

DISMANTLING

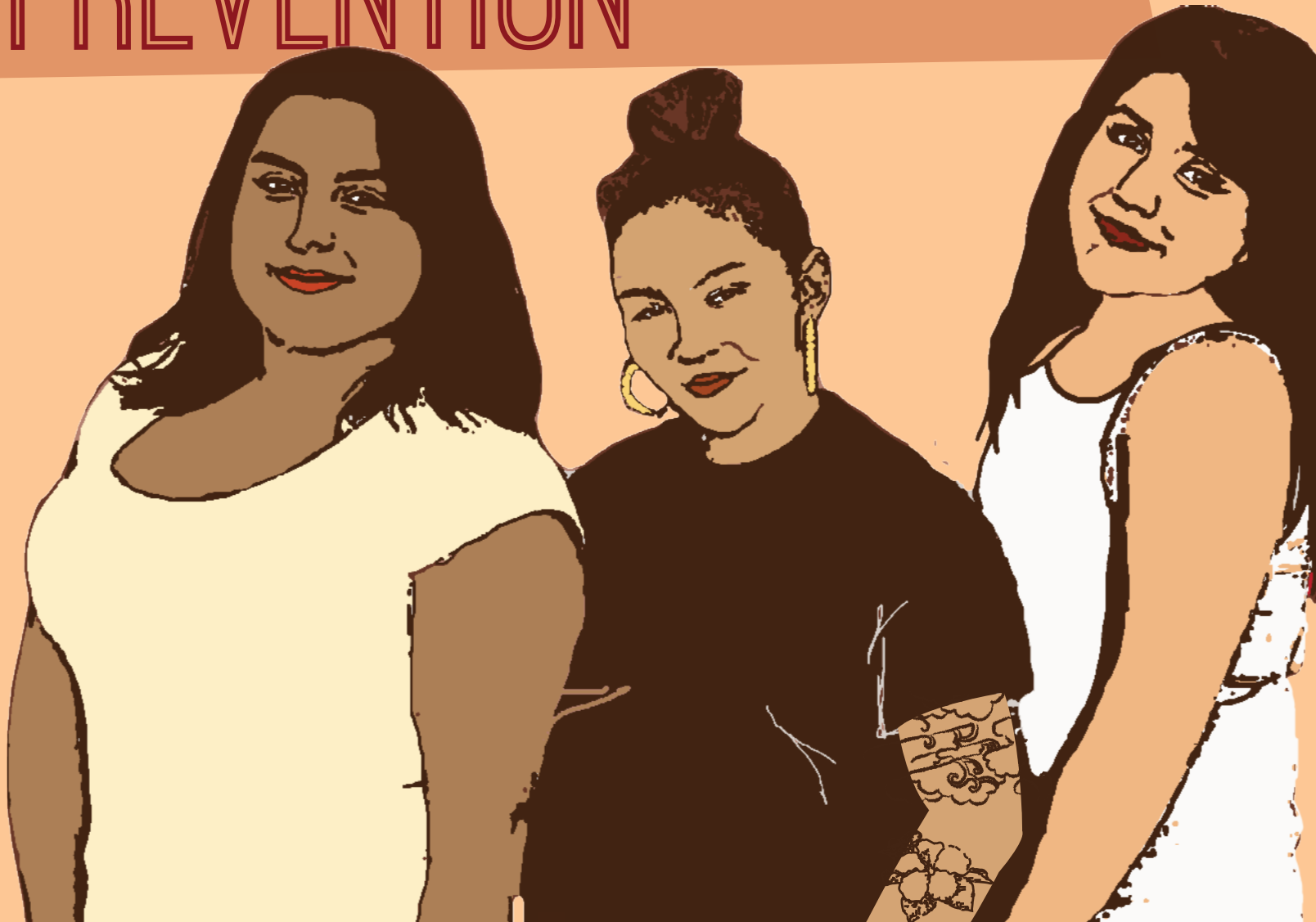


TEEN

PREGNANCY

MAY 2016

PREVENTION



DISMANTLING TEEN PREGNANCY PREVENTION

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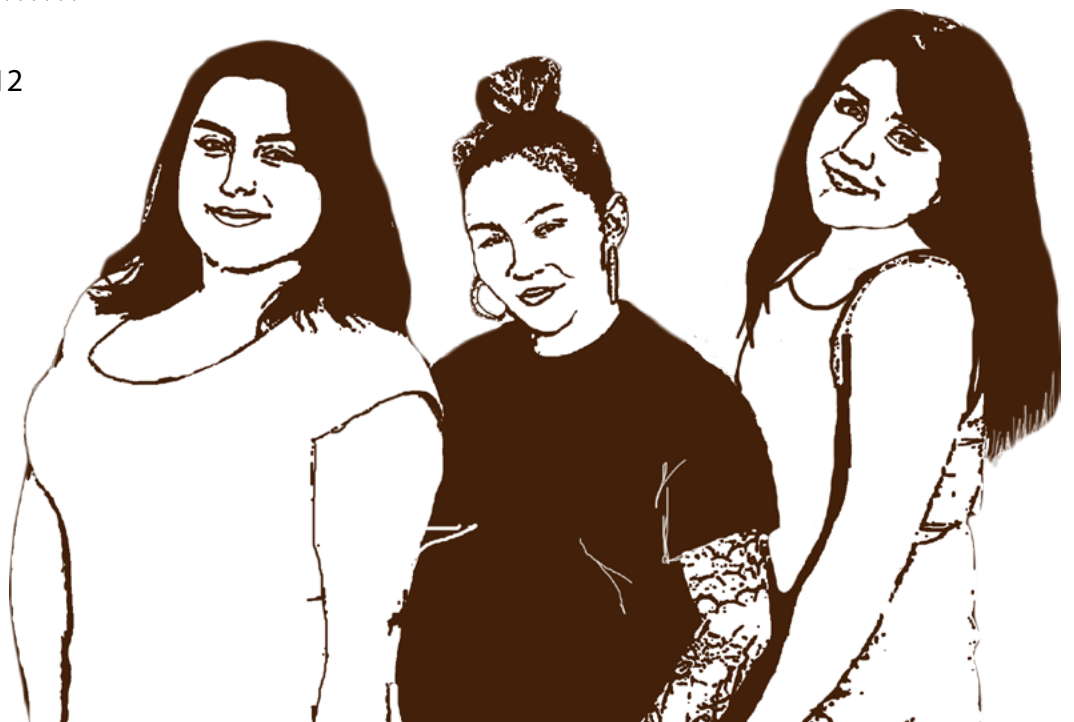
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ABOUT YOUNG WOMEN UNITED:

Young Women United (YWU) leads reproductive justice organizing and policy initiatives by and for self-identified young women and people of color in New Mexico.¹ Young Women United works to build communities where all people have access to the information, education, and resources needed to make real decisions about their own bodies and lives. We move our work through: community based organizing, policy initiatives, leadership development, and communications and culture shift strategies.

YWU is proud to build our work at the intersection of people's identities, while centering the expertise of those most impacted by an issue. Our constituency includes First Nation/Indigenous/Native American, Black/African American, Asian American and Chicanx/Latinx/Hispanic women and people, many of whom identify across Lesbian, Gay, Bisexual, Transgender, Queer spectrums.

YWU works to elevate an intersectional vision of reproductive justice around five campaign issue areas: advancing reproductive rights and access to reproductive health care; Embodying a Warrior State of Mind: a campaign de-stigmatizing LGBTQ youth mental health; leading criminal justice reform while improving access to prenatal care and treatment for substance using pregnant women; increasing access women of color have to a full range of birthing options including licensed midwifery models of care; building educational equity for expectant and parenting young people. YWU also runs Circle of Strength, a leadership development program for self identified young women of color ages 13-19.



RESPECTING YOUNG PEOPLE, REALIZING REPRODUCTIVE HEALTH FOR ALL OF US

