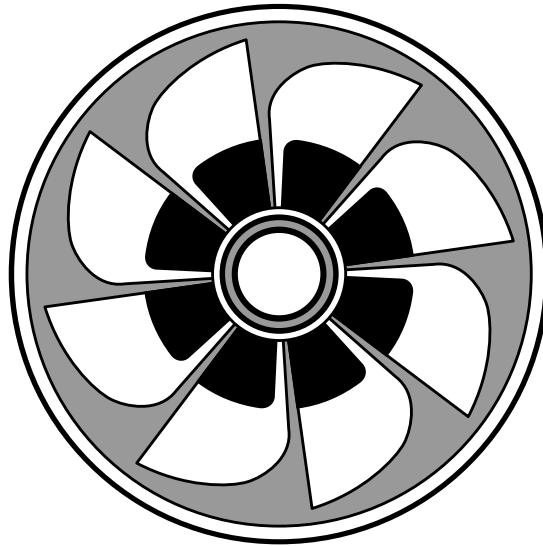


Bridging Our Past, Present and Future: Teen Pregnancy in New Mexico



A Report to Policy Makers and Communities

*This document honors New Mexico's past efforts to address teen pregnancy
and proposes recommendations for future action
on the part of public and private sectors*

N E W M E X I C O

TEEN PREGNANCY COALITION

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Bridging Our Past, Present and Future

is dedicated to all the young people of New Mexico and to the committed and caring adults who work to insure a better future for our children and families.

The New Mexico Teen Pregnancy Coalition would like to express its sincere appreciation to our State Plan Committee for its work on this document and to the state agencies and community members who have collaborated with us over the years. We particularly want to acknowledge the long-term commitment of the NM Department of Health and the NM Children, Youth and Families Department.

Appreciation is also extended to The National Campaign to Prevent Teen Pregnancy for its ongoing commitment to providing the research and advocacy essential to the nation's progress in reducing teen pregnancy.

This publication was funded with the generous support of the NM Department of Health, the NM Department of Human Services, the Turner Foundation, and the New Cycles Foundation.

October, 2003

Introduction

Between 1988 and 1992, New Mexico had a Governor-appointed task force/advisory committee on adolescent pregnancy. Its primary responsibility was to prepare recommendations to state agencies regarding primary prevention and services to pregnant and parenting teens. The committee's final recommendations were made in the 1992 publication, *Children Having Children - STILL Having Children*. Since that time, there has been no written document designed to look at accomplishments or make recommendations for the future.

In late 1999, a group of people from the earlier Governor's Advisory Committee (now members of the New Mexico Teen Pregnancy Coalition) came together to review the subsequent progress that New Mexico has made. They reviewed the events of the decade and compared notes using the *Children Having Children* publication. This small group became the New Mexico Teen Pregnancy Coalition's State Plan Committee. Its goal was to review past policies and interventions, consider the current status of teen pregnancy in New Mexico and chart a path to our future.

Bridging Our Past, Present and Future: Teen Pregnancy in New Mexico was originally released in May 2002. It was designed to pick up where *Children Having Children - STILL Having Children* left off by continuing to record the history of our interventions and consciously planning for our future. Rather than attempting to evaluate the success of the 1992 recommendations to the state agencies, we chose to highlight major accomplishments and then propose recommendations for future action. Additionally, this document makes recommendations to non-governmental entities.

This 2003 edition of *Bridging Our Past, Present and Future: Teen Pregnancy in New Mexico* is updated and reformatted for easier reading.

It is with much appreciation that we acknowledge and thank the original NMTPC State Plan Committee and the many state agency staff and community members who collaborated on the development of *Bridging Our Past, Present and Future*.

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N E W M E X I C O
TEEN PREGNANCY COALITION
PREVENTION • PARENTING

October, 2003

Dear Concerned Citizen of New Mexico,

The New Mexico Teen Pregnancy Coalition is pleased to present a document that reviews the past decade's work in teen pregnancy prevention and proposes recommendations for the future. It's been a decade since *Children Having Children – Still Having Children* was published by the Governor's Advisory Committee. That was the last time a measurement was taken of our State's progress in this area. *Children Having Children* focused on state government and state agencies.

This document expands our recommendations to the larger community. Preventing teen pregnancy and ameliorating the negative consequences once a pregnancy has already taken place require participation from the entire community. This is not something that government can remedy by itself. We want to recruit everyone in New Mexico to join the **Challenge 2005: To Reduce Teen Births by 20% by 2005**.

The good news is that New Mexico's teen pregnancy and birth rates are declining – not as quickly as many other states – but we are moving in the right direction. Despite this positive trend, we can't afford to become complacent. Demographics indicate continued growth in our teen population, especially for Hispanic youth — a particularly high risk group. If we don't continue to develop and improve our interventions, we won't maintain the progress we've made and we may see increases in the number of teen births.

Reducing teen pregnancy is an investment in New Mexico's future. It will strengthen New Mexico's families, communities, and economy.

In 2002, NMTPC published the first edition of *Bridging Our Past, Present and Future: Teen Pregnancy in New Mexico*. We hope you find this 2003 edition to be a useful tool in your efforts to reduce teen pregnancy.

Sincerely,

Marilyn Bowman, President
New Mexico Teen Pregnancy Coalition

Sylvia Ruiz, Executive Director
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A new group of young people enters adolescence every year. Convincing them that it is in their own self-interest to postpone early pregnancy and childbearing – and helping them achieve this goal – is a demanding task requiring constant vigilance.

—National Campaign to Prevent Teen Pregnancy,
*Halfway There: A Prescription for Continued Progress in
Preventing Teen Pregnancy, 2001*

Nature and Extent of the Problem

In 2002, New Mexico had the 4th highest teen birth rate in the United States. Although our state has seen a decline in both teen pregnancy and birth rates since the early 1990's, other states and the nation as a whole have made deeper reductions over the years. With over 4,500 teen births in 2002, New Mexico faces a persistent and formidable teen pregnancy problem.

