

Withdrawal/Redaction Sheet

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001. memo	Carol Rasco et al. to The President re: Teen Pregnancy Initiative (partial) (2 pages)	07/24/1995	P5
002. memo	Carol Rasco et al. to The President re: Teen Pregnancy Initiative (partial) (2 pages)	07/24/1995	P5
003. memo	Carol Rasco et al. to The President re: Teen Pregnancy Initiative (partial) (2 pages)	07/24/1995	P5
004a. note	Todd Stern to Mr. President re: Dr. Foster (1 page)	07/28/1995	P5
004b. memo	Carol Rasco et al. to The President re: Teen Pregnancy Initiative (partial) (2 pages)	07/24/1995	P5
005. paper	re: Teen Pregnancy Initiative (partial) (1 page)	n.d.	P5

COLLECTION:

Clinton Presidential Records
Domestic Policy Council
Lyn Hogan
OA/Box Number: 11C27

FOLDER TITLE:

Teen Pregnancy: National Campaign 2 [2]

2010-1083-S

rc451

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

Freedom of Information Act - [5 U.S.C. 552(b)]

P1 National Security Classified Information [(a)(1) of the PRA]
P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
P3 Release would violate a Federal statute [(a)(3) of the PRA]
P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [(a)(5) of the PRA]
P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

C. Closed in accordance with restrictions contained in donor's deed of gift.

PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).

RR. Document will be reviewed upon request.

b(1) National security classified information [(b)(1) of the FOIA]
b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
b(4) Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
b(6) Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

THE FACTS ABOUT. . .

TEEN PREGNANCY

For More Information Call:
Janet Abrams, 6-2857
(updated: 2/24/95)

A National Epidemic

- In 1991, more than one million women aged 19 and younger -- 10% of all teenage girls -- became pregnant.
- From the 1950s through the early 1980s, the rate of births to teens decreased steadily. In 1986, that trend reversed, growing 24 percent by 1991.
- The U.S. rate of births to teens is now twice as high as in the United Kingdom and six times as high as in France, Italy, and Denmark.

Trend towards out-of-wedlock childbearing among teens

- In 1960, only 15% of teenage mothers were unmarried. By 1990, that percentage had increased to 69%.

Crisis affects all communities

- Out-of-wedlock childbearing has increased significantly among both black and white teens. Births outside of marriage among black teenagers rose from 64% in 1970 to 93% in 1991. For white teens, the percentage of births out of wedlock more than tripled over the same period, from 18% to 59%. Two thirds of teenage births are to white mothers.

Costs to the Children

- 80% of children born to unwed teenage mothers who have not completed high school live in poverty. In contrast, of those children born to 20-year-old married parents who are high school graduates, only 8% live in poverty.
- Children of teenage parents are more likely to die in their first years, have a lower I.Q., repeat a grade in school, be victims of abuse and neglect, and become teen parents.

Costs to the mothers

- Eight in ten teen mothers drop out of high school, and only 56% ever graduate.

Costs to society

- Taxpayers now spend about \$34 billion per year to assist families begun by teenagers.
- 52% of families who receive AFDC benefits* were started by teenage mothers.
- More than three fourths of all teen mothers will be on AFDC at some point during the 5 years following the birth of their child.

*Note: Aid to Families and Dependent Children (AFDC) is the primary cash-assistance entitlement program funded jointly by the federal and state governments.

THE NATIONAL TEEN PREGNANCY PREVENTION COUNCIL

An Overview

A National Council

A national, private, bipartisan Council is being formed to catalyze and support a sustained effort to reduce teen pregnancy in the United States. The National Teen Pregnancy Prevention Council will be made up of prominent leaders from all sectors of society, including the entertainment, business, religious, civic, education, and foundation communities.

A National Problem

Teen pregnancy is one of our most serious social problems.

- In 1990, more than 1 million girls between the ages of 15 and 19 -- 12% of all teenage girls -- became pregnant. The teen birth rate rose 24% between 1986 and 1991.
- The U.S. teen birth rate is now twice as high as in the U.K. and six times as high as in France, Italy and Denmark.
- In 1960, only 15% of teenage mothers were unmarried. By 1992, that percentage had increased to 71%.
- Out-of-wedlock childbearing has increased greatly among both black and white teens. The rate of births outside marriage among black teenagers rose from 64% in 1970 to 93% in 1992. For white teens, the percentage of births out of wedlock more than tripled in the same period, from 18% to 61%.
- Teen parents are much more likely than older parents to drop out of high school and to be poor and dependent on welfare. Their children are more likely to have poor health and to do poorly in school. In 1991, taxpayers spent about \$34 billion to assist families begun by teenagers.

A Reason for Hope

The government is involved in a range of policies that contribute to reducing teen pregnancy, including service and research programs within HHS, youth development initiatives and proposed welfare reform measures. But, government alone can not solve this problem -- the private sector must also play a big part. As President Clinton said in the State of the Union, it will take all of us, "parents and leaders across the country [joining] together in a national campaign against teen pregnancy -- to make a difference."

Many communities have been making a difference. Initiatives like Marion Howard's "Postponing Sexual Involvement" in Atlanta, the pregnancy prevention efforts of Girls Inc. and the Junior League and Michael Carrera's youth development programs show promise. But, much more must be done. Currently, although there are a number of organizations that have been actively working on teen pregnancy prevention, there remains a need for a more visible national effort which can energize and assist communities and individuals in the fight against teen pregnancy. This new effort must be capable of leading, organizing and supporting the sustained, substantive focus this complex issue demands. The National Teen Pregnancy Prevention Council will fill this role.

A National Response

The National Teen Pregnancy Prevention Council will discover, disseminate and celebrate what is working.

The Council will set its own agenda but would likely want to:

- spearhead a national grass roots campaign to make teen pregnancy prevention a priority in every community;
- launch a long-term, multi-dimensional media campaign to encourage and reinforce local efforts and instill a new ethic of responsible parenting;
- maintain an accessible national database of teen pregnancy prevention programs and provide opportunities for those already engaged in the field to more effectively learn from one another;
- support the serious evaluation of promising programs and other research as needed; and
- seek to be the most credible, independent resource available to anyone interested in teen pregnancy prevention, providing training, conferences, newsletters, briefings and speakers.

The Council will *not* impose a "top down" solution to the problem -- local communities will be urged to forge their own approaches consistent with their values and experience.

Organization and Funding

The Council will be a 501c(3) organization and seek funding from foundations, businesses, individuals and the government.

Draft June 21, 1995

Carnegie Corporation of New York

437 Madison Avenue, New York, N.Y. 10022 • (212) 371-3200 • Telex: 6506377182 • Fax: (212) 754-4073

David A. Hamburg, M.D.
President

November 13, 1995

The Honorable William J. Clinton
President of the United States
The White House
1600 Pennsylvania Avenue
1 Capitol Street
Washington, DC 20020

Dear President Clinton:

I want to express my heart-felt thanks for the privilege of two excellent meetings with you last month. I would have written you sooner, but I have been away on international travel.

We have had a lot of good feedback, both on the adolescent pregnancy meeting and the meeting with the National Board for Professional Teaching Standards. The shortest and most accurate comment I can make is that you provided authentic inspiration. These are people doing innovative, difficult work and you gave them powerful encouragement.

I thought your remarks at the teachers meeting were profound, giving insight into the ongoing world transformation that makes their responsibility more important than ever. Incidentally, the first group of teachers to be certified by the National Board were those concentrating on education in early adolescence. That precedent is a direct outgrowth of your work with the *Turning Points* panel and, of course, it relates to the adolescent pregnancy problem as well.

I was delighted to have the opportunity to present *Great Transitions* to you at the White House and to recall the important contributions you made to the *Turning Points* report. Your participation was a great boost for the Carnegie Council on Adolescent Development altogether. The fifteen states that have followed up on *Turning Points*, including Arkansas, now constitute a major reform movement in middle grades education.

The national media response to *Great Transitions* has been extraordinary, perhaps even more than when *Starting Points* was released in April 1994. Amazingly, the coverage was not only extensive, but also largely accurate; perhaps we touched a national nerve.

In due course, it might be worth considering the possibility of Presidential leadership for an integrated youth development strategy in your second term. At that time, it might be possible with Presidential leadership to build a broad coalition, bipartisan within the government, also involving non-governmental organizations in an effort of truly national dimensions. I fervently hope that a more constructive, problem-solving atmosphere will prevail in the next few years.

Page Two
The Honorable William J. Clinton
November 13, 1995

In any event, this could be a superb opportunity for your bully pulpit functions, informing the American people accurately about the problems and the opportunities for constructive youth development. Your own knowledge and experience bear strongly on this issue.

With respect to the adolescent pregnancy problem, we have been moving ahead in collaboration with Belle Sawhill who is doing her usual excellent job. You did a great service by drawing attention to this crucially important problem, convening people who understand a lot about it, many of whom are now on the front line of useful actions. We can all do more, and my sense from the ensuing discussions is that most of the participants are really energized now.

The approach you took is likely to keep the effort out of political controversy, avoiding polarization on a matter of widely shared concern. We certainly want to help the American people get the facts straight, provide serious analysis in ways that are really understandable, call attention to responsible innovations, and achieve wide dissemination of the strongest evidence and best practices.

One of the early opportunities that strikes me is to link the dynamic media people with excellent program people so that we could move rapidly to inform the American people about what works and give a reasonable basis for hope. We need to clarify what messages have great value on this topic, and what modalities could reach different sectors effectively. We will, of course, keep in close touch with Carol Rasco as we move ahead.

Once again, I am deeply grateful for your serious, thoughtful interest in these critical issues and the unique leadership you are providing.

On a personal note, let me add that I was deeply moved by your exceedingly generous remarks at the meeting with the teachers. I will try very hard to be worthy of your respect.

With every good wish,

As always,



cc: Carol Rasco

TEEN PREGNANCY Q/As (2)

Domestic Policy Council: Janet Abrams, 62857

Teen Pregnancy Prevention Qs & As for *Mike McCurry**

What progress has the Administration made in forming the "national campaign against teen pregnancy" which President Clinton called for in January?

In this year's State of the Union Address, President Clinton urged leaders from all sectors of society to join in a national campaign to prevent teen pregnancy. He called the epidemic of teen pregnancy -- with more than 1 million girls under age 20 becoming pregnant each year -- "our most serious social problem." Mr. Clinton stated that while government has an important role to play in addressing this dilemma, the public sector cannot solve the problem alone. He urged that a national campaign be organized and conducted from the private sector.

The President spoke out again in March in a speech to the National Association of County Officials. He said: "We need a national campaign ... that sends a clear message: It is wrong to have a child outside marriage. Nobody should get pregnant or father a child who isn't prepared to raise the child, love the child, and take responsibility for the child's future."

Since January, the Clinton Administration has worked in partnership with a small group of concerned citizens to lay out a practical vision for the proposed private-sector initiative. Broad consultations have been held with individuals across the country who are engaged in teen pregnancy prevention efforts and with prominent individuals in the business, religious, and foundation communities. Guided by these discussions, a framework has been developed for a national independent, bipartisan organization which will catalyze and support a sustained effort to reduce the incidence of teen pregnancy in the U.S.

In September, President Clinton will meet with selected individuals from the private sector to explore opportunities for launching the national campaign.

What will this new private-sector organization do?

The specific agenda of the organization will be determined by its leadership. As envisioned by the President, the new group will not impose any top-down solutions. Rather, it will encourage local communities to forge their own approaches to teen pregnancy prevention consistent with their values and experience. A major role of the organization will be to discover, disseminate, and celebrate what is working in teen pregnancy prevention. Right now, while many local efforts show great promise, information on what works is fragmented.

Activities of the new group are likely to include:

- spearheading a national grassroots campaign to make teen pregnancy prevention a priority in every community;
- launching a long-term, multi-dimensional media campaign to encourage and reinforce local efforts and instill a new ethic of responsible parenting;
- maintaining an accessible national database of teen pregnancy prevention programs and providing better opportunities for those already active in the field to learn from one another;
- supporting the comprehensive evaluation of promising programs and other research as needed;

seeking to be the most credible, independent resource available to anyone interested in preventing teen pregnancy and providing training, conferences, newsletters, briefings, and speakers.

What will Dr. Henry Foster's role with the Administration and this new organization be?

No specific role has been determined. There may be an announcement in the coming weeks.

Why has it taken so long to organize the private-sector campaign?

Outreach has been made to dozens of prominent citizens -- experts in the field of teen pregnancy, leaders of the business, foundation, and religious communities. These consultations have been essential. We're approaching this very complicated problem in a serious, careful manner -- we don't want a band-aid solution. The President's aim is to make a significant contribution to the future of America with this effort.

What else has the Administration done to address the problem of teen pregnancy?

The private-sector initiative is intended to complement and enhance government initiatives supported by the Administration. The range of Administration efforts related to teen pregnancy includes:

- numerous service and research programs in teen pregnancy prevention within the Department of Health and Human Services

- In 1993, President Clinton lifted the "gag rule," enabling non-directive options counselling in federally supported family planning clinics.

- The Administration has supported increases in funding for family planning services. In FY92, \$149 million was spent on family planning. Current funding is \$193 million, and the Clinton budget request for FY96 is \$199 million.

- HHS provides grants to organizations across the country to support local teen pregnancy prevention efforts and to evaluate strategies for effectiveness.

- programs across several agencies to promote youth development and address various risk factors associated with teen pregnancy

- current and proposed welfare reform measures to provide young men and women with incentives to delay parenthood until they are married and able to support their children. President Clinton's welfare reform package includes the following provisions:

 - Teen mothers on welfare would be required to live at home with their parents, stay in school, identify the father, and move into employment within a limited period of time.

 - Tough new child support laws would be strictly enforced so that prospective teen fathers would know they had to provide child support for the next 18 years. (In 1993, the Administration collected a record \$9 billion in child support, a 12% increase over the previous year.)

 - States would have flexibility to try innovative ways to encourage responsible behavior, such as rewarding teen recipients who make progress in school and sanctioning those who drop out.

a comprehensive attack on background economic and social factors contributing to rising teen pregnancy rates, including poverty, unequal educational opportunity, and disinvestment in distressed urban and rural communities

Lifelong Learning Initiatives -- Pre-School and Parenting; Goals 2000; School-to-Work; National Service; Training and Reemployment

Rewarding Work for Working Families -- Earned Income Tax Credit; Minimum Wage Increase; Family and Medical Leave

Community Empowerment -- Empowerment Zones/Enterprise Communities; Community Development Banking

THE WHITE HOUSE

WASHINGTON

July 24, 1995

MEMORANDUM TO THE PRESIDENT

FROM: Carol Rasco
Jeremy Ben-Ami
Janet Abrams

THROUGH: Leon Panetta

RE: Teen Pregnancy Initiative

BACKGROUND

In this year's State of the Union address, you urged parents and leaders of all sectors of society to join together in a national campaign against teenage pregnancy. You identified the epidemic of children-having-children as one of our most serious social problems and stressed that "government can only do so much" to solve this complicated dilemma.