Young Women United (YWU) defines “Teen Pregnancy Prevention” as an articulated strategy or campaign designed to keep young people from becoming parents as teenagers, of which the underlying premise is that teen pregnancy is inherently something that needs to be prevented. YWU understands teen pregnancy prevention to be inaccurate and stigmatizing. This report serves to discredit myths regularly perpetuated by the frame and messaging that function as the foundation of teen pregnancy prevention models.

In YWU’s early organizational years, we and many others working on issues of reproductive health and reproductive justice used the language of teen pregnancy prevention within our efforts to highlight community needs and pull vital resources to young people and families in our state. As YWU grew in political power we were able to resource increasingly honest and strength-based approaches to our community organizing, policy initiatives, and culture shift strategies—while intentionally moving away from teen pregnancy prevention.

YWU understands that young people, like people of all ages, need high-quality reproductive health information and access to services—just not on the premise of preventing teen pregnancy. Naming that teen pregnancy prevention approaches are built upon misleading and biased research, YWU understands that by unfairly depicting young parents in a negative way **these shame-based approaches are ineffective, and actually fuel discrimination against young parents causing harm to their families.** Young people, including young parents, need accurate information and basic respect—so that they may have what they need to be who they are, and to thrive.

It’s crucial that justice minded allies, advocates and policy makers invest in the resources, education, and information young people need to make decisions about their own bodies and lives, while moving away from problematic and harmful teen pregnancy prevention approaches. **We must stop blaming young people in general—and young parents in particular—for systemic inequities.** By putting blame where it isn’t deserved, we fail to address underlying causes of the challenges facing youth and their families today. Most importantly, we miss opportunities for real impact and meaningful change.



