

Teen pregnancy

Current trends

In 2006, 6,187 pregnancies occurred among Oregon females under age 20. Of these, 53.6 percent had neither completed high school nor obtained a general equivalency diploma (GED). Of those who took their pregnancies to term, 80.7 percent were unmarried at the time of birth. (See Table 4-10.) Because of 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 under age 18 and females ages 18 to 19. These two groups are compared to each other and to women age 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.)

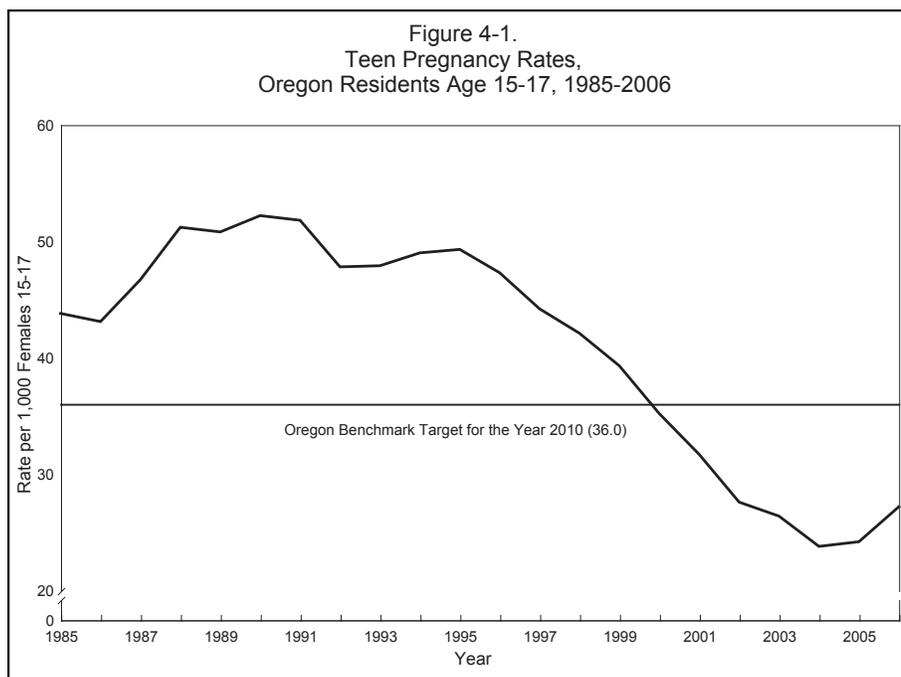
Oregon females under 18

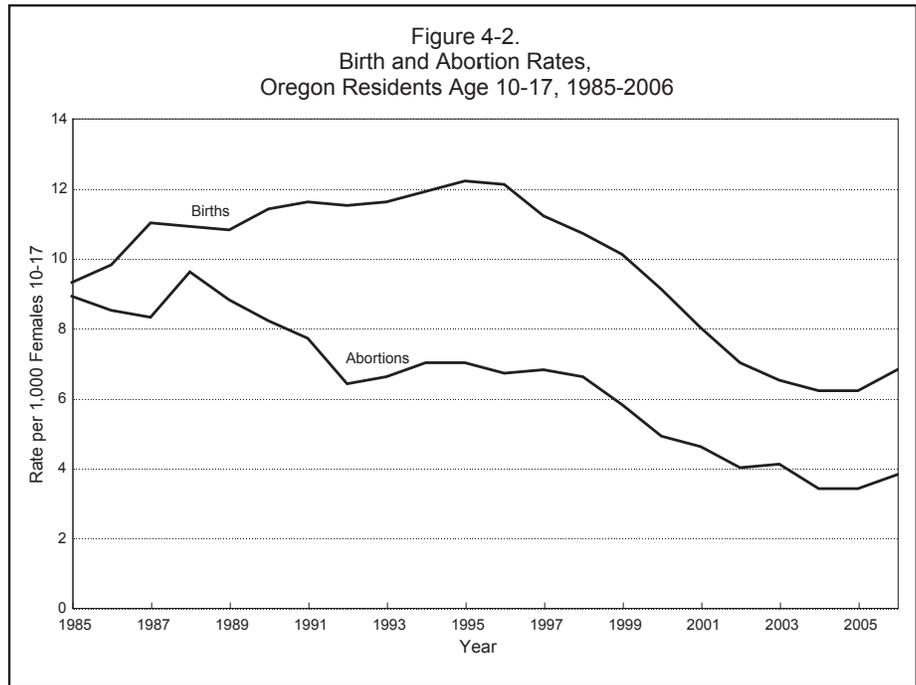
Efforts at preventing teen pregnancies are focused primarily on females under age 18. During 2006, at least 2,096 pregnancies occurred among Oregon females under age 18, 237 more than in 2005. (See Table 4-2.) In 2006, the statewide pregnancy rate among women ages 10 to 17 increased 11.6 percent from 9.5 in 2005 to 10.6 in 2006. (See Table 4-2.) This is the first increase in the pregnancy rate among women ages 10 to 17 since 1995 when it was 19.2. However, this pregnancy rate remains historically low, nearly 45 percent lower than the

Pregnancy rates for Oregonians ages 10 to 17 remained unchanged from 2004 at 9.5 per 1,000 females age 10-17.

