



Photo: Stephen Morison/Getty Images

Winning the Battle On Teen Pregnancy

In poor, rural Denmark, S.C., intensive program of sex education highlights progress across country.

Condoms at the Barber Shop

By Betsy McKay

DENMARK, S.C.—To understand why the nation's rate of unplanned teen pregnancies has been falling so significantly, visit two fading rural counties around here.

More than a quarter of the families live below the poverty line. Nearly half have only one parent living at home. The population is 66% African-American, the U.S. group with the highest rate of unplanned teen pregnancies.

If ever there was a place to expect a wave of teen mothers, it would be here among the flat farmlands of South Carolina's Allendale and Bamberg counties. Yet while teen pregnancies are numerous on the Allendale side of the county line, adolescent girls on the Bamberg side have one of the lowest pregnancy rates in the state. The county's rate has fallen faster than the rate in most of the U.S.

school curriculum and meet during the school day.

In eighth-grade classes, staffers from the Teen Life Center show students what condoms look like, how to use them, and how they will help prevent pregnancies and HIV infection. Mrs. Nimmons and her staff drop off condoms at a local laundry, a beauty shop and a barber shop that kids frequent. And unlike most pregnancy-prevention

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POVERTY:
The New Search for Solutions
Fifth in a Series



Brandon Jamison, 18, at the Denmark-Olar Teen Life Center. A billboard in Denmark, S.C. (top)

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efforts that focus on girls, the program here also actively seeks the participation of boys.

Nearly every Tuesday at 9 a.m., this past semester, Brandon Jamison and 20 other African-American young men gathered in the high-school cafeteria for hour-long discussions about sex, domestic abuse and navigating adolescence. On one morning, the topic was an explicit debate on whether it's acceptable for teenagers to have sex. "If you get a girl naked and she want you to do it to her, you can't say no," belittled Travis McCreary, a garrulous 17-year-old father of an infant, to a chorus of guffaws and snickering. Mr. Jamison, a husky, 18-year-old football captain, shot back. "A baby costs money and you get sidetracked," he argued, shrugging the shoulders of his blue-and-gold varsity letter jacket. "You can't get an education."

Between 1982, when the center opened, and 2004, the county's estimated pregnancy rate fell by nearly two-thirds among girls age 15 to 19, according to data from the South Carolina Department of Health and Environmental Control. Its teen pregnancy rate is among the lowest in the state.

IN ALLENDALE COUNTY, which is adjacent to Bamberg and has similar demographics but hasn't had the same intensive and uninterrupted prevention effort, the teen pregnancy rate has declined over the past two decades, as has the rest of the nation's. But Allendale's rate has remained one of the highest in the state—about 2.5 times as high as Bamberg's in 2004. Douglas Kirby, a research scientist who has evaluated sex-education programs for the government and other groups, believes the Teen Life Center has played a major role over the years in reducing teen pregnancy in the community it serves. "I do think it's one of the most promising approaches," he says, noting the program devotes an unusual amount of time in the regular school curriculum to sex education. A 2004 study published in the American Journal of Health Education credited the dramatic drop in Bamberg County's pregnancy rates to the program's activities.

Around the country, the percentage of unmarried girls getting pregnant in the U.S.—particularly African-American girls—began falling precipitously in the early 1990s. The national teen pregnancy rate dropped 27% between 1990 and 2000 among girls ages 15 to 19, reaching its lowest level since the government started tracking pregnancy rates in 1976. Among black girls of the same age, the decline in that period was even steeper, at 32%.

Teenagers also are waiting longer to begin having sex. In a 2002 Centers for Disease Control and Prevention survey, 63% of African-American boys between the ages of 15 and 19 reported having had sex—down from 80% in 1985. And when black teenage boys have sex, they are more likely to use condoms than other ethnic groups.

While the government has yet to publish national teen-pregnancy rates more recently than 2000, signs are emerging in other data that the decline could be slowing. The birth rate for girls ages 15 to 19 declined by just 1% in 2004, after years of annual decreases of about 3% to 5%.