Teen pregnancy is the result of a multitude of complex societal problems. While teen pregnancy occurs among all socioeconomic and ethnic groups, not all teens are at equal risk. Hispanic teen girls are much more likely to become pregnant than non-Hispanic females. Young people most likely to be involved in a teen pregnancy are those experiencing school failure, behavioral problems, family dysfunction and poverty. Conversely, young people who have strong connections to family and school are less likely to be involved in a teen pregnancy.

Teen childbearing commonly translates into diminished opportunities for the baby, the teens, their families and the larger community. Less than one-third of girls who begin their families before age 18 ever earn a high school diploma. Children born to teen mothers are more likely to have health and developmental problems, grow up without fathers, become runaways, be placed in foster care, experience abuse and neglect, fail in school, become incarcerated and perpetuate the cycle of poverty and teen pregnancy. This is not to say that teen parents and their children can't be successful. But they will have to overcome serious obstacles and they will need extensive support from society.

The monetary cost of teen childbearing is very high. According to a recent report by the NM Department of Health, the gross impact of teenage parenting in New Mexico exceeds half a billion dollars annually. Approximately \$216 million could be saved each year by reducing teen pregnancy to zero. If New Mexico is successful in meeting the *Challenge 2005: To Reduce Births to Teens by 20% by 2005*, we will save our State about \$43 million annually.¹

Teen pregnancy is not *just* one of the many worthy social agendas that New Mexico needs to address – it's a *core* issue that contributes to many other social problems. Reducing teen pregnancy can also reduce low birth-weight babies, school dropouts, child abuse and dysfunctional families. Fewer births to teens will translate into less reliance on welfare, fewer incarcerated males and more fathers in the home.

There are no quick fixes or silver bullets to resolve this problem. Interventions must be as complex and long-term as the conditions that set the stage. But reducing teen pregnancy in New Mexico is well worth our investment because the result will strengthen our families, communities and economy.

The National Campaign to Prevent Teen Pregnancy has stated that, "Preventing teen pregnancy is an effective way to improve overall child and family well-being and in particular, to reduce child poverty and out-of-wedlock childbearing." Reducing teen pregnancy is a means to attain larger social and economic goals and is therefore worthy of a major investment – an investment in the future of New Mexico.

¹*The Economic Impact of Teenage Childbearing in New Mexico*, 2003, Philip T. Ganderton, Ph.D., University of New Mexico Department of Economics, New Mexico Department of Health, Public Health Division, Title X Family Planning Program, DHHS

Teen pregnancy prevention is not a “single-issue cause.” It is best seen as a means to attaining larger social and economic goals. As such, it should be one of the strategies supported to reach these broader ends.

—National Campaign to Prevent Teen Pregnancy,
*Halfway There: A Prescription for Continued Progress in
Preventing Teen Pregnancy, 2001*

New Mexico's Response to Teen Pregnancy: A Brief History

Since the early 1970s, New Mexico's concerned citizens have recognized the need to reduce teen pregnancy. In fact, one of the nation's first schools for pregnant and parenting teens was established in Albuquerque in 1970 through a collaborative effort. By 1976, New Futures School was recognized as a national model.

Over the years, many other New Mexico communities have worked to create programs to serve pregnant and parenting teens. In 2003, there are about 45 programs serving this population – most prominently the NM GRADS program in 35 sites. A large variety of *primary* prevention efforts have also been initiated by many schools and communities throughout the state.

New Mexico has long been proactive in creating initiatives that include broad-based representation from a variety of entities such as state, county and local governments; schools; health care providers; faith leaders; parents and other concerned citizens.

In 1988, the NM Legislature allocated funds to the New Mexico Department of Health (DOH) to create the Office of Adolescent Pregnancy Prevention. The Executive Branch of government became involved when Governor Garrey Carruthers established the Governor's Task Force on Adolescent Pregnancy (GTFAP). This group was charged to study the issue and make legislative and policy recommendations. GTFAP issued two reports to the Governor, *Children Having Children* (1988) which made legislative recommendations, and *Children Having Children, Part 2* (1990) proposing policy recommendations for state agencies.

In 1989, New Mexico's two grassroots organizations concerned about teen pregnancy merged in order to maximize efforts. Until that time, the New Mexico Organization on Adolescent Pregnancy and Parenting (NMOAPP) concentrated its efforts on the needs of pregnant and parenting youth in our state. The Adolescent Pregnancy Prevention Task Force (APPT Force) focused on primary prevention. These groups combined their resources and created a joint mission, becoming the New Mexico Teen Pregnancy Coalition (NMTPC). This private, non-profit, statewide organization is now nationally recognized as one of the strongest teen pregnancy organizations in the United States. See page 10 for more information on NMTPC.

Upon taking office in 1992, Governor Bruce King issued an executive order establishing the Governor's Advisory Committee on Adolescent Pregnancy (GACAP) to provide support to the new DOH Coordinator of Adolescent Pregnancy Prevention. The 1992 GACAP report, *Children Having Children, STILL Having Children*, evaluated the progress of the earlier recommendations and proposed additional measures for state agencies.

In 1995, GACAP members made the decision to continue their work under the auspices of the New Mexico Teen Pregnancy Coalition. In late 1999, NMTPC formed a State Plan Committee to review past policies and interventions, consider the current status of teen pregnancy in New Mexico and chart a path to our future – one with substantially less teen pregnancy.

In 2000, NMTPC and the NM Department of Health issued the Challenge 2005: To Reduce Teen Births by 20% by 2005. Governor Gary Johnson supported teen pregnancy prevention through proclamations and by directing his department secretaries to collaborate on the Challenge 2005.

New Mexico's new governor, Bill Richardson, has identified the reduction of teen pregnancy as a high priority.

Collaboration

Collaboration has always been viewed as essential to addressing New Mexico's teen pregnancy problem. When a variety of entities come together to set common goals, more can be accomplished and duplication reduced.

It is important for groups who have differing beliefs and foci to identify points of agreement and the common ground upon which we all can stand. Working together requires a willingness to build bridges rather than create polarized positions. When adults become polarized, little is accomplished and our youth suffer.