Oregon Benchmark Teen Pregnancy Rates 15-17	
Year 2010 Goal: 36.0	
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

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





Abortion rates for teens age 10 to 17 increased 11.8% from 2005.

rate in 1995. Pregnancy rates for teens ages 10 to 17 varied by county and seven counties had rates statistically significantly different than the state rate. (See Table 4-5.) The 2006 rate for teens 15-17 was 24.4 percent below the Oregon Benchmark goal for the year 2010: 36 pregnancies per 1,000 females. (See Figure 4-1.)

In 2006, the three youngest females to become pregnant were age 12. One hundred pregnancies occurred among females under age 15.

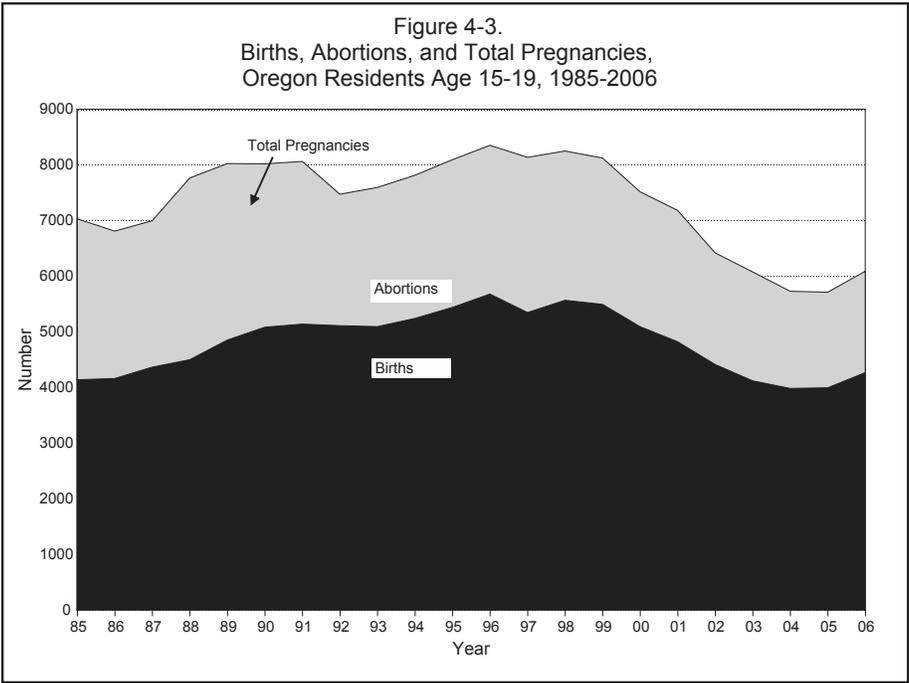
Births to teens under 18

There were 1,348 births to Oregon teens under age 18 in 2006. Sixty-four percent of the pregnancies among teens ages 10 to 17 resulted in a live birth, compared to 46 percent in 1980. (See Table 4-2.) It was the mother's first child in 91.1 percent of these births. (See Table 4-9.) The birth rate for females ages 10 to 17 was 6.8, an increase of 9.7 percent from the previous year. Forty-five girls ages 10 to 14 gave birth during 2006, seven fewer than the previous year. (See Table 4-2.)

Abortion rates among teens under 18

Abortion rates among teens increased 11.8 percent from 2005, however the rate continues to be historically low for females ages 10 to 17, the abortion rate rose to 3.8 per 1,000, from 3.4 in 2005. (See Table 4-2, Figure 4-2.) There were 748 abortions among Oregon females ages 10 to 17 reported during 2006, 92 more abortions than in 2005. Since the record high abortion rate recorded in 1980, the rate for females ages 10 to 17 has decreased by more than 71 percent (from 13.4 to 3.8 per 1,000 females).

