

# WHAT IS ORANGE COUNTY DOING ABOUT TEENAGE PREGNANCIES?

## SUMMARY

A major problem in Orange County is the high number of teenage pregnancies. The 2007-2008 Orange County Grand Jury learned that some teenage moms and dads are not aware of programs that are available to assist them through pregnancy and with parenting. This is critical as the findings of health administrators indicate that reproductive health education for youth and their parents, along with programs to assist pregnant and parenting teens, improves the safety of giving birth and ensures better health of their babies.

*“Every minute, a baby is born to a teen mother in the United States.”*

*National Center for Health Statistics, 2002*

This study deals with identifying the many programs that are available and how they should be made more accessible to teens so that they can help themselves and their babies both now and in the future. Education is important because early awareness and program access will help diminish a substantial social and economic burden on society.

The Grand Jury identified more than 100 programs offered through the Orange County Health Care Agency, the Orange County school districts and several community-based social organizations. This study focused on four programs. Of the programs reviewed, the Grand Jury found the California School Age Families Education program (Cal-SAFE), as adopted and implemented by local districts, to be very effective in assisting pregnant and parenting teens and in preventing future unwanted teen pregnancies.

However, the Cal-SAFE Program is funded by the California State Department of Education. Cal-SAFE programs which are currently operating will continue to receive California Department of Education funding. *However, no new Cal-SAFE programs will be funded.* In fact, the current funding is being threatened.

The schools, along with the Orange County Health Care Agency must explore other options that are just as effective as the Cal-SAFE program.

## REASON FOR INVESTIGATION

*“Teen birth rates for both the US and California are higher than those for every other Western democracy in the world.”<sup>1</sup>*

*“The teen birth rate in the United States rose in 2006 for the first time since 1991.”<sup>2</sup>*

Births in Orange County in 2005 indicate that 3,208 (7.2%) of the 41,905 births were to teenage moms.<sup>3</sup> Births to adolescents have inherent problems such as increased rates of

<sup>1</sup> Public Health Institute, No Time for Complacency, Teen Births in California, March 2003

<sup>2</sup> Centers for Disease Control, National Center for Health Statistics, December 5, 2007

<sup>3</sup> Orange County Health Care Agency Report to the Grand Jury, October 25, 2007

infant mortality and low birth weight. Low birth weight can lead to developmental disabilities and many other negative outcomes.

Some of the programs offered in Orange County fail to effectively promote their benefits; most prospective clients learn of programs through word-of-mouth referrals. The Grand Jury studied how programs in Orange County assist pregnant and parenting teenagers. It also wanted to know how effective these programs are in preventing repeat teen pregnancies.

## **METHOD OF STUDY**

The Grand Jury investigated this subject by:

- Conducting interviews with County agencies and community organizations that facilitate services for pregnant and parenting youth
- Reviewing and evaluating reports about pregnant and parenting teens
- Reviewing County, State and Federal statistics and reports
- Reviewing summary data related to over 100 programs dealing with teen pregnancy issues

## **BACKGROUND AND FACTS**

While teenage pregnancy numbers decreased between 1996 and 2005, an increase was recorded for 2006.<sup>4</sup> This is a warning that something is wrong. Teen pregnancy, childbearing and resulting consequences add enormous social and economic costs to the community, often including a breakdown of family structure.

A study of Orange County teen births in 2005 by ethnic groups showed that Hispanic females under 19 years of age accounted for 85% of the total teen births. Births by age showed that women 18 to 19 had the highest birth rate at 48.7 per 1,000, with girls 15 to 17 at 15 per 1,000.<sup>5</sup>

Orange County cities with the highest teen births in 2005 were as follows:<sup>6</sup>

- Santa Ana                      968
- Anaheim                        622
- Garden Grove                187
- Fullerton                        154
- Orange                          139
- Costa Mesa                    103
- Buena Park                    101

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<sup>4</sup> Centers for Disease Control, National Center for Health Statistics, December 5, 2007

<sup>5</sup> Report on the Conditions of Children in Orange County, 2007

<sup>6</sup> Orange County Health Care Agency Report to the Grand Jury, October 25, 2007

The negative impact of teenage births is documented statistically in many reports of the California Department of Finance. Some of the important results from its 2006 report show that babies born to teen mothers have a 50% higher rate of infant mortality than those born to mothers over 20 years of age. Furthermore, babies born to teen mothers are 30% more likely to have low birth weight, resulting in higher medical costs and disabilities. California's average annual cost to taxpayers for each child born to a mother 17 years of age or younger is \$4,224.<sup>7</sup>