Collaboration is an ongoing process that requires cooperation from state agencies, school districts, community organizations and other professional groups.

Over the years, New Mexico has made strides in developing collaborative efforts. A prime example occurred in February 2000 when NMTPC and the NM Department of Health created the Challenge 2005. This Challenge has involved providing statistics, support materials and technical assistance to counties. Counties reaching their yearly goals are recognized at an annual event during Teen Pregnancy Prevention Month in May.

The Governor's Task Force developed a model for addressing the continuum of needs in teen pregnancy prevention. The basis for this "prevention continuum" is the recognition that teen pregnancy must be addressed on multiple levels and in a multifaceted manner in order to meet the needs of *all* youth. This continuum approach supports and encourages collaboration and is as relevant today as when first proposed. The three points along the continuum are:

Preventing Early Sexual Intercourse

- Support and encouragement for abstinence is the first line of defense in preventing teen pregnancy. Abstinence education is an important component of a comprehensive prevention model.

Preventing Pregnancy in Sexually Active Youth

- Provide sexually active teens with family planning services, information, and the life skills necessary to prevent pregnancy.

Preventing Negative Consequences of Teen Parenthood

- Provide services to pregnant and parenting teens to reduce the negative consequences that can accompany early childbearing, including an emphasis on preventing repeat pregnancy.

A graphic of this continuum is presented in the appendix.

Assessing Our Progress: New Mexico State Government

In the past decade, New Mexico state government has addressed the teen pregnancy problem on the executive level and within its various departments. Governors have initiated and supported efforts in varying degrees but have always expressed a willingness to address the problem.

The following will highlight major accomplishments of New Mexico state government over the past decade.

Governors

The leadership provided by Governors Bruce King, Garry Curruthers, Gary Johnson, and Bill Richardson has been a major asset in New Mexico's teen pregnancy prevention agenda. Since May 2000, governors have hosted Teen Pregnancy Prevention Month activities at the State Capital. This event recognizes the previous year's teen pregnancy prevention activities by state agencies and honors the counties that are "on target" for reaching their Challenge 2005.

Department of Education

- Supporting the successful GRADS (Graduation, Reality and Dual Role Skills) teen parent programs statewide.
- Supporting EPSS (Education Plan for Student Success) which requires districts to make provisions for school health programs that address the health needs of students and staff.
- Implementating health education content standards with benchmarks. Supporting health education curricula and programs at the district level to address these standards.
- Supporting the *Education for Zero Infection* curriculum through training and education to prevent HIV among our youth.
- Support for career exploration and transition to post secondary institutions for at-risk youth.
- Collaboration with NM Department of Health to expand school-based health centers and in establishment of, and continued support for, the Office of School Health.
- Establishment of, and continuing support for, the School Health Unit.
- Establishing Even Start programs in support of early childhood education and literacy as a family model.
- Support for teen pregnancy prevention and intervention through Goals 2000 and Career and Technical Education.
- Establishing the availability of funds and resources for at-risk youth.
- Annual training of school personnel through the School Health Education Institute (SHEI).
- Developing and coordinating a single surveillance instrument on Youth Risk and Resiliency (YRRS) for the state.

Department of Health

- Establishing and maintaining the Office of Adolescent Pregnancy Prevention and supporting comprehensive prevention funding for communities and statewide efforts.
- Collaborating with the State Department of Education to expand school-based health centers and in establishment of, and continued support for, the Office of School Health.
- Collaborating with the Children, Youth and Families Department to support and expand services provided by the NM Young Fathers Project.
- Increasing expenditures of state and federal dollars supporting statewide programs for abstinence, teen pregnancy prevention, male involvement, and programs serving pregnant and parenting teens.
- Creating the Abstinence Education Advisory Committee to advise the Department.
- Supporting establishment of Maternal & Child Health County Councils.
- Establishing Families FIRST statewide.
- Supporting positive youth development and assets development.
- Expanding the availability of WIC (Women, Infants & Children) services to pregnant and parenting teens.
- Supporting statewide training, technical assistance, surveys, research and publications through collaborative funding to NMTPC.
- Supporting the evaluation of teen pregnancy prevention projects.
- Providing for VAST (Violence, Alcohol, Substance Abuse and Tobacco) screening in all family planning clinics to prevent domestic violence and sexual coercion.
- Providing family planning and reproductive health care to teens through Local Health Offices and providing ongoing training and technical assistance to staff on adolescent issues.
- Supporting Youth Power conferences.
- Providing leadership and support for the Challenge 2005 project.
- Publishing *The Economic Impact of Childbearing in New Mexico, 2003*.

Human Services Department

- Helping to establish voluntary acknowledgment of paternity by New Mexico fathers through the state's hospital system. Assisting the Young Fathers Project with paternity establishment.
- Funding and expanding the GRADS system through TANF (Temporary Assistance to Needy Families) to include prevention and fatherhood initiatives.
- Funding the expansion of NMTPC's prevention activities through TANF.
- Collaborating with schools to provide counseling and on-site eligibility determination for CHIP (Children's Health Insurance Program).
- Supporting the Family Literacy Program for TANF parents, in collaboration with the Department of Education.
- Funding the School-Age Care and Family Support Programs.

- Providing onsite public assistance eligibility screening at schools and programs for pregnant/parenting teens.
- Providing outreach to teen parent residences and teen parent programs.

Department of Labor

- Supporting youth in summer and year-round employment programs, including teen parents in Workforce Investment.
- Working statewide with Workforce Investment Board.
- Assisting in the development of youth councils.
- Increasing access to one-stop-shops.

Office of the Attorney General

- Assigning a staff member to develop a strategic plan for involvement in teen pregnancy prevention at the local, state and national levels.
- Collaborating and supporting the work of the National Campaign to Prevent Teen Pregnancy and the New Mexico Teen Pregnancy Coalition.
- Conducting workshops on legal issues relating to teen pregnancy at statewide trainings and conferences.
- Supporting teen pregnancy related bills in the legislature.

