THE ISSUE

- South Carolina has the 15th highest teen birth rate in the nation (2016). 1.9% teens gave birth in our state in 2017 and many counties lag behind national average.
- In 2016, South Carolina ranked in the top 10 nationally for rates of Chlamydia, Gonorrhea. From 2016-2017, South Carolina saw an 11% increase in the rate for Chlamydia, a 35% increase in the rate for Gonorrhea, while HIV prevalence saw a 3% decrease (15-19 year olds, per 100,000 population).
- Due to investment in teen pregnancy prevention & declines in teen pregnancy, South Carolina saved $85 Million in 2015.
- Since the early 90s, the teen birth rate in South Carolina has fallen by 70%, but there is still work to do.

THE IMPACT

Teen Pregnancy can:
- Increase risk of dropouts
- Limit career opportunities for mother
- Lead to reliance on public assistance programs
- Lead to generations of poverty
- Lead to worse health and developmental consequences for babies

GET THE FACTS

94% Of South Carolinians agree that teen pregnancy is an important issue.


92% Of South Carolinians believe sex education in public schools should emphasize abstinence AND teach about contraception.

WHO WE REACH

PARENTS
- Parents, who are generally the first teacher in a child's life, often find age-appropriate conversations about safe sex to be difficult. We work to provide resources for families.

SCHOOLS & COMMUNITIES
- We introduce evidence based information to medical communities, instructing about the right information at the right time—leading to better choices from teens.

MEDICAL COMMUNITIES
- We inform these communities about appropriate reproductive health and age limits. It is key to have the medical community ready, willing, and able to serve teen populations.

WE DON'T JUST AIM TO LOWER RATES OF UNINTENDED PREGNANCIES; OUR BROADER FOCUS IS ON IMPROVING REPRODUCTIVE HEALTH.

In this report, the American Academy of Pediatrics makes 11 recommendations for the medical community.

RECOMMENDATIONS

1. Pediatricians should counsel about and ensure access to a broad range of contraceptive services for their adolescent patients.

2. Pediatricians should be able to educate adolescent patients about LARC methods, including the progestin implant and IUDs. Given the efficacy, safety,

3. Despite increased attention to adverse effects, DMPA and the contraceptive patch are highly effective methods of contraception and do not lead to long-term side effects. Pediatricians should continue to make them available to their patients.

4. Pediatricians should allow the adolescent to consent to contraceptive care and to control the disclosure of this information within the limits of state and federal laws.

5. Pediatricians should be aware that it is appropriate to prescribe contraceptives or refer for IUD placement without first conducting a pelvic examination.

6. Pediatricians should encourage the consistent and correct use of condoms with every act of sexual intercourse.

7. Pediatricians should have a working knowledge of the different combined hormonal methods and regimens, because these provide excellent cycle control both for contraception and medical management of common conditions, such as acne, hirsutism, and heavy menstrual bleeding.

8. Pediatricians should remember that adolescents with chronic illness and disabilities have similar sexual health and contraceptive needs as healthy adolescents while recognizing that medical illness may complicate contraceptive choices.

9. Pediatricians should regularly update their adolescent patients' sexual histories and provide a confidential and nonjudgmental setting in which to address needs for contraception.

10. Pediatricians should allow sufficient time with their adolescent patients to address contraceptive needs using a developmentally appropriate, patient-centered approach.

11. Pediatricians can complement the skills and resources of the pediatric office by being aware of local and nationally validated contraceptive programs and clinics that provide confidential and/or low-cost reproductive health care services and supplies, including contraception.

<table>
<thead>
<tr>
<th>Contraceptive Method</th>
<th>Effectiveness</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Pill</td>
<td>91% *Effective</td>
</tr>
<tr>
<td>Male Condom</td>
<td>82% *Effective</td>
</tr>
<tr>
<td>The Shot</td>
<td>94% *Effective</td>
</tr>
<tr>
<td>Abstinence</td>
<td>100% *Effective</td>
</tr>
<tr>
<td>Vaginal Ring</td>
<td>91% *Effective</td>
</tr>
<tr>
<td>The Patch</td>
<td>91% *Effective</td>
</tr>
<tr>
<td>I.U.D.</td>
<td>92-99.8% *Effective</td>
</tr>
<tr>
<td>Implant</td>
<td>99.5% *Effective</td>
</tr>
</tbody>
</table>

*with perfect use
Reproductive Health Services and Teens: What Does South Carolina Law Say?

Disclaimer
This presentation does not constitute specific legal advice, nor does it establish an attorney-client relationship. It merely is compiled to educate the reader on relevant provisions in the SC Code of Laws that are current as of June, 2018. This document is educational and intended to provide guidance to health care service providers about the scope of services they are legally allowed or prohibited to provide to minors, and a brief overview of other SC Code provisions to consider. Any specific legal questions about actual instances should be directed to your organization’s attorney.

WHICH LAWS APPLY?
South Carolina Code of Laws
Title 63 South Carolina Children’s Code
Chapter 5 Legal Status of Children
Article 3 Legal Capacity of Minors

Chapter 7 Child Protection and Permanency
Article 3 Identification, Investigation, and Intervention

Title 16 Crimes and Offenses
Chapter 3 Offenses Against the Person
Article 7 Assault and Criminal Sexual Conduct

A LOOK AT THE SC CODE
South Carolina Code of Laws
Section 63-5-340 Minor’s consent to health services
“Any minor who has reached the age of sixteen years may consent to any health services from a person authorized by law to render the particular health service for himself and the consent of no other person shall be necessary unless such involves an operation which shall be performed only if such is essential to the health or life of such child in the opinion of the performing physician and a consultant physician if one is available.”

A LOOK AT THE SC CODE
South Carolina Code of Laws
Section 63-5-350 Health services to minors without parental consent
“Health services of any kind may be rendered to minors of any age without the consent of a parent or legal guardian when, in the judgment of a person authorized by law to render a particular health service, such services are deemed necessary unless such involves an operation which shall be performed only if such is essential to the health or life of such child in the opinion of the performing physician and a consultant physician if one is available.”

MANDATORY REPORTING & ROMEO AND JULIET LAW
MANDATORY REPORTING & ROMEO AND JULIET LAW

SC Mandatory Reporter Law
South Carolina Code of Laws
Section 63-7-310. Persons required to report.

SC Romeo & Juliet Clause
South Carolina Code of Laws
Section 16-3-655 (B)(2)

ROMEO AND JULIET LAW

(2) the actor engages in sexual battery with a victim who is at least fourteen years of age but who is less than sixteen years of age and the actor is in a position of familial, custodial, or official authority to coerce the victim to submit or is older than the victim. However, a person may not be convicted of a violation of the provisions of this item if he is eighteen years of age or less when he engages in consensual sexual conduct with another person who is at least fourteen years of age.

HOW CAN WE HELP YOU?

CREW — Collaborative for Reproductive Education & Wellness:
CREW is a learning collaborative where healthcare providers from around the state band together to find practical, data-driven solutions that will help improve clinical outcomes for teens.

Reproductive Health 101:
Reproductive Health 101 provides the participant with a general overview core concepts related to reproductive health as it relates to teen pregnancy prevention in South Carolina.

Seventeen Days:
Seventeen Days Interactive is a theory-based interactive film created by Carnegie Mellon University’s Center for Risk Perception and Communication and designed to educate young women about contraception and sexually transmitted infections (STIs).

Other Training Opportunities:
• Askable Adult: Talking to Teens about Tough Topics
• Contraceptive Counseling
• Safer Sex Intervention (SSI)

THANK YOU!

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