Teen mothers are more likely to<sup>8</sup>:

- Have had mothers who were pregnant as adolescents
- Drop out of school
- Remain unmarried and live in poverty
- Live in single parent households
- Experience abuse and neglect
- Remain longer in the welfare system

Under the California Comprehensive Sexual Health and HIV/AIDS Prevention Education Act (Education Code section 51930 – 51939), basic sexual health instruction, which includes basic human reproduction and HIV/AIDS instruction, **is** mandated with a parental exception option. Comprehensive sexual health instruction, which includes family planning, **is not** mandated in California. Therefore health education in schools may not be effective in preventing teen pregnancies.

Because comprehensive sexual health instruction is optional, the Community Care Health Center in Santa Ana, a non-profit community assistance group, applied for and was awarded a five-year grant which is being used to promote reproductive health education using a curriculum entitled “Street Wise to Sex Wise.” Although not sponsored by the school district, this program has been enthusiastically accepted by parents and students at one high school within the Huntington Beach Union High School District. Initial reactions are promising.

### **Programs Available to Pregnant and Parenting Teens**

The Grand Jury focused on four programs that offer services primarily to pregnant teens, teen parents and also provide instruction designed to prevent repeat pregnancies.

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<sup>7</sup> The Public Costs of Teen Childbearing in California, The National Campaign to Prevent Teen Pregnancy, November, 2006

<sup>8</sup> “Somewhere to Turn: A Study of Services in Orange County for Teens and Youth,” Mary’s Shelter, Santa Ana, California, May 2007

## *Cal-SAFE*

The Cal-SAFE Program is the successor to three programs targeting pregnant and parenting teens and their children: the Pregnant Minors Program, the School Age Parenting and Infant Development Program, and the Pregnant and Lactating Students Program.

Cal-SAFE was established as a comprehensive and community-linked, school-based program. It is designed to increase the availability of support services for enrolled expectant or parenting pupils. The services are designed to improve academic achievement, to improve parenting skills and to provide quality child care and development programs for their children.

The last Cal-SAFE Report to the California Legislature, using 2000-2004 data, indicated the program had positive results and benefits. Over 75% of the students who completed the program finished high school and a significant majority of the children born to Cal-SAFE students were healthy. Unfortunately, some of the websites of high schools which offer Cal-SAFE do not make reference to the availability of this program and therefore students may not be aware of its existence. Nevertheless, the Cal-SAFE program achieved many of its objectives as seen in the following outcomes:

- 97% of students in the Cal-SAFE Program did not have a repeat birth or father a repeat pregnancy while enrolled in the program
- Only 7.3% of babies born to teens had a low birth weight
- More than 75% of the children of Cal-SAFE students attended a child care center, 94% of these children were up-to-date on their immunization schedules

Of the 15 Orange County school districts with high schools, only the following seven operate Cal-SAFE Programs:

- Anaheim Union High School District
- Capistrano Unified School District
- Fullerton Joint Union High School District
- Garden Grove Unified School District
- Huntington Beach Union High School District
- Placentia-Yorba Linda Unified School District
- Santa Ana Unified School District.

All high school districts offering the Cal-SAFE program will accept inter-district transfers from districts not offering the program depending upon capacity.

La Sierra High School in the Fullerton Joint Union High School District is an exemplary Cal-SAFE program which includes among other outstanding services, transportation to and from school and child care to ensure that teen mothers continue their education. Most impressive is the child care center with a nurse on-site, supporting a policy to admit

children who would otherwise be sent home for non-critical illness such as a cold. This provides the teen mother the opportunity for uninterrupted class attendance.

The Cal-SAFE Program is funded by the California State Department of Education. Currently successful Cal-SAFE programs will continue to receive California Department of Education funding. *However, no new Cal-SAFE programs will be funded.* In fact, current funding is being threatened.

### *Family Planning Health Education*

The Orange County Health Care Agency's (HCA) Family Planning Health Education (FPHE) unit assists teenagers who are considered at-risk for unintended pregnancies. The teens may be drug users/abusers, homeless, disabled, non-English speakers, or even migrant workers. The teen pregnancy unit, through HCA's Family Planning Clinic, has the goal to educate and inform teens about the importance of family planning and reproductive health.