Art courtesy Adelina Cruz



For Young Women United, a critical part of realizing reproductive justice means ensuring all people have access to the reproductive health care they may need, over their lifetimes. Our work begins and ends with respect; the following values guide our reproductive health work alongside young people:

CENTERING AGENCY OF YOUNG PEOPLE TO MAKE MEANINGFUL AND INFORMED DECISIONS ABOUT THEIR OWN BODIES AND LIVES

At Young Women United we are working so that all people have the education, information and resources needed to make real decisions about their own bodies and lives, including the decisions young people make regarding pregnancies and parenting. In principle and in practice, this means that we trust in the capacity of young people to think, act and exist for themselves. In order to make meaningful and informed decisions for themselves, young people must have access to a full range of reproductive health care information and services they may need. Through policy initiatives and culture shift strategies, YWU works to improve access to reproductive health care, not on the premise that teen pregnancy is something that should be prevented, but because we understand reproductive health care to be essential to the health and well being of our communities.²

ACKNOWLEDGING CULTURAL AND HISTORICAL LEGACIES OF REPRODUCTIVE HEALTH IN COMMUNITIES OF COLOR

In this country, women and families of color have survived deep-seated and direct actions/programs/policies designed to control our reproductive functions and eliminate the autonomy of our communities. We have been systematically denied our right to decide if, when, and how we may get pregnant and/or create our families. Beginning with historical realities that have shifted into current day concerns, from contraceptive coercion³ to forced sterilization⁴, the legacies of colonization, slavery and eugenics must be acknowledged in order to effectively respond to the pressing reproductive health care needs of young people today.

RECOGNIZING CONTEXT OF INTERSECTIONAL IDENTITIES FOR YOUNG PEOPLE IN NEW MEXICO

Young Women United is proud to work at the intersection of people's identities. We understand that each person has their own unique experience navigating the world that is shaped by identities they carry—the identities they were born into, their chosen identities, and the identities assigned to them by people and institutions over their lives. YWU understands that each of us exists as whole people who live gendered, raced, classed, sexual, disabled, and/or abled lives and more. By recognizing the complexities of who we are and how we arrived at our current lived realities, we are able to organize across issue areas and collectively envision better conditions by and for ourselves, our families and loved ones, and our communities.



DEBUNKING

MYTHS

A NOTE ON TERMINOLOGY: Young Women United uses the term “young parents” rather than “teen parents” within our organizing and policy initiatives, and throughout arguments to dismantle teen pregnancy prevention myths. Following the direction of young parent activists and leaders, including many in New Mexico and the transformational group #NoTeenShame, we see use of the term “young parents” as a powerful exercise that foregrounds identity and recognition of young parents while subverting the paternalism, and stereotypes inherent in the term “teen parents.”

We intentionally utilize gender neutral language referencing young parents instead of focusing solely on young moms. Too often teen pregnancy prevention is framed around teen moms; it is not only problematic to impose a “burden of responsibility” on young moms, but also leaves no room for the complex gender identities all people carry.

Additionally, YWU acknowledges that historically women have had older sexual partners, that outdated data suggests many young moms conceive their children with significantly older partners⁵, and that limited demographic information exists regarding male partners fathering children born to young moms⁶. For YWU, these observations serve as a point of departure for more nuanced analysis and exploration.

MYTH #1

Teen parents are a drain on government resources and cost taxpayers a lot of money.

...THE MAJORITY OF THESE PARENTS WOULD HAVE FOLLOWED A SIMILAR ECONOMIC TRAJECTORY, WHETHER OR NOT THEY BECAME TEEN PARENTS.

Many believe that costs associated with teen parents are wrapped up in handouts to “needy” families, in the forms of food stamps, cash assistance, health care coverage, etc. Yet the “social costs” inaccurately attributed to young parents and their families do not stem from their young parenthood, but instead are connected back to pre-existing and systemic poverty.⁷ Most teen pregnancy prevention advocates insist on the contrary and go to great lengths to highlight the alleged price tag of adolescent pregnancy.

According to the National Campaign to Prevent Teen and Unplanned Pregnancy, adolescent childbearing in the United States cost taxpayers at least \$9.4 billion in 2010. The National Campaign explains that the high cost is “associated with negative consequences for the children of teen mothers, including increased costs for health care, foster care, incarceration, and lost tax revenue.”⁸

The National Campaign’s calculations are particularly deceptive considering over 55% of their reported costs of adolescent childbearing are based on estimated unearned income and the subsequent lost tax revenue from young parent families over their lifetimes.⁹ This means that the National Campaign and teen pregnancy prevention advocates are effectively blaming young parents for earning less income, spending less money, and paying less in taxes. What the National Campaign fails to acknowledge is that the majority of these parents would have followed a similar economic trajectory, whether or not they became teen parents. It is outrageous to blame young families for making less money and paying less taxes over a lifetime—especially when their parenting status is not the primary factor that determines their potential to earn income.

