



Press Release

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Few teens use the most effective types of birth control

Improving access and education will further reduce teen pregnancy

Teen births continue to decline in the U.S., but still more than 273,000 infants were born to teens ages 15 to 19 in 2013. Childbearing during the teen years can carry health, economic, and social costs for mothers and their children.

The good news is that more teens are waiting to have sex, and of those who are sexually active, nearly 90 percent used birth control the last time they had sex. Data show that teens most often use condoms and birth control pills which, when not used consistently and correctly, are less effective for preventing pregnancy. According to this month's [Vital Signs](#) report from the Centers for Disease Control and Prevention, increasing access to Long-Acting Reversible Contraception (LARC) is one way to further reduce teen pregnancy.

LARC – intrauterine devices (IUDs) and implants – is the most effective type of reversible birth control. LARC is safe to use, does not require taking a pill every day or doing something every time before having sex, and, depending on the method, can be used to prevent pregnancy for three to 10 years. Less than one percent of LARC users become pregnant during the first year of use. Major professional societies, including the American College of Obstetricians and Gynecologists (ACOG) and the American Academy of Pediatrics (AAP), have endorsed LARC as a first-line contraceptive choice for teens. LARC by itself does not protect against sexually transmitted diseases.

“Health care professionals have a powerful role to play in reducing teen pregnancy. They can encourage teens not to have sex and discuss the use of IUDs and implants as contraceptive options available to teens who choose to be sexually active,” said CDC Principal Deputy Director Ileana Arias, Ph.D. “Long-acting reversible contraception is safe for teens, easy to use, and very effective. We need to remove barriers and increase awareness, access, and availability of long-acting reversible contraception such as IUDs and implants.”



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The report calls attention to barriers for teens who might consider LARC, including:

- Many teens know very little about LARC.
- Some mistakenly think they cannot use LARC because of their age.

Clinics also report barriers to providing LARC to teens, including:

- High upfront costs for supplies exist for some providers.
- Providers may have misplaced concerns about the safety and appropriateness of LARC for teens.
- Providers may lack training on insertion and removal.

The reported barriers to LARC use prompted CDC and the Office of Population Affairs (OPA), both within the Department of Health and Human Services, to analyze patterns in LARC use among teens ages 15-19 seeking contraceptive services, using 2005-2013 data from the [Title X National Family Planning program](#). This federally funded grant program supports confidential family planning and related preventive services with priority for low-income clients and teens.

“The Title X National Family Planning program helps to increase teens’ access to long-acting reversible contraception,” explained Susan Moskosky, acting director of OPA. “It provides comprehensive information to teens, including advice that avoiding sex is the most effective way to prevent pregnancy and STDs. This program also applies the latest clinical guidelines on long-acting reversible contraception and other forms of birth control, offers training to providers on intrauterine device and implant insertion and removal, and provides low- or no-cost options for birth control.”

Other key findings include:

- Use of LARC among teens seeking birth control services increased from less than one percent to seven percent from 2005 to 2013.
- Use of implants, rather than IUDs, accounted for most of the increase in LARC use for both younger (ages 15-17) and older teens (ages 18-19).
- Use of LARC in 2013 was highest in Colorado (26 percent) and ranged from less than one percent to 20 percent in the remaining states.

“The good news is that teens are taking responsibility for their reproductive health needs,” said Lisa Romero, Dr.PH., a health scientist in CDC’s Division of Reproductive Health. “Nearly 90 percent of teens used birth control the last time they had sex, but we also know that teens using birth control do not often choose intrauterine devices and implants – the most effective types of birth control. Parents and teens are encouraged



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to talk with their health care professional to learn about the various types of birth control, including long-acting reversible contraception.”

May is Teen Pregnancy Prevention Month. This [Vital Signs](#) report was created to help the nation’s communities continue the dialogue about [teen pregnancy](#) and its health and social consequences for youth.

[Vital Signs](#) is a CDC report that appears on the first Tuesday of the month as part of the CDC journal [Morbidity and Mortality Weekly Report, or MMWR](#). The report provides the latest data and information on key health indicators. These are cancer prevention, obesity, tobacco use, motor vehicle passenger safety, prescription drug overdose, HIV/AIDS, alcohol use, health care-associated infections, cardiovascular health, teen pregnancy, and food safety.

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