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Learning to 'Think Twice'

A new salvo in the fight to prevent Latino teen pregnancy.

By SARAH ELKINS

Along with many of her Latina friends at her middle school in Southeast Washington, D.C., three years ago Beverly Zeleya treated sex lightly. No one told her about contraception, so she didn't use it. As a result, she wound up pregnant and had a baby boy at the age of 13. Now in high school and a good deal wiser, she observes the same reckless behavior among her peers there. Many attend "skipping parties"—as in skipping school—where they shed their inhibitions with the help of alcohol, pot and other drugs and hook up with guys who are usually older than they are. "If the girl likes the guy, they will hang out with them and they don't think twice," says Zeleya. "They just think once."

That despairing portrait is no aberration. Though teen pregnancy rates are declining generally, they remain stubbornly high for Latinas and blacks. According to the National Campaign to Prevent Teen Pregnancy, 51 percent of Latina teens become pregnant at least once before reaching 20—a full 20 points higher than the national average. While that figure is still lower than the 58-percent rate for African-Americans, it's declining at a considerably slower pace: teen pregnancy rates decreased 29 percent for blacks and whites in the 1990s, compared to just 19 percent for Latinas.

Part of the reason: current educational programs aimed at the Hispanic community are failing to connect culturally, say Bill Albert and Ruthie Flores of the National Campaign's Latino Initiative, which was launched this spring. Their project seeks to bridge the divide with a recently completed educational manual—the first of its kind—that will be distributed to schools, community groups and

health clinics across the country in November.

Until recently pregnancy-prevention campaigns targeting Hispanics were virtually identical to those directed at blacks and whites, says Liany Arroyo of the National Council of La Raza (NCLR)'s Institute for Hispanic Health, who is advising the Latino Initiative. The only difference: they were translated into Spanish. Though cultural gaps extend far beyond language, "there can tend to be a hypersensitivity when working with Latino and other ethnic minority groups," says Arroyo. That sensitivity often stems from a fear of offending minorities by concentrating on cultural differences. Yet "in order to ensure that all groups are able to access the critical health messages being delivered, we do need to acknowledge that there may be cultural as well as access barriers." In this regard, the health-policy world lags behind corporate America, which for years has been studying Hispanic culture and designing savvy, sophisticated pitches to convince Latino youth to buy the latest goods from Nike or Pepsi.

For Albert and Flores, one of the most important cultural differences involves gender. Though double standards exist everywhere, they are particularly notable in Hispanic culture. While on the one hand teenage daughters receive messages about chastity and demureness, teenage sons hear about virility and conquest. There's also the enduring Latino tradition of machismo. A recent NCLR study that involved 16 focus groups around the country found that "the idea of discussing sexuality with one's partner is perceived as a threat by the man, and, as such, the topic is rarely touched."

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In the California focus group, Latino community workers "felt that men do not participate in the [contraceptive] process because they do not want to be viewed as being told what to do by their wives." One female participant even revealed that she used contraceptives without her partner's knowledge because of "his accusations that her use of contraception is a mechanism to have an affair with other men [without becoming pregnant]."

Further complicating things: the inevitable clash between the sexual norms brought from home countries and those encountered here. Given that 40 percent of Hispanics in the U.S. are foreign-born, according to the Pew Hispanic Center, many such parents clash with their more Americanized kids. Among Latino immigrants, there's an old-world tendency to "isolate young women," says Hector Sanchez-Flores, a researcher at the University of California at San Francisco's Center for Reproductive Health. "Families may try to shelter a young woman and say she can't go out, but the fact is, [in America] she is going to go out."

Culture also helps explain why Hispanics often misinterpret—or are even put off by—the typical pregnancy-prevention campaigns in the United States. According to Albert, many Latinos misconstrue such messages as "anti-baby" or "anti-family"—anathema for a culture that so reveres the family unit. "We need to make clear that it's a matter of sequencing," says Albert. "The message isn't 'Don't have children.' It's 'Don't have children when you're seventeen'." The NCLR focus-group study concluded that when addressing a Hispanic audience, it is far more effective to discuss pregnancy in terms of family planning than to preach against it altogether.

The new manual created by the Latino Initiative, which drew on the expertise of 20 Latino community leaders, hopes to spread such insights. It emphasizes that Latino teens straddle two worlds and that they need to learn to navigate between them. To do so, the manual stresses the importance of using traditional Hispanic values—*familismo* (family-centeredness), *simpatía* (affection), *respeto* (respect)—as a compass.

As the manual points out, "Latino adolescents who report feeling close to their parents are less likely to initiate sex at an early age and are likely to enact safer sexual practices." For that reason, most of the recommendations center on parent-teen communication, seeking to harness the ingrained Hispanic notion of respect for one's elders. "Literature shows that this concept is unique to the Latino community," says Alvaro Simmons, COO of Mary's Center for Maternal and Child Care, a health-care center and NCLR affiliate in Washington, D.C. "It is one [teen-pregnancy] intervention that works when tested against other communities. "

One person trying to foster change in the community is Zeleya, the teenage mother, who is now 16. She's working as a peer educator at Mary's Center, where she encourages girls her age and younger to "think twice" about sex and to pursue their dreams. "When I had my child, my plans all went down the drain," she says. She still has her dreams—going to college, becoming a physical therapist—but it may take her quite a bit longer to realize them