We have met with the Chief of Staff about plans now underway for creating a nationwide, private-sector initiative on teen pregnancy. This memo requests your personal involvement to ensure that final commitments are made by the individuals we hope will spearhead the effort.

LAUNCHING THE CAMPAIGN

Since January, Jody Greenstone and Belle Sawhill have been working with members of the White House staff to lay the foundation for an independent, private-sector organization dedicated to reducing the incidence of teen pregnancy in the U.S.

The organization would be bi-partisan and would be led by prominent individuals from the business, religious, media, entertainment, civic, health care, education, and foundation communities. The new group would work to focus national attention on the problem of teen pregnancy and support community prevention efforts across the nation. Likely activities would include:

- spearheading a grassroots campaign to make teen pregnancy prevention a priority in communities throughout the U.S.
- establishing a clearinghouse of information on prevention efforts
(There is now no central source of data on who's doing what in teen pregnancy.)
- supporting the evaluation of promising prevention strategies
(A lot is going on in the field, but very few programs have been rigorously evaluated.)

Withdrawal/Redaction Marker

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001. memo	Carol Rasco et al. to The President re: Teen Pregnancy Initiative (partial) (2 pages)	07/24/1995	P5

COLLECTION:

Clinton Presidential Records
Domestic Policy Council
Lyn Hogan
OA/Box Number: 11027

FOLDER TITLE:

Teen Pregnancy: National Campaign 2 [2]

2010-1083-S

rc451

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

P1 National Security Classified Information [(a)(1) of the PRA]
P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
P3 Release would violate a Federal statute [(a)(3) of the PRA]
P4 Release would disclose trade secrets or confidential commercial or
financial information [(a)(4) of the PRA]
P5 Release would disclose confidential advice between the President
and his advisors, or between such advisors [(a)(5) of the PRA]
P6 Release would constitute a clearly unwarranted invasion of
personal privacy [(a)(6) of the PRA]

C. Closed in accordance with restrictions contained in donor's deed
of gift.

PRM. Personal record misfile defined in accordance with 44 U.S.C.
2201(3).

RR. Document will be reviewed upon request.

Freedom of Information Act - [5 U.S.C. 552(b)]

b(1) National security classified information [(b)(1) of the FOIA]
b(2) Release would disclose internal personnel rules and practices of
an agency [(b)(2) of the FOIA]
b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
b(4) Release would disclose trade secrets or confidential or financial
information [(b)(4) of the FOIA]
b(6) Release would constitute a clearly unwarranted invasion of
personal privacy [(b)(6) of the FOIA]
b(7) Release would disclose information compiled for law enforcement
purposes [(b)(7) of the FOIA]
b(8) Release would disclose information concerning the regulation of
financial institutions [(b)(8) of the FOIA]
b(9) Release would disclose geological or geophysical information
concerning wells [(b)(9) of the FOIA]

- providing technical assistance to communities seeking to start programs
- conducting communications outreach on the issue.

A list of candidates to be founders of the organization has been developed. Belle Sawhill (now at the Urban Institute) and Sarah Brown (an expert on teen pregnancy at the Institute of Medicine) have agreed to take on lead operational roles. While many of the individuals targeted as board members have expressed positive interest in the proposed new venture, we believe your direct involvement is necessary to secure commitments from the group.

RECOMMENDED PLAN OF ACTION

(1) White House Discussion

We suggest that you convene a meeting with the approximately 15 prominent individuals on our target list, plus several experts in the field of teen pregnancy prevention. The event would take place in early September and would require approximately 1 hour of your time. Media strategy would be very low-key.

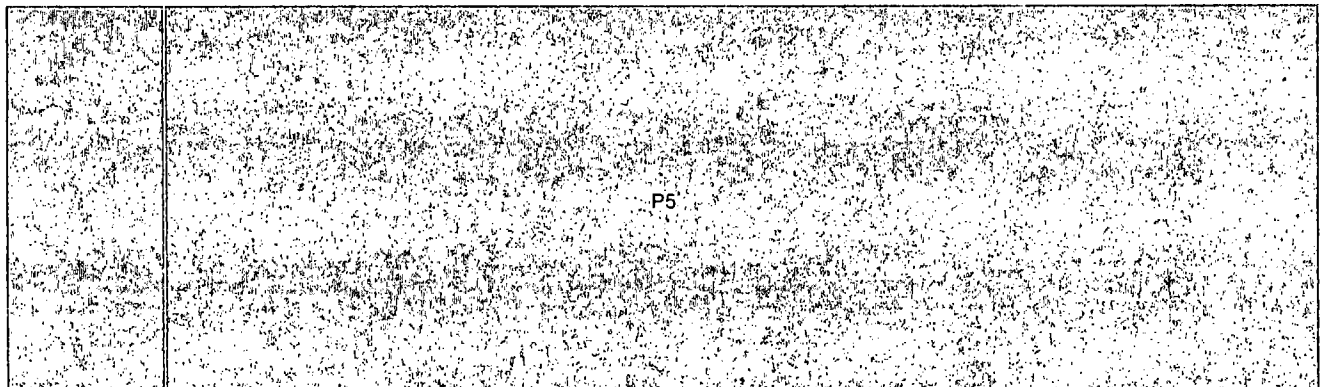
Experts would brief you and the group on what is being done in prevention at the local level and offer thoughts on what needs a national campaign might address. You would speak to the seriousness of the problem -- with its linkages to the debilitating cycle of poverty and welfare dependency -- and exhort the group to come together to combat this major threat to America's youth.

(2) Organizational Meeting

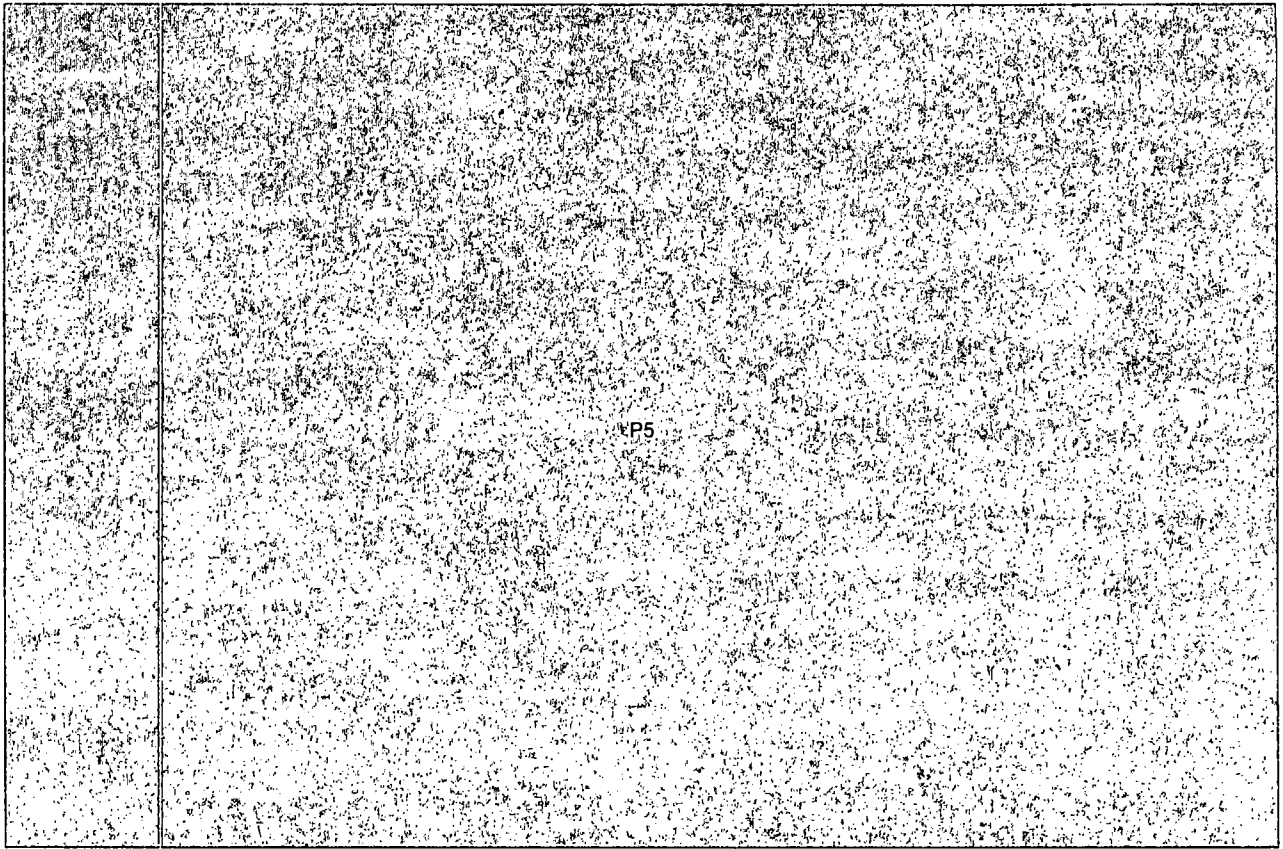
One of the participants in the White House meeting (ideally, the head of a major foundation) would agree in advance to host a follow-up event for the group of 15 and other interested individuals. This event would be a planning session for launching the envisioned private-sector organization.

(3) Launch

The new entity would be established by the end of the year. Foundations and/or private individuals would provide start-up funding. You would be present for the launch.



[001]



DECISIONS REQUESTED

- Please indicate if you approve of the proposed plan of action for the teen pregnancy:
_____ YES _____ NO
- Below is a preliminary list of invitees for the suggested White House meeting on teen pregnancy. Our aim is bring together 15-20 people, with representation from each of the following categories. Please review, and edit as desired.

Spiritual Voice

Andrew Young
Sister Mary Rose, Covenant House, NY

Entertainment

Oprah Winfrey

Visible Republicans

John Danforth
Jack Kemp
Anne McLaughlin, former Labor Secretary
Thomas Kean, President of Drew University

Public Health Leaders

C. Everett Koop
Henry Foster

Corporate Leaders/Fundraisers

Bill Gates, Microsoft Corp.
John Pepper, Procter & Gamble
Sharon (Mrs. Warren) Buffett
Irving Harris, retired CEO, Chicago
Paul Tutor Jone, Robinhood Foundation
Linda Wachner, Warnaco Inc.
John Bryan, SaraLee Corp.
A CEO member of the Mid-South Foundation

Community Practitioners

Marion Howard, Emory University, Atlanta
Michael Carrera, Children's Aid Society, NY
Elayne (Mrs. William) Bennett, BestFriends, DC

Communications

Charlotte Beres, Ogilvy & Mather
Jay Winston, Harvard School of Public Health

Academics

Kris Moore, ChildTrends, Inc.
Genie Rosoff, Guttmacher Institute
Doug Besharov, American Enterprise Institute

Foundation Executives

Angela Blackwell, Rockefeller Foundation
David Hamburg, Carnegie Foundation
Susan Beresford, Ford Foundation
Doug Nelson, Casey Foundation

Core Organizing Group

Jody Greenstone
Belle Sawhill, Urban Institute
Bill Galston
Sarah Brown, Institute of Medicine

Administration Participants

Donna Shalala
Carol Rasco
Alexis Herman

- Please indicate names of any other individuals you would like to participate:

THE WHITE HOUSE

WASHINGTON

July 24, 1995

MEMORANDUM TO THE PRESIDENT

FROM: Carol Rasco
Jeremy Ben-Ami
Janet Abrams

THROUGH: Leon Panetta

RE: Teen Pregnancy Initiative

BACKGROUND

In this year's State of the Union address, you urged parents and leaders of all sectors of society to join together in a national campaign against teenage pregnancy. You identified the epidemic of children-having-children as one of our most serious social problems and stressed that "government can only do so much" to solve this complicated dilemma.

We have met with the Chief of Staff about plans now underway for creating a nationwide, private-sector initiative on teen pregnancy. This memo requests your personal involvement to ensure that final commitments are made by the individuals we hope will spearhead the effort.

LAUNCHING THE CAMPAIGN

Since January, Jody Greenstone and Belle Sawhill have been working with members of the White House staff to lay the foundation for an independent, private-sector organization dedicated to reducing the incidence of teen pregnancy in the U.S.

The organization would be bi-partisan and would be led by prominent individuals from the business, religious, media, entertainment, civic, health care, education, and foundation communities. The new group would work to focus national attention on the problem of teen pregnancy and support community prevention efforts across the nation. Likely activities would include:

- spearheading a grassroots campaign to make teen pregnancy prevention a priority in communities throughout the U.S.
- establishing a clearinghouse of information on prevention efforts
(There is now no central source of data on who's doing what in teen pregnancy.)
- supporting the evaluation of promising prevention strategies
(A lot is going on in the field, but very few programs have been rigorously evaluated.)

Withdrawal/Redaction Marker

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
002. memo	Carol Rasco et al. to The President re: Teen Pregnancy Initiative (partial) (2 pages)	07/24/1995	P5

COLLECTION:

Clinton Presidential Records
Domestic Policy Council
Lyn Hogan
OA/Box Number: 11027

FOLDER TITLE:

Teen Pregnancy: National Campaign 2 [2]

2010-1083-S

rc451

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

- P1 National Security Classified Information [(a)(1) of the PRA]
- P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
- P3 Release would violate a Federal statute [(a)(3) of the PRA]
- P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
- P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [(a)(5) of the PRA]
- P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

C. Closed in accordance with restrictions contained in donor's deed of gift.

PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).

RR. Document will be reviewed upon request.

Freedom of Information Act - [5 U.S.C. 552(b)]

- b(1) National security classified information [(b)(1) of the FOIA]
- b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
- b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
- b(4) Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
- b(6) Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
- b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
- b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
- b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

- providing technical assistance to communities seeking to start programs
- conducting communications outreach on the issue.

A list of candidates to be founders of the organization has been developed. Belle Sawhill (now at the Urban Institute) and Sarah Brown (an expert on teen pregnancy at the Institute of Medicine) have agreed to take on lead operational roles. While many of the individuals targeted as board members have expressed positive interest in the proposed new venture, we believe your direct involvement is necessary to secure commitments from the group.

RECOMMENDED PLAN OF ACTION

(1) White House Discussion

We suggest that you convene a meeting with the approximately 15 prominent individuals on our target list, plus several experts in the field of teen pregnancy prevention. The event would take place in early September and would require approximately 1 hour of your time. Media strategy would be very low-key.