The New Mexico Department of Health states in a May 13, 2015, Report to the Legislative Finance Committee: “Negative outcomes associated with teen births cost New Mexico an estimated \$84 million annually.”¹⁰ The report details the ostensible local economic costs to taxpayers; such detailing of costs and negative outcomes serves to overwhelm the reader with alleged hard facts that are anything but.

For decades, scholars from diverse fields such as public health, communications, sociology, and economics have cautioned against such economic arguments blaming young parents for being poor because they confuse the direction of causality. It is misleading, manipulative and profoundly unethical to scapegoat and pressure young people to take personal responsibility for “social costs”¹¹ rooted in systemic inequities.

Among the professed negative consequences for the children of adolescent parents are: “increased risk of abuse, neglect, foster care, incarceration, participation in the child welfare system” and poor educational performance and attainment.¹² While these outcomes in many families are too often real, young parents are getting blamed for the consequences of poverty and systemic inequities.

Data consistently shows that the age someone becomes a parent does not determine or predict their or their children’s future. An individual’s health, social and economic trajectory is not likely to change for better or worse if they have their first child as an adolescent, or in their 20’s, 30’s or 40’s.¹³

For some young people, the decision to carry a pregnancy and parent may be described as an attempt to improve outcomes for oneself and family over a lifetime. In many indigenous communities and communities of color, environmental violence and injustice have created toxic lived environments in which the reproductive health and well-being of people is under attack.¹⁴ Young parenting has been described by various scholars as “adaptive” and even as a protective factor against low birth weight and infant mortality given disparities in maternal and infant health outcomes among low-income communities and communities of color.¹⁵ Public health scholar Arline Geronimus calls it “a strategy for coping with economic uncertainty” and a decision shaped by “the traditions or, more importantly, the environmental contingencies and life expectancy faced by members of poor families who hope to provide for children’s well-being.”¹⁶

It is important to note: becoming a young parent cannot be simply chalked up to “irresponsibility”¹⁷ or “making bad decisions”. Becoming pregnant and deciding to parent can be a rational decision, particularly given a context of systemic deprivation and disadvantage where conditions for economic progress are stifling and/or nearly impossible. Why postpone parenting when opportunities for socio-economic advancement are few whether or not childbearing is delayed? Why wait to have children when it may be a sound strategy for a young person to parent while they and the members of their support system are in (relatively) optimal health?¹⁸

S.E. Cashdollar, a researcher who in 2012 conducted a study on adolescent mothers in New Mexico’s Doña Ana County with the assistance of the county’s Health and Human Services Department, found that some young mothers had poor information about and limited access to contraception. Many, however, “told me they had knowledge of and access to contraception, but they simply chose not to use it. For them, motherhood was a deliberate choice; prospects of a college education and lucrative career were chimerical and abstract, while motherhood promised a sense of purpose and motivation they found hard to come by in their other pursuits.”¹⁹

MYTH #2

Children of teen parents have poor outcomes.

DATA CONSISTENTLY SHOWS THAT THE AGE SOMEONE BECOMES A PARENT DOES NOT DETERMINE OR PREDICT THEIR OR THEIR CHILDREN’S FUTURE.

Teen pregnancy prevention campaigns extoll delaying parenting as a key to “breaking the cycle of poverty,” yet research shows that the cycle continues unabated and “poor outcomes” are present whether people parent as adolescents or not.²⁰ If policy makers truly want to address those outcomes, adolescent pregnancy prevention is not a sound strategy.²¹ Bettering young people’s life chances is a prerequisite to improving their and their children’s outcomes—an approach that sociologist Gretchen Sisson argues for and describes as a “class conscious model of adolescent sexual health.”²²

Insisting on the falsehood that adolescent childbearing is the cause of “poor outcomes” is not only ineffective as a strategy to improve young people’s lives, it is also dangerously misguided in the case of low-income communities and communities of color since it fails to grapple with the adaptive or protective effects of some who parent young. The key to improving the outcomes that are presently correlated with—but not caused by—adolescent childbearing is working towards undoing socio-economic inequities.

If policy makers truly want to address those outcomes, adolescent pregnancy prevention is not a sound strategy. Bettering young people’s life chances is a prerequisite to improving their and their children’s outcomes...



It is neither accurate nor fair to describe as “babies” or “children” the many contemporary teenagers in the U.S. who, whether parenting or not, are shouldering adult responsibilities. For many young people today being a teenager means serving as caretakers and carrying financial responsibility for themselves, their parents, siblings, and whole networks of loved ones, among other things.

The “babies having babies” label is also incredibly inaccurate given that 73% of teenage mothers are over 18—thus they are legally adults in most states and most are also eligible to pay taxes, buy a house, be drafted, get sued, go to jail, vote and serve jury duty.²³ Sociologist Karen Sternheimer explains: “We like to infantilize teens, or focus on their bad behavior, even though some of them are functioning as adults. [...] We’ve redefined adolescence as an extension of childhood, whereas it used to be a precursor to adulthood.”²⁴ The prism through which adolescents are viewed as “babies” or “children” is specifically a contemporary middle-class one where youth are expected to delay childbirth, go to college to study, “find themselves,” party, perhaps even travel—all while still being their parents’ dependents.