These changes reflect a tangle of social, cultural and economic factors

This article is the fifth in an occasional series. Earlier installments were:

- "Poverty Program Gives Points to Do the Right Thing," July 7
- "Cincinnati Applies a Corporate Model to Saving Infants," June 20
- "In Poverty Tactics, an Old Debate: Who is at Fault?" June 15
- "For Hungry Kids, Backpack Clubs 'Try to Fill a Gap,'" June 14

Online Today: WSJ.com subscribers can read these articles and see photographs from the Denmark-Olar Teen Life Center WSJ.com/Poverty.

that still aren't well understood. Some scientists cite fears of HIV infection, particularly among poor African-Americans, where the disease has taken a heavy toll. Another factor is the increased availability of Pfizer Inc.'s Depo-Provera contraceptive, a hormone shot given to girls once every three months. Experts also cite tougher competition for good jobs in an increasingly global economy which has encouraged teens to get an education. With the proliferation of sex-education programs and welfare reform, teens became much better informed about sex and protecting themselves, and at the same time faced new disincentives to early parenthood, such as limited welfare assistance for girls. Tougher child-support laws meant that boys couldn't shirk financial responsibility for a baby.

"You got this overall sea change in the culture," says Sarah Brown, director of the National Campaign to Prevent Teen Pregnancy, a nonprofit group in Washington.

stopped calling him "Daddy," Mr. Jamison's father couldn't be reached. Mr. Jamison's mother, Patricia Smalls, subsequently had two daughters by two separate men. "I made some bad choices," says his mother.

Denmark, with a population of about 3,300, has long been in decline. The main street is lined with rambling old homes and boarded storefronts. Many adults commute to distant, low-paying jobs on the assembly lines of some local factories—such as a vending machine manufacturer and a sock mill.

FORCED IN 2002 to quit her job as a loader at the sock factory after suffering a string of fainting spells, Mrs. Smalls, 41, is barely able to provide for her children. Mr. Jamison's aunt, as well as church members, help the family pay monthly bills.

Mr. Jamison said he first started thinking about girls in the fifth grade when he and a girl in his class shared



Michelle Nimmons, director of the Denmark-Olar Teen Life Center, and former student Brandon Jamison.

Critics of teen sex education that includes information on contraception attribute the drop in pregnancy rates to increased abstinence and say teachers and counselors should be spending more time teaching students to refrain from sexual activity. Detailed discussions of contraception and how it works only encourage teens to try sex, they say.

"If we're going to spend public dollars, we should reinforce the good efforts kids are already making to maintain their chastity," says Michael Fair, a South Carolina state senator.

Since 2001, the federal government has thrown increasing weight behind programs that focus solely on sexual abstinence rather than also giving out information on contraception, as Denmark's program does. Federal appropriations for programs that discourage contraceptive use and focus solely on abstinence rose to \$177 million this year from \$62 million in 2000. President Bush has proposed \$201 million for fiscal 2007. The government doesn't provide overall figures on how much it spends on pregnancy prevention efforts, though money flows through Medicaid, HIV prevention programs and other efforts.

The Denmark program derives most of its annual budget from Medicaid, which funds pregnancy-prevention efforts for poor students in South Carolina through a combination of federal and state dollars. At least 80% of the school district's student body qualifies for Medicaid. Recent technical changes state health officials made to Medicaid rules and rates have reduced the number of class hours Mrs. Nimmons can bill to the program. She still isn't sure how this will affect her budget, but she has cut back on some extras she'd been offering, like weekend classes and promotional items.

For Mr. Jamison, the football player, the program helped fill gaps left by a broken home. Mr. Jamison's parents divorced when he was in kindergarten. He rarely sees his father and has

their first kiss in a janitor's closet at the after-school homework center.

But even though he saw the same girl on and off until ninth grade, they didn't have sex. The Teen Life Center's classes, including warnings about sexually-transmitted diseases and pregnancy, stuck in his mind. "It wasn't the time," he says. Also when he was in middle school, his mother had the first of his younger sisters, who is 6 years old. Two years later, his mother was pregnant again.

She recalls Mr. Jamison—then a high-school freshman—saying to her: "Mama, I expected more of you."

