TEEN PREGNANCY & HIGH SCHOOL DROPOUT

WHAT COMMUNITIES CAN DO TO ADDRESS THESE ISSUES

By Lisa Shuger





ABOUT THE NATIONAL CAMPAIGN

The National Campaign to Prevent Teen and Unplanned Pregnancy is a nonprofit, nonpartisan initiative supported almost entirely by private donations. Our mission is to promote values, behavior, and policies that reduce both teen pregnancy and unplanned pregnancy among young adults. By increasing the proportion of children born into welcoming, intact families who are prepared to take on the demanding task of raising the next generation, our efforts will improve the well-being of children and strengthen the nation. Please visit www.TheNationalCampaign.org to find out more.

ABOUT AMERICA'S PROMISE ALLIANCE

America's Promise Alliance is the nation's largest partnership dedicated to improving the lives of children and youth. We bring together more than 400 national organizations representing nonprofit groups, businesses, communities, educators and policymakers. Through our Grad Nation campaign, we mobilize Americans to end the high school dropout crisis and prepare young people for college and the 21st century workforce. Building on the legacy of our Founding Chairman General Colin Powell, America's Promise believes the success of young people is grounded in Five Promises: Caring Adults, Safe Places, A Healthy Start, Effective Education, and Opportunities to Help Others. www.americaspromise.org.

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OVERVIEW

Nearly one-third of teen girls who have dropped out of high school cite early pregnancy or parenthood as a key reason.¹ Only 40 percent of teen moms finish high school, and less than two percent of teen mothers (those who have a baby before age 18) finish college by age 30. The high school dropout rate in this country continues to be a crisis; nearly one in four Americans and four in 10 minorities do not complete high school with their class. In addition, the national graduation rate increased by 3.5 percentage points between 2001 and 2009 (from 72 percent in 2001 to 75.5 percent in 2009). The number of "dropout factories" (schools with graduation rates of 60 percent or less) totaled 1,550 in 2010, down from 1,634 in 2009 and a high of 2,007 in 2002. The number declined by 84 between 2009 and 2010.² There are nearly 14,000 school districts in the United States; twenty-five persistently low-achieving school districts accounted for one in five of the nation's dropouts.³^{3,4} A new analysis shows that in 2008 there were a total of 69,809 births to teens who lived in counties or cities where these 25 school districts are located.⁵

Because there is a close connection between teen pregnancy and academic failure and because teen pregnancy affects the educational achievement of teens themselves (as well as that of their children), those concerned about educating young people should also be concerned with preventing teen pregnancy. Moreover, given the increasing demands in schooling that are necessary to compete in the 21st century job market, it is more important than ever for teens to finish high school and attain postsecondary education when possible.⁶

Notwithstanding the association between teen pregnancy and high school dropout, little research exists on the relationship between these two issues in school districts across the country. The primary focus of this report is to highlight innovative ways school systems—particularly persistently low-achieving school districts with high teen birth rates—and public agencies and community-based organizations that oversee teen pregnancy prevention programs are working together with the common goal of helping students avoid too-early pregnancy and parenthood and complete their high school education. The report also provides examples of strategies for connecting efforts to prevent teen pregnancy and improve educational attainment that education, health, and community leaders around the country might find helpful as they work to reduce teen pregnancy and improve graduation rates.

TEEN PREGNANCY AND HIGH SCHOOL DROPOUT IN THE UNITED STATES

Teen pregnancy has declined 42 percent since its peak in 1990 and the U.S. teen birth rate is now at an all-time low. Despite this impressive progress, however, it is still the case that nearly three in 10 girls in this country will become pregnant before the age of 20. The United States has the highest rate of teen pregnancies in the developed world—approximately 750,000 pregnancies to teens each year.⁷ At a time when the U.S. needs to become more competitive in the global economy, our teen pregnancy rates are still much higher than our trading partners and competitors.

It is also the case that one in four U.S. public school students drop out of high school before graduation and America continues to face a dropout epidemic. Although graduation rates have increased slightly to 75.5 percent in recent years, achieving a 90 percent nationwide high school graduation rate by 2020 continues to be a challenge.

Research indicates that fully 30 percent of teen girls who have dropped out of high school cite pregnancy or parenthood as a key reason. Rates are even higher for African American and Latino girls—38 percent and 36 percent respectively.⁸ A 2006 report by Civic Enterprises for the Bill and Melinda Gates Foundation found that 26 percent of students said they dropped out when they became a parent.⁹ Although many teen parents who are unable to complete high school pursue a GED, obtaining a GED is also a challenge. Almost one-half of former teen mothers who completed a GED did so *after* the age of 18.¹⁰ Moreover, one in three (34%) young women who had been teen mothers, earned *neither* a diploma nor a GED, compared with only 6 percent of young women who had not had a teen birth.