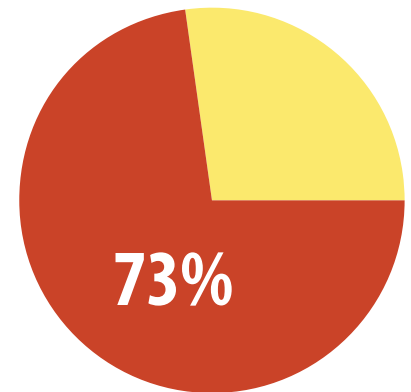
In comparison, during the 1950s, it was fairly common in the United States for teenagers to have children. The adolescent birth rate in 1957 was nearly four times what it is today.²⁵ The majority of these births were to 18 and 19 year olds within the context of marriage. Sociologist Stefanie Mollborn explains: “Technically, this made lots of young people teen parents, but it wasn’t considered a problem because they were engaging in a ‘normal’ life course.”²⁶ While back then births out of wedlock were stigmatized, nowadays, non-marital births have become more accepted. Much of the stigma today, instead, is focused on birthing as an adolescent. So while their counterparts in the 1950s were perceived as adults, today’s teenagers—even the 18 and 19 year olds who are the majority of teen parents—are derided and fretted over for purportedly being “babies having babies” or “children having children.”²⁷

While some teen pregnancy prevention advocates do acknowledge that adolescents have surpassed childhood, most maintain that teens are developmentally incapable of successfully raising children of their own. Media and policy makers have latched onto the tentative results of some recent adolescent brain research as proof of the avowed irresponsibility, rashness and lack of impulse control of the “teen brain.” However, scientific evidence is far from conclusive and experts caution against prematurely drawing cause-and-effect links between biology and behavior.²⁸

A seemingly more benign proposition held by some teen pregnancy prevention advocates is that while young parents have “proven themselves capable of meeting many of the challenges of parenting [...] that ability does not mean that they should have to.”²⁹

MYTH #3

Teen parents are babies having babies.

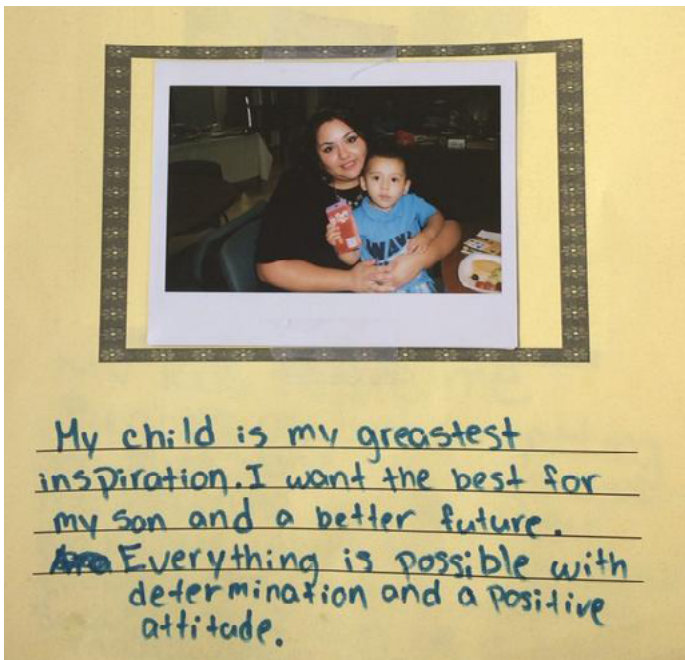


73% OF TEENAGE MOTHERS ARE OVER 18 — THEY ARE LEGALLY ADULTS IN MOST STATES AND MOST ARE ELIGIBLE TO VOTE.



These advocates argue for a less judgmental approach to teen pregnancy prevention so that “teens are protected not because of their incapacibilities, irrationality, or immaturity, or because of fears of their sexual development, but because they deserve the opportunity to experience adolescence free from the responsibilities of parenthood.”³⁰

The problem with this kinder version of teen pregnancy prevention is that it is based on an *a priori* appraisal of adolescence being an inappropriate life stage during which to parent. This approach is based on the presumption that a whole group of people should not be parenting and thus should be targeted through pregnancy prevention campaigns. While an honest discussion of the challenges (and advantages, and joys) of parenting young are necessary to quality reproductive health education for adolescents, setting out to “prevent” adolescent pregnancy predetermines that young parenting is not a sound or desired life course; this predetermination is simply incompatible with reproductive justice and self-determination. In the words of Gloria Malone, young mother and one of the founders of the #NoTeenShame campaign, participating in the #RespectYoungFams 2015 Twitter chat: “don’t assume that we don’t know what is best for us.” And as expressed in the same Twitter chat by the organization Youth-centered Health Design: “Viewing teen parents as immature, or worse as an extension of their own parents until they reach 18, is problematic.”³¹



While our society has made some strides towards questioning coercive tactics to control people’s reproductive autonomy based on race, class, and ability, the same has not yet happened with respect to age. Thus we, as a society, continue to justify teen pregnancy prevention as a public policy that seeks to prevent a certain group from reproducing by denying their capacity to parent.