Figure 4-3 and Figure 4-4 present the historical pattern of the result of pregnancies (birth and abortion). As Figure 4-4 indi-

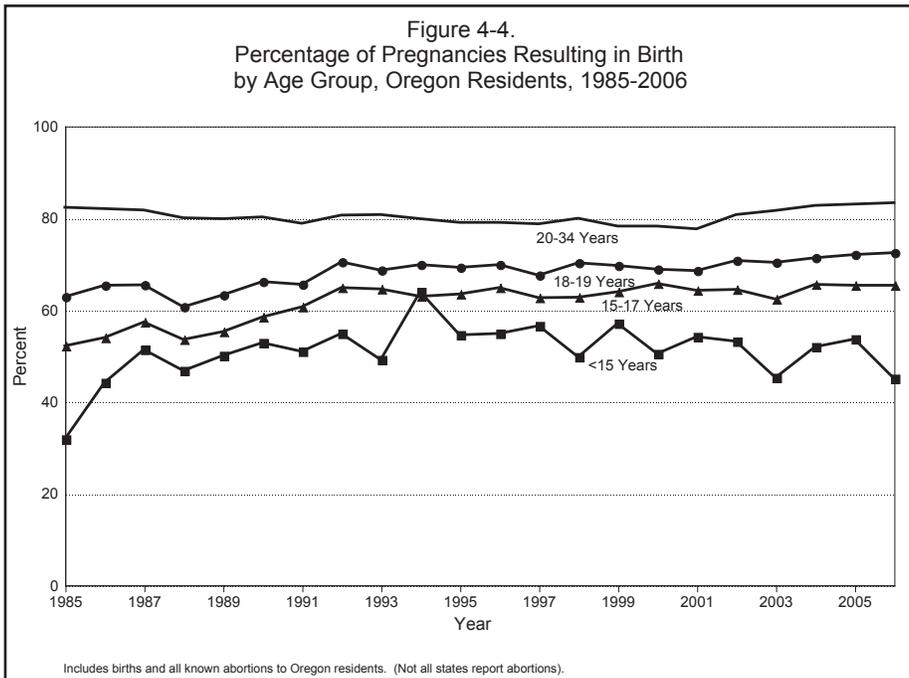


rates, teens are more likely to carry a pregnancy to term now than they were in 1985. Since 1985, the younger the teen, the more likely the pregnancy would be terminated. However, even among teens under 15, 45 percent of the pregnancies resulted in a live birth in 2006. (See Table 4-2, Figure 4-4.)

Birth rates for teens age 18 to 19 increased by 3.2% from 2005.

Oregon females 18-19

In 2006, the pregnancy rate for Oregonians ages 18 to 19 was 83.8 per 1,000 females, a 2.8 percent increase from 2005. Comparisons with the 2005 figures show an increase in both the birth rate (3.2 percent), and in the abortion rate (1.8 percent) among women ages 18 to 19. (See Table 4-1.)



Of the 4,091 pregnancies among women ages 18 to 19, 72 percent (2,960) resulted in birth. (See Figure 4-4.) It was the first child for 79.5 percent of the women giving birth.