Both teen parents who drop out of high school and children of teen parents suffer serious educational challenges. Too-early pregnancy and parenthood not only makes it more difficult to complete education, career, and other life goals for teen parents, but it also affects the future prospects of their children. Research shows that children of teen mothers start school at a disadvantage and fare worse than those born to older parents. For example, children born to teen mothers begin kindergarten with lower levels of school readiness (including lower math and reading scores, language and communication skills, social skills, and physical and social well-being), compared to children born to women in their twenties.¹¹

The impact of students leaving high school also has devastating economic consequences. Over the course of a lifetime, a college graduate will earn, on average, \$1 million more than a high school dropout. Dropping out is literally a million-dollar mistake. According to the Alliance for Excellent Education, it is estimated that over the course of his or her lifetime, a single high school dropout costs the nation approximately \$260,000 in lost earnings, taxes, and productivity. Put another way, if students who dropped out of the Class of 2011 had graduated from high school, the nation's economy would likely benefit from nearly \$154 billion in additional income over the course of their lifetimes. In addition, teen childbearing in the United States cost taxpayers (federal, state, and local) at least \$10.9 billion in 2008.

While improving educational attainment is a widespread goal, graduation rates vary greatly among schools and there has been particularly intense attention to the lowest performing schools and school districts. Twenty-five persistently low-achieving school districts account for 20 percent of all high school dropouts in the United States. In 2008, these school districts saw a combined total of 225,374 non-graduates exit their school system. A new analysis by The National Campaign shows that in 2008, there were a total of 69,809 births to teens who lived in counties or cites where these 25 persistently low-achieving school districts are located (see Table 1). Furthermore, births to teens in these 25 school districts account for 16 percent of teen births in the United States, which underscores the close association between teen pregnancy and high school dropout.¹⁵

In short, the connection between too-early pregnancy and parenthood and educational attainment is strong. Consequently, it is critical that policymakers, state and local officials, advocates, local school superintendents, business leaders, philanthropists, and others interested in the prospects for this generation of young people and the next are able to collaborate and develop strategies that address the risk for dropping out of school as a result of teen pregnancy and parenthood.

Table 1: Number of Drop-Outs and Teen Births in Twenty-Five Persistently Low-Achieving School Districts in the U.S.

School District	Total No. of Students ¹⁶	District Graduation Rate ¹⁷	Projected No. of Non-Graduates ¹⁸	Total No. of Teen Births in City/County ^{19,20}
Albuquerque Public Schools	95,965	55.4%	3,963	1,178
Broward Co. School District	258,893	66.9%	7,477	1,653
Charlotte-Mecklenburg Schools	131,176	61.2%	4,787	1,332
City of Chicago School District 299	407,510	70.2%	10,469	5,801 [†]
Clark County School District	309,051	43.1%	16,114	3,134
Dallas ISD	157,804	48.7%	6,990	3,529 [†]
Dekalb County	100,273	49.6%	4,880	1,112
Detroit City School District	107,874	33.4%	8,039	2,418 [†]
Duval County School District	124,740	49.9%	5,550	1,479
Gwinnett County	155,618	60.9%	5,366	1,011
Hawaii Department of Education	179,897	65.8%	5,523	1,640
Hillsborough County School District	193,180	63.8%	5,867	2,042
Houston ISD	199,534	53.5%	7,852	6,459 [†]
Kern Union High School District	37,341	59.8%	4,313	2,304
Los Angeles Unified School District	693,680	48.7%	35,568	6,292 [†]
Memphis City School District	115,342	60.1%	4,109	2,131 [†]
Miami-Dade County School District	348,128	62.1%	11,310	2,957
Milwaukee School District	86,819	50.9%	4,315	1,857 [†]
New York City Public Schools	989,941	57.3%	39,669	8,384 [†]
Orange County School District	174,142	64.5%	5,396	1,674
Palm Beach Co. School District	170,883	67.1%	5,000	1,358
Philadelphia City School District	172,704	45.8%	9,304	3,523 [†]
Phoenix Union High School District	26,483	45.2%	4,209	3,810 [†]
Prince George's Co. Public Schools	129,752	67.1%	4,260	1,200
San Diego Unified School District	131,577	58.1%	5,044	1,531 [†]

[†]Figure represents the number of teen births in the city

KEY DATA

- Parenthood is a leading cause of school dropout among teen girls. Thirty percent of all teen girls who
 have dropped out of high school cite pregnancy or parenthood as a key reason, and the rate is higher for
 minority students: 36 percent of Hispanic girls and 38 percent of African American girls cite pregnancy or
 parenthood as a reason they dropped out.²¹
- One in three (34%) young women who had been teen mothers earned neither a diploma nor a GED, compared with only six percent of young women who had not had a teen birth.²²
- Less than two percent of young teen mothers (those who have a baby before age 18) attain a college degree by age 30.²³

- In 2008, the 25 persistently low-achieving school districts saw a combined total of 225,374 non-graduates exit their school systems.²⁴
- These 25 persistently low-achieving school districts account for 20% of all high school dropouts in the United States.²⁵
- In 2008, there were a total of 69,809 births to teens who lived in counties or cities where these 25 persistently low-achieving school districts are located.^{26,27}
- Births to teens in the 25 persistently low-achieving school districts account for 16% of teen births in the United States.^{28,29}
- Over the course of a lifetime, a college graduate will earn, on average, \$1 million more than a high school dropout. Over the course of his or her lifetime, a single high school dropout costs the nation approximately \$260,000 in lost earnings, taxes, and productivity.³⁰
- If students who dropped out of the Class of 2011 had graduated from high school, the nation's economy would likely benefit from nearly \$154 billion in additional income over the course of their lifetimes.³¹
- Ninety percent of adults believe reducing teen pregnancy is a very effective way to reduce the high school dropout rate and improve academic achievement.³²
- Seventy-three percent of adults want teens to receive more information about both birth control and abstinence rather than either/or (11% wants teens to get more information about birth control; 14% want teens to get more information about abstinence).³³