Children, Youth & Families Department

- Making teen mothers a priority population for the income eligible child care that allows them to finish school and become self supporting. Collaborating with the Department of Education and others to provide school-based services to pregnant and parenting teens and their children.
- Providing regional professional development and technical assistance for child care providers to increase the quality of child care programs statewide.
- Leveraging AmeriCorps fund to address teen pregnancy prevention and the involvement of young fathers in the lives of their babies in collaboration with NMTPC, GRADS and the Adolescent Family Life Program.
- Developing and expanding statewide Teen Parent Residences that provide homeless teens and their babies with housing, training and support.
- Expanding programs in juvenile justice facilities that offer family life and parenting training, in collaboration with Department of Health, NMTPC, GRADS, and the Department of Education. Transitioning pregnant and parenting females from correctional facilities to Teen Parent Residences.
- Supporting the Parents as Teachers model statewide.
- Participating in all collaboratives concerning teen pregnancy at the state and local levels.

Assessing Our Progress: Pregnant and Parenting Teens

The last decade has seen major strides in the delivery of programs to New Mexico's pregnant and parenting teens and their children. The prevalence, type and quality of services have improved. Perhaps most importantly, we now have research-based evidence that these programs are an effective and valuable investment in the future.

Programs serving pregnant and parenting teens in New Mexico include:

- New Futures School
- GRADS (Graduation, Reality, and Dual Role Skills)
- Independent school-based programs
- Teen parent residences (CFYD)
- Hospital and private practice programs
- Community-based programs

These programs are funded from a variety of state, national, and local sources.

In 1997, NMTPC began a three-year statewide data collection project on programs for pregnant and parenting teens. The goal was to determine what types of programs existed for this population and to examine the subsequent outcomes for both teen parents and their children. A data base was created to track the services provided by these programs and their clients' characteristics and outcomes. (The full report, *Future Voices II: Teen Parents and Their Children in New Mexico*, is available from NMTPC.)

The three-year database included approximately 5,100 teen parents from 23 counties. Only about 20% of our teen parents are currently served by these programs.

An analysis of the data revealed that funding for these programs was well spent, given the following outcomes.

- 84% of those who had left school before being recruited to the programs returned to school.
- 77% increased their education or stayed in school in the same grade during the period of program enrollment. This rate is well above reports from other national programs.
- 5% of these young mothers had low birth weight babies, lower than both the state and national rates.
- 4% became pregnant after enrollment and 2% of those enrolled for 12 months or more had a repeat pregnancy. These rates are vastly lower than other comparable national programs and New Mexico's statewide rate.

The New Mexico GRADS system is an excellent example of a program that continues to expand services to pregnant and parenting teens and their children. GRADS is a two-generational instructional model for teen parents and their babies. A new, stronger career exploration component has been added to the program, fatherhood issues are being addressed and the number of sites continue to expand statewide. There are now 35 schools implementing GRADS.

Addressing the needs of teen fathers is a relatively new approach, but one that's gaining justifiable popularity and recognition nationally and in New Mexico. If provided adequate support, many young fathers will take an active parenting role that results in a positive impact on the child and may also delay repeat pregnancies. The next section of this document further addresses male involvement.

Assessing Our Progress: Male Involvement

Historically, programs that addressed teen pregnancy defined both the problem and the solution in terms of young women – but this is changing. New Mexico has acknowledged the importance of addressing the needs of young men and has taken action to implement groundbreaking initiatives in primary prevention and services to young fathers.

For over a decade, male involvement in teen pregnancy has been actively addressed by the Department of Health, Planned Parenthood, GRADS, and NMTPC. There is also an active Men’s Wellness movement in our state that has collaborated on issues dealing with young males.

Education and training on male involvement relating to teen pregnancy has been included in all NMTPC state-wide conferences and in many trainings offered by the Department of Health

In 1998, NMTPC called together a group of concerned men to create a Strategic Plan for Male Involvement in teen pregnancy prevention. This plan informs the work of the NMTPC Male Involvement Committee.

In 1999, the New Mexico Young Fathers Project (YFP) was created through a collaboration between NMTPC, Planned Parenthood and the Father and Family Center. The YFP mission is to promote social and family stability by improving the quality of father/child relationships in young families, and by preventing too-early pregnancy.

The YFP mission is addressed by providing young fathers with case management, community referrals, sexuality education, support groups, and parenting skills. The young men also receive services to increase their educational level, employment capabilities, and general life skills.

Contrary to popular opinion, this project has found that many young fathers desire a relationship with their children but need assistance to establish fatherhood and integrate into the family. These young men often experience complex legal problems, mental health needs, and lack social skills.

The NM Young Fathers Project has been funded by a federal grant from the Department of Health and Human Services/Office of Population Affairs, with additional support from the New Mexico Department of Health Family Planning Program, New Mexico Children, Youth & Families Department, and the New Mexico Human Services Department. Funding has also come from a variety of private foundations.

As with young females, some males are more at risk of being involved in a teen pregnancy than others. Because young males involved in the juvenile justice system are a high-risk group, it’s critical that they receive services to reduce their likelihood of becoming fathers too soon. A few community organizations are proving services to these young men, however, the need far outweighs the current resources.

Assessing Our Progress: New Mexico Teen Pregnancy Coalition

Since 1989, the New Mexico Teen Pregnancy Coalition (NMTPC) has played an important role in our state. The following information is provided to assist the reader in understanding the depth of the work accomplished by the organization and its long-term commitment to reducing teen pregnancy.

MISSION: To reduce teen pregnancy and the negative consequences of teen pregnancy and parenting in New Mexico.

GOALS:

1. To be a proactive statewide organization focusing public attention on the critical issues of teen pregnancy.
2. To provide networking, training, and technical assistance in areas of teen pregnancy prevention and parenting.
3. To advocate for and support inclusion of teen pregnancy prevention in all youth serving programs.