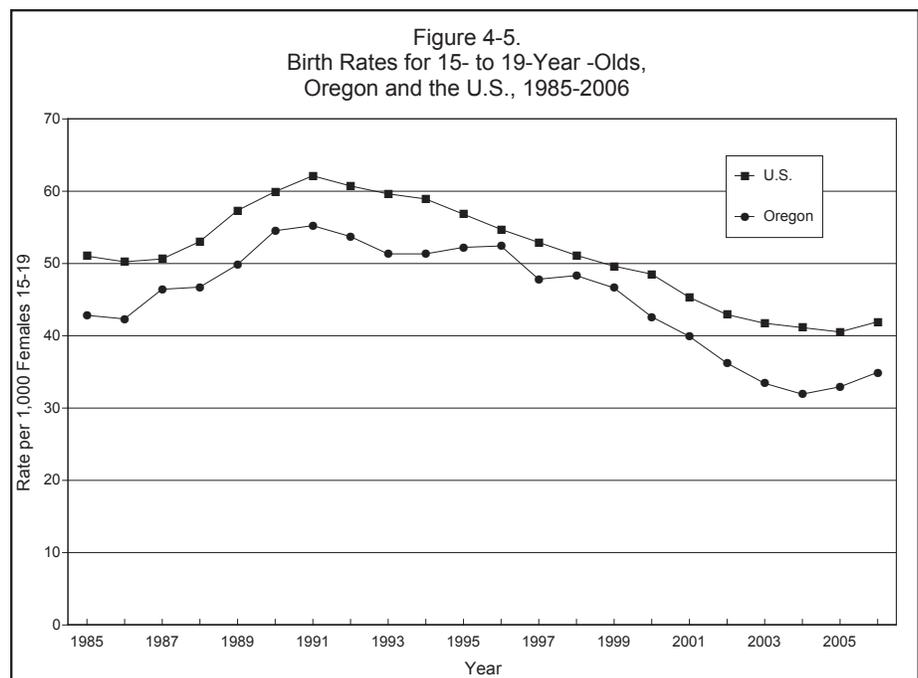
Oregon rates vs. U.S. rates

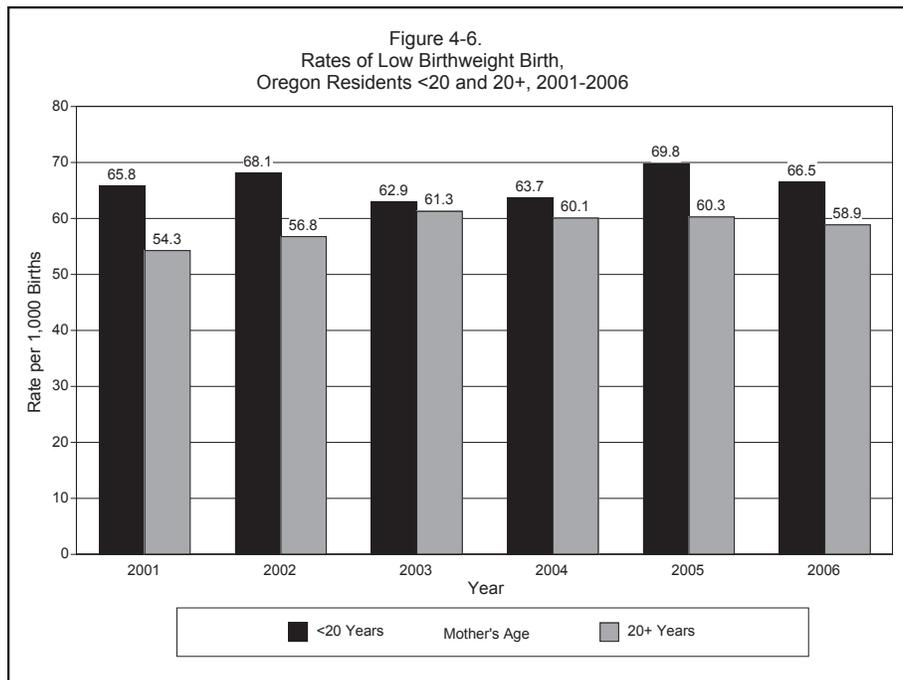
In Oregon, the birth rate among 15- to 19-year-olds (commonly used in historical and national comparisons) increased 6.1 percent in 2006 (34.9 vs. 32.9 per 1,000 females in 2005). (See Table 4-1.) The 2006 rate was 36.8 percent lower than the 1991 rate of 55.2 per 1,000, which is the highest rate recorded during the past quarter century. (See Figure 4-5.)

Oregon’s 2006 birth rate for 15- to 19-year-old teens was 16.7 percent below the national rate (34.9 vs. 41.9 per 1,000 females; see sidebar). Oregon’s lower teen birth rate may be attributed in large part to its demographic characteristics. Historically, African American and Hispanic populations have had higher teen birth rates and have been underrepresented in the state. Oregon’s diversity, however, 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 per 1,000 females in 1990 to 49.8 in 2006, a 42.1 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.)

Teen Birth Rates ¹			
Age	Oregon		U.S.
	2006	2005	2006
10-17	68	6.2	NA
10-14	0.4	0.4	0.7
15-17	17.7	15.8	22.0
18-19	60.6	58.7	73.0
15-19	34.9	32.9	41.9

¹All rates per 1,000 females.





Level of infant health

Low birthweight

Whether reflecting premature delivery or small size for gestational age, the low birthweight (LBW) rate (less than 2,500 grams or 5.5 pounds) is the best single measure of health for newborn infants. Changes in the low birthweight rate of a group might indicate aggregate changes in the mothers' personal behavior during pregnancy or other conditions that affect fetal health such as nutrition or access to prenatal care.

In 2006, the low birthweight rate for teen mothers ages 15-19 was 68.0 per 1,000 births (Table 4-4), a two percent decrease from 2005. For 15- to 17-year-olds, the rate (72.1 per 1,000) decreased by 2.3 percent. The teen rate for low birthweight remained higher than those for mothers age 20 and older (60.2 per 1,000). (See Table 2-29.) The difference in the low birthweight rates between the two groups has recently narrowed. (See Figure 4-6.)

