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INCREASED ABSTINENCE CAUSES A LARGE DROP IN TEEN PREGNANCY

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Over the past several decades, rampant teenage sexual activity has caused a major national problem: an increasing incidence of sexually transmitted diseases, emotional and psychological injuries, and high rates of out-of-wedlock childbearing among America's youth. Abstinence education programs, endorsed by President Bush and many in Congress, have long been advocated as effective in reducing sexual activity and out-of-wedlock childbearing rates among teens, as well as providing an important foundation for personal responsibility and enduring marital commitment.

Making Progress. A new study analyzing the birth and pregnancy rates of single teens, released in April 2003 by the *Adolescent and Family Health* journal, bolsters support for the advocacy of abstinence for America's youth. According to this study, increased abstinence is the major cause of the declining birth and pregnancy rates among single teenage girls. Most striking among these findings is that among unmarried teenage girls ages 15 to 19, increased abstinence accounted for 67 percent of the decrease in the pregnancy rate. Similarly, a 51 percent drop in the birth rate for single teenage girls ages 15 to 19 is attributed to abstinence.

These findings are significant because they refute the previous—and widely accepted—claims that the decrease in birth and pregnancy rates is due primarily to the increased use and effectiveness of contraception, such as condoms. According to the *Adolescent and Family Health* study—the most extensive study done to date on the birth and preg-

nancy rates of single and married teens 15 to 19 years old—67 percent of the decline in pregnancy among single teenage girls is due to a reduction in

the proportion of sexually active girls, not to the increased use of contraception.

By contrast, roughly one-third of the decline in teen pregnancy occurred among sexually active single teens, which could be attributed to either the increased use of contraception or a decrease in the frequency of sexual activity. This study shows a greater effect of abstinence than some previous studies both because it distinguishes between married and single teens and

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because it utilizes a more accurate measure of sexual activity. Previous studies had defined teens as sexually active if they had ever had sex. The *Adolescent and Family Health* study, however, defines girls as sexually active if they had engaged in sexual activity during the previous year, which is more precise in determining the effect of variations in sexual activity on pregnancy.

Highlighting Success. Over the past decade, the number of sexually active teenagers has declined

from 54 percent to 46 percent, according to a 2001 survey by the Centers for Disease Control and Prevention. When surveyed about their sexual history, a majority of adolescents report that abstinence education programs play an important role in helping them to abstain from sex until at least after high school. Parents and the American public are also increasingly supportive of abstinence education programs in America's public schools. In fact, parental and public influence is a major reason that abstinence is even mentioned in "sex ed" curricula. Abstinence is taught in hundreds of different programs around the country. Many abstinence education programs have been scientifically evaluated and shown to be successful in reducing teen sexual activity.

For example, Not Me, Not Now—a communitywide abstinence program that targets 9- to 14-year olds—produced promising results in reducing the sexual activity rates of teens across Monroe County, New York, which includes the city of Rochester. Not Me, Not Now developed an effective mass communications strategy to promote the abstinence message through paid radio and TV advertising, as well as billboards, posters in schools, materials for parents, an interactive Web site, and educational sessions in schools and communities. Of the target audience within the county, 95 percent reported having seen a Not Me, Not Now ad, and the sexual activity rate of 15-year-olds dropped from 46 percent to 31 percent during the intervention period, according to the widely cited 1998 Youth Risk Behavior Survey. In addition, a Journal of Health Communications study found that the pregnancy rates for 15- to 17-year-old girls in Monroe County fell from 63.4 pregnancies per 1,000 to 49.5 per 1,000—a significantly greater decline than in comparison counties.

Balancing the Funding. In the coming months, as Congress considers reauthorization of the Wel-

fare Reform Act of 1996, Members will certainly debate whether or not to continue funding authentic abstinence education, and at what level. Some lawmakers, under intense lobbying pressure from safe-sex organizations, will seek to transfer funding from abstinence to safe-sex/condom-promotion programs, which are misleadingly called "abstinence plus" or "abstinence first." These programs contain little or no information about abstinence. In reality, they implicitly promote sexual activity among America's youth; the majority contain graphic sexual material that would be deeply alarming to most parents. As an April 2002 Physicians Consortium report highlights, some federally supported "abstinence-plus" programs teach teens about masturbation and "alternative" methods of sexual activity such as bathing or showering together and using erotic literature or movies to enhance their sexual fantasies.

Real abstinence education is clearly the safest and best message for America's adolescents. In fact, abstinence is the only "safe sex" method that is 100 percent effective every single time. The research proves that not only is it safe, but also works—and works better than non-abstinence programs.

Conclusion. Increased abstinence has resulted in lower out-of-wedlock birth and pregnancy rates for America's teenagers. Members of Congress should recognize this fact when they reauthorize welfare reform and give abstinence education programs additional federal funding. At present, the federal government spends 10 times as much to promote contraceptive use (\$1.1 billon annually) as it does on abstinence education (\$102 million annually). It is time for Congress to level the playing field and let the results speak for themselves.

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