

# Healthy Moms, Healthy Kids:

## A Series on Maternal and Child Health in Colorado

### Family Structure and Unintended Teen Pregnancy

Family structure and maternal age at birth can have a significant influence on the physical, mental and economic well-being of mothers and their children. Children born to single mothers in poverty are more likely to face unemployment as adults, drop out of high school and encounter barriers to accessing quality health care. Children of teen mothers also face an increased risk of a number of adverse long-term outcomes, including becoming teen parents themselves. Although the number of Colorado children living in single-parent families is below the national average and Colorado has seen a decline in teen pregnancy rates in recent years, these two issues remain important ones for the state to address. Efforts to prevent unintended teen pregnancies, help teen mothers finish their education and provide support for low-income single mothers as they work to achieve self-sufficiency are important tools for ensuring the long-term health and well-being of Colorado mothers and their children.

### Births to Single Mothers

Characteristics of the typical American single mother have changed significantly in recent years.<sup>1</sup> In 2010, 40 percent of single mothers in the U.S. were over the age of 40, and most worked outside of the home.<sup>2</sup> Still, since single mothers are more likely than married mothers to live in poverty, the consequences of single motherhood can be significant for some mothers and children. Single mothers are more likely to have low educational attainment and see their earning potential decrease.<sup>3</sup> Additionally, since children born to single parents often live in households with only one income, there is a strong correlation between single-parent families and childhood poverty. In fact, more than six out of 10 children who have experienced persistent or long-term poverty live in single-parent families.<sup>4</sup> Because these families are less likely than two-parent families to have a full-time worker in the home, and because female workers often receive lower wages than their male counterparts, households headed by women are more likely to be poor than other households.<sup>5</sup>

Some single, working mothers depend on supports like food stamps, child care assistance, Temporary Assistance for Needy Families (TANF) or state and federal medical assistance programs in order to meet their needs and the needs of their children. Eligibility for these programs is primarily based on a family's annual income; thus, if a woman's earnings increase even slightly, she can find herself suddenly ineligible for many of these safety net programs. Unfortunately, these increased earnings often are not enough to offset the value of the benefits received through these programs, and single mothers may find themselves suddenly unable to afford child care services, health insurance or nutritious food – a phenomenon known as the “cliff effect.”<sup>6</sup>

“Family Structure and Unintended Teen Pregnancy” is one in a series of six briefs published by the Colorado Children's Campaign addressing maternal and child health topics titled *Healthy Moms, Healthy Kids: A Series on Maternal and Child Health in Colorado*. Other topics in the series include domestic violence, maternal depression, healthy pregnancies, social determinants of health and nutrition. We wish to thank Kaiser Permanente for their generous support of this project.

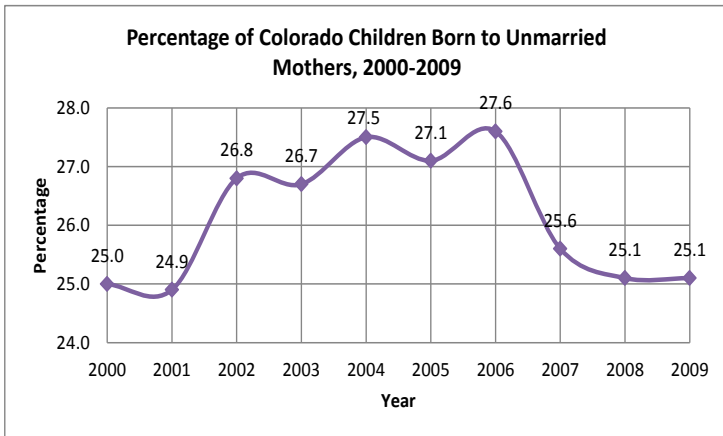


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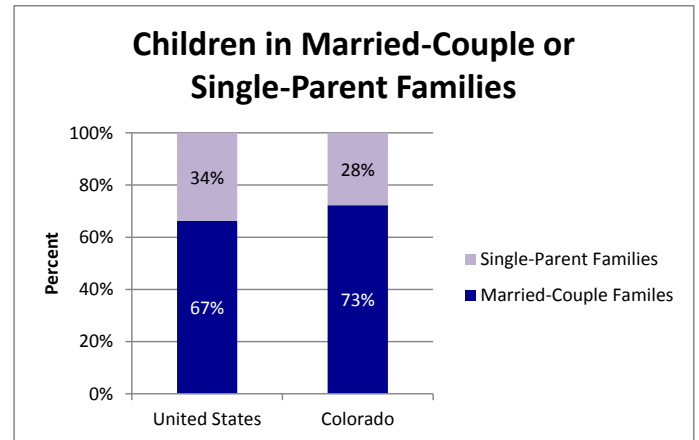