HOW SCHOOLS AND COMMUNITIES IN THE UNITED STATES ARE ADDRESSING TEEN PREGNANCY AND DROPOUT PREVENTION: OVERVIEW

Many struggling school districts have shown both high dropout rates and high numbers of teen births. In its national report, *Diplomas Count 2011*, Education Week and Editorial Projects in Education (EPE) Research Center identify the 25 persistently lowest-achieving school districts in the United States—those that account for one in five of the nation's dropouts. Births to teen students in these school districts account for 16 percent of teen births in the United States.^{34,35}

A number of these school districts, state departments of education, and community-based organizations across the country have recognized the clear link between teen pregnancy and school dropout, and in response have initiated efforts to tackle these two high priority issues. In some instances school leaders are collaborating with state and local government agencies and community-based organizations receiving federally funded teen pregnancy prevention grants, such as the U.S. Department of Health and Human Services (HHS) Office of Adolescent Health's (OAH) Evidence-based Teenage Pregnancy Prevention (TPP) Program, which provides competitive grants to a broad range of organizations and agencies. There are a few TPP grants going directly to school districts, such as Chicago Public Schools in Illinois and Iredell-Statesville Schools in North Carolina. Some OAH funds go directly to school-based grantees—public or private organizations who are collaborating with schools to serve students in the school setting. Grantees are using a variety of evidence-based models chosen to meet the needs of their communities and the age of the students they are serving. Some grantees are using programs that teach both abstinence and contraception, while others are using programs that emphasize abstinence. Many programs have a strong focus on youth development, goal setting, and making responsible decisions.

There is also federal funding available through the HHS' Administration of Children, Youth, and Families' (ACYF) Personal Responsibility Education Program (PREP), which provides formula grants to states, tribes, and territories for evidence-based programs to educate adolescents about pregnancy prevention, sexually transmitted infections (STIs), and other adulthood preparation topics. Within PREP there are also Personal Responsibility Education Innovative Strategies (PREIS)—competitive grants to public and private entities to test innovative strategies to reduce teen pregnancy. ACYF also administers Abstinence Education grants to states. In some states, the PREP and Abstinence education grants are subcontracted to local schools or school districts, or to other agencies that offer programs in schools.

The Centers for Disease Control and Prevention (CDC) also provides grants to nine state and local organizations to advance community-wide strategies to reduce teen pregnancy. Schools are closely involved in most of these projects. In addition, the Pregnancy Assistance Fund, administered by OAH, provides grants to states and tribes to provide pregnant and parenting teens and women with a network of support services to help them complete high school or postsecondary degrees through access to health care, child care, family housing, and other critical supports, including information about how to prevent subsequent unplanned pregnancies. Funding through this program supports services at high schools, institutions of higher education, and community service centers.

In order to find out more about these federally-funded programs and the grants to various states and communities, visit the following federal websites: http://www.cdc.gov/nitiatives/tpp; http://www.acf.hhs.gov/programs/fysb/content/programs/tpp.htm.

HOW SCHOOLS AND COMMUNITIES IN THE UNITED STATES ARE ADDRESSING TEEN PREGNANCY AND DROPOUT PREVENTION: EXAMPLES

The National Campaign has identified a number of interesting examples of how the education and health sectors in communities with high teen birth and dropout rates are working together to improve graduation rates by addressing teen pregnancy prevention. We focused primarily on places using the federal teen pregnancy prevention grants described above, and conducted interviews with officials involved in these projects. Interviews focused on the nature and structure of teen pregnancy prevention programs, ways grantees have engaged school administrators, parents, and others in the community, and successful strategies for making the case for the relationship between teen pregnancy and school completion. This is by no means an exhaustive list and is not intended to serve as a complete representation of the activities and programs operating in schools throughout the United States. However, it highlights some "bright spots" that could be replicated or modified in other school districts and communities around the country.

Morris Heights Health Center and New York Public Schools—Bronx, NY

Changing the Odds Teen Pregnancy Prevention Program, a new youth development program offered through the Morris Heights Health Center, is currently operating in three middle and nine high schools in the Bronx area of New York City Public Schools. Based on the Teen Outreach Program© (TOP©)—a program which has been shown to decrease teen pregnancy and improve educational outcomes—Changing the Odds offers students lessons in sexual health, relationships, values, communication and assertiveness, goal-setting, and decision making. In addition to the lessons taught during school hours and in after school programs, Changing the

Odds provides students with an opportunity to establish a community service project that will benefit their community. Through this community service project, students are expected to practice their communication skills, discover their own strengths, and recognize their power to affect change.

As New York City struggles with both high numbers of teen births and dropouts—approximately 8,384 and 39,669, respectively—the staff at Morris Heights Health Center hopes to integrate their *Changing the Odds* program into the district-wide sex education curriculum. The hope is that the program will both help prevent teen pregnancy and improve educational achievement. To achieve this, the *Changing the Odds* program recently developed and submitted pre- and post-test survey measures to the New York City Department of Education's Institutional Review Board (IRB). Once approved, this preliminary evaluation will be administered to students beginning the *Changing the Odds* program and then repeated at the end of the academic year in which the program was completed. The survey will include questions regarding students' knowledge of sexual and reproductive health as well as questions that assess school performance and dropping out (e.g. "Have you failed a class this semester?" or "How many class periods have you missed during this academic year?"). By including these school achievement and completion indicators in the evaluation of their pregnancy prevention program, the staff at *Changing the Odds* are taking key steps in underscoring the link between pregnancy prevention and school completion.

