 15-17			
Year Rate			
1980	59.3		
1981	56.8		
1982	49.5		
1983	45.5		
1984	45.6		
1985	43.8		
1986	43.1		
1987	46.7		
1988	51.2		
1989	50.8		
1990	52.2		
1991	51.8		
1992	47.8		
1993	47.9		
1994	49.0		
1995	49.3		
1996	47.3		
1997	44.2		
1998	42.1		
1999	39.3		
2000	35.2		
2001	31.7		
2002	27.6		
2003	26.4		
2004	23.8		
2005	24.2		
2006	27.2		
2007	25.7		
2008	25.7		
2009	22.5		
Pregnancy rate per	1 000 Oregon		

Pregnancy rate per 1,000 Oregon resident females ages 15-17.

recorded for Oregon females aged 15 to 17, 235 less than in 2008. (See Table 4-1.) In 2009, the statewide pregnancy rate among women aged 15 to 17 decreased 12.5 percent from 25.7 in 2008 to a current low of 22.5. (See Table 4-1.) Historically, the teen pregnancy rate has trended downward and the 2009 rate is 42.7 percent lower than it was in 1999. Pregnancy rates for teens aged 15 to 17 varied by county. Ten counties had rates significantly different than the state rate. (See Table 4-3.) The 2009 rate for teens 15–17 was 2.3 percent above the Oregon Benchmark goal for the year 2010 of 22 pregnancies per 1,000 females. (See Figure 4-1, page 4-1.)

Births to teens 15 to 17

There were 1,169 births to Oregon teens aged 15 to 17 in 2009. More than 68 percent of the pregnancies among teens aged 15 to 17 resulted in a live birth, compared to 46 percent in 1980. (Table 4-1.) It was the mother's first child in 92.9 percent of these births. (See Table 4-9.) The birth rate for females aged 15 to 17 was 15.5 per 1,000 females, a decrease of 13.7 percent from the previous year. Of these, 84.7 percent had neither completed high school nor obtained a general equivalency diploma (GED). Among those who took their pregnancies to term, 93.8 percent were unmarried at the time of birth. (See Table 4-10.)

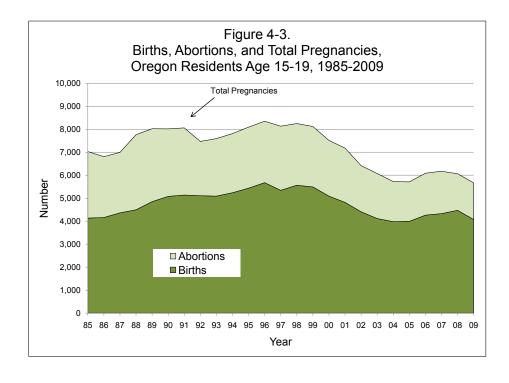


Abortion rates among teens 15 to 17

Abortion rates among teens decreased 9.8 percent from 2008. For females aged 15 to 17, the abortion rate was historically low in 2009 at 7.0 per 1,000. (See Table 4-5, Figure 4-2.) There were 527 abortions among Oregon females aged 15 to 17 reported during 2009, 55 fewer abortions than in 2008. Since the record high abortion rate recorded in 1980, the rate for females aged 15 to 17 has decreased by more than 78 percent (from 31.9 to 7.0 per 1,000 females).

Figures 4-3 and 4-4 present historical pregnancy outcomes (birth and abortion). As Figure 4-4 indicates, a higher percentage of teen pregnancies were carried to term in recent years than in 1985. Since 1985, the younger the teen, the higher the percentage of terminated pregnancies. However, even among teens under 15, 54.2 percent of the pregnancies resulted in a live birth in 2009. (See Table 4-2, Figure 4-4.)

