
Teen Pregnancy

Introduction

In 2011, 4,391 pregnancies occurred among Oregon females under the age of 20. Forty-two pregnancies occurred among females under age 15. Twenty girls aged 10–14 gave birth during 2011, 7 fewer 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 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 15–17 and females aged 18–19. 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.)

Pregnancy rates for Oregonians ages 15 to 17 decreased by 8.1% from 2010.

Oregon females 15 to 17

Efforts to prevent teen pregnancies focus primarily on females aged 15–17. During 2011, 1,243 pregnancies were recorded for Oregon females aged 15–17, 163 fewer than

Figure 4-1.
Teen Pregnancy Rates,
Oregon Residents Age 15-17, 1985-2011

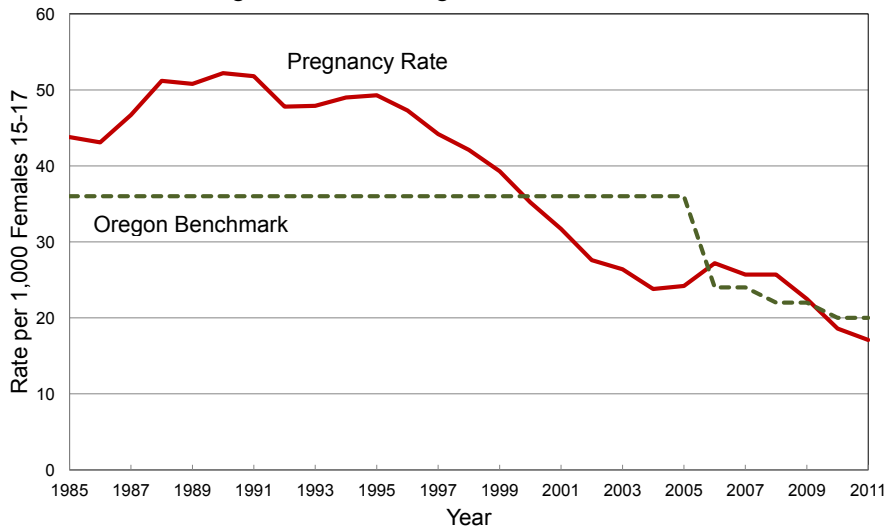


Table 4-A. Oregon Benchmark Teen Pregnancy Rates 15-17	
Year 2015 Goal: 18.0	
Year	Rate
1980	59.3
1985	43.8
1990	52.2
1991	51.8
1992	47.8
1993	47.9
1994	49.0
1995	49.3
1996	47.3
1997	44.2
1998	42.1
1999	39.3
2000	35.2
2001	31.7
2002	27.6
2003	26.4
2004	23.8
2005	24.2
2006	27.2
2007	25.7
2008	25.7
2009	22.5
2010	18.6
2011	17.1

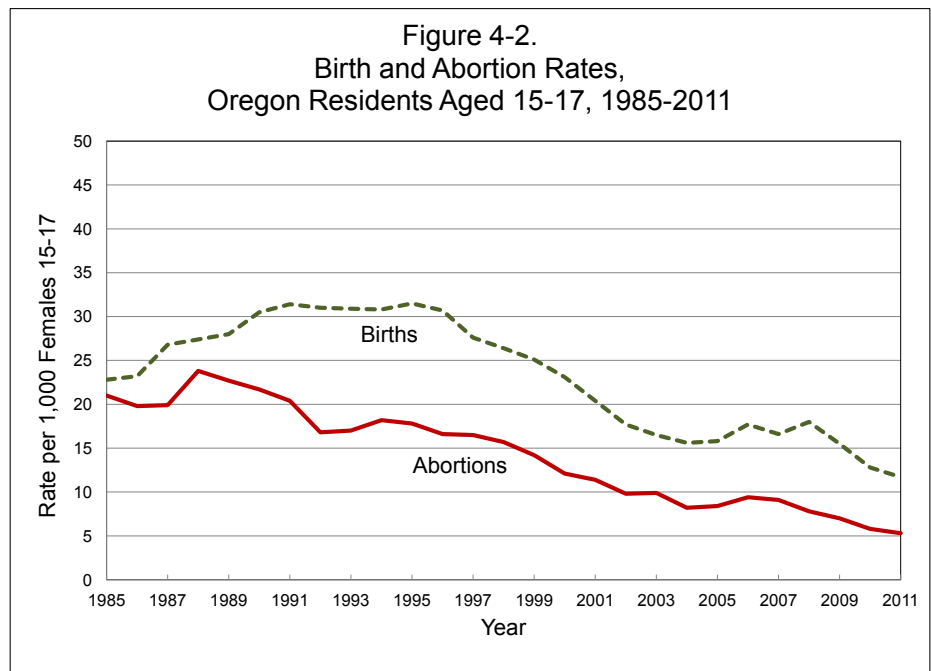
Pregnancy rate per 1,000 Oregon resident females ages 15-17.