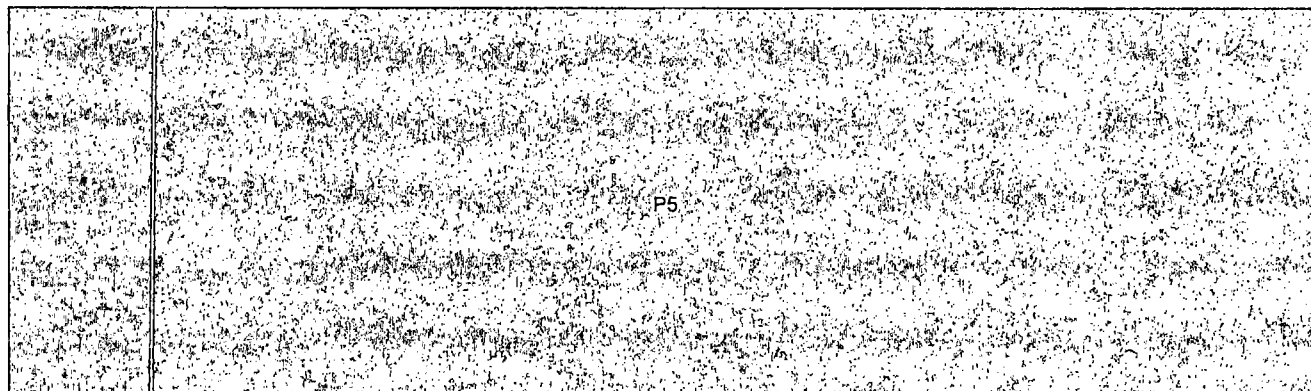
Experts would brief you and the group on what is being done in prevention at the local level and offer thoughts on what needs a national campaign might address. You would speak to the seriousness of the problem -- with its linkages to the debilitating cycle of poverty and welfare dependency -- and exhort the group to come together to combat this major threat to America's youth.

(2) Organizational Meeting

One of the participants in the White House meeting (ideally, the head of a major foundation) would agree in advance to host a follow-up event for the group of 15 and other interested individuals. This event would be a planning session for launching the envisioned private-sector organization.

(3) Launch

The new entity would be established by the end of the year. Foundations and/or private individuals would provide start-up funding. You would be present for the launch.



[002]



DECISIONS REQUESTED

- Please indicate if you approve of the proposed plan of action for the teen pregnancy:
_____ YES _____ NO
- Below is a preliminary list of invitees for the suggested White House meeting on teen pregnancy. Our aim is bring together 15-20 people, with representation from each of the following categories. Please review, and edit as desired.

Spiritual Voice

Andrew Young

Sister Mary Rose, Covenant House, NY

Entertainment

Oprah Winfrey

Visible Republicans

John Danforth

Jack Kemp

Anne McLaughlin, former Labor Secretary

Thomas Kean, President of Drew University

Public Health Leaders

C. Everett Koop

Henry Foster

Corporate Leaders/Fundraisers

Bill Gates, Microsoft Corp.

John Pepper, Procter & Gamble

Sharon (Mrs. Warren) Buffett

Irving Harris, retired CEO, Chicago

Paul Tutor Jone, Robinhood Foundation

Linda Wachner, Warnaco Inc.

John Bryan, SaraLee Corp.

A CEO member of the Mid-South Foundation

Community Practitioners

Marion Howard, Emory University, Atlanta

Michael Carrera, Children's Aid Society, NY

Elayne (Mrs. William) Bennett, BestFriends, DC

Communications

Charlotte Beres, Ogilvy & Mather

Jay Winston, Harvard School of Public Health

Academics

Kris Moore, ChildTrends, Inc.
Genie Rosoff, Guttmacher Institute
Doug Besharov, American Enterprise Institute

Foundation Executives

Angela Blackwell, Rockefeller Foundation
David Hamburg, Carnegie Foundation
Susan Beresford, Ford Foundation
Doug Nelson, Casey Foundation

Core Organizing Group

Jody Greenstone
Belle Sawhill, Urban Institute
Bill Galston
Sarah Brown, Institute of Medicine

Administration Participants

Donna Shalala
Carol Rasco
Alexis Herman

- Please indicate names of any other individuals you would like to participate:

THE WHITE HOUSE

WASHINGTON

July 24, 1995

MEMORANDUM TO THE PRESIDENT

FROM: Carol Rasco
Jeremy Ben-Ami
Janet Abrams

THROUGH: Leon Panetta

RE: Teen Pregnancy Initiative

BACKGROUND

In this year's State of the Union address, you urged parents and leaders of all sectors of society to join together in a national campaign against teenage pregnancy. You identified the epidemic of children-having-children as one of our most serious social problems and stressed that "government can only do so much" to solve this complicated dilemma.

We have met with the Chief of Staff about plans now underway for creating a nationwide, private-sector initiative on teen pregnancy. This memo requests your personal involvement to ensure that final commitments are made by the individuals we hope will spearhead the effort.

LAUNCHING THE CAMPAIGN

Since January, Jody Greenstone and Belle Sawhill have been working with members of the White House staff to lay the foundation for an independent, private-sector organization dedicated to reducing the incidence of teen pregnancy in the U.S.

The organization would be bi-partisan and would be led by prominent individuals from the business, religious, media, entertainment, civic, health care, education, and foundation communities. The new group would work to focus national attention on the problem of teen pregnancy and support community prevention efforts across the nation. Likely activities would include:

- spearheading a grassroots campaign to make teen pregnancy prevention a priority in communities throughout the U.S.
- establishing a clearinghouse of information on prevention efforts
(There is now no central source of data on who's doing what in teen pregnancy.)
- supporting the evaluation of promising prevention strategies
(A lot is going on in the field, but very few programs have been rigorously evaluated.)

Withdrawal/Redaction Marker

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
003. memo	Carol Rasco et al. to The President re: Teen Pregnancy Initiative (partial) (2 pages)	07/24/1995	P5

COLLECTION:

Clinton Presidential Records
Domestic Policy Council
Lyn Hogan
OA/Box Number: 11027

FOLDER TITLE:

Teen Pregnancy: National Campaign 2 [2]

2010-1083-S

rc451

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

- P1 National Security Classified Information [(a)(1) of the PRA]
- P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
- P3 Release would violate a Federal statute [(a)(3) of the PRA]
- P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
- P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [(a)(5) of the PRA]
- P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

C. Closed in accordance with restrictions contained in donor's deed of gift.

PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).

RR. Document will be reviewed upon request.

Freedom of Information Act - [5 U.S.C. 552(b)]

- b(1) National security classified information [(b)(1) of the FOIA]
- b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
- b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
- b(4) Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
- b(6) Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
- b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
- b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
- b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

- providing technical assistance to communities seeking to start programs
- conducting communications outreach on the issue.

A list of candidates to be founders of the organization has been developed. Belle Sawhill (now at the Urban Institute) and Sarah Brown (an expert on teen pregnancy at the Institute of Medicine) have agreed to take on lead operational roles. While many of the individuals targeted as board members have expressed positive interest in the proposed new venture, we believe your direct involvement is necessary to secure commitments from the group.

RECOMMENDED PLAN OF ACTION

(1) White House Discussion

We suggest that you convene a meeting with the approximately 15 prominent individuals on our target list, plus several experts in the field of teen pregnancy prevention. The event would take place in early September and would require approximately 1 hour of your time. Media strategy would be very low-key.

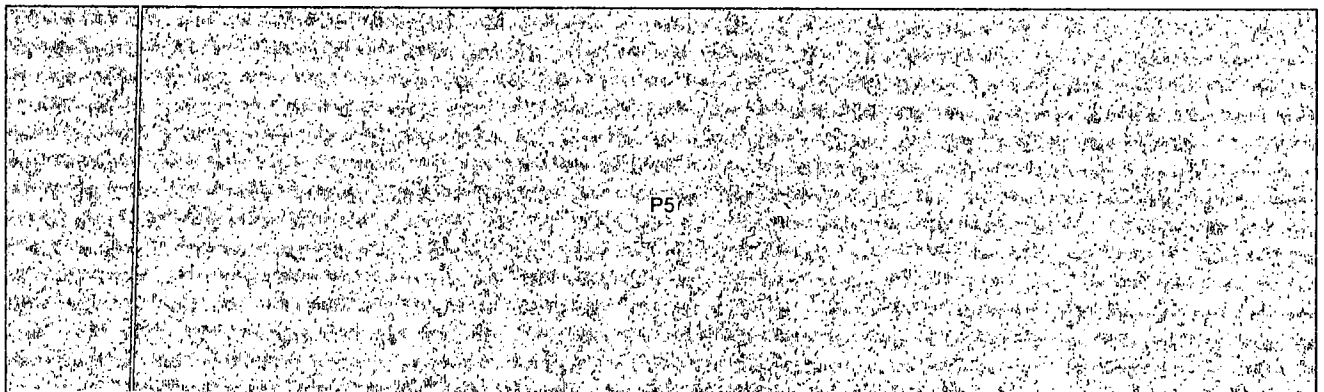
Experts would brief you and the group on what is being done in prevention at the local level and offer thoughts on what needs a national campaign might address. You would speak to the seriousness of the problem -- with its linkages to the debilitating cycle of poverty and welfare dependency -- and exhort the group to come together to combat this major threat to America's youth.

(2) Organizational Meeting

One of the participants in the White House meeting (ideally, the head of a major foundation) would agree in advance to host a follow-up event for the group of 15 and other interested individuals. This event would be a planning session for launching the envisioned private-sector organization.

(3) Launch

The new entity would be established by the end of the year. Foundations and/or private individuals would provide start-up funding. You would be present for the launch.



003

P5

DECISIONS REQUESTED

- Please indicate if you approve of the proposed plan of action for the teen pregnancy:
_____ YES _____ NO
- Below is a preliminary list of invitees for the suggested White House meeting on teen pregnancy. Our aim is bring together 15-20 people, with representation from each of the following categories. Please review, and edit as desired.

Spiritual Voice

Andrew Young

Sister Mary Rose, Covenant House, NY

Entertainment

Oprah Winfrey

Visible Republicans

John Danforth

Jack Kemp

Anne McLaughlin, former Labor Secretary

Thomas Kean, President of Drew University

Public Health Leaders

C. Everett Koop

Henry Foster

Corporate Leaders/Fundraisers

Bill Gates, Microsoft Corp.

John Pepper, Procter & Gamble

Sharon (Mrs. Warren) Buffett

Irving Harris, retired CEO, Chicago

Paul Tutor Jone, Robinhood Foundation

Linda Wachner, Warnaco Inc.

John Bryan, SaraLee Corp.

A CEO member of the Mid-South Foundation

Community Practitioners

Marion Howard, Emory University, Atlanta

Michael Carrera, Children's Aid Society, NY

Elayne (Mrs. William) Bennett, BestFriends, DC

Communications

Charlotte Beres, Ogilvy & Mather

Jay Winston, Harvard School of Public Health

Academics

Kris Moore, ChildTrends, Inc.
Genie Rosoff, Guttmacher Institute
Doug Besharov, American Enterprise Institute

Foundation Executives

Angela Blackwell, Rockefeller Foundation
David Hamburg, Carnegie Foundation
Susan Beresford, Ford Foundation
Doug Nelson, Casey Foundation

Core Organizing Group

Jody Greenstone
Belle Sawhill, Urban Institute
Bill Galston
Sarah Brown, Institute of Medicine

Administration Participants

Donna Shalala
Carol Rasco
Alexis Herman

- Please indicate names of any other individuals you would like to participate:

NOAPPP

*A Multi-Faceted Approach to Adolescent
Pregnancy, Parenting and Prevention*

National Organization on
Adolescent Pregnancy, Parenting
and Prevention, Inc.

4421-A East-West Highway
Bethesda, MD 20814
Phone (301) 913-0378
Fax (301) 913-0380

Summer 1995

Dear Exhibitor:

It is our pleasure to invite you to exhibit at the 1995 conference sponsored by the National Organization on Adolescent Pregnancy, Parenting and Prevention, Inc. (NOAPPP) scheduled November 15 - 18, 1995 at the Mesa Pavilion Hilton in Mesa, Arizona. NOAPPP is the only national organization that focuses solely on adolescent pregnancy, parenting and prevention issues.

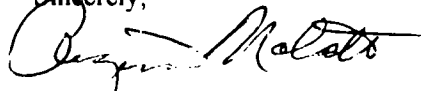
The conference, *Adolescent Pregnancy and Sexuality: Common Ground - Uncommon Efforts* will feature renowned speakers, stellar educational sessions, and networking opportunities for over 500 professionals from throughout the nation who work in the fields of medical care, health education, social services, public education, child care, research, policy-making and advocacy. Dr. Robert Selverstone, psychologist, educator and consultant in adolescent sexuality, will be the keynote speaker at the opening session on November 16. David Liederman, Executive Director of the Child Welfare League of America (CWLA), will present at the general session on November 17.

Vendor exhibits are continually voted one of the outstanding conference features by attendees. This year, exhibit space has been designed to provide maximum visibility to conference participants as the exhibit room is adjacent to the area scheduled for the continental breakfasts, breaks, luncheons, and the no-host reception on Thursday. Additionally, we plan to have an extended break period on both Thursday and Friday to allow more time for vendor visitations. Exhibitors will be recognized at Friday's luncheon.

NOAPPP requests your participation as an exhibitor and/or sponsor at this year's conference. An Exhibitor Prospectus is enclosed. Act now! Space is limited and on a first come basis. NOAPPP members will receive a 10% discount on the exhibitor fee. If you are not a NOAPPP member, an application form is enclosed. Exhibit fees are waived for sponsorships of \$977 and above.

Come share the excitement, education, networking and hospitality of the NOAPPP 1995 Annual Conference. We hope to see you there!

Sincerely,



Regina Malatt
Coordinator

P.S. Allow time to enjoy the sky piercing peaks, centuries-old cactus, Southwest cuisine, Indian Trading Posts, golf courses, and warm, sunny November weather!

Exhibitor Information

Exhibit Fees

Exhibit registration fees will include:

-  Rental of a six foot by thirty inch draped table with two chairs.
-  Display signs provided on request.
-  Coffee service during designated breaks.
-  Complete listing of all conference attendees.
-  Recognition in the conference program.

Exhibitor set-up will be 8:00 pm - 10:00 pm on Wednesday, October 15, 1995. Exhibit hours are 7:30 am - 5:30 pm on Thursday, October 16, and 8:00 am - 3:00 pm on Friday, October 17, 1995.

Your Exhibit Dollar Gives You . . .

The opportunity to reach a well-defined audience of professionals dedicated to teen pregnancy and parenting issues through a conference marked by quality and quantity. Don't miss this exciting opportunity to attract new buyers, introduce new products, meet your competition, obtain valuable user feedback on your products and/or services and collect market research information for your new products. **Act now**, space is limited and on a first-come basis!

