

Public Health Practice Stories from the Field



Keeping Teen Parents on Track for Graduation

Providing pregnant or parenting teens and their children with critical support services

5
largest cities in Connecticut are some of the poorest in the United States, even though the state is one of the nation's wealthiest

48%
of Connecticut's teen births take place in the five largest cities

80%
of high school seniors enrolled in the Supports for Pregnant and Parenting Teens program graduated or remained in school in the program's second year

98%
of children in the program are up to date on immunizations and well-child visits

While Connecticut is recognized as one of the United States' wealthiest states, its five largest cities, Bridgeport, Hartford, New Britain, New Haven and Waterbury, are some of the poorest in the country. In these cities, the rates of children who live in poverty, receive free and reduced-rate meals, are English language learners and don't finish high school are two to three times that of Connecticut state averages.

Teen births are strongly linked to school dropout, according to a 2010 analysis by Connecticut's departments of education and public health. This link is strongest in Connecticut's five largest cities, where teens are at least twice as likely to give birth as teens in the state overall. In these five cities, Hispanic teens are eight times more likely and African American teens are four times more likely to give birth as a teen, compared to non-Hispanic white teens.

To improve health, education, and social outcomes for pregnant and parenting students and their children in these five cities, the Connecticut State Department of Education spearheaded the Support for Pregnant and Parenting Teens initiative.

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What We Did

The Supports for Pregnant and Parenting Teens (SPPT) initiative began in 2010 as a three-year pilot in five school districts in grades 9–12. SPPT is a partnership of the Connecticut State departments of education, public health, and social services; the Hispanic Health Council; and the Capitol Region Education Council.

Certain core services and practices are critical to helping young parents succeed, according to The Center for Assessment and Policy Development's publication, *School-Based Programs for Adolescent Parents and their Young Children* (1997). SPPT has adopted this model, which includes

- Flexible, quality schooling to help young parents complete high school
- Case management and family support
- Links and referrals to prenatal, reproductive, and pediatric health services
- Quality child care and transportation services
- Parenting and life skills education and support services
- Fatherhood involvement services and supports

Services are delivered by a school-based team (social worker, home visitor, and nurse). State and local advisory committees help develop links with community-based organizations and create inventories of existing resources.

What We Accomplished

By the end of the program's first year, 273 students had been served (92 teen mothers, 142 pregnant teens, and 39 teen fathers). Monthly data reports track attendance, grade completion, graduation, participation in individual and group counseling sessions, and home visiting. In addition to the school-based services, approximately 58% of the teens received home visits, which focus on child development, parenting, and life skills. The initiative also provides program and school staff with a breadth of training opportunities in cultural competency, legal rights, domestic violence, social services, communication, family literacy, and sustainability planning.

After one full year of implementation,

- 80% of high school seniors enrolled in the program had graduated or remained in school
- 98% of children were up to date on immunizations and well-child visits
- 99% of children were meeting developmental milestones or receiving appropriate services to address developmental delays
- Less than 5% of enrolled females had experienced repeat pregnancy

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