



TEEN PREGNANCY

Reduce teen pregnancy and its contribution to the cycle of poverty for teens and their families

Key Strategies

- Monitor teen pregnancy/birth rates and prevention policies
- Promote the delay of sexual initiation through evidence-based programs and social norm changes
- Strengthen clinical services and improve the quality of care
- Promote the use of effective contraceptive methods, including long-acting reversible contraception, by sexually active teens

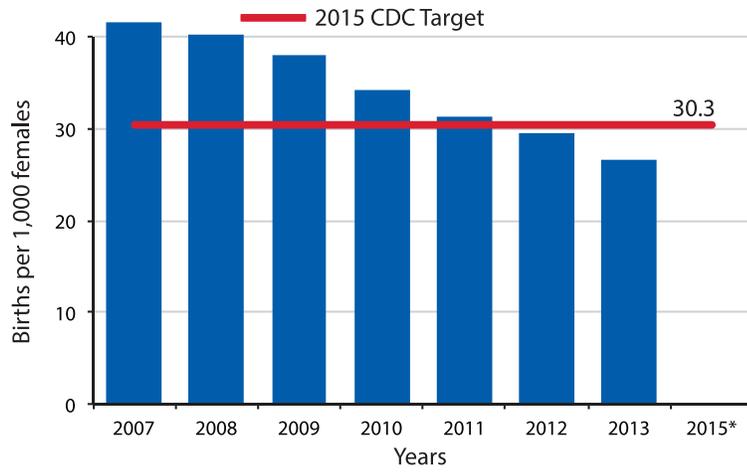
Key Highlights 2014

- *Recommendations for Providing Quality Family Planning (QFP) Services* gives all providers of reproductive health services access to national, evidence-based guidance on family planning service delivery, including specific recommendations for serving adolescent clients. The recommendations were released in April 2014.
- Working with partners, CDC developed and disseminated provider tools to support widespread understanding and use of the QFP Services, and the Medical Eligibility Criteria and Selected Practice Recommendations for Contraceptive Use. A training course for pediatricians to ensure they have the knowledge, skills and motivation to screen adolescents for sexual activity, and to counsel patients about contraception and other reproductive health matters, was developed and piloted with the American Academy of Pediatricians.
- CDC worked to disseminate information and provide learning opportunities to support removing barriers to the use of Long Acting Reversible Contraceptives (LARC) including efforts to clarify the safety and effectiveness of LARC use among adolescent females and Medicaid reimbursement for immediate postpartum insertion of LARC.
- CDC, in partnership with the Office of Adolescent Health (OAH), is providing funding to nine grantees to implement a community-wide initiative to reduce teen pregnancy and births in communities with the highest rates. Grantees have:
 - Reached over 19,000 youth with evidence-based interventions to prevent teen pregnancy, representing a four-fold increase from 2012. This exceeded the year three goal of 12,500.
 - Provided contraceptive and reproductive health services to over 50,000 individual adolescents through 63 partner clinics.
 - Increased LARC coverage by 80% from 2011 among adolescent clients served by health center partners, particularly among African American and White adolescents between 15 and 19 years of age.
- In January 2014, CDC initiated a systematic review to examine the body of evidence documenting observed health, economic, and social consequences of teenage pregnancy through systematic review and meta-analytic techniques. CDC met with economic experts and policy leaders (August 2014) to discuss and review the systematic review protocol. The review is expected to be completed in 2016.

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Progress to Date

Trends in the rate of births among adolescent females ages 15–19, 2007–2013



Source: National Vital Statistics System (NVSS)

*data anticipated December 2016