FPHE provides access to information and offers contraceptives to all, with priority given to low-income teens. A formal presentation is conducted on birth control, sexually transmitted diseases, reproduction, cancer screenings, importance of communication between partners, body image and attitudes toward sex, etc. It also provides outreach activities to the schools, family resource centers, homeless shelters, domestic violence shelters, day labor sites and community health fairs.

In 2006, Orange County FPHE provided outreach services to 10,222 individuals, of whom approximately 25% were teens.<sup>9</sup>

### *Adolescent Family Life Program*

Adolescent Family Life Program (AFLP) is a voluntary, intensive program serving pregnant and parenting youth. AFLP is also administered by the HCA with funding from local, State and Federal agencies and serves approximately 500 clients. The program's primary goals are to:

- Improve teen pregnancy outcomes
- Reduce the number of repeat, unintended adolescent pregnancies
- Encourage continuing academic education
- Promote healthy parenting

Case managers meet monthly with clients, usually in the home, to provide guidance and to help them gain access to available resources. Females must be under the age of 19 and pregnant or parenting. Males must be under 21 and actively involved with a pregnant partner or parenting a child.<sup>10</sup> At-risk teens have priority, including those who are disabled, under 15 years of age, with medical or psychological concerns, or severely behind in their education.

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<sup>9</sup> Orange County Health Care Agency Report to the Grand Jury, October 25, 2007

<sup>10</sup> *ibid*

### *Nurse-Family Partnership*

Also under HCA, Nurse-Family Partnership (NFP) is a home visitation program for teens and young women under 24 years old. The woman must be less than 28 weeks pregnant with her first pregnancy and planning to parent the child, and be eligible for Medi-Cal, Cal Optima or other Medi-Cal related services.

Under a set schedule, the nurse will visit the client before the 28<sup>th</sup> week of pregnancy and until the child is two years of age. The nurse assists the new mother and her family by providing education and support in the areas of prenatal care, nutrition, childbirth and breastfeeding. The services are provided in English, Spanish and Vietnamese. The primary goals of the NFP are to foster healthier pregnancies, improve the health and development of babies, and encourage self-sufficiency.

Data from NFP graduates as of March 2007 shows encouraging results:

- 47% earned their diploma or GED
- An additional 30% continued to work toward their diploma or GED
- 19% pursued education beyond high school
- Only 5.6% of babies born to NFP grads were premature versus 9.6% for the County (2004) and 10.7% for the State (2004)
- 84% of NFP mothers initiated breastfeeding and 13% continued to breastfeed until their babies were 12 months old
- 93% of the babies through age two had no visits to hospital emergency rooms due to injury or foreign substance ingestion
- 100% of NFP infants at age two were fully immunized compared to California's rate of 72% (2004)

This program served 437 new mothers in 2007 and anticipates serving as many as 440 in 2008.

### **CONCLUSION**

Teenage pregnancy is a continuing major problem in Orange County. This study identified many teenage parent and parenting programs that are available through the Orange County Health Care Agency, school districts and several community-based organizations. The Grand Jury found that there are a sufficient number of programs but there is a lack of awareness by teenagers and their parents about the programs being offered.

It further found that the Cal-SAFE program offered by high school districts appears to be very effective in assisting pregnant and parenting teens and in preventing repeat unwanted teen pregnancies. However, a reduction in funding for this program is being threatened due to State budget cuts. Reducing funds for the Cal-SAFE program will have a negative impact on the program.

Coordination of all programs is needed to assist pregnant and parenting teens and to provide human reproductive education. The responsibility for this coordination lies primarily within the Health Care Agency's purview in collaboration with the Orange County Superintendent of Schools and/or the participating high school districts.

Orange County needs a more aggressive campaign to publicize the programs available to pregnant teens and teen parents. Otherwise, Orange County will continue to deal with the negative impacts of teen pregnancies.