Hotel Accommodations

The Mesa Pavilion Hilton will serve as the NOAPPP conference headquarters. Sleeping room rates are \$79.00 for a single or double room. The hotel is adjacent to a 9-hole golf course and the one million square foot Fiesta Mall. Ideally located in Arizona's fastest growing city, it is only minutes from downtown Phoenix and the Sky Harbor Airport. Hurry and make your travel arrangements now through Buxton's World of Travel, NOAPPP's official travel agent at 800-875-0663. Call the Hilton direct at (602) 833-5555 to reserve your room now and be sure to mention that you will be attending the NOAPPP conference..

Standards for Exhibiting

Distribution of literature, samples, etc., by firms that are NOT participating as an exhibitor is prohibited. Evidence of violation of this rule should be reported immediately to a NOAPPP representative.

Unethical conduct or infraction of rules on the part of the exhibitor or their representative, or both, will subject the exhibitor or their representative to dismissal from the exhibit area, and no refund will be made by NOAPPP.

No entertainment or social functions may be scheduled to conflict with conference program hours or social events held during November 15-18, 1995.



Publication Displays

Publication displays are an inexpensive way to introduce materials that do not require a full exhibit table. Pamphlets, brochures and order forms may be set out for conference participants to take with them. NOAPPP cannot act as a vendor for your materials, nor can it be responsible for the return of materials. For more information, contact Regina Malatt at the NOAPPP office at (301) 913-0378.



Exhibitor Prospectus

1995 NOAPPP Conference Tax Deductible PR Opportunities

NOAPPP wants to provide you, the Exhibitor/Sponsor, an opportunity to be highly visible as committed partners in reducing the incidence of teen pregnancy and in providing quality programs to those youths who are parents too soon. Therefore, we have designed ways to acknowledge contributions at all levels with opportunities to sponsor various aspects of the conference. How much visibility do you want at the conference and how long after the event is over?

All donations are tax-deductible as NOAPPP is a 501(c)(3) charitable organization. All sponsorships will be acknowledged in the conference program, at the sponsored event, and at Thursday's luncheon.

YOU DO NOT HAVE TO BE AN EXHIBITOR TO BE A SPONSOR • YOU CAN SPONSOR ALL OR PART OF ANY ITEM OR ITEMS.

A. For \$4,875 - You Can Be a *Blue Ribbon Level Sponsor*

- A1) Provide hors d'oeuvres at the No-Host Thursday night Reception
- A2) Host a luncheon on Thursday or Friday
- A3) Provide 16 scholarships to professionals to cover registration fees
- A4) Underwrite printing for abstracts of workshops/research reports

B. For \$2,490 - You Can Be a *Honor Circle Level Sponsor*

- B1) Host a continental breakfast on Thursday, Friday or Saturday
- B2) Sponsor a keynote speaker
- B3) Fund the printing of the conference program
- B4) Provide 8 scholarships to professionals for registration fees

C. For \$977 - You Can Be a *Leadership Level Sponsor*

- C1) Provide NOAPPP with a banner for use at this and future events
- C2) Sponsor audio-visual equipment used at conference
- C3) Rent a copier for use on-site for conference presenters

D. For \$589 - You Can Be a *Patron Level Sponsor*

- D1) Provide popcorn in the Exhibit Area during Thursday's extended break
- D2) Imprint T-Shirts for conference volunteers
- D3) Sponsor one afternoon break
- D4) Provide 2 scholarships to professionals for registration fees

E. For \$300 - You Can Be a *Supporter Level Sponsor*

- E1) Sponsor refreshments in the Speaker's Hospitality Room
- E2) Sponsor the Video Festival on Thursday evening
- E3) Provide A-V equipment for teen theatre performance at reception
- E4) Provide 1 scholarship to a professional for registration fees

F. DONATE ONE OR MORE ITEMS FOR THE RAFFLE

(For conference recognition, forward resource materials to NOAPPP office by 10/15/95.)

PLEASE INDICATE WHICH ITEM YOU WISH TO SPONSOR ON THE APPLICATION TO EXHIBIT FORM

1995 NOAPPP Annual Conference
Common Ground - Uncommon Efforts
November 15-18, 1995
Mesa Pavilion Hilton, Mesa, Arizona

Exhibitor Prospectus

Please return this form
and your check to: NOAPPP
4421-A East-West Highway
Bethesda, Maryland 20814

Payment In Full Must Be Enclosed With This Application.

EXHIBITOR INFORMATION

CONTACT INFORMATION:

Firm Name _____ NOAPPP Member ____YES ____ NO
Contact Person _____ Title _____
Address _____
City, State, Zip _____
Phone () _____ FAX () _____

ON-SITE PROGRAM BOOK INFORMATION:

Company Product and/or Services Description (max 50 words; attach additional sheet if necessary)

Note: Exhibitors wishing to attend the educational sessions must register on separate conference registration form. Contact the NOAPPP office at (301) 913-0378 to receive conference registration brochure.

EXHIBIT FEES

Exhibitor:

- ☐ For Profit Organization \$300
☐ Non Profit Organization \$200
Tax I.D.# _____
☐ Take One Table - For Profit \$ 75
(Limit - 3 items)
☐ Take One Table - Non Profit \$ 50
Tax I.D.# _____
(Limit - 3 items)
☐ Video Preview at Video Festival \$ 40 (per video)
(Videos must be in NOAPPP
office by 10/15/95.)

TOTAL EXHIBITOR FEE ENCLOSED \$ _____

Sponsor:

- ☐ *Sponsor - Amount Enclosed: \$ _____
(Please indicate item by number, such
as A1, etc. as listed on Tax-Deductible
PR Opportunities page) # _____
☐ Number of donated resource
materials _____
Less 10% members only discount — \$ _____
TOTAL EXHIBITOR AND/OR
SPONSOR FEES ENCLOSED: \$ _____

**MAKE CHECKS PAYABLE TO
1995 NOAPPP CONFERENCE**

TERMS OF AGREEMENT

Exhibitor hereby agrees to protect, defend and save NOAPPP, the Mesa Pavilion Hilton and exhibitors, their officers, directors, employees and agents harmless against all claims, losses and damages to persons or property, governmental charges or fines and reasonable attorneys' fees arising out of or caused by exhibitors' installation, removal, maintenance, occupancy or use of the exhibition area of the Mesa Pavilion Hilton, or part thereof, excluding any such liability caused by the sole negligence of the Mesa Pavilion or exhibitors.

Acceptance and confirmed assignment of space shall be subject to the regulations outlined in this prospectus. In the event of cancellation prior to October 15, 1995, NOAPPP will refund payment minus a \$50.00 administration fee. Cancellations after October 15 will result in forfeiture of the required payment. Cancellations must be in writing.

Authorized signature (required)

Date



☐ Please check here if you need special assistance.

Application to Exhibit Form

**The National Organization
on Adolescent Pregnancy,
Parenting and Prevention**

NOAPPP

*A Multi-Faceted
Approach to Adolescent
Pregnancy, Parenting
and Prevention*

NOAPPP

**National Organization on
Adolescent Pregnancy, Parenting
and Prevention, Inc.**

4421-A East-West Highway
Bethesda, MD 20814
Phone (301) 913-0378
Fax (301) 913-0380

NOAPPP MEMBERSHIP FORM

Name _____

Title _____

Organization _____

Address _____

City _____ State _____ Zip _____

Phone () _____ Fax # () _____

*Please make your check payable (in U.S. dollars) to: NOAPPP
MAIL TO: NOAPPP, 4421-A East-West Highway, Bethesda, Maryland 20814*

About NOAPPP

The National Organization on Adolescent Pregnancy, Parenting and Prevention (NOAPPP) is a national network of diverse individuals and organizations who are dedicated to preventing adolescent pregnancy and problems related to adolescent sexuality, pregnancy and parenting. NOAPPP is the only broad-based national resource network whose sole agenda is focused on adolescent pregnancy care and prevention issues.

Founded in 1979, NOAPPP provides leadership on adolescent pregnancy and parenting issues for individuals and organizations nationwide.

As a member of the National Organization on Adolescent Pregnancy, Parenting and Prevention you will:

- Join a dynamic network of individuals and organizations;
- Experience a variety of opportunities to share information and resources;
- Link with individuals and organizations to develop strategies and initiate action plans in response to the complex issues related to adolescent pregnancy and early parenting;
- Assist NOAPPP in its role as a catalyst for the creation of state and local coalitions;
- Participate in a grass-roots organization which recognizes that its most valuable resources is its membership.

The Benefits

Links individuals and organizations who are dedicated to preventing adolescent pregnancy and problems related to adolescent sexuality, pregnancy, parenting and prevention.

Works in partnership with state and other national organizations to promote effective program and policy responses to adolescent pregnancy issues.

Provides a highly visible national presence, working with legislators and other national organizations to ensure the funding of adolescent pregnancy care and prevention programs.

Other benefits include: NOAPPP Quick Notes and subscription to the **NETWORK**, a quarterly newsletter which highlights effective program models, local and state initiatives, research, evaluation, upcoming events, new resource materials and other important information.

- Discounts on registration for NOAPPP events, including the Annual Meeting, workshops and conferences.
- Discounts on all NOAPPP publications and merchandise.
- Participation in the NOAPPP Speakers Bureau.
- Special information mailings and legislative alerts.
- Technical assistance and training services.
- Recognition of exemplary adolescent pregnancy care and prevention programs through an annual awards program.
- Services of a consultant bank to share program expertise and assist in training volunteers and staff members.

Memberships

☐ **Individual** **\$50/year**

Benefits include subscription to the NOAPPP Network, reduced registration fees for the NOAPPP Annual Meeting and other conferences, and voting privileges.

☐ **Organizational** **\$125/year**

Benefits include three subscriptions to the NOAPPP Network, reduced registration fees for three to the NOAPPP Annual Meeting and other conferences, and voting privileges for three.

☐ **Student** **\$25/Year**

Individuals enrolled as full time students (letter from educational or training institution required). Benefits include subscription to the NOAPPP Network, reduced registration fees for the NOAPPP Annual Meeting and other conferences, and voting privileges.

Contributions

NOAPPP is a nonprofit, 501(c)(3) organization. All general contributions, other than memberships, are tax deductible.

NARHP Update

Fall 1994

National Adolescent Reproductive Health Partnership

A Project of the Association of Reproductive Health Professionals

NATIONAL TEEN INITIATIVE ANNOUNCED

Adolescent Reproductive Health Focus of National Partnership

The National Adolescent Reproductive Health Partnership (NARHP) has begun to make its mark. The first edition of the *NARHP Update* is just one of many ways in which a group of people with at least one thing in common—to make adolescent reproductive health a national priority—can join forces to make a difference in the lives of U.S. teens.

It is no secret that the state of adolescent health in this country is alarming. Unintended pregnancy and sexually transmitted disease rates among young people are unacceptable. Those who work with teens can attest to the tremendous loss of human potential, in terms of economics, education, and the emotional lives of young people, as the overriding social cost of not addressing adolescent reproductive health.

The National Adolescent Reproductive Health Partnership is a coalition of private, nonprofit, and for-profit organizations and

corporations formed to sponsor private sector programs aimed at reducing the incidence of sexually transmitted diseases and pregnancies among adolescents. The Partnership is guided by a steering committee of individuals from the Surgeon General's Office, the Centers for Disease Control and Prevention, industry, clinical

(Continued on page 2)

Surgeon General Supports NARHP, Sponsors '95 Conference

Dr. Joycelyn Elders, U.S. Surgeon General, has announced a conference on adolescent health to be held in Washington, DC, next April (see "Mark Your Calendar" feature on page 4 for more information).

"The conference will bring new understanding to the obstacles adolescents face throughout their

development," according to Dr. Elders.

"Many of our nation's adolescents make it through this difficult period in their lives relatively unscathed; unfortunately, many do not," she says.

"I look forward to working with the National Adolescent Reproductive Health Partnership as a principal partner whose activities will parallel ours as we build toward next spring's conference. It is comforting to know that so many organizations share my commitment to adolescent health. It is also critical that we involve others who are not traditionally active in adolescent health activities but who can make a significant difference."

(Continued on page 4)

What is NARHP?

NARHP is a cooperative group of public and private sector organizations who share the vision of making adolescent reproductive health a national priority. A major goal of the Partnership is to build bridges between these public and private organizations and coordinate their efforts toward this vision.

A working meeting of interested partners on April 16, 1994, identified some priorities for reaching that goal:

1. Managing a clearinghouse of relevant information through ARHP

2. Developing a new definition of healthy adolescent sexuality including prevention

3. Incorporating adolescents as fully as possible in Partnership activities

4. Developing a comprehensive model relating to the promotion of adolescent reproductive health similar to the drunk driving campaign

5. Consider advocating for a Surgeon General's Report to galvanize academic, professional, and government attention

6. Linking into anticipated changes in the health care system

INSIDE THIS ISSUE

Teen Council Profile	page 1
Industry Program Profile	page 2
April Planning Meeting	page 3
Upcoming Conferences	page 4

A Regional Program That Works

Advocates for Youth Sponsors Teen Council in D.C.

In each issue *NARHP Update* will highlight a regional program that has achieved some level of success in affecting the reproductive health of teens. Advocates for Youth's Teen Council, headquartered in Washington, DC, is just such a program.

The Teen Council—15 teens from the DC area—provides peer education on sexual health through local and national workshops. The primary goal of the program is to help build communication skills among teens and give them the opportunity to

design their own solutions to teen pregnancy and other reproductive health concerns.

Sarah Lewis, Teen Council Coordinator, believes the Council, like any other peer education program, serves a dual purpose. "First it gives the teens in the program the chance to share positive peer influences with other teens," says Lewis, "and by doing so they are developing important leadership skills and gaining self-esteem."

After an application and interview process the teens go

(Continued on page 4)



Eight of fifteen Teen Council members

Industry Programs Link OCs & STD Protection

This spring, two pharmaceutical companies took leading roles in patient education in the United States. Wyeth-Ayerst Laboratories and Ortho Pharmaceuticals both launched educational programs for men and women of all ages linking the need for STD protection through condom use with oral contraceptive use.

The National Adolescent Reproductive Health Partnership's vision is to make adolescent reproductive health a national priority through the cooperative efforts of public- and private-sector organizations. Both Wyeth and Ortho are involved in the Partnership, and are proving through their actions that they share the goal of reducing the incidence of sexually transmitted diseases and unintended pregnancy among teens.

NARHP enlists the resources of varying organizations who all share the common goal of improving adolescent reproductive health: non-profit organizations, government agencies, foundations, community groups, and industry.

NARHP's goals are not only to build partnerships to reduce the incidence of pregnancy and sexually transmitted diseases among teens but to facilitate dialogue between health care providers and adolescents.