Abortion rates for teens age 15 to 17 decreased 10.3% from 2008

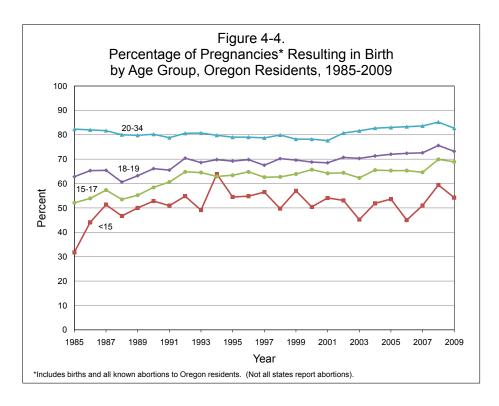


Birth rates for teens age 18 to 19 decreased by 7.2% from 2008

Oregon females 18 to 19

In 2009, the pregnancy rate for Oregonians aged 18 to 19 was 79.3 per 1,000 females, a 4.0 percent decrease from 2008. Comparisons with the 2008 figures show a decrease in the birth rate (7.1 %), while the abortion rate increased 5.6 percent among women aged 18 to 19. (See Table 4-1.)

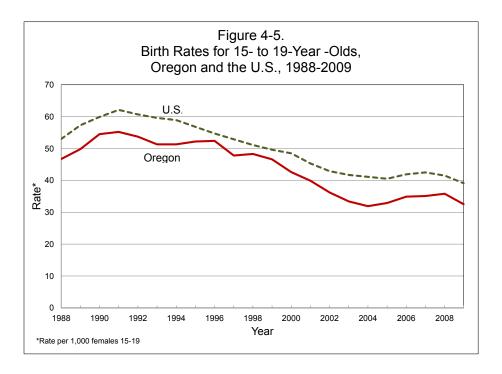
Of the 3,970 pregnancies among women aged 18 to 19, 73.2 percent (2,905) resulted in a live birth. (See Figure 4-4.) It was the first child for 80.0 percent of this group.



Oregon vs. U.S. birth rates

In Oregon, the birth rate among 15- to 19-year-olds (commonly used in historical and national comparisons) decreased 9.2 percent in 2009 (32.5 vs. 35.8 per 1,000 females in 2008). (See Table 4-1.) The 2009 rate was 41.1 percent lower than the 1991 rate of 55.2 per 1,000, which is the highest rate recorded during the past quarter century. (See Figure 4-5.)

Oregon's 2009 birth rate for 15- to 19-year-old teens was Table 4-B. Teen Birth Rates 16.9 percent below the national rate (32.5 vs. 39.1 per 1,000 U.S Oregon Age 2009 2008 2009 females; see sidebar 4-B). Oregon's lower teen birth rate may 15-17 15.5 18.0 20.1 18-19 58.0 62.5 66.2 be attributable to the state's demographic characteristics. 15-19 35.8 39.1 Historically, African American and Hispanic populations All rates per 1,000 females



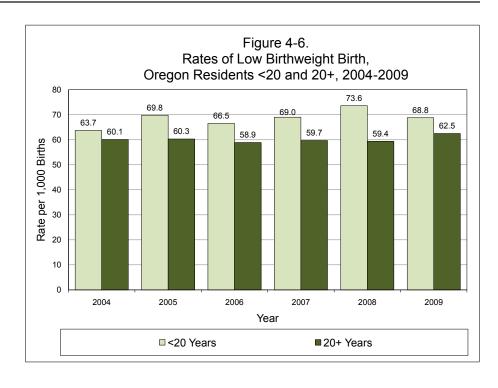
have had higher teen birth rates. Oregon's diversity is increasing. Between the 1990 and the 2000 census, the proportion of Hispanic residents doubled from 4 percent to 8 percent while the proportion of racial minorities was relatively unchanged. Nevertheless, during this period, Oregon's teen pregnancy rate for 15- to 19-year-olds fell from 86.0 per 1,000 females in 1990 to 45.2 in 2009, a 47.4 percent decrease. (See Table 4-1.) (For further discussion of Oregon's demographic characteristics and teen pregnancy rates, see the Methodology section of Appendix B.)

Level of infant health

Low birthweight

The best single measure of newborn infant health is low birthweight rate, which is defined as less than 2,500 grams or 5.5 pounds. Low birthweight is closely related to premature delivery and small size for gestational age. Changes in the low birthweight rate for a group might indicate aggregate changes in the mother's personal behavior during pregnancy or it could indicate other conditions that affect fetal health such as nutrition or access to prenatal care.

