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ABSTRACT

This paper presents data from a survey of all 50 states that examined specific programs and policies being pursued at the state level to discourage teenage and nonmarital childbearing. Overall, the teen childbearing rate has continued to fall, and in 1999 it was the lowest on record. Some research points to a relationship between welfare policies and teen childbearing, though many other factors also changed during this period, and all may have affected teen childbearing (especially the robust economy). There has been a substantial increase in pregnancy prevention education activities in the public schools. While states vary widely in their policies and programs, there is strong evidence of an increase in both governmental (state and local) and private action to discourage teen childbearing. However, fewer state governments appear to be proceeding aggressively with respect to nonmarital childbearing by adults. Increased access to contraception, paternity establishment, and child support enforcement were the only programs pursued by most states. Some research points to an association between welfare policies and nonmarital childbearing and marital stability by adults. However, while the nonmarital childbearing rate has leveled off, it remains at a near-record high level. (Contains 16 references.) (SM)

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There is a striking geographic pattern in teen fertility—in a band of southern and southwestern states, birthrates exceeded 40 births per thousand females ages 15 to 17.

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State Policy Initiatives for Reducing Teen and Adult Nonmarital Childbearing: Family Planning to Family Caps

Richard Wertheimer, Justin Jager, and

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Teenage and nonmarital childbearing are a source of concern to health practitioners, educators, the media, politicians, and the public, and are associated with numerous negative outcomes for the mother and her children. Because both forms of childbearing are also associated with costs to society—including the cost of the welfare system—they have been a major focus of welfare reform efforts.

The combination of the 1980s' rise in teen and unmarried adult childbearing rates and growing welfare caseloads fueled recent debates over the U.S. welfare system. After granting waivers to states to experiment with alternative welfare policies beginning in the early 1990s, the federal government enacted federal welfare reform in 1996.

The era of welfare waivers and welfare reform has seen

- A reversal of the upward trend in teen childbearing;
- A halt in the upward trend of nonmarital childbearing by adults; and
- Dramatic changes in welfare policies and programs—with a switch in control from the federal government to state governments.

Although welfare policies are particularly salient to policymakers, other factors that changed during this period and that may have affected these childbearing trends include

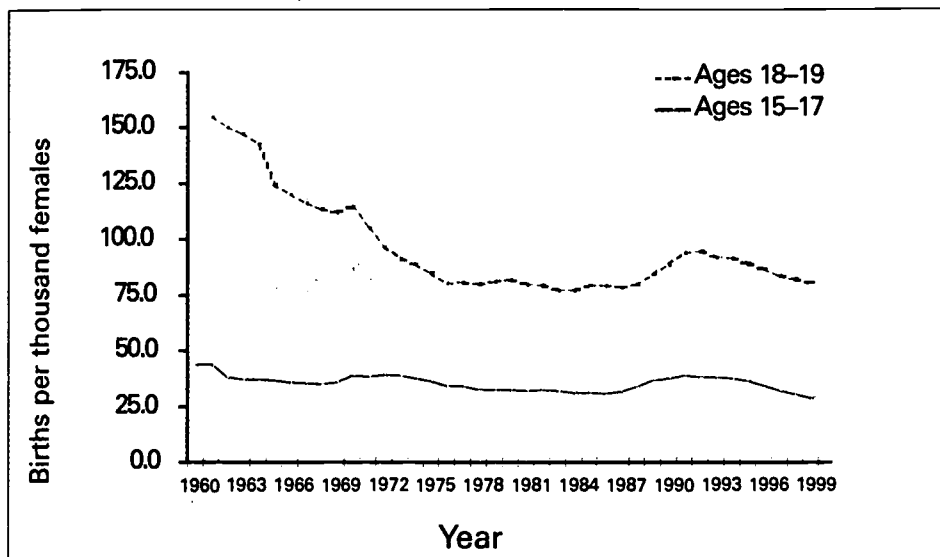
- A vigorous economic expansion;
- An expansion of the Earned Income Tax Credit (EITC);
- Use of new methods of contraception, especially Depo-Provera and Norplant;
- Increased public education about HIV and other sexually transmitted diseases;
- A focus on males as targets for policies affecting reproductive behavior;
- A rise in conservative attitudes toward premarital sex among religious youth;
- An increased emphasis on child support enforcement; and
- An emerging social consensus that nonmarital childbearing does not relieve a mother from the responsibility of working to help support her child.