in 2010. (See Table 4-1.) In 2011, the statewide pregnancy rate among women aged 15–17 decreased 8.1 percent from 18.6 in 2010 to a current low of 17.1. (See Table 4-1.) Historically, the teen pregnancy rate has trended downward and the 2011 rate is 51.4 percent lower than it was in 2000. Pregnancy rates for teens aged 15–17 varied by county. Eight counties had rates significantly different than the state rate. (See Table 4-3.) The 2011 rate for teens 15–17 was 5.0 percent below the Oregon Benchmark goal for the year 2015 of 18 pregnancies per 1,000 females. (See Figure 4-1, page 4-1.)

Births to teens 15 to 17

There were 852 births to Oregon teens aged 15–17 in 2011. More than 68.5 percent of the pregnancies among teens aged 15–17 resulted in a live birth, compared to 46.0 percent in 1980. (Table 4-1.) It was the mother’s first child in 93.7 percent of these births. (See Table 4-9.) The birth rate for females aged 15–17 was 11.7 per 1,000 females, a decrease of 8.6 percent from the previous year. Of these, 84.3 percent had neither completed high school nor obtained a general equivalency diploma (GED). Among those who took their pregnancies to term, 94.7 percent were unmarried at the time of birth. (See Table 4-10.)

Figure 4-2.
Birth and Abortion Rates,
Oregon Residents Aged 15-17, 1985-2011

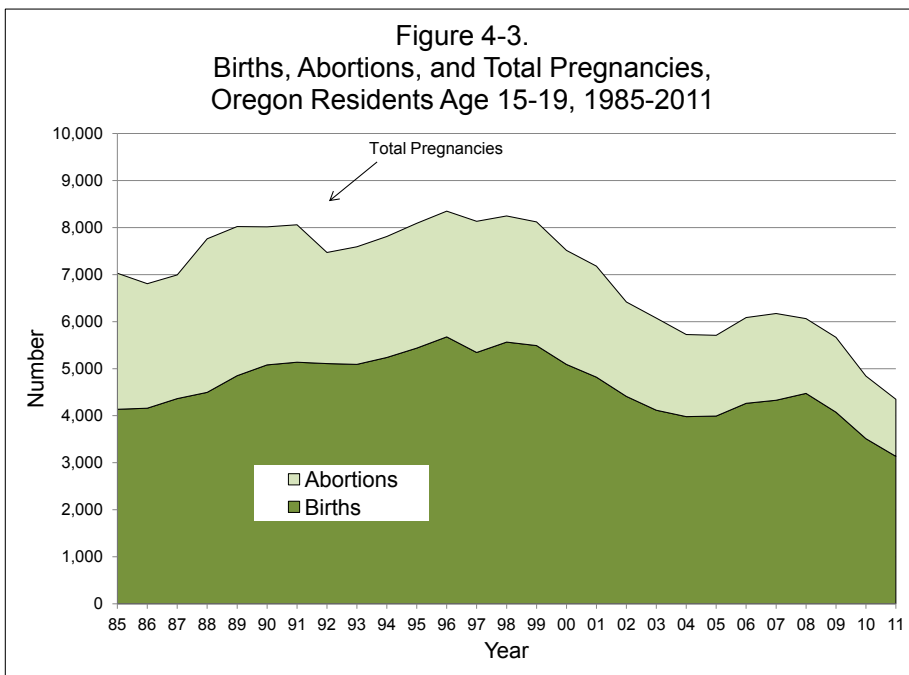


Abortion rates among teens 15 to 17

Abortion rates among teens decreased 8.6 percent from 2010. For females aged 15–17, the abortion rate was historically low in 2011 at 5.3 per 1,000. (See Table 4-5, Figure 4-2.) There were 391 abortions among Oregon females aged 15–17 reported during 2011, 46 fewer abortions than in 2010. Since the record high abortion rate recorded in 1980, the rate for females aged 15–17 has decreased by more than 83.4 percent (from 31.9 to 5.3 per 1,000 females).