Race and ethnicity

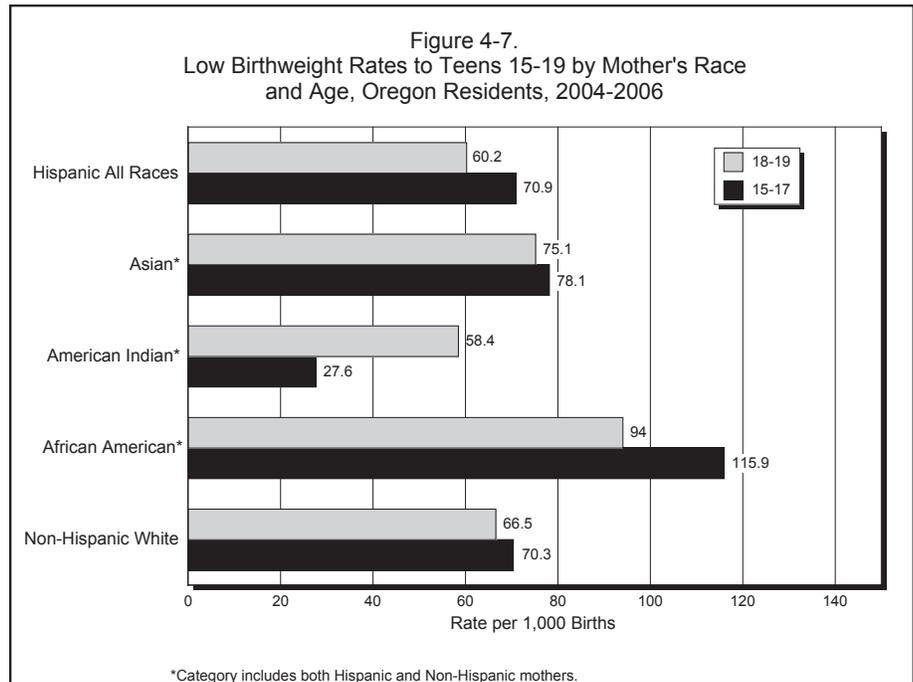
Demographic factors such as race, ethnicity and marital status combine with age to influence the likelihood that a teenager will receive early prenatal care. In 2006, for example, 52.7 percent of unmarried Hispanics ages 15-17 started prenatal care during their first trimester, compared to 75.2 percent of married non-Hispanic whites ages 18-19. (See Table 4-4.)

Low birthweight rates among teen mothers by racial/ethnic grouping are displayed in the sidebar and in Table 4-4. Between 2005 and 2006, the rate of low birthweight for all race/ethnic and age groups declined, except for Hispanics ages

Low Birthweight Rates ¹ by Race/Ethnicity and Age, 2006		
Race/Ethnicity	Age	
	15-17	18-19
Rates		
Non-Hispanic White	70.7	68.5
Hispanic (All Races)	73.1	55.6
Non-Hispanic, Non-white	73.2	87.5
Percent Change, 2006 vs. 2005		
Non-Hispanic White	-3.8	-0.7
Hispanic (All Races)	0.4	-7.5
Non-Hispanic, Non-white	-2.8	9.1

¹All rates per 1,000 births

15-17 whose rate was up marginally by 0.4 percent and the Non-Hispanic, Non-Whites whose rates increased by 9.1 percent. (See sidebar.)



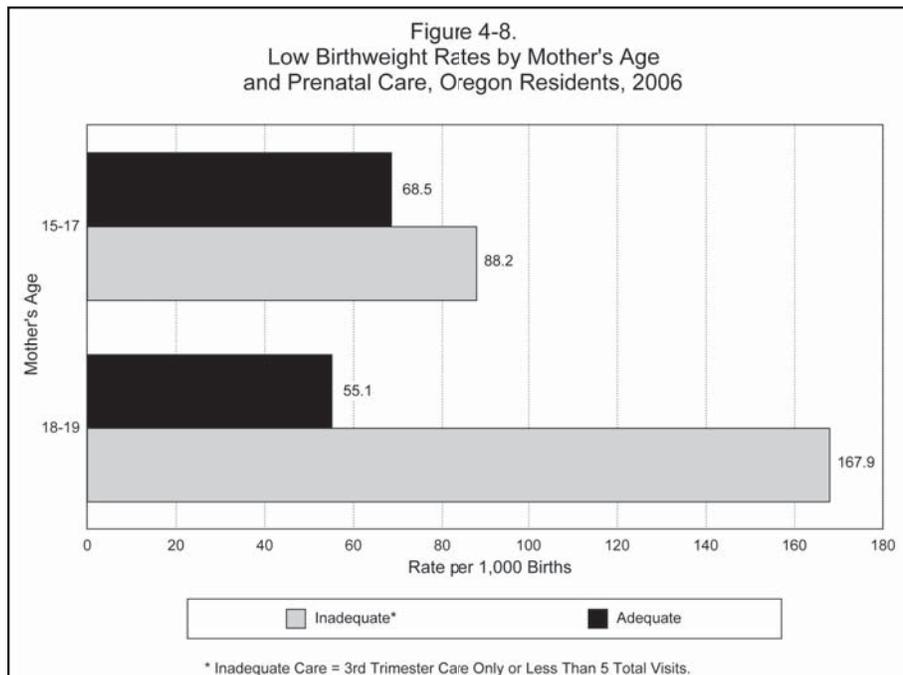
Oregon Benchmark: First Trimester Prenatal Care, 2006	
Year 2010 Goal: 90%	
All Women	79.2
All Teens	63.3
10-17 Years	55.4
18-19 Years	66.9
20+ Years	80.8

