ADOLESCENT CHILDBEARING

Teen pregnancy is generally unintended and has long-term negative effects on future physical, behavioral, educational, and economic development of both mothers and children. Adolescent mothers are less likely than older mothers to finish high school or go on to college. Compared with babies of mothers in their 20s and early 30s, children born to teen mothers are more likely to be premature, have a low birth weight, or die as infants. Children of adolescent mothers generally have poorer educational and behavioral outcomes than children born to older mothers and are more likely to initiate sex at an early age or to have a teen birth themselves.

According to preliminary data for 2013, the overall birth rate for adolescents aged 15–19 years was 26.6 births per 1,000 females, representing an 11 percent decline from 2012 (29.4 per 1,000) and a historic low for the nation (figure 1). Birth rates for younger adolescents 15–17 years of age (12.3 per 1,000) declined by 13 percent while the rates for older adolescents, aged 18–19 years, declined by 8 percent to 47.4 per 1,000. Record lows were reached for both younger (15–17 years) and older teens (18–19 years). The teen birth rate has fallen by more than 55 percent since 1991 (61.8 per 1,000), when the long-term decline began. The rate for teens aged 15–17 years has fallen 67 percent and the rate for those aged 18–19 years has declined by 47 percent.

Overall, birth rates for teenagers aged 15–19 years decreased for all racial and ethnic groups from 2011 to 2012, with declines ranging from 3 percent for American Indian/Alaska Native teens to 5 percent for Asian/Pacific Islander teens and 6–7 percent for non-Hispanic White, non-Hispanic Black, and Hispanic teens (figure 2). Birth rates for younger teens aged 15–17 years decreased for all race and ethnic groups in 2012, while rates for older teens aged 18–19 years decreased for all but American Indian/Alaska Native and Asian/Pacific Islander adolescents.

Despite observed decreases, profound disparities continue to persist in adolescent childbearing rates across racial and ethnic groups. Among teens aged 15–19 years, birth rates ranged from a low of 9.7 per 1,000 females for Asian/Pacific Islander teens to a high of 46.3 per 1,000 females for Hispanic teens, an approximately fivefold difference. The birth rate among non-Hispanic White 15- to 19-year-olds was more than twice as low as those of both Hispanic and non-Hispanic Black teens of the same age.

The Community Preventive Services Task Force recommends both group-based and youth development behavioral interventions to protect against the risk of HIV/AIDS, other sexually transmitted diseases, and teen pregnancy. Group-based interventions, referred to as Comprehensive Risk Reduction Interventions for Adolescents, have shown results in reducing sexual activity, unprotected sex, and sexually transmitted infections and are applicable across a variety of populations and settings. Youth development behavioral interventions in these programs are coordinated with community service. Social, emotional, or cognitive competence training promotes prosocial norms, improved decisionmaking, self-determination, and positive peer or role model bonding, while community service provides opportunities to gain membership in groups with explicit rules and responsibilities.

Figure 1. Birth Rates Among Adolescent Females Aged 15–19 Years, by Age, 1990–2013*

*Data for 2013 are preliminary.
**Data Sources**


**Endnotes**


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Suggested Citation