In 2009, the low birthweight rate for teen mothers aged 15–19 was 67.7 per 1,000 births (Table 4-7), an 8.3 percent decrease from 2008. For 15- to 17-year-olds, the rate (68.4 per 1,000) decreased by 16.9 percent. The teen rate for



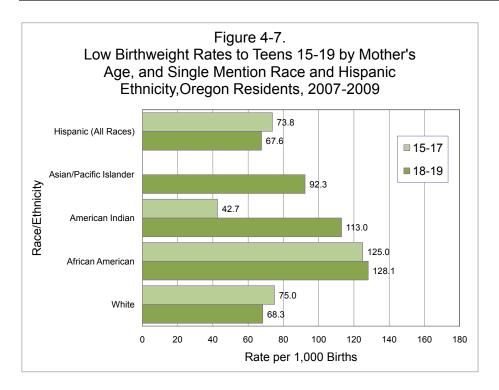
low birthweight remained higher than for mothers aged 20 and older (62.5 per 1,000). (See Table 2-29.) However, the difference in the low birthweight rates between teen and older mothers has decreased since 2008. (See Figure 4-6.)

Race and ethnicity

Demographic factors such as race, ethnicity and marital status combine with age to influence the likelihood a teenager will receive early prenatal care. In 2009 for example, 46.2 percent of unmarried Hispanics aged 15–17 started prenatal care during their first trimester, compared to 54.9 percent of married non-Hispanic White women aged 18-19. (See Table 4-7.)

Low birthweight rates among teen mothers by racial/ethnic grouping are displayed in the sidebar and in Table 4-7. Between 2008 and 2009, the rate of low birthweight infants for Hispanic teens aged 15–17 decreased by 16.7 percent. The low birthweight rate for Hispanic teens aged 18-19 during this same period increased by 5.9 percent. Among non-Hispanic, non-white groups, the low birthweight rate for teens aged 15–17 decreased by 42.0 percent, while the rate for 18- to 19-year-olds decreased by 12.3 percent. (See sidebar 4-C.)

Table 4-C. Low Birthweight Rates ¹ by Race/ Ethnicity and Age, 2009				
Dago/Ethnicity	Age			
Race/Ethnicity	15-17	18-19		
F	Rates			
Non-Hispanic White	70.6	64.7		
Hispanic	62.5	69.8		
(All Races)				
Non-Hispanic, Non-white	66.9	72.6		
Percent Chan	ge, 2009 vs. 2	2008		
Non-Hispanic White	-12.3	0.2		
Hispanic	-16.7	5.9		
(All Races)				
Non-Hispanic, Non-white	-42.0	-12.3		



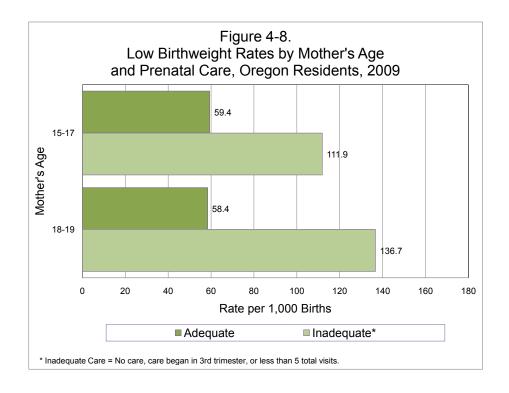
Prenatal care

Table 4-6 shows the association between inadequate prenatal care and frequency of low birthweight infants for teens who gave birth in 2009. Among mothers aged 15–19, those who received inadequate prenatal care had a greater number of low birthweight babies than those who had received adequate care (128.7 vs. 58.7 per 1,000 live births). Figure 4-8 shows low birthweight rates per 1,000 live births by adequate and inadequate prenatal care. For mothers 15–17, the rates were 59.4 vs. 111.9; for mothers 18–19, the rates were 58.4 vs.136.7.