Abortion rates for teens age 15 to 17 decreased 8.6% from 2010

Figure 4-3 and Figure 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, 40.6 percent of the pregnancies resulted in a live birth in 2011. (See Table 4-2, Figure 4-4.)

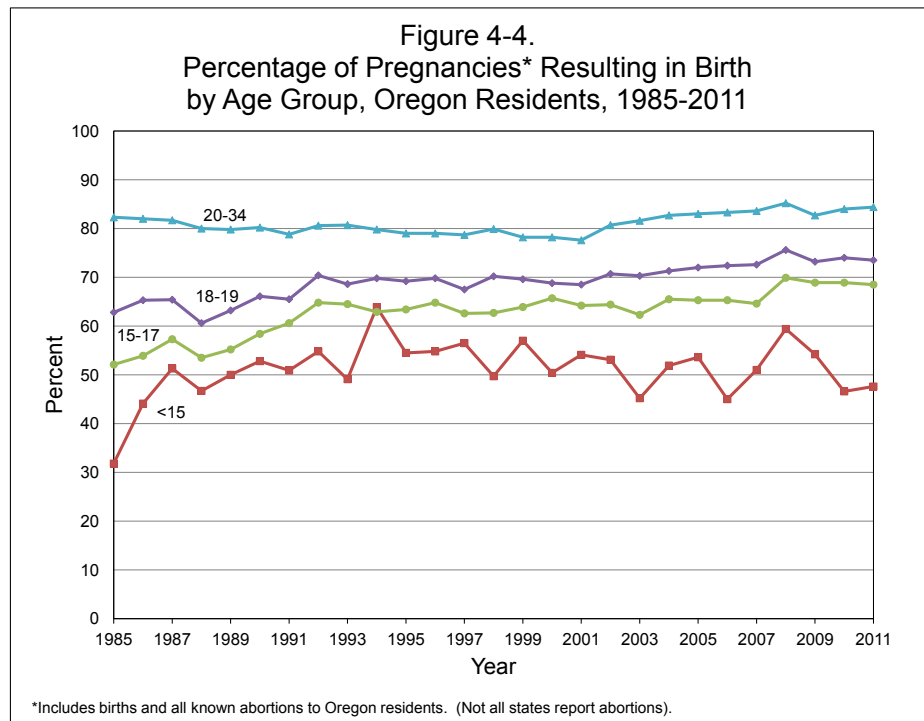


Birth rates for teens age 18 to 19 decreased by 12.0% from 2010

Oregon females 18 to 19

In 2011, the pregnancy rate for Oregonians aged 18–19 was 60.9 per 1,000 females, an 11.5 percent decrease from 2010. Comparisons with the 2010 figures show a decrease in the birth rate (12.0 %), while the abortion rate decreased 10.1 percent among women aged 18–19. (See Table 4-1.)

Of the 3,106 pregnancies among women aged 18–19, 73.5 percent (2,283) resulted in a live birth. (See Figure 4-4.) It was the first child for 80.3 percent of this group.