These two goals are realized in Wyeth-Ayerst Laboratories' *Safer Sex Initiative* and Ortho Pharmaceutical Corporation's *It Takes Two: Prevent and Protect Program*. Both programs were developed in cooperation with government and non-profit agencies.

These programs supply health care providers with kits that facilitate counseling OC users on how to protect themselves against both unintended pregnancy and sexually transmitted diseases. By including educational materials and a condom, the kits serve as a catalyst for STD discussion between a young woman and her healthcare provider and encourage providers to advocate the simultaneous use of the birth control pill and the condom.

According to Dr. S. Paige Hertweck, assistant professor, Department of Obstetrics & Gynecology, University of Louisville, "STD numbers are staggering and, at the same time, 30 million women will be at risk for unplanned pregnancy. Since the pill is 99 percent effective in preventing pregnancy and the condom is our best defense against STDs, advising our at-risk patients to pair together condoms and oral contraceptives is the best way for health professionals to

help stem the reproductive health crisis," says Hertweck.

In a survey of 200 family practitioners and obstetrician/gynecologists, two-thirds of respondents stated that the best way to combat both unintended pregnancy and sexually transmitted disease is the pairing of oral contraceptives and condoms. Four out of five physicians said they would like to be provided with materials that would enhance counseling sessions with patients on the subject of STDs.

With the educational kits from Wyeth and Ortho, providers now have tools to encourage at-risk patients to protect against both of these reproductive health problems. NARHP encourages

educational programs such as these from its public- and private-sector partners.

NARHP's diverse make-up parallels the Association of Reproductive Health Professionals' membership model. ARHP members are public- and private-sector physicians, allied health professionals, health educators, researchers and others brought together to address a variety of reproductive health issues.

ARHP's educational mission covers the spectrum of reproductive health topics including contraception, sexually transmitted diseases, HIV/AIDS, urogenital disorders, abortion, menopause, cancer prevention/detection, sexual health and infertility.



Adolescent Health Initiative Underway

(Continued from page 1)

practice, and academia. The Partnership was formed in April, 1994, as a project of the Association of Reproductive Health Professionals' National Program to Prevent Unintended Pregnancy. Its foundations were laid in an October, 1993, adolescent reproductive health policy meeting and a November, 1993, clinical conference on adolescent reproductive health care.

The April 16 strategic planning meeting brought together representatives from more than 50 non-profit associations, the pharmaceutical industry, the non-pharmaceutical industry, government, the media, and teens to brainstorm on how to most effectively and collectively address the tremendous difficulties facing teens today in the area of reproductive health. Originally called the Adolescent Health Initiative, NARHP was adopted to emphasize the importance of a partnership effort in effecting change.

The Partnership's vision is to make adolescent reproductive health a national priority. An important purpose of the Partnership is to enlist the support of the resources of the private sector as a partner to the federal government in its activities in the area of adolescent reproductive health.

The goal of the Partnership is to identify ways in which public and private organizations can

1. build partnerships to reduce the incidence of pregnancy and sexually transmitted disease among teens,
2. facilitate dialogue between health care providers and adolescents,
3. act as a liaison between clinicians and public policy makers.

NARHP partners are linked by their concern for the health of teens, today, and in the future. This common bond has overcome the differences between organizations and disciplines.

NARHP Update provides a forum for sharing information about what works and what doesn't, for showcasing public and private programs that help, for featuring important conferences, and for other topics of interest. Never before has cooperation and communication been so vital among all those working to ensure the health and future of teens.

Through cooperative efforts such as *NARHP Update*, new avenues of communication can lead to greater understanding and toward reaching NARHP's goal to positively influence adolescent reproductive health.

Spring Partnership Meeting Participants

Add your name to this list of organizations that were represented at the National Adolescent Reproductive Health Partnership (NARHP) meeting in April. Return the tear-out card on the facing page to join this important partnership.

Advocates for Youth (formerly Center for Population Options)

Alan Guttmacher Institute

American Medical Women's Association

American College of Obstetrics and Gynecology

Association of Reproductive Health Professionals

Burroughs Wellcome Co.

Center for Population Research

Children's Defense Fund

Comprehensive School Health Project, Washington, DC

Congressional Caucus for Women's Issues

Centers for Disease Control and Prevention:

Division of Adolescent and School Health

Glamour Magazine

HEALTH WATCH, Inc.

Johns Hopkins University

Johns Hopkins School of Hygiene and Public Health

Maternal and Child Health Bureau

National Association of Community Health Centers

page 2

National Association of Nurse Practitioners in Reproductive Health

National Council of Chain Restaurants

National Network of Runaway and Youth Services

National Pharmaceutical Council

North American Society for Pediatric & Adolescent Gynecology

Office of Population Affairs

Ortho Pharmaceutical Corporation

Planned Parenthood® Federation of America

Porter-Novelli

Prince George's County Department of Health

Robin Hood Foundation

Sex Information and Education Council of the U.S.

Teen AIDS

Tufts New England Medical Center

U.S. Surgeon General's Office

University of Alabama School of Nursing

University of Arkansas for Medical Sciences

The Upjohn Company

USC Dept. of Family Medicine

Wyeth-Ayerst Laboratories

Youth Leadership Development Initiative

NARHP Update

For more information or to become a partner make address corrections on the label on the reverse side of this card, fill out the information to the right, detach below, and return to:

NARHP

2401 Pennsylvania Avenue, NW, Suite 350
Washington, DC 20037-1718

☐ YES. I want to become a partner.

- ☐ Please add me to your mailing list.
- ☐ Please send me more information about NARHP.
- ☐ Please send information about continuing medical education on adolescent reproductive health.
- ☐ I am enclosing materials for the NARHP clearinghouse.
- ☐ I want to participate in research (please describe): _____

- ☐ I want to participate in the program speaker's bureau. My area of expertise is (please list): _____

- ☐ I am enclosing a program description, article, or meeting announcement for you to consider including in the next newsletter.

- ☐ I am interested in participating in the following way (please describe): _____

Letter from the Partnership Chair



Lee Lee Doyle, PhD
Associate Dean for Continuing
Medical Education and Faculty
Development
Professor of Obstetrics and
Gynecology
University of Arkansas for Medical
Sciences

NARHP—

The Younger Generation

What do Glamour magazine, the National Council of Chain Restaurants, several pharmaceutical companies, and six teens from the Washington D.C. area have in common? While your response might be, "little or nothing," the correct answer is that they are all part of an exciting new group of over 50 individuals and public, private, and governmental organizations making up the National Adolescent Reproductive Health Partnership.

What made these people along with others decide to form such a partnership? It was the common goal of making sure that adolescent reproductive health becomes a priority item on our national agenda, a goal that can only be accomplished by a coordinated, cooperative effort by the many groups involved with and concerned about adolescents and their health problems. ARHP had sponsored two meetings during 1994 dealing with adolescents and their health needs, one from a policy perspective and one educational meeting for health professionals, as part of the Adolescent Reproductive Health Initiative. These meetings provided the impetus for ARHP to act as a catalyst in bringing people and organizations together to work on a strategic action plan for adolescent reproductive health.

By the end of the day of meetings and workshops the group had worked through a variety of issues and agreed on

four activities that will be basic to the partnership. ARHP will facilitate the activities which involve letting each member know the programs and initiatives of other partners regarding adolescent reproductive health, seeking the same information of other organizations not yet in the partnership, setting up a calendar of relevant meetings, facilitating the exchange of information on the upcoming release of reports or materials of interest, and assembling information on staff expertise in areas related to adolescent reproductive health so ARHP might assist other organizations with grants or contracts. The most important outcome of the meeting was, of course, the formation of the partnership itself. In becoming part of such an alliance, ARHP has, once again, not only taken the initiative, but moved it forward.



April NARHP meeting attendees discuss partnership recommendations

Partners Meet in DC

The National Adolescent Reproductive Health Partnership was launched with the enthusiastic participation of more than 50 organizations on April 16, 1994. The conclusion? Adolescent health must become a national priority, and the Partnership can help.

The ambitious meeting goals of consensus-building, strategic planning, and building a partnership framework while defining its objectives were more than met. A central theme of building linkages between public- and private-sector organizations was addressed in the main session and later in individual break-out groups.

In the spirit of cooperation, participants were charged with formulating a mutually acceptable statement of the problems associated with adolescent reproductive health and a vision of what needs to be done. A clear consensus was reached early in the process: the problem lies in the way Americans communicate—or don't communicate—about sex. The social and economic environment in the U.S. stifles healthy communication. How can teens be expected to talk about sex if adults can't do it?

Following this discussion, the participants divided into six working groups, each focusing on an important aspect of adolescent reproductive health. Each group was charged with coming up with two clear "action" items for implementing the Partnership in their topical area.

Each group met their challenge and emerged with at least two "action" items. Some new strategies for making adolescent reproductive health a national priority are listed on the cover of this newsletter.

NARHP has been working to turn these strategies into reality. If you or your organization would like to contribute in any way, please send in the tear-out card above.

NARHP Steering Committee

Lee Lee Doyle, PhD, Chair University of Arkansas for Medical Sciences Little Rock, AR	
Alwyn T. Conall, MD St. Luke's/Roosevelt Hospital New York, NY	Douglas Kirby, PhD Education, Training, and Research Associates Santa Cruz, CA
Michael Dalmat, PhD CDC/DRH Atlanta, GA	Marilyn North Arnold The Upjohn Company Kalamazoo, MI
Ann Davis, MD Tufts New England Medical Center Boston, MA	Eleanor Vogt, RPh, PhD National Pharmaceutical Council Reston, VA
Mariana Kastrinakis, MD-MPH U.S. Surgeon General's Office Washington, DC	

Non-Profit Org.
US Postage
PAID
Permit 827
Washington, DC

April 20, 1995
Pennsylvania Coalition to Prevent Teen
Pregnancy
3rd Annual Conference:
Completing the Prevention Puzzle—Males and
Teen Pregnancy
Harrisburg, PA
April 21-23, 1995
717/761-7380
North American Society of Pediatric and
Adolescent Gynecology
Annual Meeting
Toronto, ON, CANADA
215/955-6331
December 1-3, 1995
Association of Reproductive Health
Professionals
Clinical Conference:
Adolescent Reproductive Health '95
Los Angeles, CA
202/466-3825

Teen Council

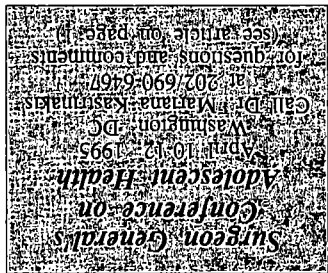
(Continued from page 1)

through a three-month training in youth leadership and sexual and reproductive health. At their first meeting the teens learn the basics of STDs and pregnancy prevention, brainstorm about other issues they'd like to see addressed, and set the next year's agenda.

After successful training, most become full members of the Council. Council members then go on to provide educational workshops on teen health and sexuality with youth-serving organizations, teen clinics, and at national conferences.

William Johnson, an 18-year-old from Southeast Washington, has been a member of the Teen Council since January. According to Johnson, one of the most important things he has gained from the Council is knowledge. "Sometimes teens are misguided by street knowledge," says Johnson. "With what I have learned I can help my friends and other people my age by giving them the information they need to prevent pregnancy and STDs. I can give them the facts and answer their questions and get them talking about different issues." He also encourages them to visit a health care provider for more information.

Another Council project is an educational brochure to address teen reproductive health issues. Teen focus groups will study language, color, and graphics



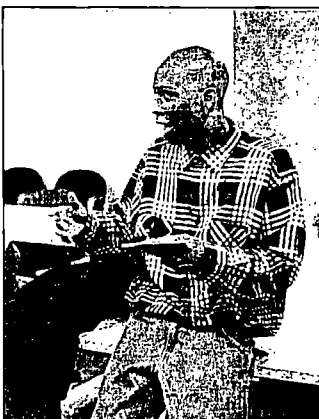
quality for effectiveness. First, the group is asked to look over a variety of brochures and to pick out the ones they think are best at reaching a teen audience.

"We're asking the teens if they would want to look at it," says Lewis. "There's no point in designing a brochure for a teen if they're not going to read it."

In the past Council members designed pamphlets on various issues using teen-friendly language and design. One pamphlet, *Advice for Teens on Buying Condoms* was created after teens conducted a survey on the accessibility of condoms and other family planning products in area stores. The brochure features information on where to buy and how to use condoms, and what to look for on the label.

Another pamphlet on prevention of date rape includes tips for teens and gives local rape crisis center phone numbers and a domestic violence hotline. *America's Least Wanted*, a brochure on STDs, presents transmission and prevention tips. This summer, Council members worked on a contraceptive pamphlet for teens, including information on the morning-after pill.

The Council also serves to give Advocates for Youth and other youth-program planners a direct, informed adolescent perspective into their own work. "It's important that adults listen to teens and ask them how they feel about things," says Johnson. "It's the adults who make all the



William Johnson, Teen Council Member

decisions but it's the teens who are blamed for problems they didn't cause. Teens can make a difference; they want to be part of the solution."

Advocates for Youth is a national, non-profit organization that works to increase opportunities for and abilities of youth to make healthy decisions regarding sexuality. Currently they are recruiting teens for next year's Council. For more information on the Teen Council, call Sarah Lewis, council coordinator at (202) 347-5700.

If you sponsor a program for teens that really "works," please write and tell us about it—we may be able to profile your program in a future *NARHP Update*. If you have materials about your organization that you would like added to the NARHP clearinghouse, you can send information to Sue Starkweather at ARHP.

Surgeon General

(Continued from page 1)

"Perhaps never before in our history have adolescents been faced with so many deadly choices and exposed to so many dangers over which they have little or no control," Elders says. "Their protection is our obligation."

The purpose of the conference is to identify interventions that provide for a safe passage through adolescence and activate communities to implement those intervention strategies. About 300 people from a wide range of disciplines will be charged with responding to a proposed national action plan for healthy adolescent development. The plan's goal is to redirect adolescent health from a main focus of problem-based interventions to one of health promotion and prevention.

Production of this issue of *NARHP Update* was made possible by an educational grant from Wyeth-Ayerst Laboratories.

The Partnership gratefully acknowledges the financial support of the following organizations:
Ortho Pharmaceuticals
The Upjohn Company
Wisconsin Pharmacal
Wyeth-Ayerst Laboratories

Editor: Wayne Shields
Contributing Editors: Caryn Bratt
Neena Mehta
Arin Pereira
Sue Starkweather

© 1994 ARHP

NARHP Update

National Adolescent Reproductive Health Partnership

2401 Pennsylvania Avenue, NW, Suite 350
Washington, DC 20037-1718

THE ASSOCIATION OF REPRODUCTIVE HEALTH PROFESSIONALS OVERVIEW

MISSION STATEMENT

The Association of Reproductive Health Professionals (ARHP) is an interdisciplinary medical professional association composed of obstetrician/gynecologists and other physicians, advanced practice clinicians, researchers, educators, and other professionals in reproductive health. ARHP, founded in 1963, has an organizational mission to educate health care professionals and the public on family planning, contraception and other reproductive health issues including sexually transmitted diseases, HIV, urogenital disorders, abortion, menopause, cancer prevention/detection, sexual health and infertility.