**COLORADO CHILDREN'S CAMPAIGN**

According to the American Community Survey three-year estimates for 2007-2009, 182,326 Colorado families were female-headed households with no husband present, and of those households, 26.3 percent had annual incomes below the federal poverty level, defined as a family of four earning \$22,050 or less a year.<sup>5</sup> From 2000 to 2009, the percentage of Colorado children living in single-parent families has remained just below the national average at 28 percent. Still, in 2009, one in four children born in Colorado was born to an unmarried mother.



Source: Colorado Department of Public Health and Environment



Source: Colorado Children's Campaign. 2011 KIDS COUNT in Colorado!

## Unplanned Teen Motherhood

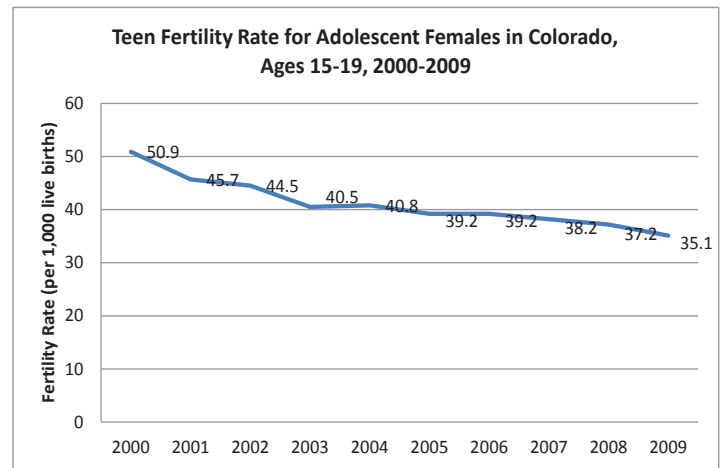
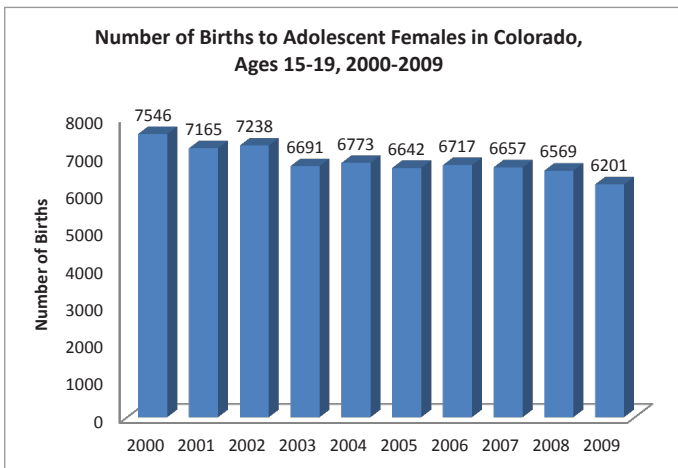
According to the Centers for Disease Control, teen pregnancy rates in the United States are considerably higher than in most other developed countries.<sup>6</sup> The National Campaign to Prevent Teen and Unplanned Pregnancy reports that nearly thirty percent of teen girls in the U.S. will get pregnant before they reach the age of 20. Although steady declines in the birth rate among U.S. adolescents ages 15-19 were observed between 1991 and 2005, the teen birth rate has been on the rise again in recent years, jumping from 40.5 live births per 1000 adolescent females to 42.5 live births per 1000 adolescent females.<sup>7</sup>

Unintended teen pregnancy can have drastic implications for maternal and child well-being right from the start. For example, many young parents may not have the knowledge or opportunity to access adequate prenatal care, which is instrumental in providing guidance on healthy habits and behaviors during pregnancy. As a result, teens are more likely than women in their twenties to be at risk for complications like high blood pressure, anemia and premature labor. Pregnant teens also are more prone to engage in risky behaviors than older expectant mothers, such as smoking during pregnancy.<sup>8</sup> These risk factors contribute to a higher rate of premature births among teen moms, which is associated with heightened risk of low birthweight, sudden infant death syndrome (SIDS) and complications resulting from underdeveloped organs, among other health problems.<sup>9</sup> According to one study, the average child of a teen mother will use nearly \$145 more per year in public health care dollars than children born to mothers in their early twenties.<sup>10</sup>