Child Trends has conducted a new survey of all 50 states to learn about the specific programs and policies being pursued at the state level to discourage teenage and nonmarital childbearing. We summarize our findings below.

Teen Childbearing Rates

Teen birth rates declined dramatically in the 1960s and early 1970s, then rose in the late 1980s. After peaking in 1991, teen childbearing rates fell steadily, and by 1999 the overall teen birth rate reached a record low of just under 50 per thousand. As shown in figure 1, the birth rate for older

FIGURE 1. Teen Births per Thousand Females Ages 15 to 17 and Ages 18 to 19, 1960-1999



Source: Curtin and Martin 2000.

teens (ages 18 to 19) declined by approximately 15 percent to 80 per thousand in 1999, while the rate dropped by about 26 percent for younger teens (ages 15 to 17) to a record low of 29 per thousand. In 1999, about four out of five teen births were to unmarried mothers.

In 1998, the last year for which state-level data are available, the birth rate of young women ages 15 to 17 varied from 11 births per thousand in Vermont to 47 births per thousand in Mississippi. There is a striking geographic pattern in teen fertility across the states, as shown in figure 2. In a band of southern and southwestern states, birth rates exceeded 40 births per thousand females ages 15 to 17, while in New England from Massachusetts northward and in the upper Midwest, teen birth rates were less than 20 per thousand.

Adult Nonmarital Childbearing

The substantial reduction in teen childbearing during the 1990s has not been met with a similar decline in adult nonmarital childbearing. The birth rate for unmarried women ages 20 to 44, after a 20-year increase from

about 24 births per thousand in 1974 to 46 births per thousand in 1994, leveled off and stood at about 45 births per thousand between 1995 and 1998 (Curtin and Martin 2000; National Center for Health Statistics 1995; Ventura et al. 1996, 1997, 1998, 1999, 2000).

The percentage of births that occur to adult unmarried women has also increased. In 1960, less than 4

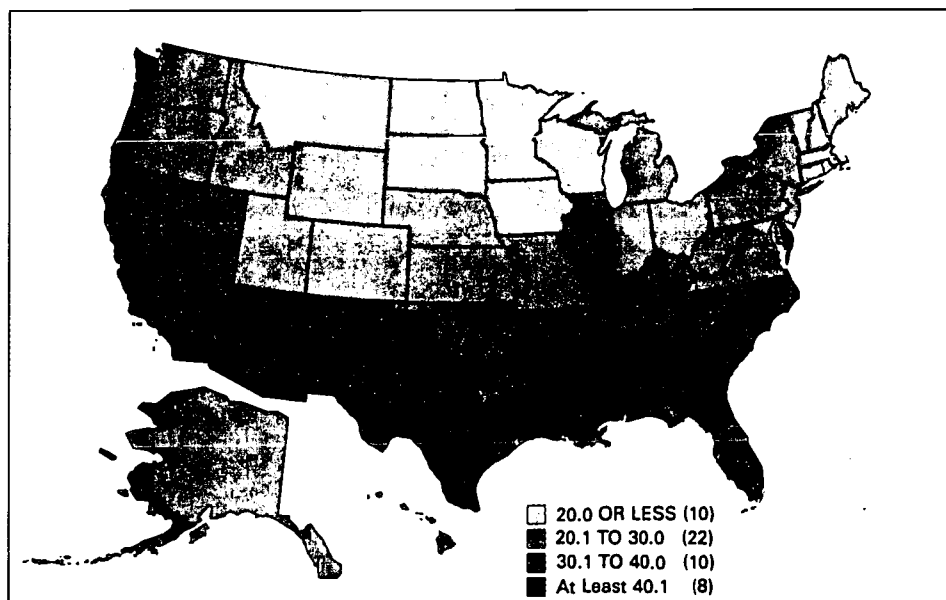
percent of births to women ages 20 to 44 were to unmarried women (National Center for Health Statistics 1995). By 1998, 26 percent of all births to women ages 20 to 44 were to unmarried women (Ventura et al. 2000.) Since 1980, most of this increase appears to be accounted for by increases in births to cohabiting parents rather than to women without resident partners (Bumpass and Lu 2000).

