

OneAthens Recommendations on Teen Pregnancy Prevention

Introduction

The OneAthens Teen Pregnancy Prevention Implementation Team has been charged with developing strategies that will lead to a 25 percent reduction in the Athens-Clarke County teenage pregnancy rate by December 2010.

This is a crucial task for two reasons. First, teens with children are at high risk of living in poverty along with their child/children. Second, school interruption, persistent poverty, limited vocational opportunities, divorce, physical and sexual abuse, and repeat pregnancies are all major consequences associated with unintended teenage pregnancies. It is estimated that the annual cost of teen births to Athens-Clarke County taxpayers, including the delivery of preterm babies as well as the general cost of raising and educating a child, totals \$8.5 million each year.

Goals

The implementation team seeks to achieve the following goals:

1. Make policy recommendations to the Clarke County School Board to ensure that children are receiving accurate, up-to-date, comprehensive sex education each year in grades six through twelve.
2. Work with community and faith-based organizations, including schools, to implement appropriate sex education programs and curricula within their organizations.
3. Educate parents to be effective health educators of their children.
4. Support policies and increase funding for public health and community organizations' efforts to prevent teen pregnancies.
5. Provide teens with convenient, confidential access to birth control.

Recommendations

- **Provide age appropriate formal education and support to all children about goal-setting, self-esteem, relationships, anatomy, sexually-transmitted diseases, and sexual intercourse.**
 - This formal education and support should come from multiple sources (e.g., school, home, place of worship, community agency, etc.).
 - Yearly programs should last a minimum of 10 hours and include interactive activities that build positive relationship skills and self-esteem, and demonstrate how to avoid peer pressure.
 - Children in grades 6-12 should receive formal education and support about goal-setting, self-esteem, relationships, anatomy, sexually-transmitted diseases, and sexual intercourse.
 - Elementary aged children should also consistently receive education and support from multiple sources about goal-setting, self-esteem, and relationships.
 - Children who have been victims of sexual abuse should be provided counseling and comprehensive services.
 - Parents have the right to choose whether their child participates in these programs.
 - School and community-based educators should be empowered to provide accurate information about methods of contraception (including abstinence) and disease prevention, addressing both use and local availability.
 - Curriculum-based programs should be selected based on scientifically rigorous outcome studies and should include promotion of behaviors that prevent unintended pregnancies and sexually transmitted infections, including HIV/AIDS.

- Faith-based organizations should be encouraged to offer pregnancy prevention programs to teens and parents that align with congregational acceptance.
 - Curriculum-based programs should reflect cultural and social norms and the age of participants when being considered in the selection and delivery of the curricula.
 - Comprehensive sexuality education should include accurate information about anatomy, sexual intercourse and other forms of sexual activity that can lead to sexually transmitted diseases.
 - Programs should emphasize abstinence first and also provide information about the proper use of condoms and other methods of contraception.
 - Comprehensive sexuality education should send a clear message to teens that abstaining from sex or using contraception consistently and correctly is a healthy decision to make, as opposed to simply discussing the pros and cons of different sexual choices.
 - Programs should allow an opportunity for students to submit anonymous questions that are answered as part of the program's educational material.
 - Peer education should be used as an effective vehicle for messages about teen pregnancy prevention.
 - Comprehensive sexuality education should provide teens with information about current Georgia law regarding age of consent, paternity issues, child support enforcement and legality of sexual activity. In addition, teens should be provided with information about their ability to seek confidential health care for reproductive services according to Georgia law.
 - Healthy teen relationships should be an important subject in the curriculum, including gender differences in approaches to emotional intimacy, self-esteem, and long-term commitment and family responsibilities.
 - Community organizations should be encouraged to work with health professionals in determining appropriate methods of addressing this comprehensive sex education initiative. These methods should be within the mission of the organization and the needs of its participants.
- **Equip parents to be effective health educators of their children.**
 - Community resources need to be made available to help parents prepare for this role.
 - **Limit the amount of time adolescents are unsupervised due to its association with risky sexual behaviors.**
 - After-school programming, sports, mentoring, internships, faith-based programs, and family-centered education should be used as important components to a community-based pregnancy and STD/HIV AIDS prevention program.
 - **Maintain or increase support for organizations addressing teen pregnancy prevention.**
 - Public health and other community-based organizations whose mission includes the prevention of teen pregnancy and sexually transmitted infections, including HIV/AIDS, should receive financial support.
 - Public health programs that provide convenient, confidential access to birth control services should be supported.