Mr. Jamison recalls learning in his seventh-grade sex-education class in detail about how reproduction works. Center staff also drilled the class on the most common sexually transmitted diseases and their symptoms, warning that some diseases can kill and that the best way to avoid them is not to have sex at all, he says.

In eighth grade, teachers showed Mr. Jamison's class how to use condoms, explaining that they are the form of contraception that will help protect them against HIV infection. They told

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the students they could get them free at the local health clinic in town.

In ninth grade, he says, center staffers held up condom packages and showed students how to open them without nicking the condom and how to put them on correctly. Amid the barrage of lessons, kids grew comfortable with discussing the awkward details of sex, although they often also giggled with embarrassment during class discussions. "We're pretty open here," says Mr. Jamison.

Mrs. Nimmons, the driving force behind the Teen Life Center, made a big impression on Mr. Jamison early on. In middle school, Mr. Jamison attended an overnight gathering called "Mantalk" in the school gym that Mrs. Nimmons organized just for boys. They came for the free food and games, but Mrs. Nimmons also invited a professor of African-American studies, the pastor of a local church and a former prison inmate who spoke "about making the right decisions," Mr. Jamison recalls.

Mr. Jamison says he was inspired by the discipline and encouragement Mrs. Nimmons conveyed at such events as she greeted the kids or introduced speakers. "She told us you can be somebody, but you gotta stay in school," he recalls.

Mrs. Nimmons, a slender African-American with close-cropped hair, moved to Denmark at the age of 8 from a military base in Panama. Her father was a naval officer, her mother a middle-school teacher. Growing up in Denmark in the 1970s, Mrs. Nimmons says she had little sex education of her own, although teen-pregnancy rates were rising at the time. "Nobody was talking about this," she says. Her family's physician gave her mother a book about sex, which her mother hid in a dresser drawer and didn't share with her daughter, Mrs. Nimmons says. Instead, she says, she learned about sex from her friends and some reading of her own.

In 1982, Murray Vincent, a professor at the University of South Carolina School of Public Health, used a \$50,000-a-year federal grant to design an intensive school and community-based pregnancy-prevention program for Denmark which at the time had a worryingly high teen-pregnancy rate. (Sex education has been taught formally in U.S. schools since the early 20th century, when officials grew alarmed by a flood of venereal disease outbreaks. About 95% of public secondary schools today teach some form of sex education, according to private surveys.)

The new Denmark program offered sex-education classes for students and adults along with media campaigns, and active participation by parents, clergy and community youth leaders. A school nurse also opened a health clinic for students across the small parking lot from the high school, dispensing free consultations and contraceptives among other health services.

The goal was to flood the community with information, creating an environment that would encourage teens to say "no" to sex but also instruct them on

how to avoid pregnancy if they decided to say "yes."

In 1986, the health clinic stopped handing out contraceptives after it drew the attention of state lawmakers, who eventually banned the dispensing of contraceptives on school grounds.

In 1994, Mrs. Nimmons, who had worked for the county drug and alcohol commission for the previous four years, took over the center. Her husband, Ernest, was the high-school basketball coach. Mrs. Nimmons, who wears a lizard-shaped brooch pinned to her suit or dress over her back right shoulder blade every day "to be different," believed Denmark's students could have careers and modestly prosperous lives like hers if they could break out of the town's persistent cycle of poverty.

Mrs. Nimmons, who is also a senior program consultant to the South Carolina Campaign to Prevent Teen Pregnancy, a not-for-profit organization in Columbia, S.C., says children and teens must be aggressively prepared for the inundation of sexual images they face from television, print media and music. "We don't send our troops to Iraq with rubber bullets, and we shouldn't send our kids out into a society driven by sexual innuendo without information and skills," she says. "We can't control the penises and vaginas when they leave school. All we can do is equip them with knowledge and skill."

Around the time Mrs. Nimmons took over the program, its funding was grow-

ing. State officials agreed to pay for pregnancy-prevention services for poor students using Medicaid. Mrs. Nimmons persuaded the school system's superintendent to incorporate the 45-minute classes into the regular school day. Soon, every student attended 36 classes a year, starting in the third grade, along with twice-monthly one-on-one counseling sessions for Medicaid-eligible students.