Prenatal care

Table 4-3 shows the association between inadequate prenatal care and frequency of low birthweight infants among teens who gave birth in 2006. Among mothers ages 15-19, those who received inadequate prenatal care were more likely to have low birthweight babies than those who had received adequate care (137.8 vs. 59.1 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 68.5 vs. 88.2; for mothers 18-19, they were 55.1 vs. 167.9.

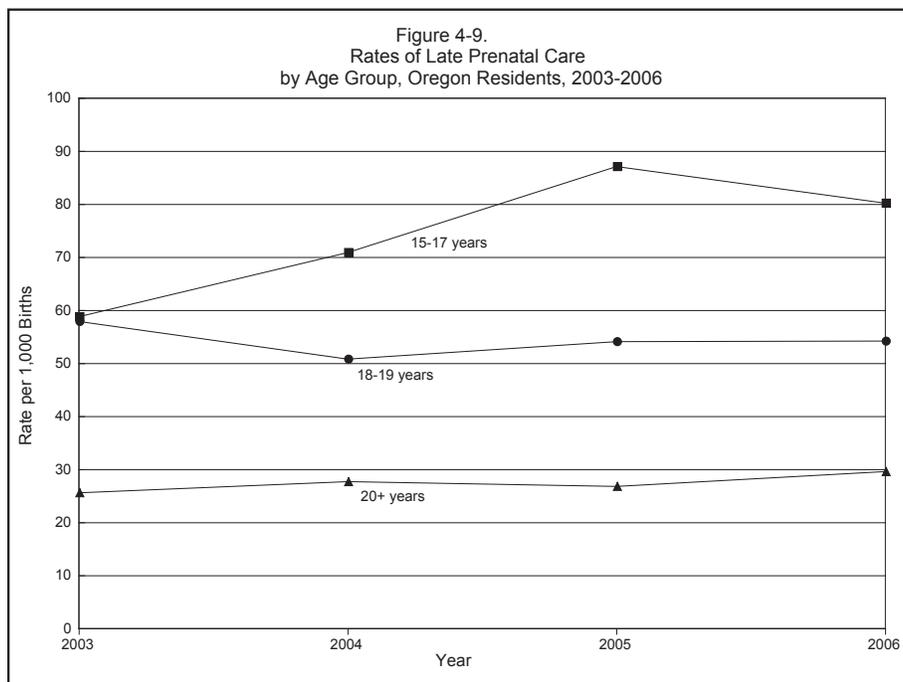
Early prenatal care

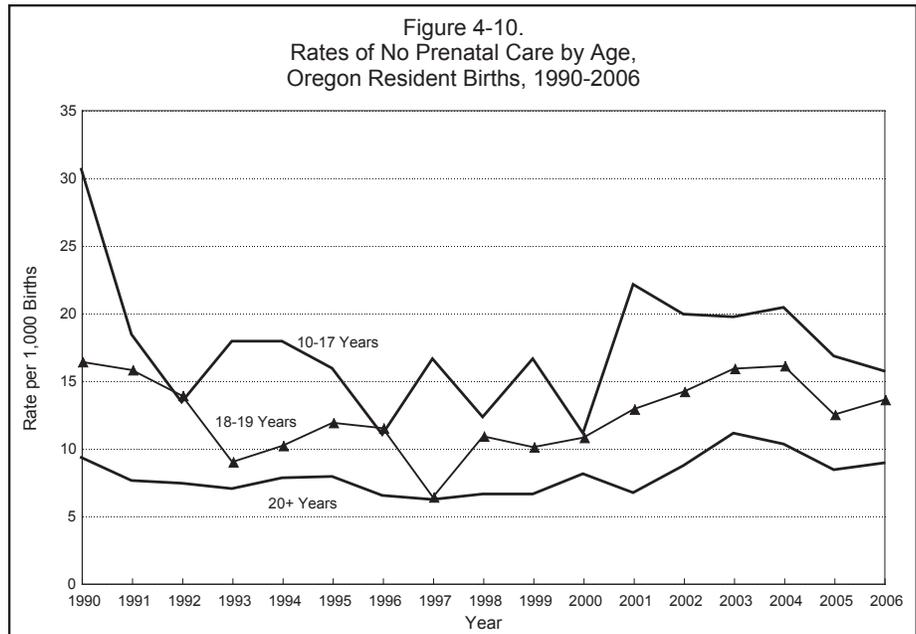
Prenatal care should begin within the first three months of pregnancy to allow early detection of complications and to ensure the health of both the mother and the infant. An Oregon Benchmark goal is that by the year 2010, 90 percent of pregnant women, regardless of age, will begin medical care during the first trimester of pregnancy. Teens are further from this goal than any other age group: in 2006, only 63.3 percent of teens giving birth started prenatal care during the first trimester compared to 80.8 percent for women age 20 and older (see sidebar). Only 55.4 percent of those under age 18 received early prenatal care, a decrease from 57.5 percent in 2005. (See Table 4-10.)



Inadequate prenatal care

Inadequate prenatal care has been defined as care that begins after the second trimester of pregnancy, or that involves fewer than five prenatal visits. By this measure, 13.1 percent of 15- to 17-year-old teens and 9.5 percent of 18- to 19-year-old teens received inadequate prenatal care in 2006. This compares with 5.7 percent of women age 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 5.3 percent in 2006, from 11.4 percent in 2005 to 10.8 percent.





Late care and no prenatal care