Young parents are bombarded daily by messages that tell them they have “made a mistake” that has “ruined their lives.” A salient national example is the Candie’s Foundation ad campaign that proclaims: “You’re supposed to be changing the world... not changing diapers. Enjoy your youth by being a kid, not raising one.”³² The ad campaign frames young parenting as incompatible with pursuing other interests and dreams; it also poses young parenting as incompatible with joy. But the perspectives and experiences of young parents themselves debunk the notion that they have “ruined their lives” or the misconception that being a young parent will get in the way of thriving and having enjoyable, meaningful lives.

Many young parents report feeling *more* motivated to finish school after they became pregnant or began parenting, while others express that having children has been a great incentive to become more responsible and focused than their peers.³³ As conveyed by two young parents who participated in the 2015 #RespectYoungFams Twitter chat: “Kids are our future and my children inspire me with going back to school and give back” (Linda Nastacio, @ZuniPride) and “They motivate u to finish things tht you need to accomplish for your future. you become more determined” (Kelsi Lee, @kelsilove7). Other young parents powerfully speak to the joy and strength they derive from raising their children. As a reply to the question “How do your kids inspire you?” one young father said “As a father in my son’s life, I love reading to him. Makes me happy” (Young Women United, @YwuWomen) while a young mother stated “My daughter inspires me by telling me ‘you can do it, mommy’. hugging me, making my smile, and loving me” (TeenMomNYC, @TeenMomNYC).³⁴

Young parents have been very vocal in pushing for our society to rethink the present one-size-fits-all notion of youth success predicated on postponing parenting. They argue that young people must have room to define and pursue success for themselves, within a variety of circumstances. In the words of another parent who contributed to the 2015 #RespectYoungFams conversation by answering the question “what tools do young parents need in order for them and their families to succeed?”: “the chance to define our own path to success. going to school right away was not the right choice for me” (Hailea Squires, @haileasquires). And in the words of the New Mexico GRADS program dedicated to supporting young parents and their families: “We work with families who teach us what the definition of family means, we learn there are no molds” (New Mexico GRADS, @nmgrads).³⁵

Not only do many young parents’ experiences counter the presumption that they have “ruined their lives,” but the myth also falls apart when we recall that data shows parenting age is a poor predictor of an individual’s socio-economic outcomes. Furthermore, the accusation that adolescent parents have “ruined their lives” is particularly specious considering that the challenges, stigma and structural barriers that young parents do face are socially imposed and not at all an inevitable consequence of their decision to parent young.

MYTH #4

Teens who have babies have ruined their lives.

MANY YOUNG PARENTS REPORT FEELING *MORE* MOTIVATED TO FINISH SCHOOL AFTER THEY BECAME PREGNANT OR BEGAN PARENTING, WHILE OTHERS EXPRESS THAT HAVING CHILDREN HAS BEEN A GREAT INCENTIVE TO BECOME MORE RESPONSIBLE AND FOCUSED THAN THEIR PEERS.

New Mexico's Senate Memorial 25 (2012), authored by young parents and passed through YWU's advocacy, recognizes the strengths and possibilities of young parents, while also countering the myth that young families are bound to fail:

“WHEREAS, positive change in the lives of young people is rooted in equal access to educational opportunities, living-wage jobs, affordable health care and safe housing; and WHEREAS, many young parents are raising wonderful, healthy and happy children; and WHEREAS, all families deserve dignity and equal rights; and WHEREAS, all parents have a future and all families matter; NOW, THEREFORE, BE IT RESOLVED BY THE SENATE OF THE STATE OF NEW MEXICO that August 25, 2012 be designated as a day of recognition of young parents.”³⁶

CONCLUSION

Young Women United takes an explicit stance against efforts that seek to control, coerce or manage the reproductive agency of any person. Teen pregnancy prevention is designed to influence the reproductive decisions and outcomes of an entire segment of a population, simply on the basis of their age. We understand that the concept and practice of teen pregnancy prevention is built on a foundation of inaccurate information. Teen pregnancy prevention models are inherently flawed as they unfairly blame young people, and young parents specifically, for disparities in outcomes within our communities. We know that narratives that use young parents as scapegoats for social ills deflect real accountability away from broad systemic issues plaguing our families.