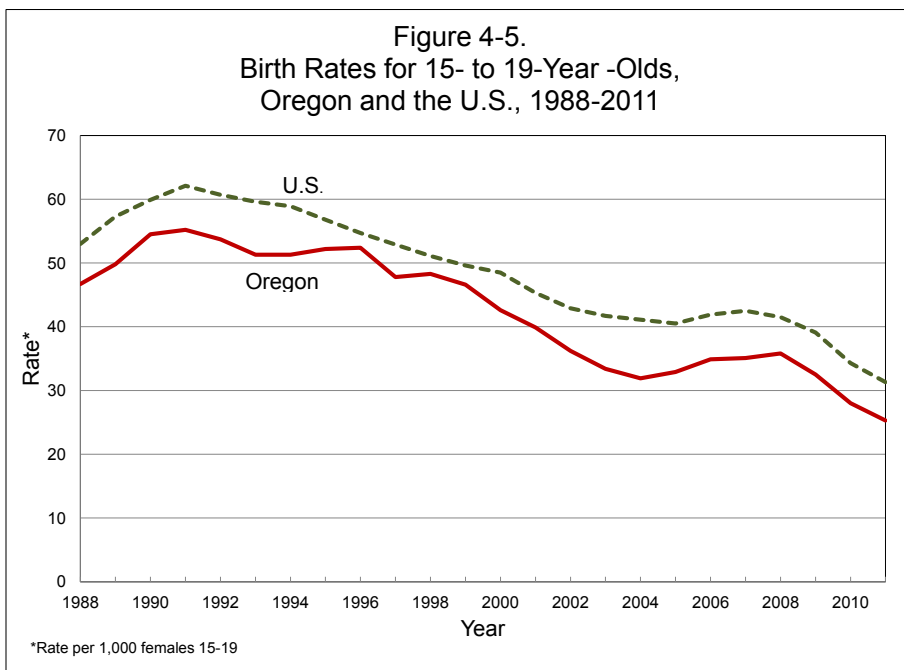
Oregon vs. U.S. birth rates

In Oregon, the birth rate among 15- to 19-year-olds (commonly used in historical and national comparisons) decreased 9.6 percent in 2011 (25.3 vs. 28.0 per 1,000 females in 2010). (See Table 4-1.) The 2011 rate was 54.2 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.)

Age	Oregon		U.S.
	2011	2010	2011
15-17	11.7	12.8	15.4
18-19	44.8	50.9	54.1
15-19	25.3	28.0	31.3

¹ All rates per 1,000 females.

Oregon’s 2011 birth rate for 15- to 19-year-old teens was 19.2 percent below the national rate (25.3 vs. 31.3 per 1,000 females; see sidebar 4-B). Oregon’s lower teen birth rate may be attributable to the state’s demographic characteristics. Historically, African American and Hispanic populations



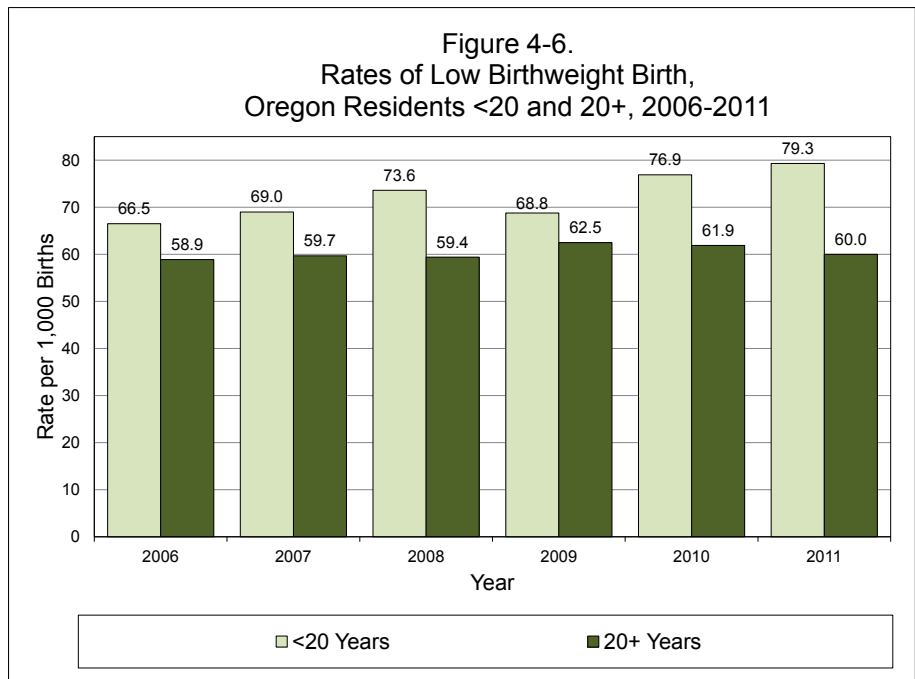
have had higher teen birth rates. Oregon's diversity is increasing. Between the 1990 and the 2000 census, the proportion of Hispanic residents doubled from 4 percent to 8 percent while the proportion of racial minorities was relatively unchanged.¹ Nevertheless, during this period, Oregon's teen pregnancy rate for 15- to 19-year-olds fell from 86.0 per 1,000 females in 1990 to 35.1 in 2011, a 59.2 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 2011, the low birthweight rate for teen mothers aged 15–19 was 82.3 per 1,000 births (Table 4-7), a 6.2 percent increase from 2010. For 15- to 17-year-olds, the rate (79.8 per 1,000) decreased by 3.4 percent. The teen rate for low



birthweight remained higher than for mothers aged 20 and older (60.0 per 1,000). (See Table 2-29.) The difference in the low birthweight rates between teen and older mothers has increased in recent years. (See Figure 4-6.)