As shown in figure 3, the percentage of births to adult unmarried women in 1999 varied from 17 percent in Utah to 46 percent in Mississippi. All of the states in which this percentage exceeded 35 percent were in the South and Southwest.

State Policy Options for Discouraging Teen and Adult Nonmarital Childbearing

Federal welfare reform legislation enacted in 1996 included several policies designed to decrease both teen and adult nonmarital childbearing, including the following:

FIGURE 2. Teen Birth Rate (per Thousand 15- to 17-Year-Olds), 1998



Source: Ventura et al. (2000).

be. Since then, six additional studies (Fein 1999; Horvath and Peters 1999; Knox, Miller, and Gennetian 2000; Manlove, Terry, and Williams 2000; O'Neill 1994; Stark and Levin-Epstein 1999) have addressed whether specific provisions of the welfare system are associated with nonmarital childbearing. Findings were mixed, with only some of the studies showing a significant association between nonmarital fertility and welfare waivers or family caps.

What States Are Doing

Teen Childbearing: Current Policy and Recent Changes

Child Trends conducted two sets of surveys of all 50 states, one in 1997 and one in 1999, to learn about their policies and programs directed at teen pregnancy during the mid-to-late 1990s.¹ In addition, the National Governors' Association conducted a similar survey in 1990 (Koshel 1990). As summarized in table 1 and described in detail below, in recent years more states have been placing emphasis on teen pregnancy prevention.

As shown in table 1, 28 states had an official policy in 1999 requiring or encouraging pregnancy prevention programs in the public schools. This is a substantial increase from the 19 states with such a policy in 1997 and the 16 with such a policy in 1990.

In 1999, as part of their initiative to reduce teen pregnancy and regardless of official policy, 23 states provided contraception education in the public schools statewide—up from 14 states in 1997.² School-based abstinence education was provided in 26 states, and 15 states provided *both* contraceptive and abstinence education in 1999.

The states have been more aggressive in educating students about HIV/AIDS. All but 8 states have an official policy regarding HIV/AIDS education in the public schools; 41 of these states require or encourage HIV/AIDS education. This is an increase of two states since 1997 and an increase of eight states since 1990.

However, states are *less likely* now than in 1997 to have an official policy regarding education on sexually transmitted diseases (STDs).³ Although 35 states had a policy requiring or encouraging STD education in the public schools in 1997, only 30 did so in 1999.

Not teaching about STDs and not providing contraceptive education tend to go together. Among the 19 states without a policy requiring or encouraging STD education in the public schools, 14 also chose not to provide school-based contraception education statewide.

Abstinence-only approaches to teen pregnancy prevention have received much attention and federal support. Among the 14 states that did not have a policy requiring or encouraging STD education and that did not provide contraception education statewide, 4 states did provide abstinence education in 1999. These states—Alabama, Indiana, New Mexico, and Texas—could be considered “abstinence-only” states with respect to pregnancy prevention education in their public school systems.

In short, there has been a substantial increase in pregnancy prevention education activities in the public schools in recent years.

In 1999,

- Forty-four states provided family planning services⁴ to teens statewide, compared with 33 states in 1997. Forty-four states used federal money from at least two sources⁵ to fund family plan-

ning services to teens, and 30 states used Temporary Assistance for Needy Families (TANF) money for this purpose. Forty-four states reported using state or local money as well—the same as in 1997.