The Prevention Research Center and Harris County Schools—Texas

The Prevention Research Center (PRC) of the University of Texas Health Science Center received an OAH grant to deliver *It's Your Game: Keep it Real!*—a theory-based pregnancy, HIV, and sexually transmitted infection prevention curriculum developed by researchers at the Center—to 10 school districts in the Houston met-

ropolitan area. This program focuses on decision making to help adolescent students set personal behavioral limits, recognize threats, and use refusal skills to defend their set limits. The overall goal of this project is to promote sexual abstinence, reduce risky sexual behavior, and prevent teen pregnancy among youth in 84 middle schools throughout Harris County. The curriculum's lessons on sexual and reproductive health simultaneously target the area's high dropout rate (46%) and the large proportion of the city's births that are to teen mothers (16%). The program has a goal of reaching at least 30,000 middle school students each year.

The PRC has made extensive efforts to educate parents, school leaders, and teachers about the importance of implementing evidence-based programming and how this can affect school completion levels. As part of these efforts, the PRC has become involved with School Health Advisory Councils contained within each school district. These Councils are comprised partially of parents and teachers and are intended to provide advice on coordinat-

HARRIS COUNTY, TEXAS

"Each year, we at the UTPRC host a three to four day training course on adolescent sexual health, which is open to Harris County community members as well as to educators and practitioners from across the state of Texas. During this training course, we explain the connection between teen pregnancy and problems such as high school dropout, school absenteeism, and poverty in order to reframe participants' thinking about adolescent sexuality. While school and district administrators may not have considered the link between these issues prior to the training course, we are pleased to see them learning about this important link through our course each year."

Dr. Susan Tortolero
 Director, Center for Health Promotion and Prevention Research, University of Texas Prevention Research Center

ing school health programming. To ensure that parents and teachers are educated about the effectiveness of programs—a concern among many parents—of evidence-based sex education programs, trainers from the PRC attend School Health Advisory Council meetings in every school district to talk about the importance of sex education and to build support for *It's Your Game: Keep it Real!*.

- In addition, the PRC administered a survey about sex education to assess attitudes of parents whose children are enrolled in Harris County public schools. Specifically, this survey asked parents a number of questions about whether sex education should be taught in schools, what should be taught, and who should have authority over the content taught in public school sex education programs
- More than two-thirds of parents believe sex education programs should include information about both abstinence and contraception beginning as early as middle school.
- The survey also indicated that parents (84%), health professionals (63%), and teachers (52%) should have primary responsibility in deciding how sex education is delivered in schools.

Given the strong survey findings in support of school-based sex education, the PRC has been able to move beyond claims that parents are opposed to such programming and to continue with their efforts to educate parents about the advantages of their curriculum.

To further educate parents, teachers, and district leaders and to communicate widely about the relevance of their programming, the PRC has created a special section on their website (<u>www.utprc.org</u>) that focuses on the link between teen pregnancy/births and school dropouts. The website provides maps of both teen birth rates and dropout rates for each district with the hopes that this will help community leaders better understand the connection between these two critical issues.

The PRC has also provided training to help local health departments understand the connection between teen pregnancy and the dropout crisis in their communities, and to learn more about evidence-based programs. Recently, Midland, TX, adopted the *It's Your Game: Keep it Real!* program after sending several of their health educators to this multi-day training. Efforts are also underway to take this initiative to school districts in other states.

Health Research Association and Los Angeles Unified School District—California

The Health Research Association of the University of Southern California recently partnered with the Los Angeles (LA) County Health Department and LA Unified School District (LAUSD) to administer *It's Your Game: Keep it Real!*. With sites in 16 middle and seven high schools throughout LAUSD, the Health Research Association anticipates that they will serve nearly 15,000 school-aged youth per year. The program is taught in 7th, 8th, and 9th grade health and science courses. District leaders agree that with over 50 percent of the LAUSD students expected to fail to graduate from high school each year and given that nearly 10% of births in Los Angeles are to females below the age of 20, initiating this sex education program in middle and early high school is especially important.

For almost 10 years leading up to their *It's Your Game: Keep it Real!* collaboration, the LA County Health Department and LAUSD partnered to administer Project Connect, another STI and teen pregnancy prevention program developed with a grant from CDC. As a result of this long-standing relationship, the school district has been involved in the *It's Your Game: Keep it Real!* project from the beginning. Specifically, they worked closely

with Health Research Association to identify the most pressing needs of their students and then to incorporate these needs into a proposal for OAH funding—a proposal that was approved at the district-level before it could even be submitted to OAH. Since the program's inception, Health Research Association has continued to work jointly with the school district, by maintaining an open dialogue and feedback system with the district's Department of Health and Human Services, Assistant Superintendent for Health and Human Services, Medical Director, Director of Nursing, Health Education Coordinator, and four local-level nurses. The direct collaboration between Health Research Association and LAUSD has allowed for two important outcomes: 1) the district acts as a back-up for Health Research Association in cases where they need additional support or assistance in a particular school site; and 2) Health Research Association is able to focus on the critical link between teen pregnancy and school completion at times when the large school district must channel its efforts toward other high priority issues. Overall, coordination with administrators and staff in LAUSD's Department of Health and Human Services has played a key role in Health Research Association's ability to use the *It's Your Game: Keep it Real!* curriculum to effectively address the district's high rates of teen births and school dropouts.