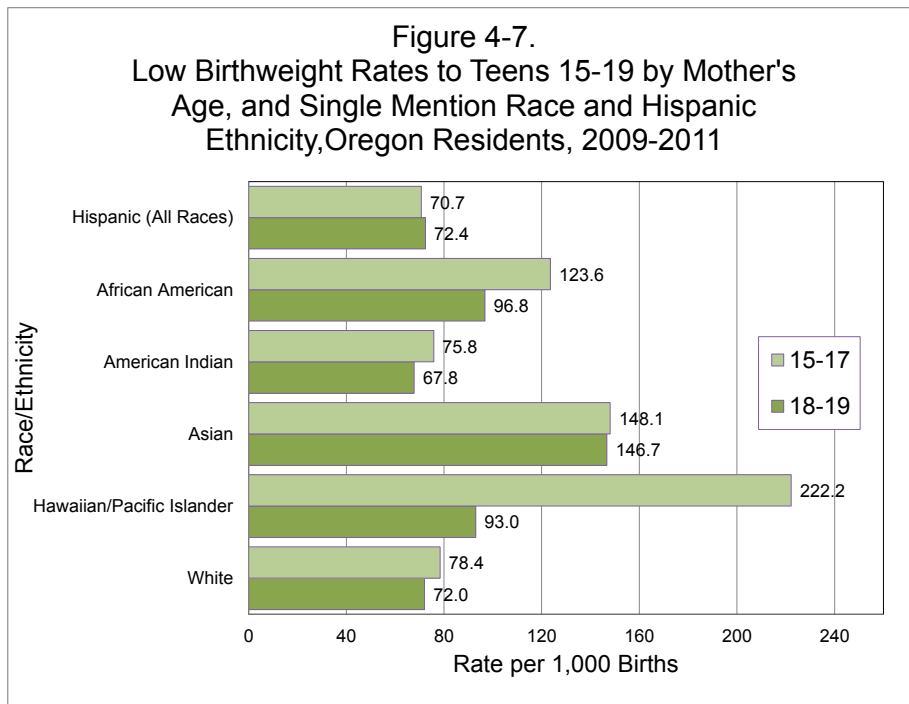
Race and ethnicity

Demographic factors such as race, ethnicity and marital status combine with age to influence the likelihood a teenager will receive early prenatal care. In 2011 for example, 49.9 percent of unmarried Hispanics aged 15–17 started prenatal care during their first trimester, compared to 68.0 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 2010 and 2011, the rate of low birthweight infants for Hispanic teens aged 15–17 increased by 16.9 percent. The low birthweight rate for Hispanic teens aged 18–19 during this same period increased by 20.0 percent. Among non-Hispanic, non-White groups, the low birthweight rate for teens aged 15–17 decreased by 55.4 percent, while the rate for 18- to 19-year-olds decreased by 14.2 percent. (See sidebar 4-C.)

Race/Ethnicity	Age	
	15-17	18-19
Rates		
Non-Hispanic White	79.2	77.4
Hispanic (All Races)	82.2	81.0
Non-Hispanic, Non-white	60.2	82.0
Percent Change, 2011 vs. 2010		
Non-Hispanic White	-3.1	2.1
Hispanic (All Races)	16.9	20.0
Non-Hispanic, Non-white	-55.4	-14.2

