Teen Pregnancy and Sexually Transmitted Infections among Youth in Douglas County

- Approximately 50% of high school youth will have sex\(^1\),\(^2\)
  - This percentage has been stable for 20 years
  - The percentage is lower among 9\(^{th}\) graders and higher among 12\(^{th}\) graders
- Teen birth rates have declined nationally, in Nebraska, and in Douglas County
  - 86% of this decline is due to increased use of contraceptives\(^3\)
  - In Douglas County, compared to Whites the teen birth rate is higher for African Americans, American Indians, and Hispanics\(^4\)
- Sexually transmitted diseases (STDs) are an ongoing, significant problem in Douglas County\(^5\)
  - Douglas County rates of Chlamydia and Gonorrhea have been higher than national and state rates since 1998
  - Rates are 10 times higher for African Americans compared to Whites
  - Youth ages 15-24 have highest rates

What Puts Youth at Risk of Pregnancy and STDs?

Several risk factors have been identified that increase the likelihood of teen pregnancy and STDs\(^6\). Minorities in Douglas County may have greater exposure to some of these risk factors, resulting in disparities. Known risk factors include:

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<th>Risk Factor</th>
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<tr>
<td>Cultural Risk Factors</td>
<td>Cultural Attitudes and Norms – Norms about not sharing sexual information with teens, low availability of comprehensive sex education, media portrayals of sex</td>
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<td>Indirect Social Risk Factors</td>
<td>Inadequate Access to Health Care – Lack of access to reproductive health care</td>
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<td>Neighborhood and Community Characteristics – Inadequate resources, disorganized neighborhoods (e.g., low adult monitoring), low perceived opportunity, social norms favoring risk behaviors, high rates of STDs</td>
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<td>Direct Social Risk Factors</td>
<td>Family – Poor relationship quality, unstable home environment, insecure housing, abuse, poverty</td>
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<td>Peers – Peer attitudes and behaviors favoring sex, older sexual partners</td>
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<td>School – Low availability of comprehensive sex education, low-quality educational opportunities</td>
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<td>Individual Level Risk Factors</td>
<td>Antisocial Development – Negative views about prosocial institutions, low academic performance, aggression, delinquency, substance use</td>
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<td>Attitudes and Beliefs – Pregnancy intentions, low prevention knowledge, sex intentions, low condom self-efficacy</td>
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<td>Sexual Risk Behaviors – Young age at first sex, high frequency of sex, high number of partners, inadequate contraceptive use</td>
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What Are Effective Strategies for Preventing Teen Pregnancy and STDs? Age-appropriate, research-proven interventions that aim to decrease risk factors and prevent teen pregnancy and STDs should be offered to youth throughout late childhood and adolescence. Comprehensive sex education is one type of effective intervention.

Comprehensive sex education presents all options for preventing pregnancy and STDs, including abstinence and contraception, along with skills such as goal setting and avoiding risky sexual situations.

- More effective than abstinence-only education\(^7,9\)
- \textit{Does not} increase the initiation of sex, frequency of sex, or number of sex partners\(^7,9\)
- Comprehensive sex education is recommended by the American Academy of Pediatrics\(^9\)
- Comprehensive sex education currently is offered at OPS within the Human Growth & Development course
  - In the 2015 Omaha Public Schools parent poll, 94% of parents agreed that birth control and condom use should be covered in Human Growth & Development

References


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