A wealth of research has examined the relationship between unplanned teen parenthood and long-term outcomes for the children of young mothers. Young women who become mothers unexpectedly at a young age often are already living in families with fewer resources and in communities with fewer supports. Unexpectedly becoming a teen parent can exacerbate this lack of financial and social resources, resulting in a number of long-term consequences that perpetuate the cycle of poverty. For example, daughters of teen mothers are more likely to become teen mothers themselves. It is estimated that delaying a birth until age 20 or 21 reduces the likelihood that a daughter will become a teen mother by 60 percent.<sup>11</sup> Sons of teen mothers face their own risks. When compared to boys born to mothers in their early twenties, sons of teenage mothers were more than twice as likely to spend time in prison.<sup>12</sup> According to one estimate, delaying a birth until age 20 or 21 could reduce the likelihood that a male would be incarcerated by more than 10 percent and would reduce the average number of years he would spend incarcerated by more than 13 percent. As a result, the prison population in the U.S. would decrease by an estimated four percent.<sup>13</sup>

In addition to the negative repercussions for children born to teen mothers who were not planning a pregnancy, having children at an early age can have dire consequences for a young girl's future. Teenage girls who unexpectedly become mothers often struggle to complete their education, due to the variety of new challenges they must face, including health, housing and child care issues.<sup>14</sup> Various studies have indicated that teen pregnancy is the number one reason teenage girls drop out of high school, finding that almost half of female dropouts surveyed cited becoming a parent as a major contributing factor in their decision to leave school.<sup>15,16</sup> Lack of educational attainment among teen mothers places them and their children at a significant economic and social disadvantage, as teen parenthood is associated with a 20 percent reduction in a girl's adult income.<sup>17</sup>

In recent years, Colorado has seen a decline in the number of births to adolescent girls ages 15 to 19. Although this decline is promising, Colorado's fertility rate remains troubling; in 2009, one in three Colorado girls ages 15 to 19 became a teen mother.



## Family Structure and Teen Motherhood: Best Practices

### Teen Pregnancy Prevention Efforts

Given the severity of the short- and long-term outcomes associated with unplanned teenage pregnancy, developing programs designed to reduce the number of teen pregnancies in Colorado is essential to improving the overall health and well-being of our state. A number of interventions have been shown to reduce the incidence of pregnancies among teenage girls. Age-appropriate, comprehensive sex education programs that include information on abstinence, contraception and safer sex practices have seen demonstrated success in reducing the number of unintended pregnancies among teenage girls.<sup>18</sup> Additionally, family planning services that address the unique needs of adolescents and school-based teen outreach programs designed to prevent adolescent risk behavior have also been shown to be effective interventions for reducing unintended pregnancies among teen girls.<sup>19</sup>

### Parenting Supports for Teen Mothers

In addition to efforts to prevent teen pregnancy, there exists a need for programs to support teens who have already become parents in finishing their education. Earning a high school diploma is an accomplishment that can guard teen moms and their children from the risk factors that so often perpetuate the cycle of poverty. Some small-scale programs that provide educational support and child care resources for young parents have experienced considerable success at lessening the staggering dropout rate among this group, helping to ensure a brighter future for teen parents and their children.<sup>20</sup> The Colorado Nurse Home Visitor Program is another important support for young mothers. Through this program, low-income, first-time mothers can receive home visits from a trained nurse who will counsel them on healthy behaviors during pregnancy, caregiving for newborns and child health and development.<sup>21</sup>

## Mitigating the Cliff Effect

Eligibility for many work support programs is determined by a family's annual income. Thus, as a woman moves up the economic ladder and earns a wage increase, she may suddenly lose important benefits, such as child care subsidies or public health insurance for her children – perhaps leaving her family worse off than before the increase in wages. Gradually reducing benefits as income increases, rather than immediately terminating benefits once a certain income level is reached, could help mitigate this effect and facilitate a smoother transition from safety net programs to self-sufficiency for single, working women and their children.

### Acknowledgements:

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## End Notes

<sup>1</sup> Women of Color Policy Network. (2010). *The American single mother: 2009*. New York: New York University's Robert F. Wagner Graduate School of Public Service.

<sup>2</sup> Mather, Mark. (2010). U.S. children in single mother families. *Population Reference Bureau*.