## **FINDINGS**

In accordance with California Penal Code Sections 933 and 933.05, each finding will be responded to by the government entity to which it is addressed. The responses are to be submitted to the Presiding Judge of the Superior Court. The 2007-2008 Orange County Grand Jury has arrived at the following findings:

**F-1 The Cal-SAFE program which is offered by some local high school districts, is a very effective program that assists students who are pregnant and parenting. However, a reduction in funding for existing high school districts with Cal-SAFE programs is being threatened and there is no new funding for additional programs.**

**F-2 Programs available to pregnant and parenting youth are currently coordinated by the Health Care Agency. However, most programs are not widely known or utilized by Orange County teenagers and/or their parents.**

**Responses to Findings F-1 and F-2 are required from the Orange County Superintendent of Schools.**

**Response to Finding F-2 is requested from the Orange County Health Care Agency**

## **RECOMMENDATIONS**

In accordance with California Penal Code sections 933 and 933.05, each recommendation will be responded to by the government entity to which it is addressed. The responses are to be submitted to the Presiding Judge of the Superior Court. Based on the findings of this report, the 2007-2008 Orange County Grand Jury makes the following recommendations:

**R- 1 That the Orange County Health Care Agency in connection with the Orange County Superintendent of Schools form and support a program that incorporates some of the integral parts of the Cal-SAFE program to continue assisting pregnant and parenting teens.**

**R-2 That the Orange County Health Care Agency and the Orange County Superintendent of Schools coordinate and publicize programs about pregnancy and parenting to high school students and their parents.**

**Response to Recommendations R-1 and R-2 is required from the Orange County Superintendent of Schools.**

**Response to Recommendations R-1 and R-2 is requested from the Orange County Health Care Agency.**

**REQUIRED RESPONSES:**

The California Penal Code specifies the required permissible responses to the findings and recommendations contained in this report. The specific sections are quoted below:

§933.05

(a) For purposes of subdivision (b) of Section 933, as to each grand jury finding, the responding person or entity shall indicate one of the following:

- (1) The respondent agrees with the finding.
- (2) The respondent disagrees wholly or partially with the finding, in which case the response shall specify the portion of the finding that is disputed and shall include an explanation of the reasons therefore.

(b) For purposes of subdivision (b) of Section 933, as to each grand jury recommendation, the responding person or entity shall report one of the following actions:

- (1) The recommendation has been implemented, with a summary regarding the implemented action.
- (2) The recommendation has not yet been implemented, but will be implemented in the future, with a timeframe for implementation.
- (3) The recommendation requires further analysis, with an explanation and the scope and parameters of an analysis or study, and a timeframe for the matter to be prepared for discussion by the officer or head of the agency or department being investigated or reviewed, including the governing body of the public agency when applicable. This timeframe shall not exceed six months from the date of publication of the grand jury report.
- (4) The recommendation will not be implemented because it is not warranted or is not reasonable, with an explanation therefore.

## REFERENCES

“Somewhere to Turn: A Study of Services in Orange County, California, for Pregnant Teens and Youths”, Mary’s Shelter, Santa Ana, California, May 2007.

“Report on the Condition of Children in Orange County”, Orange County Health Care Agency, October 2007.

“No time for Complacency: Teen Births in California”, Public Health Institute, September 2007.

“Federal Funding of Abstinence – Only Sex Education Programs Debated”, Los Angeles Times, April 24, 2008.

“California School Age Families Education (Cal-SAFE) Program Fiscal Guidelines and Funding Procedures Manual”, California Department of Education, School Fiscal Services Division (Rev 04/07).

“Street Wise to Sex Wise”, Community Health Care Center

Cal-SAFE Program (California School-Aged Family Education), Anaheim Union High School District

Public Health Nursing, Orange County Health Agency

Orange County Department of Education

*Websites:*

California State University – Fullerton ([www.fullerton.edu](http://www.fullerton.edu))

Orange County Government ([www.oc.ca.gov](http://www.oc.ca.gov))  
Health Care Agency ([www.ochealthinfo.com](http://www.ochealthinfo.com))  
Department of Education ([www.ocde.k12.ca.us](http://www.ocde.k12.ca.us))  
Social Services Agency ([www.ssa.ocgov.com](http://www.ssa.ocgov.com))

State of California ([www.ca.gov](http://www.ca.gov))  
Department of Finance ([www.dof.ca.gov](http://www.dof.ca.gov))  
Department of Education ([www.cde.ca.gov](http://www.cde.ca.gov))

National Campaign to Prevent Teenage Pregnancy ([www.teenpregnancy.org](http://www.teenpregnancy.org))

National Center for Disease Control & Prevention ([www.cde.gov](http://www.cde.gov))

National Center for Health Statistics ([www.cdc.gov/nchs](http://www.cdc.gov/nchs))