In addition to their successful relationships with key leaders in LAUSD, Health Research Association has also garnered additional support for their teen pregnancy prevention program through interactions with district parents. To ensure that they—and their school sites—would not face resistance from parents whose children were enrolled in the program, Health Research Association administered a number of parent surveys to assess responses to the new curriculum. Based on these surveys, Health Research Association determined that parents were generally supportive of the sex education curriculum in their children's schools as long as they were informed about the details of the curriculum and given the opportunity to opt out of the program if desired. With this information, the agency has been able to reassure district administrators and teachers who are concerned with parent opposition about the broad support for the program and, ultimately, to reinforce their prominent place in LAUSD's teen pregnancy prevention efforts.

<u>Girls Incorporated of Memphis and Memphis City Schools—Tennessee</u>

For over 60 years, Girls Inc. of Memphis has been working to promote confidence and self-sufficiency in girls age 6-18. With 2,131 teen births per year in Memphis, Girls Inc. of Memphis plays a critical role in promoting sexual health and reducing teen pregnancy among students enrolled in Memphis public schools. Through both in-school and afterschool programming, Girls Inc. of Memphis offers a number of activities to build girls' capacity for college preparedness, responsible adulthood, economic independence, and personal fulfillment—all skills and qualities directly related to preventing teen pregnancy and school dropout among school-aged girls. Girls Inc. of Memphis focuses on six areas, one of which is "health and sexuality." As part of their focus on health and sexuality, Girls Inc. of Memphis offers its *Preventing Adolescent Pregnancy* program in elementary, middle, and high schools throughout Memphis City Schools. This program, which enables girls to identify ways and reasons to avoid early pregnancy and to prevent sexually transmitted infections, includes three age-appropriate components: "Growing Together" for elementary school students, "Will Power/Won't Power" for middle school students, and "Taking Care of Business" for high school students. Moreover, they host an overnight retreat, Baby Think It Over, as part of the culmination of the Preventing Adolescent Pregnancy course. At one of two Girls Inc. of Memphis centers, teen girls spend the night with lifelike simulated babies and are presented with challenging economic scenarios to give them a better idea of the realities of parenthood.

To ensure that Memphis City Schools remains aware of the ways in which *Preventing Adolescent Pregnancy* reduces teen births and dropouts in their schools, Girls Inc. of Memphis has joined an innovative community

coalition—Memphis Teen Vision (MemTV). MemTV is a collaboration among 25 community organizations whose goal is to reduce teen pregnancy and improve pregnancy outcomes among Memphis teens. With many administrators from Memphis City Schools a part of the coalition, Girls Inc. of Memphis is able to remind them of why teen pregnancy should be a high priority issue for the school district. Accordingly, Memphis City Schools has increasingly acknowledged the problem of teen pregnancy in their district and has permitted Girls Inc. of Memphis to open after school sites as well as facilitate the *Preventing Adolescent Pregnancy* curriculum during the school day.

In addition, Girls Inc. of Memphis and Memphis City Schools have recently benefitted from the local United Way's efforts to improve communication between community partners and Memphis' public schools. Specifically, through United Way's efforts, Girls Inc. of Memphis believes that Memphis City Schools have begun to realize the potential of

MEMPHIS, TENNESSEE

"In the past year alone, we have seen Memphis City Schools significantly increase their efforts to work and communicate with community partners like Girls Inc. of Memphis. Memphis City Schools and Girls Inc. have worked closely together to help students realize the importance of staying in school and achieving their educational goals. Through Girls Inc.'s *Preventing Adolescent Pregnancy* program, we can have an impact on students' educational success. The collaboration between Girls Inc. and Memphis City Schools makes sense, and we look forward to working with the school district as we continue to explore the link between teen pregnancy and school completion."

Deborah Hester Harrison,
 President/CEO of Girls Inc. of Memphis

youth-serving organizations to benefit their students in ways that make sense for the district. Consequently, in November 2011, Memphis City Schools began an initiative called Education Beyond the Classroom. Girls Inc. of Memphis was one of 13 community partners selected to participate in the initial phase. The intent of the initiative is to extend academic programs into the community at selected sites throughout the Memphis metro area, through sharing of interventions and other programs that enhance and promote the academic performance of students in grades PreK – 12. Community partners will also have access to their participant's academic information and educational plan (EdPlan) to help determine if progress is being made and what areas need additional attention. Providing access to this academic information is an indication that the school district is attuned to the relationship between teen pregnancy and school performance outcomes and engaged in Girls Inc. of Memphis' work regarding this relationship.