NMTPC is a nonprofit statewide organization of parents, youth, community leaders, educators, healthcare professionals and community organizations. We are committed to providing the people of New Mexico with the latest and most accurate information about teen pregnancy including research on best practice approaches. We advocate for implementation of the most effective interventions and solutions on both the state and community level. NMTPC provides training, resources and technical assistance to adults working on the front line with New Mexico youth. We also work closely with community organizations and state agencies to encourage an ongoing, coordinated, well-planned teen pregnancy prevention effort. NMTPC keeps teen pregnancy on the “radar screen” of local and state governments, communities, and schools.

The following is an overview of NMTPC’s major projects and accomplishments.

Conferences/Trainings/Roundtables address timely and relevant topics.

- Annual conferences for adult service providers, 1989-2003
- Youth Power Conference, 1999, 2000, and planning for 2002
- Training in development and implementation of program evaluation.
- Roundtable discussions on topics such as: male involvement, Hispanic issues, Native American issues, grandparents of teen parents, military issues, school-based health centers and faith community involvement.

Program Evaluation allows us to determine if New Mexico programs are meeting their goals. Since our state has such limited resources, it is critical that we know what’s working. NMTPC has coordinated the evaluation of three statewide programs: the Department of Health Adolescent Pregnancy Prevention projects, New Mexico’s teen parent programs, and the Young Fathers Project.

Technical Assistance is provided to communities working to address teen pregnancy at the local level. The manual, *Meeting the Challenge: How to Reduce Teen Pregnancy in Your Community*, was developed as a self-help tool in this regard.

Hispanic Teen Pregnancy Prevention took centerstage in 2002, with the creation of a Hispanic Community Liaison position and the development of a plan to reduce New Mexico's extremely high Hispanic teen pregnancy rate.

A **Statewide Survey** of adult attitudes on sex education for youth was implemented in late 2000 and the report on key findings, *TUNE IN: New Mexico Attitudes on Sex Education*, was published in 2001. New Mexicans from every part of the state expressed support for sex education that includes information on both abstinence and contraception. NMTPC has developed recommendations based on the survey results.

Male Involvement has an important place at NMTPC, as described on page 9. Activities are guided by the NMTPC Male Involvement Committee.

Scholarships are awarded yearly to pregnant/parenting teens or teens who have been actively involved in prevention efforts. Funding comes from our annual silent auction, investments and donations.

NMTPC plays the leadership role in activities related to the Challenge 2005, including document development and recognition of state agencies and counties for their teen pregnancy prevention accomplishments.

Publications are developed to keep New Mexicans informed. Examples include:

- Newsletters and the monthly electronic *NEWSFLASH*
- *Meeting the Challenge: How to Reduce Teen Pregnancy in Your Community*, 2001
- Position Paper: *Comprehensive vs. Abstinence-only Sex Education*, 2001
- *TUNE IN: New Mexico Attitudes on Sex Education*, 2001
- *The New Mexico Mapping Project: Challenge 2005: Reducing Teen Pregnancy in New Mexico*, 2000
- *Future Voices II: Teen Parents and Their Children in New Mexico*, 2000
- *Listen Up...Youth Voices on Teen Pregnancy*, 2000
- *Teen Pregnancy: Focus on New Mexico*, 2000
- *10 Lessons Learned About New Mexico's Teen Pregnancy Prevention Projects*, 1999
- *Attitudes and Sexual Behaviors of Young Incarcerated Males in New Mexico*, 1999
- *Strategic Plan for Male Involvement in Teen Pregnancy Prevention*, 1998
- *NM Single Parent Resource Guide*, 1997

The NMTPC **web site** enables the public to read and download our publications, get information about upcoming events and link to related sites.

NMTPC maintains close working relationships with state and national organizations with similar goals, especially the National Campaign to Prevent Teen Pregnancy.

NMTPC's accomplishments are the result of a dedicated board of directors, collaboration with community organizations, caring and hardworking individuals, and the wisdom and generosity of our public and private funders.

Teen pregnancy is often just one symptom of an overarching lack of hope and vision for a positive future, and a pervasive lack of good educational and social services and job opportunities.

—National Campaign to Prevent Teen Pregnancy,
Progress Pending, 2003

Lessons Learned 1992 - 2003

The past decade has taught us much about teen pregnancy and what can be done to reduce it. The following “lessons learned” are substantiated by the National Campaign to Prevent Teen Pregnancy. For more information, visit their website at www.teenpregnancy.org

Lessons Learned About Teens

1. All youth need sex education that is appropriate to their age, culture, life experience, and gender.
2. Youth who are at higher risk need our most intensive and comprehensive interventions. The primary risk factors are: early school failure, early behavioral problems, dysfunctional families, and poverty.
3. Protective factors that substantially reduce the likelihood of teen pregnancy are: a strong connection to family and a strong connection with school.
4. Teen pregnancy, births, and abortions have declined as a result of two factors: less sex and better contraceptive use.
5. Teens have become more cautious and more motivated to make better sexual choices. Factors that contribute to this include: worry over STDs and AIDS, an increase in sex and HIV education, more public discussion about teen pregnancy, easier to use methods of contraception (like Depo Provera), parents exercising their influence, and a decade of economic prosperity in the 1990’s that may have increased a sense of hope for the future.
6. Since the U.S. still has the highest teen pregnancy rate in the industrialized world, it is obvious that teens are still not motivated enough to consistently use either abstinence or contraception.