PROJECTS AND PLANS

ARHP has sponsored a number of successful CME conferences over the past four years. In 1992, ARHP was reaccredited with commendation for four years by the Accreditation Council on Continuing Education (ACCME), in recognition of outstanding CME programs. ARHP continues to sponsor an annual scientific meeting, an annual clinical conference on sexually transmitted diseases and biennial clinical conferences on the perimenopause and adolescent reproductive health. ARHP has also sponsored scientific session at the annual meeting of Planned Parenthood® Federation of America (PPFA). ARHP CME conferences to date have included the following:

- 1991 *Oral Contraceptive Compliance and Effectiveness Symposium*
The Second Transition: From Reproduction to Menopause
The New American Agenda: Challenges in Reproductive Health
- 1992 *STD Update '92: New Ideas, New Tests, New Treatments*
Women's Health in the Perimenopause: Implications for Clinicians
- 1993 *STD Update '93: Men, Women and Families*
Adolescent Reproductive Health '93 – Clinical Update: Protecting the Sexual Health of Teens in the '90s
Reproductive Health '93: Prevention in Clinical Practice
- 1994 *STD Update '94: Contraception, STDs and Risk-Taking Behaviors*
Perimenopause: Pathways to Change
Reproductive Health '94: The Continuing Clinical Challenge

ARHP also sponsors the following visiting faculty CME programs:

Clinical Strategies for Preventing Unintended Pregnancy:
Reversible Methods of Contraception

Clinical Challenges in Contraception:
A Program on Women With Special Medical Conditions

In addition to its CME-related activities, ARHP has launched a series of major public and professional education campaigns over the years. These include the following:

- 1991 *New Developments in Contraception and a Practicum on the Norplant® System* -- ARHP trained over 1,700 clinicians in the insertion and removal of Norplant contraceptive system in 34, 4-hour training sessions in more than 20 cities.
- 1992 *National Program to Prevent Unintended Pregnancy* -- a multi-year campaign aimed at reducing the incidence of unintended pregnancy through improved contraceptive usage and greater awareness of the consequences of sexual behavior.
- 1993 *Choosing a Birth Control Method* -- following FDA approval of Depo-Provera® as a contraceptive for U.S. women, ARHP produced a series of educational videos and pamphlets on reversible methods of birth control, for health care providers and patients. An information hotline was also instituted.

What Works? -- Adolescent Health: STD and Pregnancy Prevention -- a policy meeting was held to examine the public policy component of a newly-recognized health crisis population. The meeting led to formation of the *Adolescent Reproductive Health Initiative*.

- 1994 *National Adolescent Reproductive Health Partnership (NARHP)* -- an outgrowth of the *National Program to Prevent Unintended Pregnancy* and its *Adolescent Reproductive Health Initiative*, NARHP was convened with a mission to make adolescent reproductive health a national priority.

Perimenopause: Pathways to Change -- an educational brochure that answers common questions about the perimenopause for a general audience. An information hotline was also instituted.

A Women's Guide to Contraception: Long-Acting Hormonal Methods -- an educational brochure for patients that features questions to ask themselves and their providers. A contraception hotline was also instituted to allow copies of the brochure to be ordered by phone (202/723-5085).

To complement its education programs and clinical conferences, ARHP publishes a variety of materials. These include *Health & Sexuality*, ARHP's award-winning quarterly newsletter, and *Clinical Proceedings*, a publication that addresses clinical aspects of reproductive health practice. Current *Clinical Proceedings* address the following topics:

- (1) *STD Update '93: STDs in the '90s*
- (2) *Clinical Challenges in Contraception: A Program on Women With Special Medical Conditions*
- (3) *Women's Health in the Perimenopause: Implications for Clinicians*
- (4) *Maximizing Oral Contraceptive Effectiveness -- Changing Perceptions*
- (5) *Maximizing Oral Contraceptive Effectiveness -- Patient Compliance, Drug Interactions, and Other Factors.*

In addition to further issues of *Clinical Proceedings*, ARHP also plans to initiate a new publication in late 1994 containing reviews and comments on breakthroughs in reproductive health research and practice and a bimonthly newsletter devoted to adolescent reproductive health.

ARHP is governed by a 13-member board of directors and maintains professional offices in Washington, DC. For more information, contact **The Association of Reproductive Health Professionals**, 2401 Pennsylvania Avenue, NW, Suite 350, Washington, DC 20037-1718: Telephone (202) 466-3825 Fax (202) 466-3826

THE NATIONAL ADOLESCENT REPRODUCTIVE HEALTH PARTNERSHIP

The National Adolescent Reproductive Health Partnership (NARHP), formerly known as the Adolescent Health Initiative, was launched by the Association of Reproductive Health Professionals (ARHP) as an innovative strategy that unites the resources of diverse organizations to combat the alarming state of adolescent reproductive health in this country, specifically regarding pregnancy and STD prevention. The Partnership consists of representatives from more than fifty non-profit associations, government agencies, the pharmaceutical industry, the non-pharmaceutical industry, the media, and teens themselves who have come together to effectively and collectively address the tremendous difficulties facing teens today. The name change reflects the importance of the partnership effort in effecting change.

The Partnership came together for the first time on April 16, 1994, to discuss strategic planning and Partnership objectives. With emphasis on making adolescent reproductive health a national priority, the basis for specific projects were laid, which ARHP and the Partnership have subsequently developed into the planning stages and beyond.

The Partnership's vision is to make adolescent reproductive health a national priority. An important purpose of the Partnership is to enlist the support of the resources of the private sector as a partner to the federal government in its activities in the area of adolescent reproductive health. The goal of the Partnership is three-fold: to identify ways in which the public and private organizations can: 1. build partnerships to reduce the incidence of pregnancy and sexually transmitted disease among teens; 2. facilitate dialogue between health care providers and adolescents; 3. act as a liaison between clinicians and public policy makers.

In order to achieve these goals, the meeting participants agreed on the following strategies:

1. Incorporate adolescents as fully as possible in Partnership activities;
2. Develop a new definition of healthy adolescent sexuality, including emphasis on prevention and an understanding of diversity.
3. Manage a clearinghouse of relevant information through ARHP (see #2 below)
4. Develop a comprehensive model relating to the promotion of adolescent reproductive health, similar to the drunk driving campaign;
5. Consider advocating for a Surgeon General's Report to galvanize academic, professional, and government attention;
6. Link into anticipated changes in the health care system.

Current NARHP projects have been developed to reflect these strategies and the focus on using multiple resources and methods to address the problems. These projects include:

1. The development of an adolescent reproductive health history taking instrument, to be distributed to health care providers. The instrument is a questionnaire for the teen patient which will allow the health care provider a more in-depth look at the teen's behavior regarding sexual development and behavior. This is especially important for pediatricians and family practitioners who may have difficulty addressing this important health care topic.
2. Development of a clearinghouse of information on programs and strategies that work to effectively address these problems. This is a vital reference source for organizations who are attempting to put programs in place.
3. Production of the *NARHP Update*, a bimonthly newsletter dedicated to health care providers and organizations who deal with adolescent pregnancy and STD prevention and other areas related to adolescent reproductive health.

Projects in the development stage for 1995 include teen focus groups, a teen/clinician CME panel, the development of teen patient education materials, and teen focused educational materials for clinicians.

The Partnership is committed to working to ensure the health and future of all teens. Through its cooperative efforts, avenues of communication are opened which will lead to greater understanding and a greater ability to make a positive influence on adolescent reproductive health.

**NATIONAL ADOLESCENT REPRODUCTIVE
HEALTH PARTNERSHIP STEERING
COMMITTEE**

Lee Lee Doyle, PhD - Chair
Associate Dean for Continuing Medical Education and
Faculty Development
Professor, Dept. of Ob/Gyn
University of Arkansas for Medical Sciences
4301 West Markham, Slot 518
Little Rock, AR 72205 7199

Michael Dalmat, PhD
Assistant to the Director for
Program Development and Evaluation
Division of Reproductive Health
Centers for Disease Control and Prevention
4770 Buford Highway, NE, Mail Stop K20
Atlanta, GA 30341-3724

Mariana Kastrinakis, MD, MPH
Consultant to the Surgeon General
U.S. Surgeon General's Office
200 Independence Avenue SW
Room 736 E
Washington, DC 20201

Marilyn North-Arnold
National Medical Relations Manager
The Upjohn Company
6709 NW Monticello Terrace
Kansas City, MO 64152

Alwyn T. Cohall, MD
St. Lukes/Roosevelt Hospital Center
111 Amsterdam Avenue
New York, NY 10025

Ann J. Davis, MD
Assistant Professor of Ob/Gyn & Pediatrics
Dept of Obstetrics and Gynecology - Reprod. Endo.
Tufts New England Medical Center
750 Washington St., Box 36
Boston, MA 02111

Doug Kirby, PhD
Research Director
Education, Training, and Research Associates
P.O. Box 1830
Santa Cruz, CA 95031

Eleanor Vogt, RPh., PhD
Vice President, Public Affairs
National Pharmaceutical Council
1894 Preston White Dr.
Reston, VA 22091

Withdrawal/Redaction Marker

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
004a. note	Todd Stern to Mr. President re: Dr. Foster (1 page)	07/28/1995	P5

COLLECTION:

Clinton Presidential Records
Domestic Policy Council
Lyn Hogan
OA/Box Number: 11027

FOLDER TITLE:

Teen Pregnancy: National Campaign 2 [2]

2010-1083-S

rc451

RESTRICTION CODES**Presidential Records Act - [44 U.S.C. 2204(a)]**

- P1 National Security Classified Information [(a)(1) of the PRA]
- P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
- P3 Release would violate a Federal statute [(a)(3) of the PRA]
- P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
- P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [(a)(5) of the PRA]
- P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

C. Closed in accordance with restrictions contained in donor's deed of gift.

PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).

RR. Document will be reviewed upon request.

Freedom of Information Act - [5 U.S.C. 552(b)]

- b(1) National security classified information [(b)(1) of the FOIA]
- b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
- b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
- b(4) Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
- b(6) Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
- b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
- b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
- b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

THE PRESIDENT HAS SEEN
7/31/95

THE WHITE HOUSE
WASHINGTON

July 24, 1995

95 JUL 24 P 6: 19

MEMORANDUM TO THE PRESIDENT

FROM: Carol Rasco
Jeremy Ben-Ami
Janet Abrams

THROUGH: Leon Panetta

RE: Teen Pregnancy Initiative

BACKGROUND

In this year's State of the Union address, you urged parents and leaders of all sectors of society to join together in a national campaign against teenage pregnancy. You identified the epidemic of children-having-children as one of our most serious social problems and stressed that "government can only do so much" to solve this complicated dilemma.

We have met with the Chief of Staff about plans now underway for creating a nationwide, private-sector initiative on teen pregnancy. This memo requests your personal involvement to ensure that final commitments are made by the individuals we hope will spearhead the effort.

LAUNCHING THE CAMPAIGN

Since January, Jody Greenstone and Belle Sawhill have been working with members of the White House staff to lay the foundation for an independent, private-sector organization dedicated to reducing the incidence of teen pregnancy in the U.S.

The organization would be bi-partisan and would be led by prominent individuals from the business, religious, media, entertainment, civic, health care, education, and foundation communities. The new group would work to focus national attention on the problem of teen pregnancy and support community prevention efforts across the nation. Likely activities would include:

- spearheading a grassroots campaign to make teen pregnancy prevention a priority in communities throughout the U.S.
- establishing a clearinghouse of information on prevention efforts
(There is now no central source of data on who's doing what in teen pregnancy.)
- supporting the evaluation of promising prevention strategies
(A lot is going on in the field, but very few programs have been rigorously evaluated.)

Withdrawal/Redaction Marker

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
004b. memo	Carol Rasco et al. to The President re: Teen Pregnancy Initiative (partial) (2 pages)	07/24/1995	P5

COLLECTION:

Clinton Presidential Records
Domestic Policy Council
Lyn Hogan
OA/Box Number: 11027

FOLDER TITLE:

Teen Pregnancy: National Campaign 2 [2]

2010-1083-S

rc451

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

- P1 National Security Classified Information [(a)(1) of the PRA]
- P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
- P3 Release would violate a Federal statute [(a)(3) of the PRA]
- P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
- P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [(a)(5) of the PRA]
- P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

C. Closed in accordance with restrictions contained in donor's deed of gift.

PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).

RR. Document will be reviewed upon request.

Freedom of Information Act - [5 U.S.C. 552(b)]

- b(1) National security classified information [(b)(1) of the FOIA]
- b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
- b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
- b(4) Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
- b(6) Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
- b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
- b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
- b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

- providing technical assistance to communities seeking to start programs
- conducting communications outreach on the issue.

A list of candidates to be founders of the organization has been developed. Belle Sawhill (now at the Urban Institute) and Sarah Brown (an expert on teen pregnancy at the Institute of Medicine) have agreed to take on lead operational roles. While many of the individuals targeted as board members have expressed positive interest in the proposed new venture, we believe your direct involvement is necessary to secure commitments from the group.

RECOMMENDED PLAN OF ACTION

(1) White House Discussion

We suggest that you convene a meeting with the approximately 15 prominent individuals on our target list, plus several experts in the field of teen pregnancy prevention. The event would take place in early September and would require approximately 1 hour of your time. Media strategy would be very low-key.