¹ All rates per 1,000 births



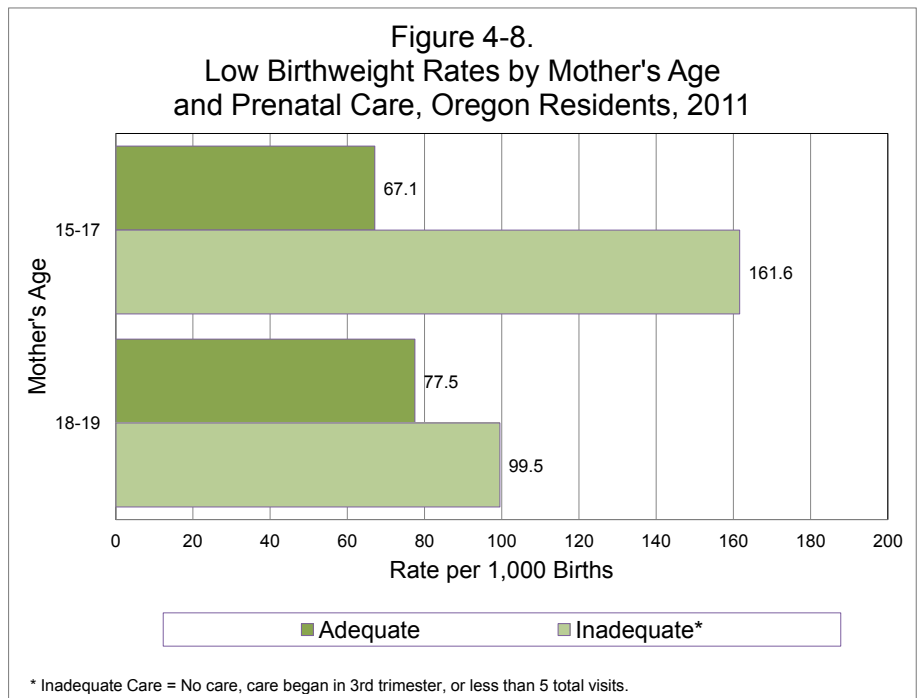
Prenatal care

Table 4-6 shows the association between inadequate prenatal care and frequency of low birthweight infants for teens who gave birth in 2011. 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 (120.0 vs. 74.8 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 67.1 vs. 161.6; for mothers 18–19, the rates were 77.5 vs. 99.5.

- **Early prenatal care**

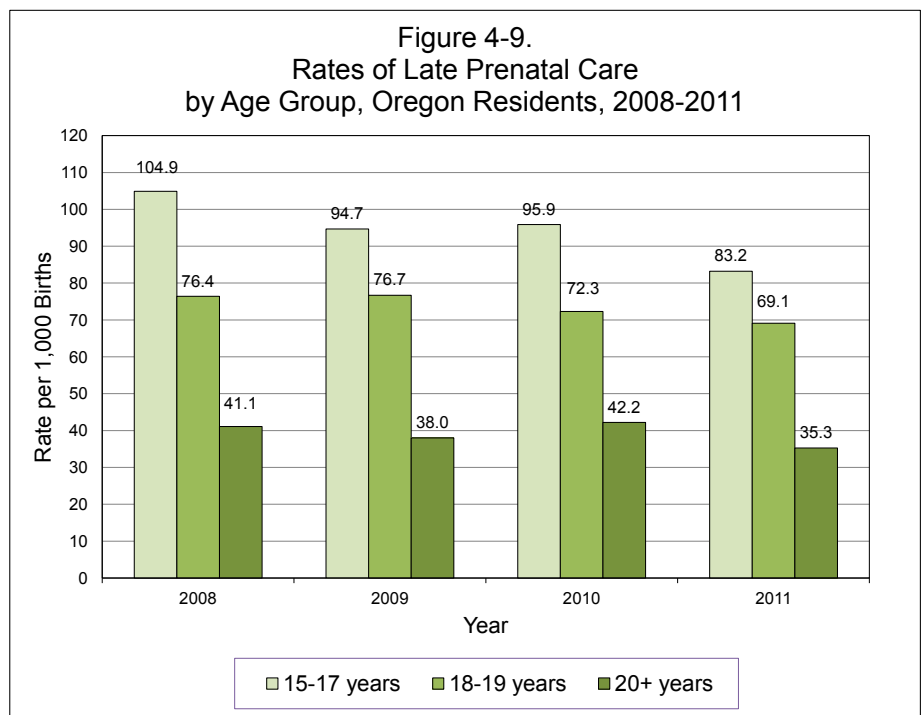
Prenatal care should begin within the first three months of pregnancy to allow early detection of complications and to ensure the health of both mother and infant. An Oregon Benchmark goal is 90 percent of pregnant women, regardless of age, will begin medical care during the first trimester of pregnancy by the year 2015. Teens are further from this goal than any other age group. In 2011, only 60.9 percent of teen mothers started prenatal care during the first trimester, compared to 76.1 percent for women aged 20 and older (see sidebar 4-D). Only 54.6 percent of those 15–17 received first trimester prenatal care, a slight increase from 54.1 percent in 2010. (See Table 4-10.)