State Department of Education and Department of Health and Human Resources—West Virginia

Over the past several years, the West Virginia Department of Education (WVDE), the state agency tasked with overseeing the 55 school districts and 834 schools in West Virginia, has put in place numerous statewide initiatives to address teen pregnancy and its role in preventing school dropout. Most recently, the State Superintendent of Schools, Dr. Jorea Marple, and the Cabinet Secretary of Health and Human Resources, Dr. Michael Lewis, have joined together to make clear the strong correlation between school dropout and teen pregnancy. Prior to the start of the 2011-2012 academic year, Drs. Marple and Lewis issued a joint memorandum to individual school district superintendents to remind them of the problem of teen pregnancy in their schools and to highlight the ways in which persistent teen pregnancies and births can have adverse effects on their school completion rates. In addition to issuing the informative memo, Drs. Marple and Lewis developed digital teen pregnancy data "booklets" created for each county in the state. These booklets include data on the teen birth rate, the percentage of births to unmarried teens, and academic outcomes such as the percentage of high school dropouts in each district. Pairing teen birth and dropout statistics together in a format that is easy for

educational administrators to access is a critical step in drawing the connection between these two issues in West Virginia's public schools.

In 2009, WVDE partnered with the West Virginia Department of Health and Human Resources (WVDHHR) to create the Coordinated School Public Health Partnership (CSPHP), which is comprised of several divisions within the WVDHHR Bureau for Public Health and the WVDE Office of Healthy Schools. This collaboration was created to address all six areas of risky behavior identified by the CDC as affecting school performance and completion, including the need to address behavior contributing to unintended pregnancy and sexually transmitted infections. To help effectively address the risky behavior most relevant to each region in West Virginia, the partnership created a network of eight full-time Regional School Wellness Specialists (RSWS). Because teen pregnancy is such a critical issue in West Virginia—it is the one of only three states that did *not* see a decrease in the teen birth rate between 2007 and 2010—RSWS have been focusing heavily on this issue and its linkage to academic outcomes.

WEST VIRGINIA

"Teen pregnancy can have serious effects on our schools and communities. School dropout rates are higher among girls who give birth during high school. In addition, children born to teen parents are at greater risk for poor health and education outcomes due to increased chances of growing up in poverty and unstable homes. They are also more likely to start kindergarten at a disadvantage than children born to older parents. It is in this context that we need to increase our efforts in public schools by working collaboratively with community partners to address this issue. Preventing teen pregnancy is a challenge that teens, parents, school administrators, policymakers, and society at large must take on."

Dr. Jorea Marple
 State Superintendent of Schools
 West Virginia Department of Education

WVDE also developed a "Teen Pregnancy Prevention Plan" to focus their efforts on effective pregnancy prevention strategies. Strategies proposed by the plan include: 1) develop county specific data sheets with all relevant teen pregnancy data; 2) develop joint communications from WVDE and WVDHHR leadership to county superintendents articulating the issue using county specific data; 3) target RSWS efforts regarding teen pregnancy prevention to the counties with the highest teen birth rates; and 4) design and deliver professional development programs for health educators related to teen pregnancy prevention. WVDE collaborated with the WV Adolescent Pregnancy Prevention Initiative, WV Adolescent Health Initiative, WV Family Planning Program, Marshall University Technical Assistance, WV School-Based Assembly, and WV School-Based Association to maximize teen pregnancy prevention resources for the RSWS assigned to this issue. WVDE's coordinated efforts through both the CSPHP and the Teen Pregnancy Prevention Plan are expected to make great headway in the state's efforts to reduce teen pregnancy in public schools over the next several years.

Roanoke City Public Schools and Planned Parenthood Health Systems—Virginia

The teen pregnancy rate in Roanoke City is among the highest in Virginia, which contributes to the school dropout rate. According to the most recent data from the Virginia Department of Health, Roanoke City had the fifth highest rate of teen pregnancy in the Commonwealth of Virginia in 2008 and the second highest in 2007. In 2009, the teen birth rate in Roanoke was approximately 63 per 1,000 females below the age of 20 compared to the statewide rate of 24 per 1,000.³⁷ Only 67% of the Class of 2005 graduated on time. One way school and community leaders decided to address both the problem of high teen pregnancy rates and school

dropout rates was to engage parents. In 2011, the Roanoke City Public Schools and Planned Parenthood Health Systems, Inc. (PPHS) in Roanoke conducted a parent survey. The survey, which polled 363 Roanoke City parents with school-aged children, indicated strong support regardless of age, race, gender, or party affiliation, for teaching sex education in Roanoke City Public Schools and overwhelming recognition that such education is appropriate to teach at the middle-school level. The vast majority of parents recognized that specific sex education topics are "appropriate to teach," including the basics of reproduction (95%), how to use birth control methods (90%), how to use condoms (89%), and the effectiveness of various birth control methods (93%).

Before the official release of the data, PPHS shared the poll's findings with the Assistant Superintendent for Teaching and Learning, Roanoke Public Schools, Dr. Vella Wright. By sharing these results with Dr. Wright, PPHS and Roanoke City Public Schools fully prepared all concerned parties about the content of the district's sex education program. The discussion revealed that because sex education is not a topic included in the state's high-stakes testing content, it was often pushed aside in curriculum planning. Based on this realization, paired with the understanding that only a rigorous, evi-

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"We know that teen pregnancy has a negative impact on high school graduation rates. It is the responsibility of parents, schools, and community leaders to pursue effective strategies to prevent teen pregnancy (including but not limited to age- and grade-appropriate sexuality education). Roanoke City Public Schools works closely with a number of individuals and groups (including Planned Parenthood Health Systems) who provide information and professional training for health educators and who serve as invited guest speakers in the classroom with students. Our goal is to ensure that our instructional efforts produce better informed students, male and female. When all students are armed with accurate information, they are empowered to make decisions that support their future plans, resulting in improved graduation outcomes."