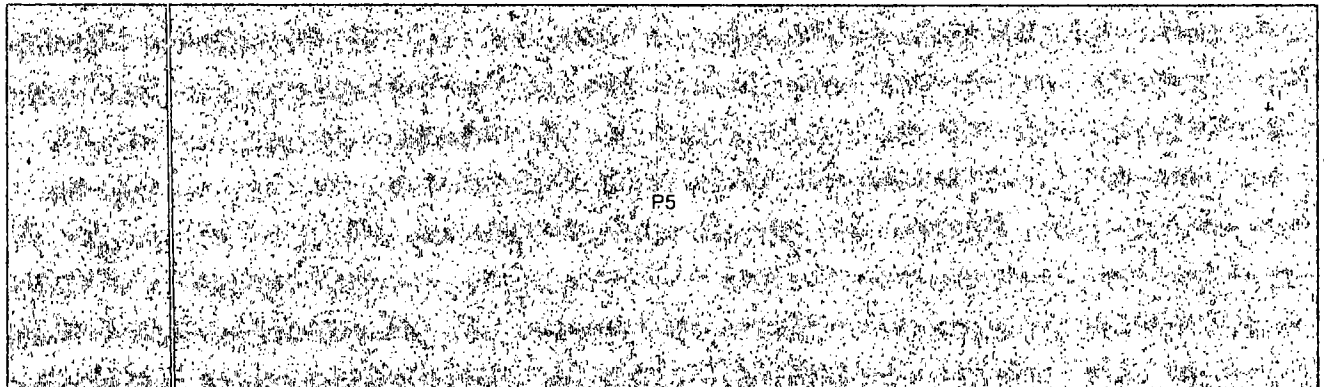
Experts would brief you and the group on what is being done in prevention at the local level and offer thoughts on what needs a national campaign might address. You would speak to the seriousness of the problem -- with its linkages to the debilitating cycle of poverty and welfare dependency -- and exhort the group to come together to combat this major threat to America's youth.

(2) Organizational Meeting

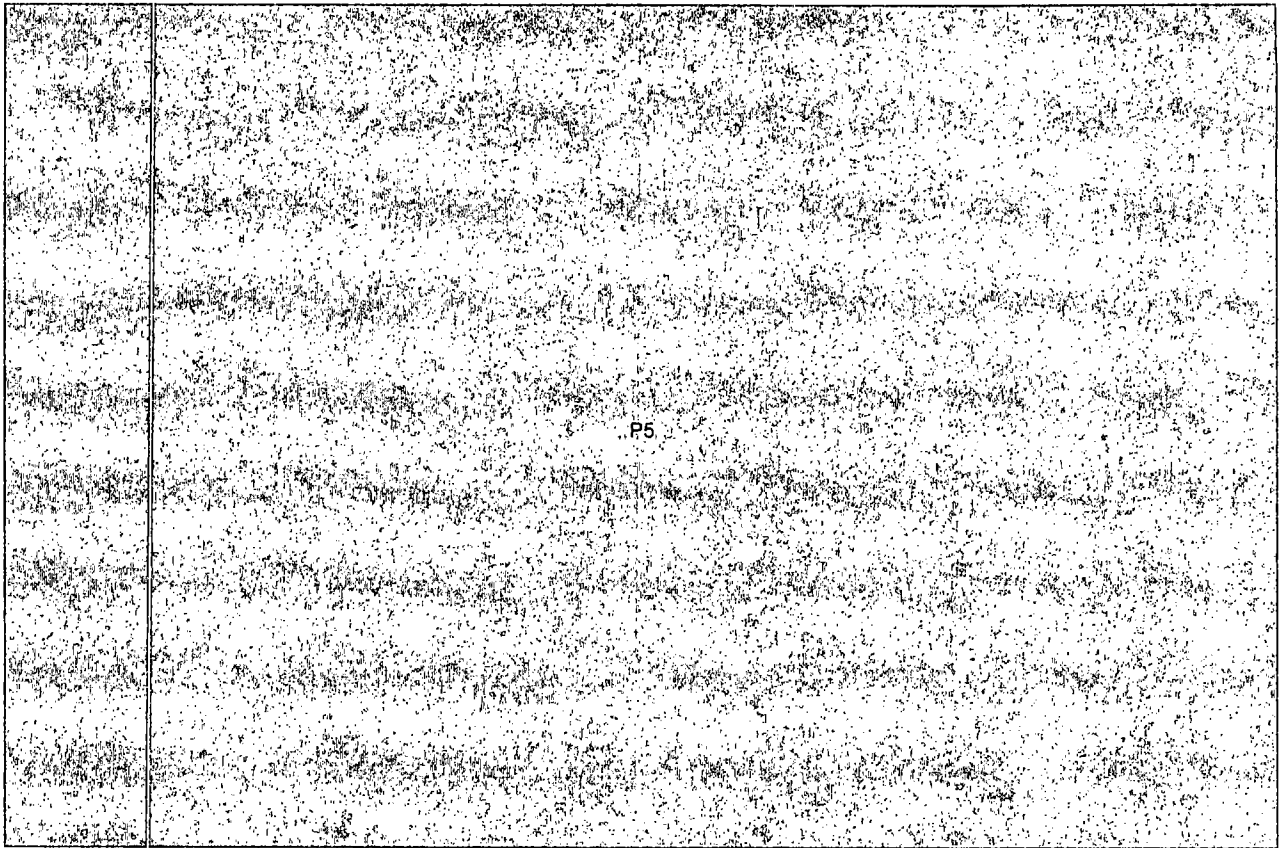
One of the participants in the White House meeting (ideally, the head of a major foundation) would agree in advance to host a follow-up event for the group of 15 and other interested individuals. This event would be a planning session for launching the envisioned private-sector organization.

(3) Launch

The new entity would be established by the end of the year. Foundations and/or private individuals would provide start-up funding. You would be present for the launch.



100467



DECISIONS REQUESTED

- Please indicate if you approve of the proposed plan of action for the teen pregnancy initiative:

_____ YES _____ NO

- Below is a preliminary list of invitees for the suggested White House meeting on teen pregnancy. Our intention is to have no more than 25 people at the event. Please review the list, and edit as desired. Please also indicate names of any other individuals you would like to invite.

Spiritual Voice

Andrew Young

Sister Mary Rose, Covenant House, NY

Entertainment

Oprah Winfrey

Visible Republicans

John Danforth

Anne McLaughlin, former Labor Secretary

Thomas Kean, President of Drew University

Public Health Leaders

C. Everett Koop

Henry Foster

Corporate Leaders/Fundraisers

John Pepper, Procter & Gamble

Sharon (Mrs. Warren) Buffett

Linda Wachner, Warnaco Inc.

A CEO member of the Mid-South Foundation

Community Practitioners

Marion Howard, Emory University, Atlanta

Michael Carrera, Children's Aid Society, NY

Elayne (Mrs. William) Bennett, BestFriends, DC

Academics

Kris Moore, ChildTrends, Inc.

Genie Rosoff, Guttmacher Institute

Doug Besharov, American Enterprise Institute

Communications

Charlotte Beres, Ogilvy & Mather

Jay Winston, Harvard School of Public Health

Foundation Executives

Angela Blackwell, Rockefeller Foundation

David Hamburg, Carnegie Foundation

Susan Beresford, Ford Foundation

Doug Nelson, Casey Foundation

Core Organizing Group

Jody Greenstone

Belle Sawhill, Urban Institute

Bill Galston

Sarah Brown, Institute of Medicine

Administration Participants

Donna Shalala

Carol Rasco

Alexis Herman

- Please indicate here names to be added to the list:

THE WHITE HOUSE
WASHINGTON

February 3, 1995

MEMORANDUM FOR JANET ABRAMS

FROM: Ann Walker

RE: The President's Statements on Teen Pregnancy

State of the Union Address, January 24, 1995

"I have sent Congress a plan to target schools all over the country with anti-pregnancy programs that work. But government can only do so much. Tonight, I call on parents and leaders all across this country to join together in a national campaign against teen pregnancy to make a difference. We can do this and we must."

"We should promote responsibility by requiring young mothers to live at home with their parents or in other supervised settings, by requiring them to finish school, but we shouldn't put them and their children out on the street."

Message to Congress Transmitting the "Work and Responsibility Act of 1994" June 21, 1994

"Preventing teen pregnancy and out-of-wedlock births is a critical part of welfare reform...Our prevention approach includes a national campaign against teen pregnancy and a national clearinghouse on teen pregnancy prevention. Roughly 1,000 middle and high schools in disadvantaged areas will receive grants to develop innovative teen pregnancy prevention programs."

Remarks in a Town Meeting
Charlotte, North Carolina
April 5, 1994

Q. "Due to the rising teen pregnancy, do you plan to increase the amount of sex education given in schools?"

"I think we should. It is largely a decision to be made at the local school district level. But I have worked on this problem for a long time; when I was a Governor, I worked on it. And I can tell you what I've seen from own experience works -- what I believe works."

**President Clinton Speaks to Students of
Kramer Junior High School
Washington, D.C.
February 4, 1994**

Q. "Good morning, Mr. President. Since family life has been breaking down for the last 30 years, what can my generation do to restore family values?"

"The first thing you can do is make up your mind you're not going to have a baby till you're old enough to take care of it and until you're married. I mean, that's the most important thing...Well, we spend all this time -- now I'm trying to figure out how to help people get off welfare. Good people who are trapped on welfare, who hate it, who don't want to be on it. And I've got some ideas and I've learned a lot from people who are on welfare about it, but one big problem is that people get on it because they start having children when they are children. So that's the first thing.

The second thing that you ought to do is something you can't do alone, and that is that we need to organize, starting about this age, young men to start talking among each other about what their responsibilities are, and that they shouldn't, they should not go out and father these kids when they're not prepared to marry the mothers, they're not prepared to take responsibility for the children, and they're not even able to take responsibility for themselves. This is not a sport, this a solemn responsibility. Look, it's hard -- then, once you get married people have to realize they're going to have to ride through some tough times to keep the family together. There is no such thing as a trouble-free family. There's no such thing as a family where fights never occur, where differences never happen, where some days you think it wouldn't be easier to quit than to go on. There is no such family.

So the third thing we should be doing when young people are young is to say "Look, the family is the most wonderful institution in society, but it's a human thing, which means it's full of fault, too." And you need to think about it. And when you make a commitment to it, you need to do everything you can to hang in there with it all the way because it makes life much more meaningful. Life is lonely enough as it is. And if you have a family and you have people that are helping you, it makes a huge difference and it makes life better. And I'll tell you, until we decide this is a -- this is a big cultural thing. We've got to make a decision. Every one of you have to make it. Is it right or wrong if you're a boy to get some girl pregnant and then forget about it? I think it's wrong. I think it's not only wrong the them, I think it's wrong for you. It's something you pay for the rest of your life. You carry that in the back of your head: somewhere there's some child out there you didn't take care of who's in terrible shape because of something you didn't do. And if you're a young girl, you've got to think, being a mother is still the most important thing in society. It is the most important thing that any person can do. But when you do it, you ought to do it when it's right: when it's right for you, when it's right for the child, and when you can do it right. And we just have to make a decision: if you don't want -- if you really want to rebuild the families, then people have to decide "I'm not going to have a baby until I'm married, I'm not going to bring a baby into the world I can't take care of, and I'm not going to turn around and walk away when I do it. I'm going to take responsibility for what I do."

Governor Bill Clinton
Education Reform Address to AFT Delegates
Opening Remarks and Introduction by Al Schanker
August 12, 1992

"And one other thing I'd like to say about the schools. Our children today are under more threat and more temptation and more duress than any generation of children before them. And some of the things are a matter of life or death. There have been a number of studies in the last few years which have shown that youthful sexual activity is not measurably greater in the United States than European countries but our teen pregnancy rate is twice as high."

Family Values Address
Governor Bill Clinton
Cleveland City Club Cleveland, Ohio
May 21, 1992

"Over the last 12 years, those efforts have evolved into initiatives to lower the infant mortality rate through expanded maternal and child health services. To reduce teen pregnancy through aggressive and often controversial but value-based sex education efforts. To enhance child care for working families through an innovative voucher system. To reduce long-term welfare dependence by aggressively promoting more education, and training, and child care, and medical coverage for the children of welfare families, then requiring parents to take available work."

"Sixth and lastly, I want to ensure that American families and individuals make the best personal decisions with their life with a full sense of personal responsibility and concern for the consequences of their behavior. That means letting teens know that it is wrong for children to have children, and also providing them with the education about how to prevent that. In Arkansas, my nationally renowned health director, Dr. Joycelyn Elders and I, fought for school-based health clinics and sex education. It wasn't popular and it still isn't easy, but with teen pregnancy and AIDS claiming more and more of our young people, it is now a matter of life and death."

Remarks by Governor Bill Clinton
Face-to-Face with Bill Clinton
Dallas, TX
August 25, 1992

"As president, I would emphasize research and development more. I would emphasize the clinical aspects you discussed more. And I would have an aggressive outreach effort in the public schools and in the work places of America. I have strongly supported public clinics in the schools of my state. They've been very controversial. We've tried to use them to reduce teen pregnancy and to protect children against sexually transmitted and other diseases, including AIDS. I think we need to invest more money in that area and much more money in research and development."

Governor Bill Clinton
Democratic Leadership Council
New Orleans, Louisiana
May 2, 1992

"We pay when we stick our heads in the sand instead of reaching out to these young children. We have the highest teen pregnancy rate, the highest low-birth weight rate, the highest explosion of AIDS of any advanced country in the world. We will all pay for it because we refuse to face the underlying hard truth and go after these problems. We all pay when we are divided."

THE WHITE HOUSE

WASHINGTON

May 4, 1995

MEMORANDUM FOR:

Jeremy 218 A
THE FIRST LADY
MAGGIE WILLIAMS
MELANNE VERVEER

FROM:

BILL GALSTON WA9
JANET ABRAMS

SUBJECT:

ADMINISTRATION INITIATIVES IN TEEN
PREGNANCY PREVENTION

Since the State of the Union, efforts have been underway to create a national voluntary organization to serve as a focal-point for efforts to reduce teen pregnancy. As you have noted, it is important that this initiative be presented and perceived as a private-sector partner for administration initiatives. To that end, we have assembled summaries of the range of administration policies that contribute to reducing teen pregnancy. They include:

- o a number of service and research programs within the Department of Health and Human Services
- o programs across several agencies to promote youth development and address various risk factors associated with teen pregnancy
- o current and proposed welfare reform measures to provide young men and women with incentives to delay parenthood until they are married and able to support their children
- o a comprehensive attack on background economic and social factors contributing to rising teen pregnancy rates, including poverty, unequal educational opportunity, and disinvestment in distressed urban and rural communities

We attach first drafts of background documents on each of these categories. Suitably refined, these documents could be made public, or used as the basis of administration statements, when the new voluntary organization is announced. This approach would add substance and credibility to our overall message of public/private partnership to combat teen pregnancy.

Department of Health and Human Services Efforts in Adolescent Pregnancy Prevention

Numerous offices and agencies across the Department have programs that address the issue of adolescent pregnancy prevention, including repeat pregnancies. Only a few focus specifically on teen pregnancy. Given that the multiple problems adolescents face are often interrelated, the specific problems that other programs emphasize (i.e., substance abuse, education, etc.) are also related to adolescent pregnancy prevention. Below is a brief summary of some of these efforts. This list is not meant to be a comprehensive list, but one that demonstrates the types of activities occurring in the Department.