Table 4-D. Oregon Benchmark: First Trimester Prenatal Care, 2011	
Year 2015 Goal: 90%	
All Women	75.1
All Teens	60.9
15-17 Years	54.6
18-19 Years	63.5
20+ Years	76.1



- **Inadequate prenatal care**

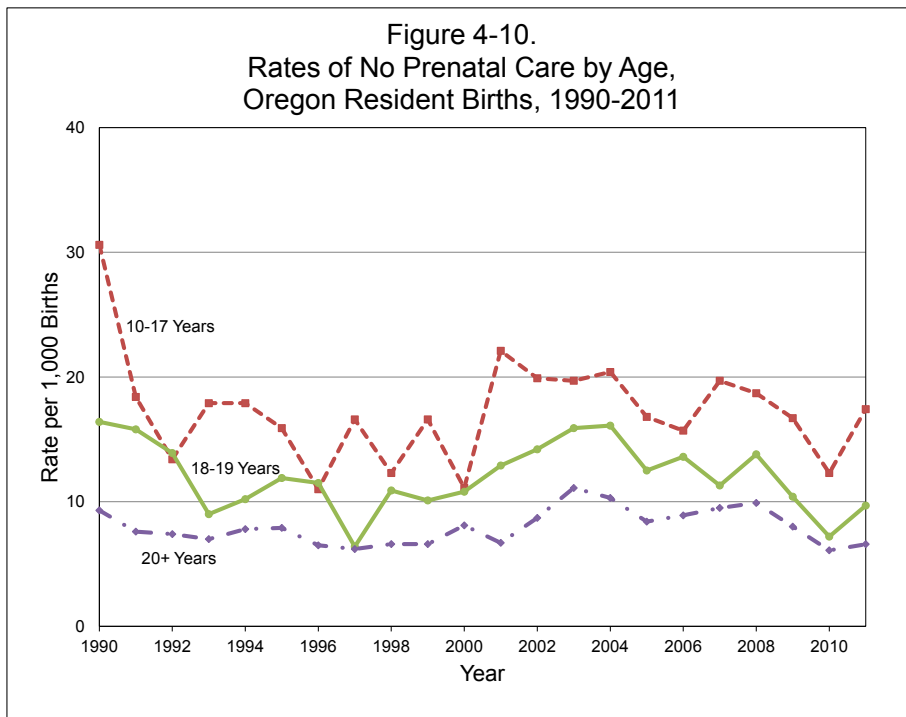
Inadequate prenatal care is defined as no prenatal care, care beginning after the second trimester of pregnancy or involving fewer than five prenatal visits. By this measure, 11.9 percent of 15- to 17-year-old teens and 9.0 percent of 18- to 19-year-old teens received inadequate prenatal care in 2011. This compares with



5.1 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 increased by 3.5 percent in 2011, from 9.6 percent in 2010 to 9.9 percent.

- **Late care and no prenatal care**

From 2010 to 2011, the proportion of teens aged 15–17 who began prenatal care during the third trimester decreased 13.2 percent to 83.2 per 1,000 live births. (See Figure 4-9.) In 2011, 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 16.6 per 1,000 live births, more than 2.5 times the rate of women aged 20 and older (6.6 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 2011, the low five-minute Apgar rate for newborns of mothers aged 15–17 was 37.6 per 1,000 births (Table 4-9), a 10.1 percent increase from 2010 (34.2 per 1,000). The low five-minute Apgar rate for infants born to women under age 20 was 33.0 percent higher than the rate for infants born to women 20 years or older (35.6 compared to 26.7 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. 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 15–19 who reported smoking during pregnancy in 2011 was nearly double the percentage reported by women aged 20 and older (17.8 % vs. 10.2 %). (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 (99.1 vs. 55.4 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 15–19 were less likely to report the use of alcohol during pregnancy as were women aged 20 and older (6.9 per 1,000 births vs. 8.8 per 1,000 births).