The proportion of teens ages 15-17 who began prenatal care during the third trimester decreased 7.9 percent to 80.2 per 1,000 live births in 2006. (See Figure 4-9.) Teens under age 18 are more likely than older women to go through pregnancy without a single visit to a medical provider; in 2006, the rate of no prenatal care among teens under age 18 was 15.6 per 1,000 live births, almost two times the rate of women age 20 and older (8.9 per 1,000 live births). (See Figure 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 seven is considered low and indicates that an infant is at greater than normal risk for morbidity and mortality. The 2006 low Apgar rate for newborns of mothers ages 10-19 was 21.6 per 1,000 births (Table 4-9), a 1.4 percent increase from 2005 (21.3 per 1,000). The low Apgar rate for infants born to women under age 20 was 35.7 percent higher than the rate for infants born to women 20 years or older (15.7 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 or possess alcohol in Oregon is 21 years old. The legal age to purchase tobacco products is age 18.

Tobacco

Teens ages 15 to 19 were almost twice as likely to report smoking during pregnancy than were women age 20 and older (19.3 percent vs. 11.6 percent). (See Table 4-9.) Women

who smoked during pregnancy were more likely to have low birthweight babies than nonsmokers. Mothers age 20 or older show the greatest difference between low birthweight rates by tobacco use (85.9 vs. 56.4 per 1,000 live births). However, this is in part because the low birthweight rate for teen mothers is already higher than that of women age 20 and older (see sidebar). Tobacco use remains one of the most important preventable causes of low birthweight infants for teen mothers.

	<20	20+
Nonsmokers	61.5	56.4
Smokers	89.2	85.9

¹ All Rates per 1,000 births

Alcohol

Reported alcohol use by teens ages 15 to 19 during pregnancy increased from 12.0 per 1,000 live births in 2005 to 14.6 in 2006, an increase of 21.7 percent. Teens ages 15 to 19 were more likely to report the use of alcohol during pregnancy than were women age 20 and older (14.6 vs. 13.6 per 1,000 births). (See Table 4-9.) Alcohol use for women age 20 and older decreased 4.9 percent, from 14.3 per 1,000 live births in 2005 to 13.6 in 2006.