YWU's vision of reproductive justice means young people have what they need to safely navigate their own reproductive lives, healthy relationships and families. Resources, policies, and priorities will better serve young people by addressing the root causes of inequity that impact quality of life and overall outcomes in our communities. If we are committed to a bright future for all young people, then we must invest in honest dialog and real change, instead of perpetuating the misconception that teen pregnancy is a problem that must be prevented.

NOTES

1. www.youngwomenunited.org.
2. Dorothy Roberts, *Killing the Black Body: Race, Reproduction, and the Meaning of Liberty* (New York: Pantheon Books, 1997).
3. Aline Gubrium et. al., “Realizing Reproductive Health Equity Needs More Than Long-Acting Reversible Contraception (LARC),” *American Journal of Public Health* 106 (January 2016): 18-19. doi: 10.2105/AJPH.2015.302900.
4. Kathryn Kruse, “History of Forced Sterilization and Current U.S. Abuses,” *Our Bodies Ourselves* (October 1, 2014), accessed May 3, 2016, <http://www.ourbodiesourselves.org/health-info/forced-sterilization/>.
5. Sarah S. Brown and Leon Eisenberg, eds., *The Best Intentions: Unintended Pregnancy and the Well-Being of Children and Families* (Washington, DC: National Academy Press, 1995); Mike Males, “School-age Pregnancy: Why Hasn't Prevention Worked?” *Journal of School Health* 63 (1993): 429-432.
6. Joyce A. Martin, Brady E. Hamilton, Michelle J.K. Osterman, Sally C. Curtin, and T.J. Mathews, “Births: Final Data for 2013,” *National Vital Statistics Reports* 64 (January 15, 2015): 7, accessed May 18, 2016, http://www.cdc.gov/nchs/data/nvsr/nvsr64/nvsr64_01.pdf.
7. Melissa S. Kearney and Philip B. Levine, “Why Is the Teen Birth Rate in the United States So High and Why Does It Matter?” *Journal of Economic Perspectives*, 26 (2012): 141-166; V. Joseph Hotz, Susan Williams McElroy and Seth G. Sanders, “Teenage Childbearing and Its Life Cycle Consequences: Exploiting a Natural Experiment,” *The Journal of Human Resources* 40 (2005): 683-715; Arline T. Geronimus, Sanders Korenman and Marianne M. Hillemeier, “Does Young Maternal Age Adversely Affect Child Development? Evidence from Cousin Comparisons in the United States,” *Population and Development Review* 20 (1994): 585-609; Ana Penman-Aguilar, Marion Carter, M. Christine Snead and Athena P. Kourtis, “Socioeconomic Disadvantage as a Social Determinant of Teen Childbearing in the U.S.” *Public Health Reports* 128 Supplement 1 (2013): 5-22; Arline T. Geronimus, “Teenage Childbearing as Cultural Prism,” *British Medical Bulletin* 29 (2004): 155-166; Kristin Luker, *Dubious Conceptions: The Politics of Teenage Pregnancy* (Cambridge: Harvard University Press, 1996), 128-133; Mike Males, *Teenage Sex and Pregnancy: Modern Myths, Unsexy Realities* (Santa Barbara: Praeger, 2010); Gretchen Sisson, “Finding a Way to Offer Something More: Reframing Teen Pregnancy Prevention,” *Sexuality Research & Social Policy* 9 (2012): 57-69.
8. “Counting It Up: The Public Costs of Teen Childbearing,” The National Campaign to Prevent Teen and Unplanned Pregnancy, accessed April 29, 2016, <http://thenationalcampaign.org/why-it-matters/public-cost>.
9. Saul D. Hoffman, “By the Numbers: The Public Costs of Teenage Childbearing,” The National Campaign to Prevent Teen and Unplanned Pregnancy (October 2006), accessed May 3, 2016, https://d3np9zinex7nzb.cloudfront.net/sites/default/files/resource-supporting-download/7-btn_conclusion.pdf.
10. New Mexico Department of Health, “Report to the Legislative Finance Committee: Effective Practices to Reduce Teen Pregnancy, Including the Use of School-Based Health Centers,” Report #15-07, May 13, 2015: 5. Accessed April 29, 2016, <http://www.nmlegis.gov/lcs/lfc/lfcdocs/perfaudit/Department%20of%20Health%20Effective%20Practices%20to%20Reduce%20Teen%20Pregnancy,%20Including%20the%20Use%20of%20School-Based%20Health%20Centers.pdf>.

11. Sociologist Mike A. Males has questioned the very notion of “social cost” by pointing out: “The crude biases dominating social-cost studies of teen motherhood involve selecting measures that emphasize only those costs attributable to the targeted group while ignoring their benefits; ignoring costs imposed by more favored groups in society; and blaming personal choices while ignoring external conditions.” See Males, op.cit., p. 57.