Dr. Vella S. Wright
 Assistant Superintendent for Teaching and Learning, Roanoke City Public
 Schools

dence-based sex education program could have an impact on the district's low school completion rates, PPHS and Roanoke City Public Schools' Director of Health and Physical Education hosted a sex education training for teachers in the weeks leading up to the 2010-2011 academic year. The half-day training, which was led by two PPHS health educators, the coordinator of Roanoke Teen Pregnancy Prevention Initiative, and the district's Director of Health and Physical Education, reviewed findings from the parent poll, provided age-appropriate sex education lessons for elementary, middle, and high school students, and reinforced the district's decision to engage PPHS in their sex education efforts. As a result of the training, a number of district teachers invited PPHS' trainers to their classrooms to deliver their sex education curriculum to students, leading to improved sex education for students.

One important factor that contributed to the success of this effort was that rather than using the polling data to underscore discrepancies between what parents wanted and sex education services the school district previously delivered, PHHS used the data to include Roanoke City Public Schools in a discussion of school-based sex education. In the end, this strategy helped with how the data was perceived and used, and, ultimately, contributed to the district's willingness to partner with PPHS. Additionally, PPHS chose to frame their discussion of sex education as a means of helping students complete high school instead of simply as a means of preventing teen pregnancy. By couching the discussion in the language of educators, and explaining how

preventing teen pregnancy and births would enable students to focus more on their academic responsibilities, PPHS established a lasting relationship with Roanoke City educators.

WHAT CAN SCHOOL AND COMMUNITY LEADERS DO?

As evidenced by the success of the education leaders and community partners described above, there are a number of strategies to address the link between teen pregnancy and high school dropouts. The following are several recommendations for individual schools, school districts and education agencies, health departments, and community organizations to strengthen the relationship between those working to prevent teen pregnancy and those working to improve educational attainment, thereby reducing both teen pregnancy/birth rates and high school dropout rates.

Ask Parents. Many school principals and district administrators who are hesitant to put in place sex education or teen pregnancy prevention programs are concerned that parents oppose such programs or have worries about particular content. Therefore, parent support for sex education in schools can have a powerful impact in determining whether school leaders interested in addressing the dropout crisis and community leaders involved in teen pregnancy prevention can collaborate to improve graduation rates, particularly in persistently low-achieving school districts. In fact, national polling data show that adults (90%) overwhelmingly believe that reducing teen pregnancy is a very effective way to reduce the high school dropout rate and improve academic achievement. Most adults (73%) wish young people were getting more information about both abstinence and contraception rather than either/or.³⁸ When asked about what topics are appropriate for public school sex education programs to teach in middle and high schools, 96% of adults supported teaching the basics of reproduction and pregnancy, 94% supported teaching birth control and methods of preventing pregnancy, and 87% supported teaching students how to access contraceptives.³⁹

While there is ample national data indicating parental support for addressing teen pregnancy and related topics in schools, finding out what parents in a particular state or community believe can be even more motivating. To this end, a number of state and local surveys have found that parents overwhelmingly support sex education in schools and often find that such school-based education helps them communicate with their children in their own homes about sex and reproductive health. Polling shows that nearly 93% of parents in Harris County, Texas and 80% of parents in Roanoke City Schools support school-based sex education. Over three-quarters of voters in New York state are in favor of teaching comprehensive sex education in New York's public schools. In Mississippi, a statewide survey of parents found overwhelming support for teaching sex-related education in Mississippi public schools at an age-appropriate grade level, including 90% of parents who support teaching the purpose and effectiveness of different birth control methods. Conducting a simple survey of parents in your district can help to educate administrators about the effectiveness of these programs and, ultimately, help them to understand the critical relationship between teen pregnancy and educational outcomes.

Educate Community Leaders and Parents. In some communities, parents, teachers, and school leaders are unaware of how pregnant and parenting teens are often at risk for dropping out of high school. However, once they are made aware of the connection between the two, they are far more amenable to teen pregnancy prevention programs. Holding discussions or information sessions with individuals in the district who are responsible for selecting sex education programs provides the ideal forum in which to introduce curricula that simultaneously target behavior leading to early pregnancy or dropouts. While district administrators often

have a number of high-priority issues to address, if educated about the impact teen pregnancy has on dropout rates in their schools, they are likely to give much more thought to the role of school-based sex education programs.

Professional Development for District Staff and Teachers. A number of experts in teen pregnancy prevention who are working with schools underscore the importance of providing professional development training for science and physical education teachers who are frequently responsible for teaching sex education curricula. Such training helps increase their knowledge about key topics, and their ability to present content to students in an objective and effective manner. Training is also important for ensuring that teachers replicate evidence-based programs with fidelity. School districts who have partnered with community-based organizations or local health agencies to hold in-person or online professional development courses for teachers have experienced success in improving the delivery of their pregnancy prevention programs. While one option is to bring in well-trained staff from outside organizations to deliver sex education, some feel that teachers typically have closer relationships with their students and that students are more comfortable with and engaged in what they are being taught about preventing teen pregnancy if they are taught by a well-prepared teacher they already know.

