

# Briefly...

## Policy Brief: Racial and Ethnic Disparities in Teen Pregnancy

Teen pregnancy rates in the United States have declined substantially since the early 1990s among all racial and ethnic groups. Even so, there have been real disparities in that progress. Moreover, recent data suggest that the significant progress the nation has made in reducing teen sexual activity, improving contraceptive use among sexually active teens, and reducing the teen birth rate has stagnated and/or reversed—for minorities in particular. All of which suggests that our nation cannot afford to become complacent in its efforts to reduce the high level of teen pregnancy, which has serious consequences for child and family well-being. We must concentrate additional efforts to support various racial and ethnic communities that are disproportionately affected by early pregnancy and parenthood. By preventing teen pregnancy, we can make progress on other troubling social issues that also disproportionately affect many minority youth including academic failure and poverty.

Fifty-two percent of Latina teens and 50 percent of African American teen girls will become pregnant at least once before they turn 20. In comparison, only 19 percent of non-Hispanic white teen girls under the age of 20 become pregnant.

### Recommendation

Policymakers should support teen pregnancy legislation that seeks to address disparities among different racial and ethnic groups. Additionally, federal investments are needed to enhance research and data collection that will shed more light on the factors contributing to these disparities and how to address them.

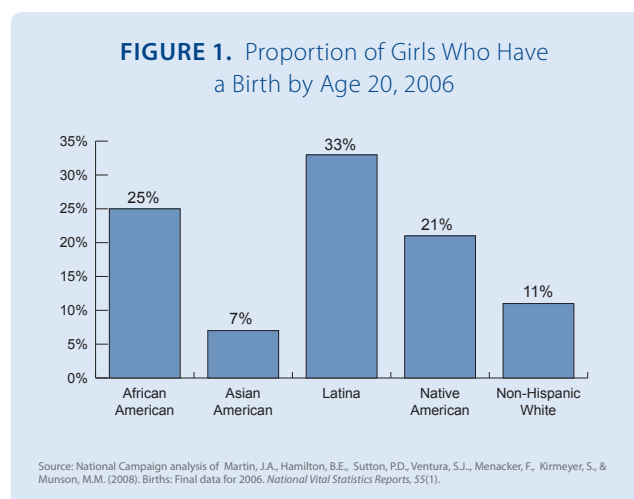
### Key Facts

At present, Latina and African American teen girls are more likely than not to become pregnant at least once before age 20. Native American teens also have significantly higher birth rates compared to their non-Hispanic white counterparts (teen pregnancy data are not available). Asian American teens have the lowest rates of teen births compared to other racial and ethnic groups (teen pregnancy data are not available). However, disaggregated data show that certain Asian American subgroups have high rates of teen births. For example, in Ramsey County, Minnesota, Hmong teen girls have a birth rate more than four times greater than their non-Hispanic white counterparts and in California, the proportion of teen births among Laotians is the highest among all racial/ethnic groups.<sup>1,2</sup>

### Teen Pregnancy and Birth Data

- Fifty-two percent of Latina teens and 50% of African American teen girls will become pregnant at least once before they turn 20. In comparison, only 19% of non-Hispanic white teen girls under the age of 20 become pregnant.<sup>3</sup>

- Fully 16% of all teen girls will have a baby by age 20. As Figure 1 shows, the likelihood is higher in most communities of color.<sup>4</sup>
- The overall teen pregnancy rate increased 3% between 2005 and 2006, the first increase since 1990. The overall increase includes increases among most racial and ethnic groups. For example, between 2005 and 2006 the teen pregnancy rate increased 3% for African American teen girls, 1% for Latinas, and 2% for non-Hispanic white teen girls.<sup>5</sup>
- The birth rate among Native American teens increased steadily between 2005 and 2007 before decreasing slightly in 2008, for an overall increase of 11 percent. This is the steepest increase in the teen birth rate of any racial or ethnic group (teen pregnancy rates are not available for Native American teens).<sup>6</sup>



## Teen Sexual Behavior and Contraceptive Use

- Sexual experience differs significantly by race/ethnicity. In 2009, black high school students (65%) were more likely than Hispanic students (49%) and white students (42%) to report having ever had sex.<sup>7</sup>
- Three times as many white students (27%) as black (8%) students reported using birth control pills before the last time they had sex. Hispanic students (11%) also reported used birth control pills less than half as frequently as their white counterparts.
- There are also racial/ethnic differences in the proportion of high school students who say they used a condom the last time they had sex—63% of whites, 62% of blacks, and 55% of Hispanic students.<sup>8</sup>

## Legislative Background

**The Communities of Color Teen Pregnancy Prevention Act of 2010 (H.R.5033)** was introduced by Rep. Lucille Roybal-Allard (D-CA) to offer a research-driven, innovative approach to address the disproportionately higher rate of teen pregnancy among young women in communities of color. The bill authorizes grants for research and demonstration teen pregnancy prevention programs for racial and ethnic communities with disproportionately higher rates and supports research on the incidence and prevalence of teen pregnancy in communities of color.

There are also several legislative proposals both as stand-alone bills and in larger legislative vehicles that give priority to projects in communities with above average teen pregnancy rates, which would include certain communities of color. These provisions are included within: the Preventing Unintended Pregnancies, Reducing the Need for Abortion, and Supporting Parents Act (H.R. 3312) and the Prevention First Act (S.21/ H.R. 463).

The National Campaign believes these provisions would help ensure that vulnerable youth in communities with high rates of early pregnancy and parenthood have the necessary tools to make wise decisions about their future that will promote the well-being of this generation and the next.

## Sources

1. Meschke, L. L. (2003). Hmong Pregnancy Planning Grant (unpublished document). St. Paul, MN: Lao Family Community of Minnesota.
2. Weitz, T.A., Harper, C., Mohllajee, A.P. Teen Pregnancy among Asians and Pacific Islanders in California: Final Report. UCSF Center for Reproductive Health Research & Policy: San Francisco, California, 2001
3. National Campaign analysis of Martin, J.A., Hamilton, B.E., Sutton, P.D., Ventura, S.J., Menacker, F., & Kirmeyer, S. (2006). Births:

Final data for 2004. *National Vital Statistics Reports*, 55(1); Ventura, S.J., Abma, J.C., Mosher, W.D., & Henshaw, S. (2008). Estimated Pregnancy Rates by Outcome for the United States, 1990-2004. *National Vital Statistics Reports*, 56(15).

4. National Campaign analysis of Martin, J.A., Hamilton, B.E., Sutton, P.D., Ventura, S.J., Menacker, F., Kirmeyer, S., & Munson, M.M. (2007). Births: Final data for 2005. *National Vital Statistics Reports*, 55(1).
5. Kost, K., Henshaw, S., & Carlin, L. (2010). *U.S. Teenage Pregnancies, Births and Abortions: National and State Trends and Trends by Race and Ethnicity*. Retrieved January 26, 2010, from <http://www.guttmacher.org/pubs/USTPtrends.pdf>
6. Hamilton, B.E., Martin, J.A., and Ventura, S.J (2010). Births: Preliminary data for 2008. *National Vital Statistics Reports*, 58(16).
7. Centers for Disease Control and Prevention (2010). Youth Risk Behavior Surveillance—United States, 2009. Surveillance Summaries, June 4, 2010. MMWR; 59(SS-5); Youth Risk Behavior Surveillance System (2009). *Youth Online: Comprehensive Results*. Retrieved June 2010 from <http://apps.nccd.cdc.gov/yrbss>. Atlanta, GA: Centers for Disease Control and Prevention.
8. Ibid.