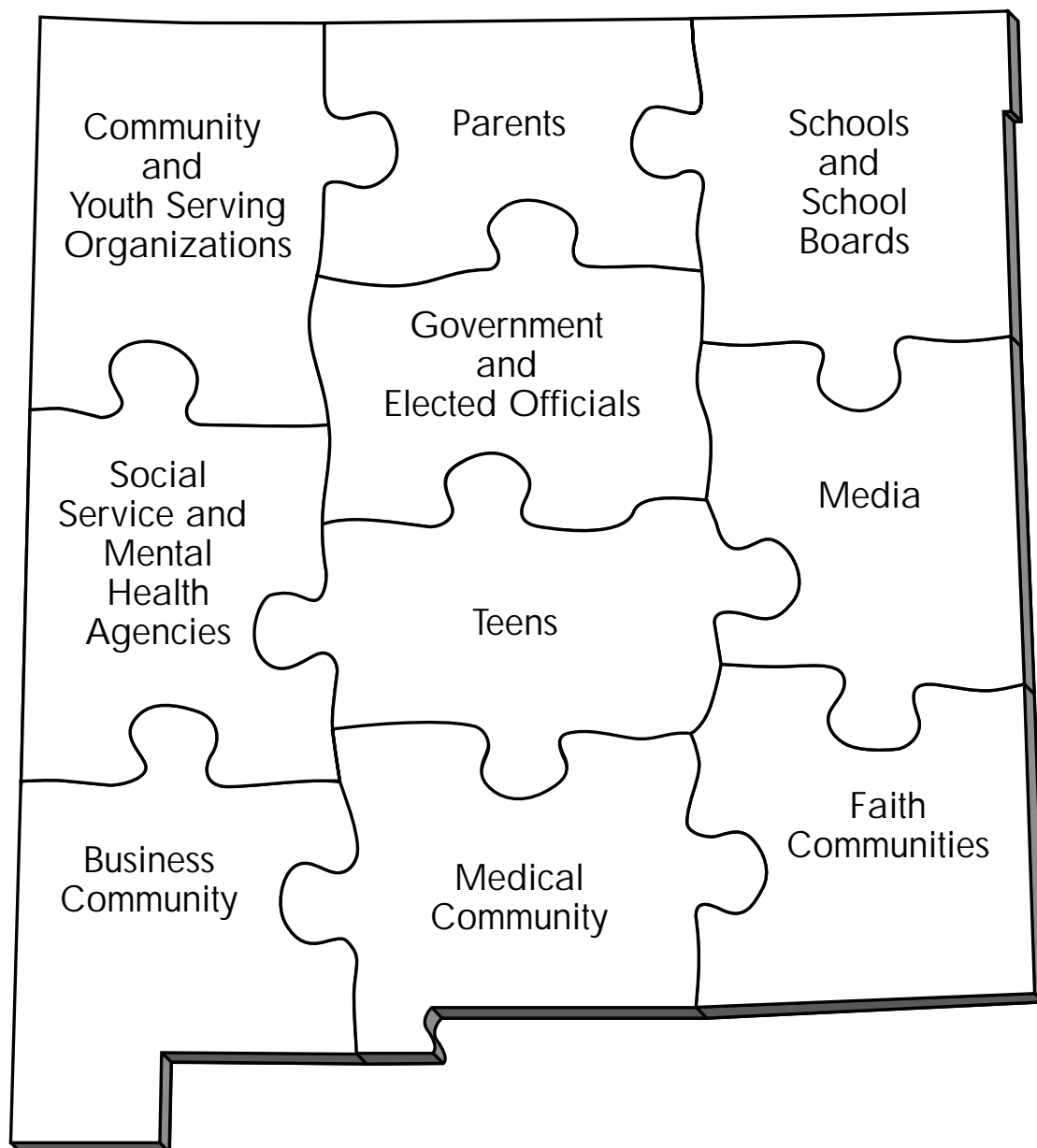
Lessons Learned About Interventions

1. Teens need support and encouragement for abstinence and also complete medically accurate information about contraception. Information about contraception and provision of family planning service do not result in earlier sex or more partners. Research indicates that encouraging abstinence *and* urging better use of contraception *are* compatible goals.
2. Some programs and curricula have solid research-based evidence for reducing sexual activity and pregnancy. These include service learning programs and sex education that includes contraceptive information. Other interventions look promising but do not yet have research confirmation.
3. Teens need both the capacity (ability) and the motivation (desire) to prevent a pregnancy. Our interventions must support both elements.
4. Most adults strongly support the provision of contraceptive information to teens; however, there is disagreement among some who believe that teens should only be encouraged to abstain until marriage. This disagreement must be carefully managed so that it does not interfere with our adult responsibility to provide for the needs of *all* our youth.
5. Parents and schools can play a powerful role in teen pregnancy prevention, but larger societal messengers also exert strong influences over teens. Even good programs aren’t always as influential as our omnipresent media.
6. Poverty is both a cause and result of teen pregnancy and must be seriously addressed as an intervention.

We need to go beyond the mechanics of teen pregnancy prevention and strive to provide youth with the motivation, skills and opportunities they need to take action so they do not become parents too soon.

—National Campaign to Prevent Teen Pregnancy,
Progress Pending, 2003

The New Mexico Teen Pregnancy Puzzle



To reduce teen pregnancy, the whole community must work together in a collaborative manner. With everyone involved, interventions will fit together like puzzle pieces.

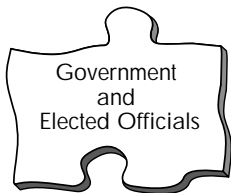
Even the best-intentioned programs can only be successful if they have sufficient funding, trained staff and community support.

An Action Plan for the Future:

Recommendations for Reducing Teen Pregnancy in New Mexico

To reduce teen pregnancy, the whole community must work together in a collaborative manner. With everyone involved, interventions will fit together like puzzle pieces. Certainly this is a challenging goal, but one that we should strive for.

The New Mexico Teen Pregnancy Puzzle identifies the entities that must actively collaborate in our state-wide effort. In this section we propose recommendations for each entity of the New Mexico Teen Pregnancy Puzzle (preceeding page). These recommendations represent the views of the New Mexico Teen Pregnancy Coalition.



Recommendations to Government and Elected Officials

Governor

1. Provide clear leadership to keep NM focused on the long-term approach to teen pregnancy prevention.
2. Improve New Mexico's educational system, with the goal of creating school success for all students.
3. Move New Mexico toward a stronger economy that will inspire our youth to believe in their future.
4. Seriously address the problem of poverty in our state.
5. Instruct cabinet secretaries to work together and with NMTPC to meet the Challenge 2005: To Reduce Teen Births by 20% by 2005. Request that secretaries document this collaboration and its progress.

