2013
Bexar County Teen Pregnancy Report

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Why Teen Pregnancy Prevention?

1/2
OF TEEN MOTHERS REPORT THE FATHER OF THEIR CHILD DID NOT VISIT AT ALL IN THE PAST MONTH

DAUGHTERS OF TEEN MOTHERS ARE 3X MORE LIKELY TO BECOME TEEN MOTHERS THEMSELVES COMPARED TO MOTHERS WHO HAD A CHILD AT AGE 20–21

CHILDREN WHO LIVE APART FROM THEIR FATHERS ARE 3X AS LIKELY TO BE POOR THAN CHILDREN LIVING WITH BOTH PARENTS TOGETHER

Prevention helps future children

“Delaying birth to teens increases average family income of their offspring.”

“Earning a high school diploma raises the average family income of teens’ offspring even more.”

Also, teens’ offspring are less likely to be a teen parent;
• Slightly less likely to report symptoms of depression, and
• Less likely to describe themselves as being in poor health

Bexar County Teen Births 2010 - 2013

Females Ages 15 to 19

2010: 3,252
2011: 2,912
2012: 2,711
2013: 2,558

A 21% decline from 2010 to 2013

Source: San Antonio Metro Health 2013 – preliminary data
Bexar County Teen Birth Rate Declined by 42% since 2000

Source: San Antonio Metro Health 2013 – preliminary data. 2010 Bexar Co. Teen Birth Rate was 50.6 births per 1,000.
2013 Costs of Teen Childbearing

$58 Million in Bexar County taxpayer money

Costs include health care, child welfare, incarceration, lost revenue

In 2013, 69% of teen births were to females ages 18 to 19.

2000 – 2013 Bexar County Teen Births by Female Age Groups

2,590 total teen births in 2013…nearly 50 teen births per week

Source: San Antonio Metro Health 2013 Births – preliminary data
2013 Teen Birth Rates
Females ages 15 to 19
by Zip Code and School District Boundaries

2013 U.S. Teen Birth Rate: 26.6 births per 1,000

Source: San Antonio Metro Health 2013 Births – preliminary data
## 2013 Bexar County School District Birth Rates

<table>
<thead>
<tr>
<th>SCHOOL DISTRICTS</th>
<th>2013 Births to Females 15 to 19 yrs</th>
<th>SCHOOL DISTRICTS</th>
<th>2013 Teen Birth Rate Rate per 1,000 Females 15 to 19 yrs</th>
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<tbody>
<tr>
<td>San Antonio</td>
<td>723</td>
<td>Harlandale</td>
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<td>Alamo Heights</td>
<td>2.7</td>
</tr>
</tbody>
</table>

Sources:
- San Antonio Metro Health birth data on all live births to females 15 to 19 reporting an address within school district boundaries.
Bexar County 2013: Age of Fathers of Babies Born to Mothers 19 and Under

10% Under 18

62% of fathers were 18 and older

28% Unknown

Source: San Antonio Metro Health 2013 Births – preliminary data
Bexar County 2013: Married Teen Mothers

2013

11% OF BEXAR COUNTY TEEN MOTHERS WERE MARRIED

Source: San Antonio Metro Health 2013 – preliminary data.
In 2013, **529** teen mothers who gave birth already had at least one previous child.

Source: San Antonio Metro Health 2013 Births – preliminary data; Teen mothers ages 10 to 19.
In FY 2013, The collaborative reached over 6,182 teens with evidence-based pregnancy prevention programs.

The collaborative follows the SA2020 Collective Impact Model.

SA2020 INDICATOR:
Reduce the teen birth rate among females ages 10 to 19 in Bexar County by 25%.*

The collaborative consists of several organizations collaborating in five areas:

1. Stakeholder Education
2. Evidence-Based Programs
3. Youth Support & Development
4. Community Mobilization
5. Quality Adolescent Health Care

* Based on the 2010 Bexar County teen birth rate of 50.9 births per 1,000.
San Antonio Teen Pregnancy Prevention Collaborative BDL Logic Model

**Intervention Activities**
- Evidence-based Programs (Effective programs):
  - Implement evidence-based sex education programs in Youth Serving Organizations (YSOs) including middle and high schools
  - Increase participation in evidence-based programs to foster care, juvenile probation, and out-of-school youth including the 18-19 year old population
  - Implement evidence-based parent education curricula
  - Implement evidence-based home visitation programs to pregnant/parenting teens
  - Increase capacity of YSOs to evaluate their activities and programs
- Quality Adolescent Health Care:
  - Increase provider/staff education to promote/advocate for:
    - Teen friendly hours
    - Teen friendly (values neutral) attitudes from clinic staff
    - Best practices regarding adolescent care to prevent teen pregnancy
    - Linkages from schools/YSOs to quality adolescent health care
- Community Mobilization:
  - Create accessible, easy to understand messaging for the community by way of social media and other outlets
  - Create innovative strategies for engaging parents
  - Develop teen pregnancy prevention campaigns
  - Develop strategies to engage faith-based communities
  - Increase awareness of sexual abuse/coercion and dating violence
- Stakeholder Education:
  - Educate stakeholders about determinants of healthy teen behavior
  - Ensure school/YSO policies include referrals to teen-friendly clinics
  - Advocate/promote funding that supports adolescent healthcare to prevent teen pregnancy
  - Advocate/promote policies that support use of evidence-based teen pregnancy prevention programs
- Youth Support/Development:
  - Increase the number of youth who are involved with long-term mentors
  - Train existing youth development programs to incorporate building 40 Developmental Assets
  - Increase the involvement/engagement of males in intervention activities
  - Increase the number of youth participating in domestic violence prevention programs
  - Increase awareness about strategies for approaching youth from various populations (i.e., juvenile probation, foster care youth, trauma survivors, and LGBTQ youth among others.)

**Determinants of Teen Behavior**
- Knowledge:
  - Level of parents’ education and access to medically-accurate information
  - Teens’ knowledge of factual, medically-based information
  - Teens’ knowledge about condom and contraceptive use
- Attitudes:
  - Educational aspirations and planning for the future
  - Perceived risk of pregnancy and STDS/HIV
  - Attitude towards abstinence
  - Attitude towards condom and contraceptive use
  - Perceived self-efficacy in accessing and using condoms and contraceptives
  - Partner attitudes towards sexual activity
  - Perceptions of sexual activity/abstinence among peers (or lack thereof)
- Skills:
  - Increase self-efficacy to:
    - Abstain from sex
    - Avoid risky situations
    - Access and utilize condoms and contraception correctly and consistently
    - Access quality adolescent health care
- Connectedness:
  - School performance
  - Faith-based attendance
- Community:
  - Awareness of high teen pregnancy rates in San Antonio
  - Social norms with regards to teen pregnancy

**Teen Behavior**
- Decrease the percentage of school-age youth who have ever had sex.
- Increase number of youth who are practicing abstinence.
- Decrease frequency of sex.
- Decrease incidence of sexual coercion.

**Health Indicators**
- Teen birth rate for females ages 10 to 14 in Bexar County
- Teen birth rate for females ages 15 to 19 in Bexar County

**Health Goal**
- Decrease the Bexar County teen birth rate among females ages 10 to 19 by 25%* by the year 2020.

*Based on the 2010 County teen birth rate of 50.6

Information compiled by UT Teen Health, UT Health Science Center at San Antonio