- Forty-two states were spending their own money on teen pregnancy prevention—up from 27 states in 1997. Among the states budgeting their own money in 1999, reported amounts varied between \$1 and \$179 per female age 15 to 19, with a median value of \$8 per teen female (a value which is unchanged since 1997).
- Twenty states had developed both a written multiagency plan to coordinate programs and policies affecting teenage pregnancy and a multiagency task force that meets at least annually to discuss goals, activities, or progress toward meeting the plan's goals.
- Thirty-six states conducted media campaigns to discourage teen pregnancy. Media campaigns were especially prevalent in the South.
- Thirty-seven states had formed coalitions with nongovernment organizations to prevent teenage pregnancy. In all cases, at least part of the coalition's budget came from foundations, nonprofit agencies, religious institutions, corporations, or individuals.

Many states have pursued a policy of devolving authority over teen pregnancy prevention programs to local organizations. In 1999, of the 28 states with an official policy regarding pregnancy prevention education in public schools, all but 2 deferred final say over the content of a pregnancy prevention program to local authorities. Moreover, of the 37 state coalitions to prevent teenage pregnancy, 29 include members from local government agencies.

TABLE 2. State Nonmarital Pregnancy Prevention Policies and Programs, 1999

State	Nonmarital Pregnancy Prevention Budget (\$)	Family Caps on Welfare Payments	Other Welfare Rules	Improving Access to Contraceptive Services	Media Campaign	Programs to Encourage Abstinence before Marriage	Programs to Encourage Couples Experiencing Pregnancy to Marry	Changes to the Tax Code to Encourage Marriage	Paternity Establishment Programs	Child Support Enforcement	Youth Development or Young Adult Education and Employment Programs	State Coalitions Run by Nonprofit Institutions	Local Control over Pregnancy Prevention Education Program
Alabama	0			x					x		x		x
Alaska	300,000		na	x	x				x	x	x		
Arizona	870,000	x			x	x			x	x	na	x	x
Arkansas	1,900,000	x		x				x	x	x		x	
California	0	x		x	na				x	x	na		
Colorado	0			x					x	x			
Connecticut	0				x	x			x				
Delaware	0	x	x	x					x	x	x		
Florida	0	x	na	x	x				x	x	x		
Georgia	na	x	x	x	x	x	x		x	x	x		x
Hawaii	0			x					x	x	x		
Idaho	0	x	na	x					x	x	na		
Illinois	0			x					x	x			
Indiana	na	x							x	x	x		
Iowa	0			x					x	x			
Kansas	0												
Kentucky	0			x	x				x	x	na		
Louisiana	4,645,257			x	x				x	x	x		
Maine	0			x					x	x	x		
Maryland	207,000	x	na	x					x	x	x	x	x
Massachusetts	0	x	x						x	x	x		
Michigan	0												
Minnesota	5,000,000			x	x	x	na		x	x	x	x	x
Mississippi	0	x		x					x	x			
Missouri	2,000,000			x	na				x	x	x		
Montana	0			x		x							
Nebraska	0					x			x	x	na		
Nevada	1,000,000				x	x			x	x	x	x	x
New Hampshire	0		x						x	x	na		
New Jersey	0												
New Mexico	0												
New York	0			x	x				x	x	x		
North Carolina	1,500,000			x					x	x			
North Dakota	0	x	x	x		x	x		x	x	x		
Ohio	0	x		x					x	x			
Oklahoma	100,000	x	x		na	x			x	x			
Oregon	11,280,000			x					x	x	x	x	x
Pennsylvania	0	x							x	x			
Rhode Island	107,000			x					x	x	x	x	x
South Carolina	0												
South Dakota	0			na									
Tennessee	1,800,000	x					x		x	x	x	x	x
Texas	15,000,000								x	x	x		
Utah	350,000		x	x	x	x			x	x	na	x	x
Vermont	0		x	x	x				x	x	x	x	x
Virginia	1,000,000	x		x	x	x			x	x	x	x	x
Washington	0		x	x	x	x			x	x	x	x	x
West Virginia	0	na	x	x	x	x	na		x	x	x		
Wisconsin	0	x	x	x					x	x	x		
Wyoming	na	x		na	x	x			x	x			
Total		19	11	32	17	14	3	1	43	42	26	12	13

Note: na = not available.

In short, while states vary widely in their policies and programs, there is strong evidence of an increase in both governmental (state and local) and private action to discourage teen childbearing.