Legislature

1. Continue to stay abreast of teen pregnancy issues in New Mexico and especially among your constituent families and youth.
2. Create opportunities for discussion of teen pregnancy issues at relevant interim and standing committees.
3. Fund only interventions that have demonstrated success through science-based research, whenever possible. Include programs to address male involvement.
4. Prioritize legislation that will address the primary risk factors of teen pregnancy: early school failure, early behavioral problems, dysfunctional families and poverty.

Human Services Department (HSD)

1. Expand physical and mental health services to needy children and families.
2. Expand teen pregnancy prevention programs for incarcerated youth.
3. Utilize TANF funding to support services for pregnant and parenting teens, their children and young fathers.
4. Utilize TANF funding for teen pregnancy prevention interventions and whenever possible, fund only those with research-based evidence of success.
5. Fund youth development programs that encourage healthy development of the whole child.

Department of Labor (DOL)

1. Prioritize training and employment opportunities for high-risk youth and teen parents.
2. Include a teen pregnancy prevention message in all youth-oriented initiatives.

Department of Health (DOH)

1. Improve collaboration on teen pregnancy prevention among DOH programs and bureaus.
2. Improve collaboration between DOH and other state agencies on teen pregnancy prevention.
3. Continue to support and expand pregnancy prevention programs. Fund only programs that have demonstrated success through science-based evaluation, whenever possible.
4. Expand funding to address young males in teen pregnancy prevention. Take into consideration the flexibility necessary when piloting projects for a population whose needs are complex and new to service providers.
5. Make reproductive health care and family planning services, including emergency contraception, more accessible to teens.
6. Expand physical and mental health services to needy children and families.
7. Prioritize teen pregnancy related data collection and analysis, making it available in a timely manner.

Department of Education (SDE)

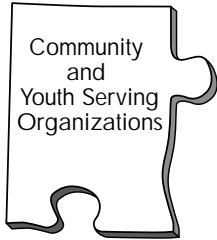
1. Create an educational system that fosters academic success for *all* student
2. Support schools in their ability to provide non-academic services that are critical to student success.
3. Support and expand school-based health centers and encourage the inclusion of a wide range of physical and mental health services.
4. Encourage schools to provide sex education that is consistent with the desires of parents and communities. The NMTPC 2000 statewide survey indicates that most parents want information about abstinence *and* contraception to be taught in both mid and high school.
5. Instruct school nurses and counselors to proactively refer at-risk students to the range of resources available, including family planning services. The NMTPC 2000 statewide survey indicated that most parents support school referrals to family planning services.
6. Ensure that teachers, nurses and counselors receive proper training in teen pregnancy prevention. Support continuing education opportunities on this topic.
7. Support school-based programs for pregnant and parenting females and male partners, in order to encourage academic success and graduation.
8. Support and expand programs that will address the needs of high-risk youth.
9. Continue supporting the Youth Risk and Resiliency Survey (YRRS) and the Youth Risk Behavior Survey (YRBS). Strongly encourage all districts to participate.

Children, Youth and Families Department (CYFD)

1. Continue to fund and expand collaborative efforts to provide child care for teen parents.
2. Continue to expand Teen Parent Residences statewide.
3. Expand support for programs to address young families, including programs serving young fathers.
4. Continue to provide training for child care staff working in teen parent programs. Focus on the specific needs of teens and their children.
5. Ensure that youth in out-of-home care receive appropriate sexuality education and pregnancy prevention services.
6. Fund youth development programs that encourage healthy development of the whole child.

Office of the Attorney General

1. Complete production of Teens and the Law project, to include an instructor's guide, video, teaching tools, and teen booklet.
2. Provide technical assistance to programs serving young mothers and fathers.
3. Continue to support teen pregnancy prevention efforts at the state and local levels.
4. Continue to provide technical assistance at conferences and trainings on teen pregnancy related topics.



Recommendations to Community and Youth Serving Organizations

1. Improve collaboration with other civic, business, cultural, professional, and youth serving organizations — in order to maximize your positive impact on youth.
2. Incorporate successful youth development and service learning concepts into your efforts.
3. Reach out to the highest risk youth by offering caring adults and constructive activities.
4. Include culturally appropriate teen pregnancy prevention messages in all youth programs.



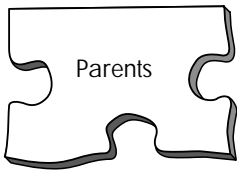
Recommendations to Social Service and Mental Health Agencies

1. *Proactively* address the needs of young people who experience the following high risk situations:
 - sexual abuse
 - involvement with the juvenile justice system
 - dysfunctional families or out-of-home care
 - behavioral problems or substance abuse
2. Explore ways to incorporate teen pregnancy prevention into your existing services.



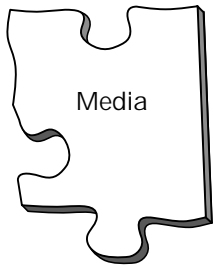
Recommendations to Business Community

1. Employ, train and mentor young people.
2. Support programs working with at-risk youth and families.
3. Partner with local schools.
4. Create workplace policies that promote parental involvement in school and community programs for youth.
5. If you employ teens, find ways to incorporate a pregnancy prevention message.



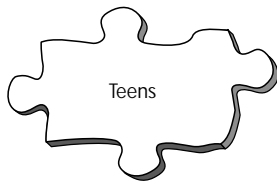
Recommendations to Parents

1. Create and maintain a strong connection with your children. Be a consistent supportive and guiding presence in their lives.
2. Encourage and support your children's school success.
3. Talk with your children about sexuality and clearly express your values about sexual behaviors. Don't forget the boys!



Recommendations to Media

1. Collaborate with local and state efforts to focus attention on teen pregnancy.
2. Partner with schools and create opportunities to support and encourage success for all students.
3. Carefully scrutinize your role in delivering accurate and responsible messages about sex. Take action to counter potentially harmful messages.



Recommendations to Teens

1. Seriously attend to your own school success by accepting the responsibility of your most important job – getting an education.
2. Support the school success of other youth by tutoring or mentoring peers and younger students.
3. Make a commitment to postpone parenthood until you are fully prepared for the responsibility involved in raising a child.