12. New Mexico Health Department, op.cit., p. 11.

13. See sources referenced in endnote 7.

14. Elizabeth Hoover, Katsi Cook, Ron Plain, Kathy Sanchez, Vi Waghiyi, Pamela Miller, Renee Dufault, Caitlin Sislin, and David O. Carpenter, “Indigenous Peoples of North America: Environmental Exposures and Reproductive Justice,” *Environmental Health Perspectives* 120 (2012): 1646, accessed May 18, 2016, <http://ehp.niehs.nih.gov/wp-content/uploads/120/12/ehp.1205422.pdf>; Women’s Earth Alliance and Native Youth Sexual Health Network, *Violence on the Land, Violence on Our Bodies: Building an Indigenous Response to Environmental Violence* (Berkeley, California and Toronto, Ontario, Canada: Women’s Earth Alliance and Native Youth Sexual Health Network, 2016).

15. Sisson, op. cit., p. 59; Arline T. Geronimus, “Understanding and Eliminating Racial Inequalities in Women’s Health in the United States: The Role of the Weathering Conceptual Framework,” *Journal of the American Medical Women’s Association* 56 (2001): 1–5; Arline T. Geronimus, “Teenage Childbearing and Personal Responsibility: An Alternative View,” *Political Science Quarterly* 112 (1997): 405-430.

16. Geronimus, 1997, op. cit., p. 406, p. 427.

17. One example that often gets bandied about as proof of adolescent irresponsibility is the avowedly high rates of unintended teenage pregnancies in the United States. The assumption is that unintended pregnancy is a direct result of being “irresponsible” regarding the use of birth control. But while the rates of unintended adolescent pregnancies in the United States are much higher than those in many other developed countries, the same cannot be said when U.S. adolescent (15-19 years old) and U.S. adult rates (20-34 years old) are compared. In 2011 the unintended pregnancy rate for adolescents 15-19 years old was 41 per 1,000. That rate is lower than for women 20-24 years old (81 per 1,000), for women 25-29 years old (66 per 1,000), and for women 30-34 years old (43 per 1,000). How can we as society describe adolescents as particularly irresponsible when their unintended pregnancy rates either match or are lower than those of adults ages 20-34? Furthermore, is it fair to point fingers at adolescents when they have much less access than adults to quality sexual health information and services? See Lawrence B. Finer and Mia R. Zolna, “Declines in Unintended Pregnancy in the United States, 2008–2011,” *New England Journal of Medicine* 374 (March 3, 2016): 843-852.

18. Kearney and Levine, op. cit., p.38; Geronimus, 1997, op. cit., p. 406, p. 424-427.

19. S.E. Cashdollar, “Aspirations, Teen Pregnancy Linked,” *The Albuquerque Journal*, Sunday, August 16th, 2015, accessed April 29, 2016, <http://www.abqjournal.com/629036/opinion/aspirations-teen-pregnancy-linked.html>.

20. See sources referenced in endnote 7.

21. “Income Inequality and Teen Pregnancy,” Motoko Rich, *The New York Times*, April 3, 2012, accessed April 29, 2018, http://economix.blogs.nytimes.com/2012/04/03/income-inequality-and-teen-pregnancy/?_r=0.

22. Sisson, op. cit., p. 62.

23. “Trends in Teen Births and Childbearing,” U.S. Department of Health and Human Services, accessed April 29, 2016, <http://www.hhs.gov/ash/oah/adolescent-health-topics/reproductive-health/teen-pregnancy/trends.html>.

24. Sarah Kershaw, “Now, the Bad News on Teenage Marriage,” *The New York Times*, November 3, 2008, accessed April 29, 2016, http://www.nytimes.com/2008/09/04/fashion/04marriage.html?_r=0.

25. At its peak rate in 1957, the adolescent birth rate was 96.3 per 1,000 women aged 15-19; in comparison, the birth rate for the same population in 2013 was 26.6 and in 2014 continued its downward trajectory to 24.2. All throughout the 1950s, adolescent birth rates fluctuated above 75 births per 1,000 women aged 15-19; from 2000 onwards the rate has been below 50. See Stephanie J. Ventura, Brady E. Hamilton, and T.J. Mathews, “National and State Patterns of Teen Births in the United States, 1940–2013,” *National Vital Statistics Reports* 63, 4 (August 20, 2014),

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MYTH #1

Teen parents are a drain on government resources and cost taxpayers a lot of money.



MYTH #2

Children of teen parents have poor outcomes.



MYTH #3

Teen parents are babies having babies.

MYTH #4

Teens who have babies have ruined their lives.

Young Women United (YWU) defines “Teen Pregnancy Prevention” as an articulated strategy or campaign designed to keep young people from becoming parents as teenagers, of which the underlying premise is that teen pregnancy is inherently something that needs to be prevented. YWU understands teen pregnancy prevention to be inaccurate and stigmatizing. This report serves to discredit myths regularly perpetuated by the frame and messaging that function as the foundation of teen pregnancy prevention models.



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