When students complained several years ago that they didn't have money to buy condoms at the local chain drug store, and found it embarrassing to get free ones at the health clinic, Mrs. Nimmons and her staff started dropping them off at a beauty shop, and most often, at Supreme Barber Shop.

One of the barbers, Johnell Rice, keeps them in a cardboard box on a high shelf in the bathroom. When young teens ask for the condoms, Mr. Rice says he sits them down and explains how to use them. "I tell them this protects you against AIDS and babies too," he says. "It's gonna take away all your fun time, your younger years and her younger years if you don't protect yourself."

Convincing boys to use condoms regularly and properly isn't simple, though. Preston Johnson, an 18-year-old basketball player, says he first had sex at age 13. He says he uses condoms routinely, and urges his friends to use them too, often explaining how to use them correctly. He says it's hard to convince them, conceding that "it feels better" without condoms and they can be frustrating to use. "You start kissing, and when you get ready, you gotta stop," he says.

When Mr. Jamison arrived back home, his mother says, he felt guilty. "He said, 'Mama, I ain't no good,'" Mrs. Smalls recalls. "He told me he disappointed me and God... I told him, we make bad choices." She reminded her son that she too had made misjudgments. "You learn from your mistakes," she told him.

Mr. Jamison says he has kept his vow to remain abstinent since then. He says he is a better counselor to his friends and cousins about relationships and sex now. "To know, you gotta go through it," he says "I was ignorant. Now I know."

Mr. Jamison is determined to leave Denmark and have a career. He has an academic scholarship to attend South Carolina State University this fall, where he says he plans to study business.

In May, a few days before the high-school prom, Mrs. Nimmons and her staff launched a new safe-sex-awareness campaign. They glued condoms to a bulletin board in a central hallway of the high school. Titled "Condom Express," the display was a knockoff of a popular credit-card slogan: "Condoms: \$10.99. Peace of Mind: Priceless."

Signs on each side of the board warned that the condoms might be defective because of the glue. Still, Mrs. Nimmons says, within two hours every condom had been ripped off the bulletin board.

On the night of the dance, Mr. Jamison alighted from a black SUV borrowed from a fellow church member. He wore a white tuxedo with matching shoes, on loan from a church trustee he calls "Pop." Mr. Jamison gingerly opened the passenger door for his girlfriend, in a shimmering charcoal gown and heels. He slipped his arm around her as friends took a picture. Inside, silver cardboard swans decorated the basketball court for the theme of "On the Wings of Love."

In his pocket: a few condoms. "I don't plan to have sex, but it's better to be safe than sorry," he said.



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A Different Approach

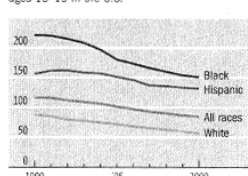
In South Carolina's Allendale and Bamberg counties, many teens are black, low-income, and come from single-parent homes. These socioeconomic and demographic traits are consistent with those of areas with the highest pregnancy rates.

However, while Allendale had the state's highest county-level pregnancy rates among women ages 15-19 in 2004, Bamberg had the lowest. Bamberg has had a consistent comprehensive sexual-education program since 1982. Allendale has not.

* Estimated as of April 1 for 1990 and 2000, as of July 1 for all other years. Note: An estimated pregnancy rate is the estimated number of pregnancies per 1,000 women and is calculated using the number of births, abortions, and miscarriages. Sources: Centers for Disease Control and Prevention; South Carolina Department of Health and Environmental Control.

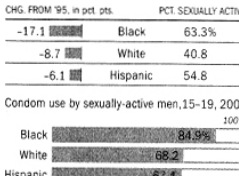
Nationally, teenage-pregnancy rates have fallen significantly since 1990

Estimated rates of pregnancy per 1,000 women ages 15-19 in the U.S.*



Fewer teenage men are sexually active, more black teenage men use condoms

Men ages 15-19 who are sexually active, 2002



A tale of two counties

Estimated rates of pregnancy per 1,000 women ages 15-19, all races, in Bamberg and Allendale counties