Periodic Outreach to School Administrators. Of course, school superintendents and other administrators are often forced to prioritize the issues they feel are fundamental to promoting student success. Although preventing teen pregnancy itself may not be a top priority for education leaders, when connected to school completion—a top priority for the majority of educators—it gains much more traction. For instance, a joint memo by the West Virginia State Superintendent of Schools and Secretary of Health and Human Resources on the centrality of preventing teen pregnancy to improving state graduation rates provided local superintendents with the impetus to consider the problem of teen pregnancy in their own districts. Reaching out to school administrators at least once during the academic year reminds them of the importance of viewing teen pregnancy within the lens of academic achievement and is a good opportunity to present any new findings regarding teen pregnancy and school performance in their communities.

Enlist New Champions. There are a significant and growing number of evidence-based programs to prevent teen pregnancy, but not all community and education leaders are aware of these programs or the value of adopting evidence-based approaches. Although there is currently some federal funding dedicated to such programs (as described earlier), and some state and local funding as well, these funds are not sufficient to serve all communities or all teens. Without leadership in school districts or local health departments advocating for evidence-based teen pregnancy prevention both in schools and in after-school programs, individual parents, educators, and community members often need to talk to school and community leaders about the positive impact teen pregnancy prevention can have on students. Those directly involved with programs designed to prevent teen pregnancy repeatedly emphasize the importance of enlisting support from influential leaders at the local or state level. Rallying leaders from a mayor's office, a popular principal or school superintendent, or a state department of education to highlight the role that reducing teen pregnancy can play in improving educational outcomes will elevate this issue and potentially even lead to policies or funding in support of evidence-based teen pregnancy prevention programs in public schools.

Share Best Practices With Other Communities or States. Once school districts and community organizations begin to experience success connecting teen pregnancy to school dropout, it is important that they make others in the field aware of the strategies they use. Sharing information and best practices with neighboring communities and states can lead to other communities making the connection between teen pregnancy and educational attainment.

CONCLUSION

Having a high school diploma alone is no longer enough to provide young people with the skills they need for a 21st century economy. Consequently, high school completion and being college- and career-ready is critical to the success of individuals, families, and our nation's competitiveness in a global economy. Too-early pregnancy and parenthood can interfere with educational attainment. As educators strive to improve graduation rates and help students succeed academically, it is important that school leaders, local health departments, and other agencies work together and leverage their expertise and resources in a way that can address both teen pregnancy and school completion. In other words, anyone interested in improving graduation rates should also be interested in reducing teen pregnancy. This is particularly important in low performing school districts.

There are a number of innovative strategies and activities going on around the country that offer great examples of how communities can work together toward this end. Some school districts have used results from surveys of parents' to overcome resistance to implementing programs to prevent teen pregnancy. Other districts have organized information sessions to educate parents, teachers, and school leaders about the connection between teen pregnancy and school completion as a way to enlist more support for teen pregnancy prevention programs in schools and improve knowledge about sex education. In some states, school districts have partnered with community-based organizations or local health agencies to hold in-person or online professional development courses for teachers to improve the delivery of pregnancy prevention programs. In one case, the state superintendent worked with other state and local leaders to send joint letters and create materials to make sure preventing teen pregnancy is a high priority within each local school district.

It is important that school districts, especially those who are not currently receiving federally-funded teen pregnancy prevention grants directly, are aware of the programs in their communities and can identify ways to link with grantees and consider possible ways to collaborate. It is also important to look for opportunities to strengthen connections between school districts and after school programs engaged in teen pregnancy prevention and youth development.

ANALYSIS METHODOLOGY

Four sources of information were used to examine the number of drop outs and teen births in the the 25 persistently lowest achieving school districts 1) Diplomas Count 2011, 2) Common Core of Data (CCD), 3) VitalStats, and 4) Child Trends data on teen childbearing (total births to girls under age 20). *Diplomas Count 2011* is a national report from Education Week and Editorial Projects in Education (EPE) Research Center, which provides current graduation rates and graduation trends over time for each public school district in the United States. Based on an analysis of these graduation rates, Diplomas Count 2011 identifies the 25 persistently lowest-achieving school districts—or group of school districts— accounting for one in five of the nation's dropouts.

Data on total district enrollment and enrollment by grade-level was extracted from CCD, a tool from the Department of Education's National Center for Education Statistics, which collects annual fiscal and non-fiscal data about all public schools, public school districts, and state education agencies in the United States. We used enrollment data from 2008.

Teen birth rates and numbers were collected from VitalStats and Child Trends. VitalStats is an interactive health data system managed by the National Center for Health Statistics, which provides annual figures on U.S. birth and morality rates. We used Child Trends (a non-profit research center on child development) information on national, state, and city teen birth data for the county and city school districts assessed in this report.

Readers should note that this data is meant only to draw a parallel between high school dropouts and teen births. No quantitative analysis to examine the statistical significance of the association between these two issues was performed and, therefore, causality should not be inferred. Rather this data should be used simply as a means of highlighting school districts in the nation that struggle with both poor school completion and high numbers of teen births and how various districts are tacking these issues.

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