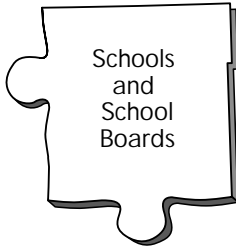
Recommendations to Medical Community

1. Create opportunities to prevent teen pregnancy within your daily provision of health care.
2. If you work with youth, utilize appropriate screening procedures to identify those at risk of becoming involved in a pregnancy.
3. Provide support and encouragement for teen sexual abstinence and also insure the provision of easily accessible contraception. Promote awareness and use of emergency contraception.
4. Help schools and parents provide accurate information about human sexuality and reproductive health care.



Recommendations to Faith Communities

1. Address the need that teens have for spiritual fulfillment and help them navigate the difficult waters of adolescence.
2. Support family “connectedness” through parent/child programs that promote strong family relationships.
3. Provide youth with constructive activities and safe, supportive, caring adults.
4. Help families talk about sexuality, within the context of your faith traditions.



Recommendations to Schools and School Boards

1. Create an educational system that fosters academic success for *all* students.
2. Support your schools’ ability to provide non-academic services that are critical to student success.
3. Establish school-based health centers that include a wide range of physical and mental health services.
4. Provide sex education that is consistent with parental support. The NMTPC statewide 2000 survey indicated that most parents want middle and high school students to be taught about both abstinence and contraception. A 2003 survey by NM GRADS also indicated strong support for this two-pronged approach. Parents naturally have some limitations as to the explicitness of this instruction.
5. Instruct school nurses and counselors to proactively refer at-risk student to the range of resources available, including family planning services. The NMTPC survey indicated that most parents support school referrals to family planning services.
6. Ensure that teachers, nurses and counselors receive proper training in teen pregnancy prevention. Support continuing education opportunities on this topic.
7. Support school-based programs for pregnant and parenting females and male partners, in order to encourage academic success and graduation.
8. Provide programs that address the needs of at-risk youth.
9. Participate fully in the Youth Risk and Resiliency Survey (YRRS) and Youth Risk Behavior Survey (YRBS) so that New Mexico will have accurate statewide data.

Recommendations to Foundations and Funders

Here’s how you can play an important role in teen pregnancy prevention:

1. Stay abreast of the latest research in order to fund the most effective teen pregnancy prevention programs.
2. Provide higher levels of funding for New Mexico’s teen pregnancy prevention efforts. Fund interventions that have demonstrated success through science-based evaluation, whenever possible.
3. Encourage the inclusion of a teen pregnancy prevention component in all youth programs that you fund.
4. Collaborate with NMTPC and other community entities to insure a coordinated approach to teen pregnancy prevention.

Recommendations to all the People of New Mexico

Everyone can play a role by:

1. Sending youth a strong message that the teen years are a time for education and growing up – not for childbearing.
2. Participating in the Challenge 2005: To Reduce Teen Births by 20% by 2005. This can be done by addressing teen pregnancy in our families, religious institutions, schools, businesses, and communities.
3. Supporting and encourage abstinence as an essential component to teen pregnancy prevention – while also providing complete and medically accurate information about contraception and condoms.

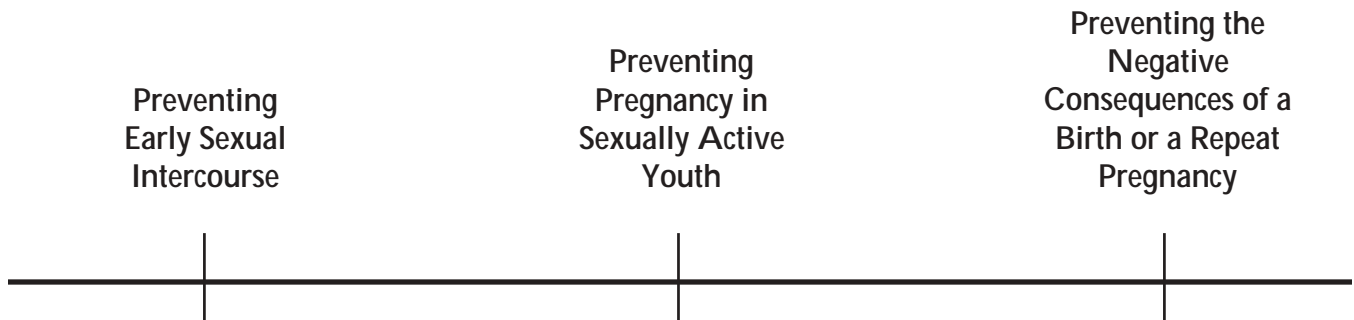
We acknowledge that caring people can have differing opinions about which prevention approaches are best. But precious time and resources should not be spent arguing over the issue of abstinence-only vs. abstinence-plus-contraception education. Adults can agree on the goal of preventing teen pregnancy – even if not always on how to achieve it. Since preventing teen pregnancy is a daunting task, there is a role for everyone in this work. In fact, our diverse population of youth *requires* multiple strategies to meet their different needs.

If adults appropriately manage their conflicting views on this topic, young people will benefit by observing a respectful difference of opinion. More importantly, their needs won't get lost in the argument.

Appendix I

Appendix II

The Teen Pregnancy Prevention Continuum



Teen pregnancy can be reduced by implementing effective interventions anywhere along the continuum.

The continuum demonstrates that there is a place for everyone to play a role in reducing teen pregnancy and the negative consequences of teen childbearing. Individuals should work at whatever point along the continuum they are most comfortable and have the most expertise. However, it is critical to insure that the *full* continuum is provided in order to meet the needs of *all* youth in your community.

Suggested Activity:

Brainstorm about how your community can address the needs of youth who are at each point along this continuum.

What services currently exist in your community?

Which are performing optimally and which need improvements?

What services do not exist and need to be developed?

What steps can you take to improve services?

Who are the stakeholders who should be involved?

Appendix III

Appendix IV