<sup>3</sup> National Center for Law and Economic Justice. (2010). *Poverty in the United States: A snapshot*. Retrieved from <http://www.nclj.org/poverty-in-the-us.php>.

<sup>4</sup> Dinan, K.A., Chau, M., Cauthen, N. K. (2007). *Two steps forward and three steps back: The "cliff effect" – Colorado's curious penalty for increased earnings*. New York: National Center for Children in Poverty. Retrieved from [http://www.wfco.org/web\\_wfco/images/userpages/file/COCliffEffect-summary.pdf](http://www.wfco.org/web_wfco/images/userpages/file/COCliffEffect-summary.pdf).

<sup>5</sup> American Community Survey 3-Year Estimates, 2007-2009. Retrieved from [http://factfinder.census.gov/servlet/ADPTable?\\_bm=y&-geo\\_id=04000US08&-qr\\_name=ACS\\_2009\\_5YR\\_G00\\_DP5YR2&-context=adp&-ds\\_name=&-tree\\_id=5309&-lang=en&-redoLog=false&-format=](http://factfinder.census.gov/servlet/ADPTable?_bm=y&-geo_id=04000US08&-qr_name=ACS_2009_5YR_G00_DP5YR2&-context=adp&-ds_name=&-tree_id=5309&-lang=en&-redoLog=false&-format=)

<sup>6</sup> Centers for Disease Control and Prevention. (2010). *Adolescent and reproductive health : About Teen Pregnancy*. Retrieved from <http://www.cdc.gov/reproductivehealth/AdolescentReproHealth/AboutTP.htm>.

<sup>7</sup> Centers for Disease Control and Prevention. "Sexual and Reproductive Health of Persons Aged 10-24 Years-United States, 2002–2007."

<sup>8</sup> March of Dimes. (2009). *Teenage pregnancy*. Retrieved from [http://www.marchofdimes.com/medicalresources\\_teenpregnancy.html](http://www.marchofdimes.com/medicalresources_teenpregnancy.html)

<sup>9</sup> *Ibid.*

<sup>10</sup> *Kids Having Kids: Economic Costs and Social Consequences of Teen Pregnancy*, second edition, edited by Saul D. Hoffman and Rebecca A. Maynard.

<sup>11</sup> *Ibid.*

<sup>12</sup> *Ibid.*

<sup>13</sup> *Ibid.*

<sup>14</sup> Bennett, L. J., & Iver, M.A. M. (2009). "Girls tend to stop going; boys get told not to come back": A report on gender and the dropout problem in Colorado schools. Denver, CO: Colorado Children's Campaign.

<sup>15</sup> Erlich, G., & Vega-Matos, C. (2000). The impact of adolescent pregnancy and parenthood on educational achievement: A blueprint for education policymakers' involvement in prevention efforts. Retrieved from <http://nasbe.org/index.php/file-repository?func=showdown&id=291>.

<sup>16</sup> Bridgeland, J.M., Dilulio, J.J., & Morison, K.B. (2006). *The silent epidemic: Perspectives of high school dropouts*. Retrieved from <http://www.gatesfoundation.org/united-states/Documents/TheSilentEpidemic3-06FINAL.pdf>.

<sup>17</sup> Rynell, A. (2008). *Causes of poverty: Findings from recent research*. Retrieved from <http://www.heartlandalliance.org/whatwedo/advocacy/reports/causes-of-poverty.pdf>

<sup>18</sup> Kohler, P. K., Manhart, L. E., & Lafferty, W. E. (2008). Abstinence-only and comprehensive sex education and the initiation of sexual activity and teen pregnancy. *Journal of Adolescent Health, 42*(4), pp. 344-351.

<sup>19</sup> The National Campaign to Prevent Teen and Unplanned Pregnancy. (n.d.). *Interventions with evidence of success*. Retrieved from <http://www.the-nationalcampaign.org/resources/programs.aspx#search>.

<sup>20</sup> Crawford, A. (2008, October 26). Programs help teen moms to graduate. *Pittsburgh Tribune-Review*. Retrieved from [http://www.pittsburghlive.com/x/pittsburghtrib/news/westmoreland/s\\_595266.html](http://www.pittsburghlive.com/x/pittsburghtrib/news/westmoreland/s_595266.html).

<sup>21</sup> Colorado Department of Public Health and Environment. (2008). *Nurse Home Visitor Program (NHVP)*. Retrieved from <http://www.cdph.state.co.us/ps/nursehome/NHVPfactsheet.pdf>.



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