

Pregnancy Rate for Teens in District Fell in 2001

May 29, 2003

Statistics Mirror Nationwide Trend

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The pregnancy rate for District teenagers, an important number not only for families but also for the city budget, continued its long-term decline in 2001, the last year for which figures are available, the D.C. Campaign to Prevent Teen Pregnancy announced last week.

The figures are "cause for celebration," said Brenda Rhodes Miller, executive director of the D.C. campaign, but "even one pregnant teen is too many."

Teen pregnancy is not only an "obstacle in the lives of most young people but also an expensive proposition for the city," Miller said. Families started by teenagers frequently add to welfare, food stamp, special education, and child abuse and neglect costs.

The committee estimated last year that the District government spends \$747 million each year in direct costs associated with teen pregnancy. Nearly half

of the combined budgets of the Department of Health and the Department of Human Services in the District are directed to assistance programs for families begun by teens, the group said.

The reduced rate of teen pregnancy in the city mirrors a nationwide trend occurring in every state, every age category, and every racial and ethnic group, according to Sarah Brown, the director of the National Campaign to Prevent Teen Pregnancy.

On a statistical basis, 74.4 of every 1,000 girls ages 15 to 19 got pregnant in 2001, down from 81.4 the year before and 164.5 in 1996, when the city began collecting data in a comparable fashion, the D.C. campaign announced.

The number of pregnancies is the sum of births, miscarriages and abortions in the city.

The campaign's statistics are lower than those reported for the city by the federal Centers for Disease Control and Prevention and the National Campaign to Prevent Teen Pregnancy because of differences in the calculation of the city's population, the number of miscarriages and the number of abortions.

Fern Johnson Clarke, chief of the research and analysis division of the De-

partment of Health, relies on the D.C. demographer for population estimates. She said she counts official records, checking addresses and ages, to determine the teen pregnancy rate. She does not count reports of pregnancies where the age of the mother is unknown. There were 21 of these in the city in 2001, but in previous years the number has been higher.

Jennifer Manlove, a senior research associate with Child Trends, a nonprofit group that does research in the area, said that national pregnancy prevention groups use statistical sampling techniques and also rely on extensive surveys conducted by independent researchers. "There is no doubt that the abortion and miscarriage rates are low," Manlove said.

Similar discrepancies occur in other jurisdictions, Brown said.

"I am confident that it is a decline," said Stephanie J. Ventura, a leading statistician at the National Center for Health Statistics, "but it is very hard to quantify."

The new rate was announced at a news conference called to honor citizens and organizations across the city who have worked to help young people postpone childbearing.

Miller said that teenagers are less like-

ly to get pregnant when they feel close to their families, have safe places to hang out, receive adequate health care, make a plan for their lives, succeed in school from an early age and have a sense of belonging. Because most of these things require adult support, the campaign primarily works with adult groups, she said.

Among the 2003 Award Honorees were the First Baptist Church in Ward 7, the U.S. Attorney's Office for the District of Columbia Sex Offense and Domestic Violence Section, Untouchable Taste Catering and WAMU (88.5 FM) radio.

Vince Gray, executive director of Covenant House, a community service agency on Mississippi Avenue, said that "teen pregnancy is still quite a challenge" in the neighborhoods he serves, but "we feel we are making progress." Gray, the former head of the city's department of human services, said that what appears to work is information about sexually transmitted diseases and about the economic consequences of early childbearing. Providing constructive activities between the hours of 3 and 8 p.m. is important, he said.

"We talk about delaying sexual activity. If they can make it through their teens, they have a better chance economically," he said.