Early prenatal care

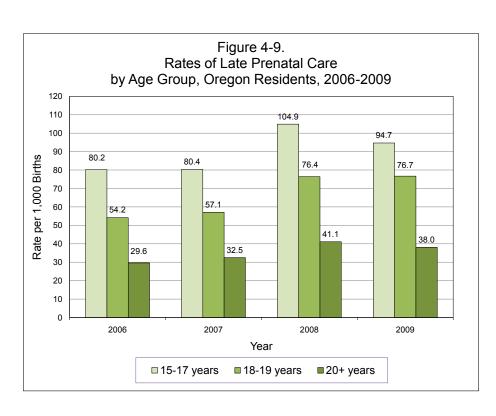
Prenatal care should begin within the first three months of pregnancy to allow early detection of complications and to ensure the health of both mother and infant. An Oregon Benchmark goal is 90 percent of pregnant women, regardless of age, will begin medical care during the first trimester of pregnancy by the year 2010. Teens are further from this goal than any other age group. In 2009, only 53.5 percent of teen mothers started prenatal care during the first trimester, compared to 72.9 percent for women aged 20 and older (see sidebar 4-D). Only 49.9 percent of those 15 to 17 received first trimester prenatal care, an increase from 45.2 percent in 2008. (See Table 4-10.)

Table 4-D. Oregon Benchmark: First Trimester Prenatal Care, 2009			
Year 2010 Goal: 90%			
All Women	71.2		
All Teens	53.5		
15-17 Years	49.9		
18-19 Years	55.4		
20+ Years	72.9		



Inadequate prenatal care

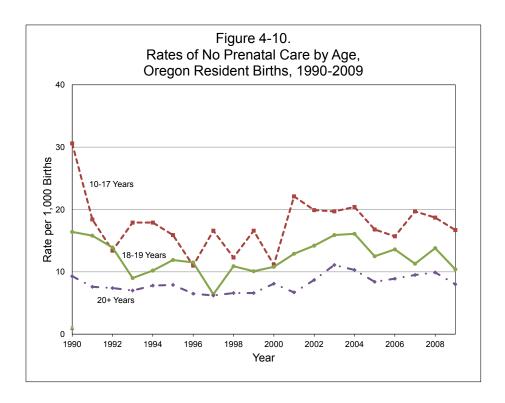
Inadequate prenatal care is defined as no prenatal care, care beginning after the second trimester of pregnancy or involving fewer than five prenatal visits. By this measure, 12.4 percent of 15- to 17-year-old teens and 10.5 percent of 18- to 19-year-old teens received inadequate prenatal care in 2009. This compares with



5.7 percent of women aged 20 or older who received inadequate care. (See Table 4-10.) The proportion of women under age 20 who received inadequate prenatal care decreased by 10.4 percent in 2009, from 12.5 percent in 2008 to 11.2 percent.

Late care and no prenatal care

From 2008 to 2009, the proportion of teens aged 15–17 who began prenatal care during the third trimester decreased 9.7 percent to 94.7 per 1,000 live births. (See Figure 4-9.) In 2009, a higher percentage of teens under age 18 went through pregnancy without a single visit to a medical provider than did older women. (See Figure 4-10.) The rate of no prenatal care among teens 15–17 is 17.2 per 1,000 live births, more than twice the rate of women aged 20 and older (8.0 per 1,000 live births). (See Table 4-10.)



Low Apgar score

The Apgar score recorded by the birth attendant five minutes after birth provides another measure of infant health at the time of delivery. A score of less than 7 is considered low and indicates an infant at greater than normal risk for morbidity and mortality. In 2009, the low five-minute Apgar rate for newborns of mothers aged 15–17 was 35.2 per 1,000 births (Table 4-9), a 10.4 percent decrease from 2008 (39.3 per 1,000). The low five-minute Apgar rate for infants born to women under age 20 was 23.2 percent higher than the rate for infants born to women 20 years or older (33.4 compared to 27.1 per 1,000).

