

Hartford's Strategic Plan for Teen Pregnancy Prevention

BREAKING THE CYCLE



of children having children having children having children having children

Statement by Jean King, Chief Executive Officer of the Hartford Action Plan, in support of the Bill 461, An act concerning teen pregnancy prevention – March 3, 2008

Thank you for the opportunity to speak with you in support of Bill No. 461, an act concerning teenage pregnancy prevention programs. The Hartford Action Plan is part of the Healthy Teens Coalition, a group who have come together to ask the state to help schools provide our young people with appropriate specific comprehensive sex education.

The Hartford Action Plan Breaking the Cycle campaign has been leading teen pregnancy prevention activities in Hartford since 1995. During that time the birth rate to teens ages 15 to 17 was cut in half from 94 births per 1000 in 1995 to 47 births per 1000 in 2005 (the latest year for which we have data). The number of births to Hartford teens ages 15-17 was more than cut in half, reduced from 264 in 1995 to 132 in 2005. ¹

Three things that we know from our work

- 1 Comprehensive sex education works - young people learn how to make informed choices in their lives and how to protect themselves
- 2 Parents want comprehensive sex education and they want it in the schools. We learned this particularly for CT with a study done in 2003 in major CT cities by the national organization Advocates for Youth.² My written testimony includes more details about this study.
- 3 Providing comprehensive sex education and other teen pregnancy prevention programming in the schools means that we reach far more young people than we can from smaller out of school community programs. If we want to continue to lower the teen birth rates and decrease many risky behaviors in teens we have to take a public health approach and provide ongoing community wide programming.

Success in reducing the rates of teen pregnancy require community wide programming that reaches young people, their parents and community leaders; teaching in the schools; and support of local government. Young people need comprehensive sex education. Teens need advice and counseling from parents and other responsible adults, but they also need to have the comprehensive teaching.

We start our Breaking the Cycle programs in Hartford with a school program for fifth graders called Postponing Sexual Involvement. We reach every fifth grader with the message to delay starting to have sex, with advice on healthy relationships, and understanding of their right to make their own decisions. This program supplements the health education taught in the schools.

Teens in Hartford inform our work. Several years ago we worked with a group of teens to design their own program of peer teen pregnancy prevention for Hartford High schools. The teens wrote the curriculum. They named the program "The Whole Truth" because they told us that teens want to know the whole truth – they don't want partial information or limited

information. They want to learn the facts so that they can make their own responsible decisions. Another group of Hartford teens, Teens United in Health, has told us repeatedly that we have to reach younger teens, middle school youth and younger. The older teens tell us the younger teens are “clueless.” But data tells us that about 45% of youth will be sexually active by the end of 9th grade. We cannot wait until high school to offer appropriate quality, that is, comprehensive, sex education.

We know too that comprehensive sexual education must start early and continue, always in an age appropriate way, through high school. It must teach not only the body parts, that is reproductive physiology, but also avoidance of risky behaviors, how to protect themselves, how to recognize good and bad relationships. In Hartford where the school system has a health education curriculum that covers a large range of issues, middle school teens are receiving only 8 sessions per year of health education, with sex education as only one or two parts of those 8 sessions. CT’s state guidelines suggest that the recommended annual dosage for comprehensive health education is 80 hours per year for grades 5 through 12.

This legislation will help to provide one part of the essential programming to educate and protect our youth. For us in Hartford it will be an important resource to continue to carry out effective and comprehensive teaching. It is a good first step and we urge the legislature to enact the bill.

NOTES

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| BIRTHS TO TEENAGERS, HARTFORD 1990-2005 | | | | |
|--|-------|------|------|-------------|
| | 1990 | 1995 | 2000 | 2005 |
| Actual Births to Teens | 747 | 598 | 481 | 381 |
| Percent Births to Teens | 23 | 25.9 | 22.0 | 17.9 |
| Births to under 15 | 29 | 17 | 22 | 4 |
| % Births to under 15 | 0.9 | 0.7 | 1.0 | 0.2 |
| # Births to 15 to 17 | 293 | 264 | 183 | 132 |
| % Births to 15 to 17 | 9.0 | 11.4 | 8.4 | 6.2 |
| Birth Rate to 15 to 17 | 104.0 | 93.8 | 64.8 | 46.7 |
| Births to 18 & 19 | 425 | 317 | 276 | 245 |
| Total Births | 3248 | 2312 | 2186 | 2125 |
| U.S. Teen Birth Rate 15 to 17 per 1,000 teens | 37.5 | 35.5 | 26.9 | 21.4 |

² APCO Insight, a public opinion research firm located in Washington, D.C., conducted a survey of Connecticut residents for the national organization Advocates for Youth on attitudes toward sexuality education. The survey was conducted among 699 randomly selected adults in the state of Connecticut, including over-samples in Hartford, Bridgeport, Waterbury, and New Haven of 100 residents each. Interviews were conducted over the telephone between December 9 and December 16, 2003. The margin of error overall is $\pm 3.8\%$.

Summary of Findings

- Connecticut residents agree by a large margin that young people should receive sex education that teaches about birth control and sexually transmitted diseases, yet most also believe that the schools should also promote abstinence in their sexual education curriculum. In fact, most Connecticut residents (75%) do not believe that these two activities are contradictory and that schools should both promote abstinence and provide information about birth control and safe sex practices.
- A majority of Connecticut residents (59%) oppose current national policy that prohibits programs receiving federal abstinence funding from providing information about condoms and birth control as methods for preventing pregnancy and disease and which solely teaches the message of abstinence before marriage. Moreover, a majority (61%) say they would take action if they found out that their children's school prohibited information about birth control.
- Large majorities support sex education courses for junior high and high school students (79% and 91%, respectively), yet most do not support sex education for younger elementary school students aged 6 to 8 (81%). Connecticut residents are more divided on whether sex education should be taught to older elementary school students aged 9 to 11 (44% support and 53% oppose).
- Generally, Connecticut residents do not believe that young people receive information about sex too early. In fact, a large majority believe that young people get information about sex, birth control, and protection from sexually transmitted diseases either too late (29%) or at about the right time (36%).
- A majority of Connecticut residents support an active role for nurses and guidance counselors in directing sexually active young people to clinics that treat and prevent sexually transmitted diseases and to family planning clinics (79% and 69%, respectively). Additionally, a majority (60%) support school personnel making condoms and other forms of birth control accessible to sexually active young people.

For more information contact: Jean C. King, Chief Executive Officer, Hartford Action Plan, 30 Arbor St.,
Hartford, CT 06106, 860-236-4872, jeank@pariskygroup.com