	<20	20+
Nonsmokers	75.4	55.4
Smokers	95.3	99.1

¹ All Rates per 1,000 births

Source of payment

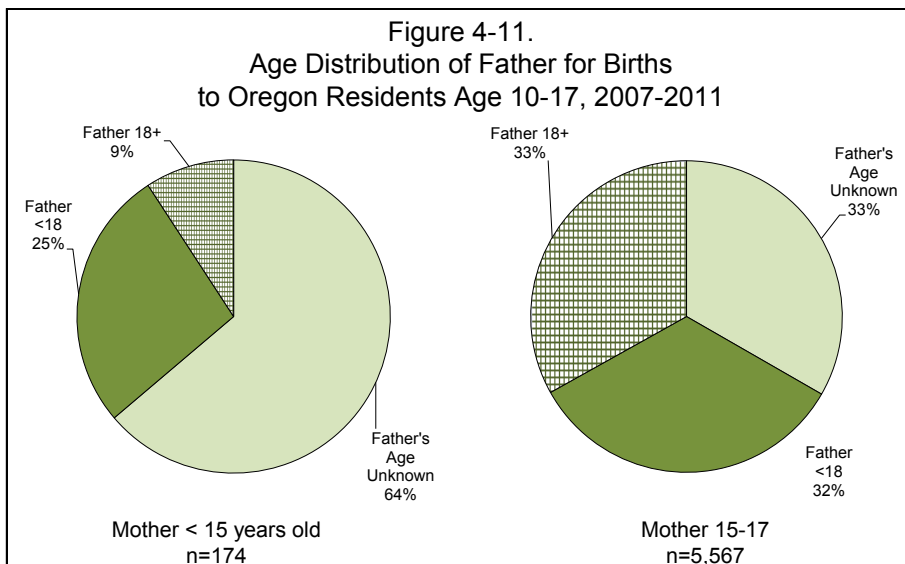
The percentage of teen mothers who utilized public funds to pay the costs associated with birth was nearly twice that of older mothers. In 2011, Medicaid/Oregon Health Plan paid for 77.0 percent of births to teens aged 15–19 and 43.2 percent of births to women aged 20 and older where payor source was reported. (See Table 4-10.)

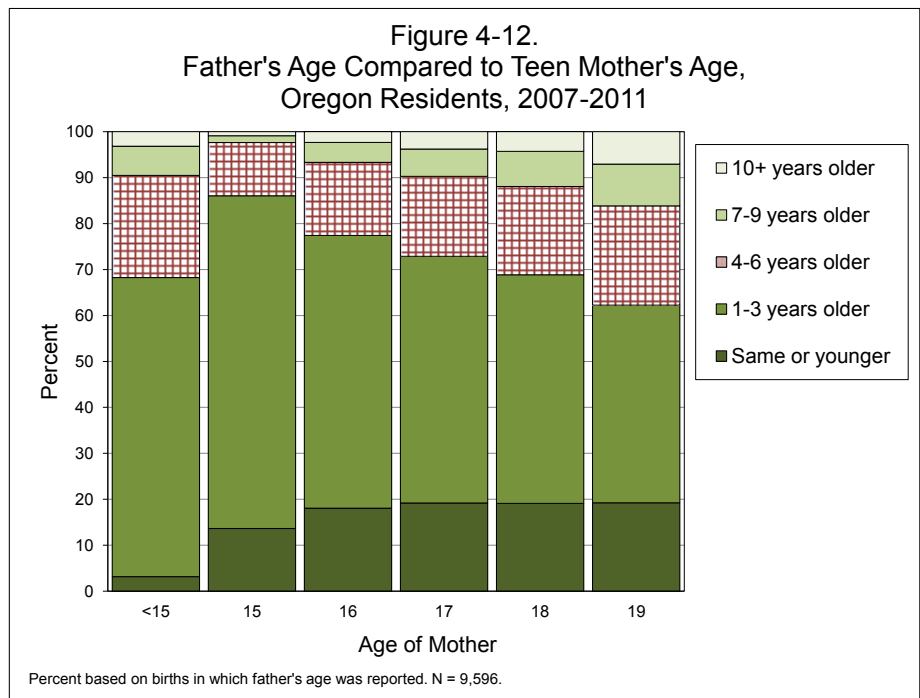
Medicaid/OHP paid for 77.1 percent of births to teens in 2011

Age of father

For the period 2007 to 2011, 33.3 percent of birth records for babies born to teens aged 15–17 did not indicate father’s age or the father was not identified on the birth certificate. (See Figure 4-11, Table 4-13.) Almost two-thirds (63.8 %) 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, 74.6 percent were younger than age 18 and 25.4 percent were aged 18 or older. Birth records for mothers aged 15–17 report father’s age for 66.7 percent of births. Where the father’s age was reported, 29.2 percent of fathers were under age 18 and 70.8 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 11.1 percent of the births for the 2007–2011 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 2.4





percent of births to 15-year-old mothers, to a high of 16.2 percent for 19-year-old teens. (See Figure 4-12.)

End note

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