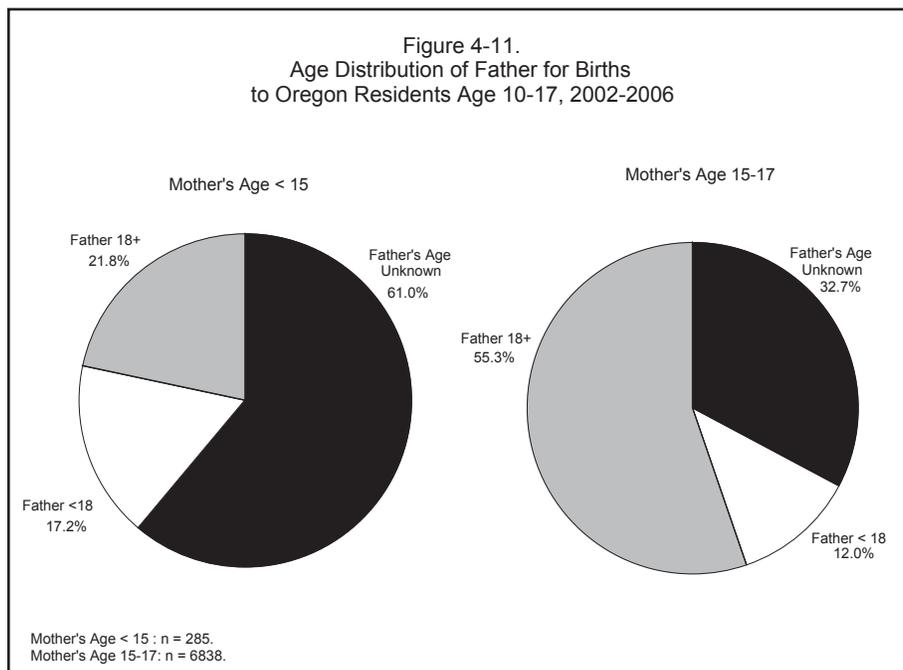
Source of payment

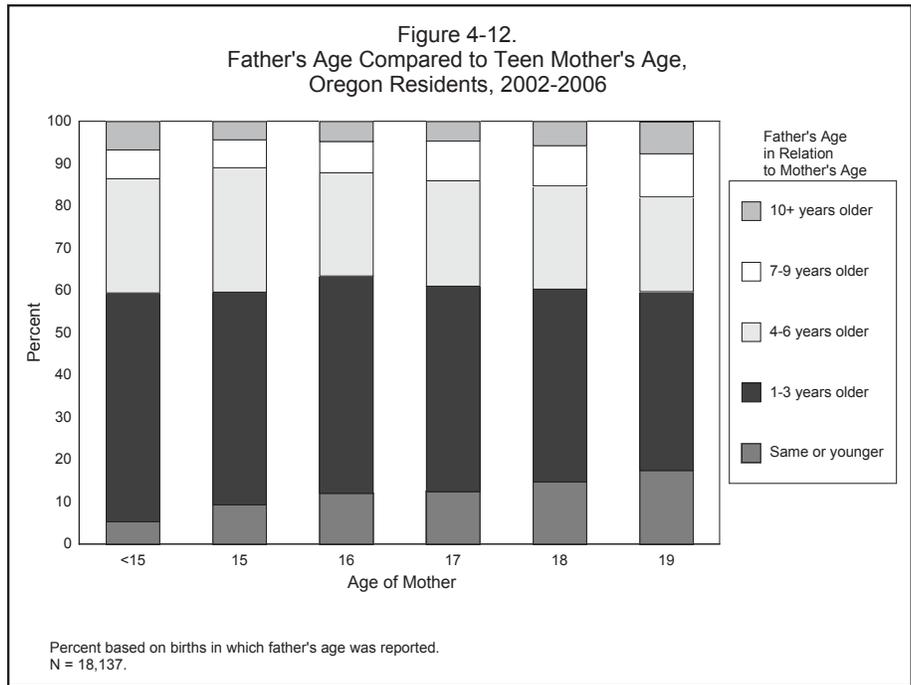
Costs associated with births to teen mothers were more than twice as likely to be paid with public funds as births to older women. In 2006, Medicaid paid for 73.8 percent of births to teens (under age 20) and 38.2 percent of births to women age 20 and older where payor source was reported. (See Table 4-10.)

Medicaid paid for 73.8 percent of births to teens.

Age of father

During 2002-2006, 35.4 percent of birth records for babies born to teens ages 10 to 17 did not indicate father's age, because the father was not identified on the certificate. (See Figure 4-11, Table 4-13.) More than three-fifths (70.4 percent)





of the birth records where the mother was under age 15 did not list father's age. Where the father's age was reported for teen mothers under age 15, 59.5 percent were younger than age 18 and 40.5 percent were age 18 or older. Birth records for mothers ages 15 to 17 report father's age for 66 percent of the births. Where the father's age was reported, 19.9 percent of fathers were under age 18 and 80.1 percent were age 18 or older.

For all teens, including the youngest mothers (age less than 15 years), the father was more than six years older than the mother in 15.8 percent of the births for the 2002–2006 period where the father's age was reported. This difference in ages ranged from a low of 10.9 percent of births to 15-year-old mothers to a high of 17.7 percent for 19-year-old mothers. (See Figure 4-12.)

Endnote

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