Substance use during pregnancy

Estimates of tobacco and alcohol use during pregnancy are presumed to be minimum counts due to underreporting on birth certificates. The legal age to purchase alcohol in Oregon is 21-years-old. The legal age to purchase tobacco products is 18. It is hoped that teen mothers are deterred by Oregon legal age limits placed on the purchase and/or possession of these substances.

Tobacco

The percentage of teens aged 15 to 19 who reported smoking during pregnancy in 2009 was nearly double the percentage reported by women aged 20 and older (18.0 % vs. 10.7 %). (See Table 4-9.) Women who smoked during pregnancy had a higher number of low birthweight babies than nonsmokers. Mothers aged 20 or older show the greatest difference between low birthweight rates by tobacco use (90.8 vs. 58.9 per 1,000 live births). This is due, in part, because the low birthweight rate for teen mothers is higher than for women aged 20 and older (see sidebar 4-E). Tobacco use remains one of the most important preventable causes of low birthweight infants for teen mothers.

Alcohol

Teens aged 15 to 19 were slightly less likely to report the use of alcohol during pregnancy as women aged 20 and older (5.0 per 1,000 births vs. 7.3 per 1,000 births).

Table 4-E. Low Birthweight Rates ¹ By Mother's Age and Smoking Status, Oregon, 2009				
	<20	20+		
Nonsmokers	66.3	58.9		
Smokers	82.5	90.8		
¹ All Rates per 1,000 births				

Source of payment

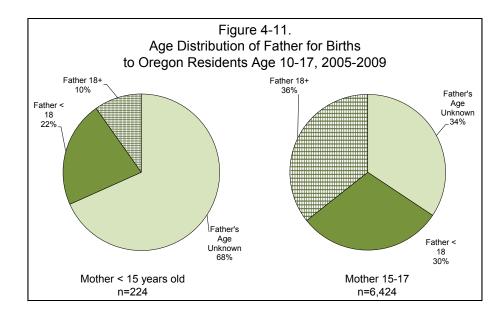
The percentage of teen mothers who utilized public funds to pay the costs associated with birth was nearly twice that of older mothers. In 2009, Medicaid/Oregon Health Plan paid for 74.7 percent of births to teens aged 15–19 and 42.3 percent of births to women aged 20 and older where payor source was reported. (See Table 4-10.)

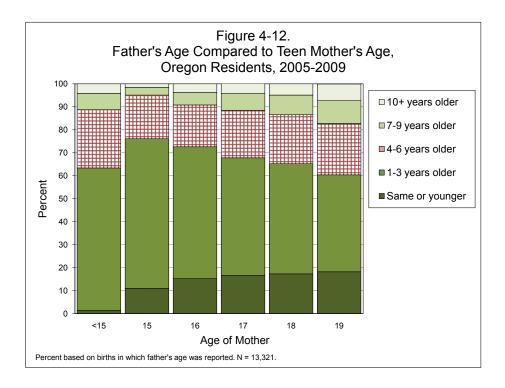
Medicaid/OHP paid for 74.7 percent of births to teens in 2009

Age of father

For the period 2005 to 2009, 34.3 percent of birth records for babies born to teens aged 15 to 17 did not indicate father's age or the father was not identified on the birth certificate. (See Figure 4-11, Table 4-13.) Almost three-quarters (68.3 %) of the birth records where the mother was under age 15 did not list the father's age. When the father's age was reported for teen mothers under age 15, 69.0 percent were younger than age 18 and 31.0 percent were aged 18 or older. Birth records for mothers aged 15 to 17 report father's age for 66.0 percent of births. Where the father's age was reported, 25.6 percent of fathers were under age 18 and 74.4 percent were aged 18 or older.

For all teens, including the youngest mothers (aged less than 15 years), the father was more than six years older than the mother in 14.4 percent of the births for the 2005–2009 period where the father's age was reported. The percentage of births to teen mothers where the father was more than six years older than the mother ranged from a low of 4.9





percent of births to 15-year-old mothers, to a high of 17.1 percent for 19-year-old teens. (See Figure 4-12.)

End note

1 Source: U.S. Census Bureau, Census 2000, Table DP-1.