Adult Nonmarital Childbearing: Current Policy (1999)

Fewer states are directly promoting marriage or sexual abstinence among unmarried adults than has been the case for teens. However, a majority of states are addressing contraception.

Results presented below apply only to 1999.

As shown in table 2, 32 states reported that they were trying to improve access to contraceptive services as a means of reducing nonmarital childbearing.

Fourteen states ran programs that encouraged sexual abstinence before marriage. However, none of the 10 most populous states ran such a program.

Only three states (Georgia, North Dakota, and Tennessee) ran programs in 1999 encouraging couples experiencing a pregnancy to marry.

Arkansas was the only state to change its tax code to encourage marriage. It is worth noting that there are proposals pending before Congress to reduce the federal "marriage penalty." However, these proposals would have little effect on couples with modest earnings. The marriage penalty implicit in the federal Earned Income Tax Credit, on the other hand, is substantial, and modification of this provision has also been discussed.⁶

States have also attempted to discourage adult nonmarital childbearing indirectly by establishing financial consequences for nonmarital births,

with paternity establishment and child support enforcement programs the most common approaches. In 1999, 43 states reported that they attempted to reduce nonmarital childbearing through paternity establishment programs, and 42 states reported operation of child support enforcement programs for the same purpose.

Nineteen states reported that they no longer increased benefits when a mother receiving TANF payments had an additional child (a "family cap"). Eleven states reported using welfare rules other than family caps to discourage nonmarital childbearing.

Seventeen states conducted media campaigns discouraging nonmarital pregnancies. Media campaigns were more popular in the South than in the rest of the country. While about half of the states in the South conducted media campaigns, only about one-quarter of nonsouthern states did so.

Twenty-six states ran youth development or young adult education/employment programs.

Sixteen states spent their own money on nonmarital pregnancy prevention. Among the states budgeting their own money in 1999, reported amounts varied from a low of \$100,000 for the state of Oklahoma to a high of \$15,000,000 for the state of Texas. A majority of the states that allocated funds to nonmarital pregnancy prevention were located in the Southwest or the South Atlantic region.

Twelve states distributed a portion of their nonmarital pregnancy prevention budget to private institutions or agencies.

Thirteen states both distributed a portion of their nonmarital pregnancy prevention budget and passed on the control of how that portion was to be spent to local agencies. In all, 10 states distributed funds to local gov-

ernment agencies, and 11 states distributed funds to local nonprofit institutions, with 8 states distributing funds to both.

In contrast with teen pregnancy prevention, fewer state governments appeared to be proceeding aggressively with respect to nonmarital childbearing by adults. Increased access to contraception, paternity establishment, and child support enforcement were the only programs pursued by most states.

Conclusion

The 1990s have seen a dramatic expansion of programs at the state level designed to discourage teen childbearing. The teen childbearing rate has continued to fall, and in 1999 was the lowest on record. Moreover, some research points to an association between welfare policies and teen childbearing. However, as noted earlier, many other factors also changed during this period, and all may have affected teen childbearing—especially the robust economy. Thus, it is not necessarily appropriate to credit welfare reform with the current downward trend in teen childbearing.

However, fewer state governments appear to be proceeding aggressively with respect to nonmarital childbearing by adults. Some research points to an association between welfare policies and nonmarital childbearing and marital stability by adults. However, while the nonmarital childbearing rate has leveled off, it remains at a near-record high level.

Endnotes

1. Financial support for the 1997 survey was provided by the Charles Stewart Mott Foundation.
2. In 1999, three states provided contraceptive clinics in the public schools (a number which is unchanged since 1997).

3. However, there was a substantial increase between 1990 and 1997 from 28 states to 35 states.

4. Family planning services include contraceptive services and supplies, sexually transmitted disease services, and pregnancy testing.

5. Sources of federal money include TANF, Public Health Services Act (Title X), Maternal and Child Health (Title V), Medicaid (Title XIX), Social Services (Title XX), and the Centers for Disease Control.

6. The penalty results from the phase-out of the EITC as earnings rise. A single mother with modest earnings may lose her entire credit if she marries a man who also has earnings.

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