- Title X is the primary Federal grant program focused solely on family planning and reproductive health. Enacted in 1970 to provide comprehensive family planning services to all persons who desired them, the statute was amended in 1978 to expressly state that services to adolescents were mandated. Title X provides funding to 4,000 clinics nationwide that serve more than four million clients each year—approximately 30 percent of Title X clients are adolescents.
- Title XX is the only Federal grant program focused exclusively on the issues of adolescent sexuality, pregnancy and childbearing. This program funds demonstration and research projects that address the problems of adolescent sexual behavior and pregnancy. While the focus of the adolescent pregnancy prevention projects is to encourage abstinence from sexual activity, it is recognized that many adolescents are already sexually active—or will become sexually active—and thus, projects are encouraged to provide education about contraceptive methods and their role in reducing the risk of unintended pregnancy and STD/HIV infection.
- Through the MCH Services Block Grant and Special Projects of Regional and National Significance (SPRANS) funding, adolescent health has become a major component of each state's Maternal and Child Health program. Forty-three states and the District of Columbia have adolescent health coordinators/directors. The Maternal and Child Health Bureau has sponsored annual meetings since 1988 for training, networking, and resource sharing for these adolescent health coordinators/directors. The Bureau recently completed the State Adolescent Health Coordinator 1995 Profile of Adolescent Pregnancy Prevention which summarizes the assessment, policy development, and assurance activities found in 35 states.

A significant number of Bureau funded adolescent projects focus on adolescent pregnancy prevention, many focus on minority adolescents and adolescents with special health care needs. Currently the Bureau funds approximately 30 special projects which address adolescent pregnancy prevention.

The Bureau also funds MCHB-Block Grant Toll-Free numbers in 52 states which serve as a means of providing access to information regarding pregnancy prevention.

- The Centers for Disease Control and Prevention Division of Adolescent and School Health funds health education to schools in order to decrease the risk behaviors that cause high rates of morbidity and mortality through sexually transmitted diseases, drug

and alcohol abuse, tobacco use, unintentional and intentional injuries, diet and physical inactivity. These high risk behaviors are associated with increased risk of adolescent pregnancy.

- The Centers for Disease Control and Prevention Division of Reproductive Health and Division of Adolescent and School Health received approximately \$4.5 million in FY 1995 to develop a teen pregnancy prevention initiative. These funds are being used to improve teen pregnancy surveillance, to support the development of a national strategy for teen pregnancy prevention and to assist local communities in designing, implementing and evaluating Community Demonstration Programs for Teen Pregnancy Prevention. Surveillance activities include the enhancement of state-based vital records systems to provide the information for the calculation of teen pregnancy rates and the development of an ongoing system for routinely generating national and state pregnancy reports for teens. The national strategy is designed to enlist the assistance of various public and private partners in national communication and programmatic efforts necessary to positively influence teen decisions regarding abstinence, use of contraceptives and pregnancy. Approximately 12 Community Demonstration Programs will be funded to develop plans for implementing innovative, comprehensive, community-based interventions to reduce teen pregnancy. Eligible communities must have an existing community partnership, experience in dealing with prevention of teen pregnancy, a base population of at least 200,000 and a teen birth rate at least 1.5 times as high as the national average. Program evaluation assistance will also be provided to communities so that lessons learned by these programs can be used in support of other community-based efforts throughout the country to prevent teen pregnancy and related problems. This initiative is being developed and implemented in strong partnership with the Office of Population Affairs (OPA).
- The Administration on Children and Families (ACF) funds a number of programs that address a wide range of risk factors related to adolescent pregnancy and support youth development activities. These include runaway and homeless youth programs, Community Schools, Empowerment Zones and Enterprise Communities (EZ-EC), and National Youth Sports Program. In addition, the Comprehensive Child Development Program (CCDP) funds grantees to conduct a range of activities from providing health information to classes on self-esteem.
- In the fall of 1992, National Institute for Child Health and Human Development (NICHD) began the implementation of a set of eight cooperative agreements to develop, implement and evaluate coordinated programs of community based health behavior interventions designed to lower the unacceptably high rates of morbidity and mortality among minority youth. These projects are funded through the National Institutes of Health Office of Research on Minority Health.

The projects focus on strategies for decreasing violence-related injuries and deaths, sexually transmitted diseases (STDs) and unwanted or unintended pregnancies in minority youth ages 10-18. A few include strategies to help young people resist other health compromising behaviors such as smoking, alcohol and drug use. Several projects are collaborations between minority and majority institutions, and all include

community-based groups and organizations in both the design and the implementation phases. They are longitudinal, comprising at least two years of intervention and follow-up. They provide an interesting geographic range. Six projects will focus on programs for Black, Native American or Hispanic youth. The University of Washington project will be working in the multi-ethnic communities of Seattle. Three will have sites in a wide range of neighborhood or community organizations and the other four will provide at least some of the programs in local schools.

- The Substance and Mental Health Services Administration (SAMHSA) has sponsored several initiatives and campaigns targeted toward reducing teenage pregnancy. The Center for Substance Abuse Prevention funds many projects including demonstrations for pregnancy, postpartum women and their infants. Other CSAP demonstrations target female high risk adolescents to prevent, reduce, and delay the use of alcohol, tobacco, and other drugs for these adolescents.

In FY 1995 CSAP will let a contract to support a women's education campaign with a multi-faceted approach to reach female and male adolescents and their families who are believed to have significant gaps in their knowledge about the risks of using alcohol and other drugs (AOD) during pregnancy, the risks of becoming pregnant, and other associated risks such as HIV/AIDS, violence and school performance. The campaign will focus on changing knowledge and attitudes to reduce risks of alcohol and drug use and intent to use during pregnancy and changing social norms regarding use of alcohol and drugs and becoming pregnant.

OTHER YOUTH DEVELOPMENT PROGRAMS

Department of Education

- Drug-free schools and communities programs address risk factors related to teen pregnancy.
- Title I of the Elementary and Secondary Education Act allocates funds to schools with educationally disadvantaged students. A new provision in the law permits school districts to use up to 5% of their ESEA funding for coordinated services projects for youth.
- The Department funds postsecondary education outreach and student support services to encourage individuals from disadvantaged backgrounds to enter and complete college.

Department of Labor

- The New Chance Program funds demonstration grants aimed at increasing the long-term employability of teenage mothers.
- The Youth Fair Chance Program supports grants to facilitate the coordination of comprehensive services, including education, job training, employment, and related social services to youth.
- The Job Training and Partnership Act funds programs which support youth in successfully attaining and retaining employment. Services include employment training, vocational counseling, literacy and basic skills training, work experience, and social support and health services.
- The Young Unwed Fathers Project funds demonstrations aimed at improving the long-term employability and parenting capabilities of teenage and other young fathers.

Department of Agriculture

- 4-H Youth Development programs assist young people in acquiring knowledge and developing life skills that will enable them to become self-directing, productive members of society.
- The Youth at Risk Initiative supports school-age child care programs, reading and science literacy programs, and coalitions for high-risk youth.
- The Farmers Home Administration makes Youth Project Loans to rural youth to support income-producing projects.

Department of Interior

- The Department of the Interior funds Youth Conservation Corps, a summer employment program for youth 15-18 and additional career development and job corps programs that provide educational and vocational training, work experience, personal and career counseling, and health care services for youth and young adults. The Bureau of Indian Affairs supports programs aimed at high-risk youth in the areas of alcohol and other substance abuse prevention.

Department of Housing and Urban Development

- Youthbuild Opportunities Program provides job training and work experience for economically disadvantaged youth; a Youth Sports Program that provides sports, cultural, recreational, and educational activities for youth who are residents in public housing. They also funds a Public and Indian Housing Drug Elimination Program.

Department of Justice

- The Office of Juvenile Justice and Delinquency Prevention funds programs assisting criminally at-risk youth. Service areas include substance abuse, literacy, parental involvement, and mentoring.

Department of Defense

- The Department of Defense supports activities for children of military families. Prevention programs focus on substance abuse, conflict resolution, teen pregnancy, self-esteem, recreation, job skills, and physical fitness.

WELFARE REFORM

In 1992, President Clinton made the groundbreaking commitment to "end welfare as we know it." The President's reform plan introduced in 1994 included several measures to motivate young people to delay parenthood until they are married and able to provide for their children financially:

- Teen mothers on welfare would be required to live at home with their parents, stay in school, identify the father, and move into employment within a limited period of time.
- Tough new child support laws would be strictly enforced, so that prospective teen fathers would know they had to provide child support for the next 18 years. The Clinton plan would increase child support collections by \$24 billion over the next decade. (In 1993, the Administration collected a record \$9 billion in child support, a 12% increase over the previous year.)
- States would have the flexibility to try innovative ways to encourage responsible behavior, such as rewarding teen recipients who make progress in school and sanctioning those who drop out.

The Clinton plan also included provisions to support communities in their teen pregnancy prevention efforts:

- Grants would be provided to school-based teen pregnancy prevention programs in high-risk areas of the country.
- A national teen pregnancy clearinghouse would be established to disseminate information on model prevention programs.

LIFELONG LEARNING

"We can do all these things -- put our economic house in order, expand world trade, target the jobs of the future, guarantee equal opportunity -- but if we're honest, we'll admit that this strategy still cannot work unless we also give our people the education, training, and skills they need to seize the opportunities of tomorrow."

President Clinton
State of the Union Address
January 25, 1994

Pre-School and Parenting, so that every child starts school ready to learn.

Reformed Head Start to create tough new quality standards, reduce child-to-teacher ratios, expand services, and create the new Early Head Start for infants and toddlers.

Expanded Head Start to enable over 130,000 more children to participate in 1995 than in 1993 -- with a proposed increase of 31,500 for 1996.

Introduced the new Early Head Start for infants and toddlers.

Goals 2000 and School Improvement, to enable our K-12 students to pursue challenging academic standards -- and meet them.

Signed the Goals 2000: Educate America Act, including the Safe Schools Act, and the Improving America's Schools Act, to provide top-down support for bottom-up reform.

Empowered teachers, principals, and parents to change the way schools work -- with cutting-edge technology, challenging academic standards for what students should know, renewed commitment to involving parents in schools, and new, flexible partnerships with states and communities -- cutting red tape so that communities can tailor their schools to meet their children's needs.

Kicked off anti-crime initiative inside schools to make sure students can learn in safety, no fear.

School to Work Opportunities, to prepare all young people for further education and first jobs that lead to high-wage, high-skill careers.

Signed the School-to-Work Opportunities Act to support efforts in all 50 states to create and reform school-to-work systems. The Act sunsets in 2001 -- a limited national catalyst for local initiatives.

Every school-to-work initiative will enable all participants to develop high-level academic and technical skills, obtain a high school diploma and an occupational skills

certificate, and move toward further training and first jobs that lead to high-skill, high-wage careers.

National Service, so young people have a chance to help their communities -- and help pay for college, too.

- Signed the National and Community Service Trust Act, creating AmeriCorps, the new national service initiative.
- AmeriCorps gives young people the chance to spend a year or more in tough, direct service making our people safer, smarter, and healthier -- while earning an award of nearly \$5000 per year to pay for college or job training.
- AmeriCorps already engages 20,000 Americans as AmeriCorps Members in more than 350 community efforts around the country.
- AmeriCorps relies on the initiative of communities and the support of states to change communities from the inside out -- not with bureaucracy, but with citizens helping each other and building voluntary organizations -- getting things done.
- College Loans, so that every American is able to borrow the money to pay for college and pay it back on an affordable schedule.
- Signed into law the biggest change in student loans ever -- a new direct lending program which takes the middlemen out of the process.
- Will enable any student to get loans for college or job training and repay them in one of four ways, including "pay-as-you-can" repayments as a small percentage of income over time. Students can change repayment plans throughout the life of their loans, and "pay-as-you-can" gives them more freedom to choose careers without repayments as a dominant concern.
- Dramatically cut back red tape, making it faster and easier for students to get the money to pay for college.
- Will save taxpayers more than \$6 billion by the year 2000.

Training and Reemployment, so Americans can continuously learn to obtain better jobs and better wages.

- President Clinton has proposed comprehensive reforms for Congress to enact.

REWARDING WORK FOR WORKING FAMILIES

Earned Income Tax Credit

- The 1993 expansion gives 15 million working families a tax cut.
- The credit returns a total of \$21 billion to working families making up to \$28,500 per year.
- When fully phased in, the EITC will offer a maximum credit of about \$3,560 for families with two or more children, more than double the maximum basic credit of \$1,511 in 1993.

Making Work Pay -- The Minimum Wage

- The President has proposed increasing the minimum wage from \$4.25 to \$5.15 over two years through two 45-cent increases.
- The proposal would offer 11 million workers a raise and provide a full-time, year-round worker a raise of \$1800 a year -- as much as the average family spends on groceries in over 7 months.
- Over a dozen empirical studies show a proposal like the President's can increase wages without costing jobs.

Family and Medical Leave Act

- In February 1993, President Clinton signed the Family and Medical Leave Act, mandating 12 weeks of unpaid, job-guaranteed leave for childbirth, adoption, or illness of an employee or family member.
- The Department of the Treasury estimates that 42.5 million American workers are covered under the new legislation.
- The General Accounting Office estimates that up to 2.54 million workers were likely to need unpaid leave in 1993.

COMMUNITY EMPOWERMENT

"For a long time the government really thought that if we just had a solution designed here in Washington that was properly funded, we could solve the problems of every community in the country. Well, we learned that that wasn't true. But we've also learned ... that neglect is not a very good policy either. (There) needs to be a new partnership between Washington and the communities and the individuals of this country, and there needs to be a way of doing business in which we try to create the conditions in which people can seize opportunities for themselves."

President Clinton
January 17, 1994

Empowerment Zones and Enterprise Communities

- In 1993, President Clinton's Empowerment Zones and Enterprise Communities ("EZ/EC") legislation passed Congress, offering \$2.5 billion in tax incentives and \$1 billion in flexible block grants to more than 100 communities. The initiative is designed to create jobs and help communities to rebuild themselves from the inside out.
- 526 communities around the country engaged in long planning processes and submitted EZ/EC applications to the Administration.
- After a lengthy and thorough review process, on December 21, 1994, President Clinton and Vice President Gore announced nine EZs and two supplemental urban zones, along with the 95 ECs four of which received enhanced grants.

The Community Development Banking and Financial Institutions Act

- In 1994, the President's Community Development Banking and Financial Institutions Act became law, the first step to fulfilling his pledge to create a national network of community development financial institutions (CDFIs). In 1995, Congress appropriated \$125 million for the initiative, and the Administration has requested an additional \$375 million over the next four years.
- The Act creates a fund to provide equity investments, deposits, grants, loans, technical and training assistance to CDFIs that are starting up or expanding.
- When fully leveraged, the Act could create about \$2 billion in new investments by homeowners, businesspeople, and others who are building up low-and moderate-income communities.
- The Act will provide as many as 40,000 loans to entrepreneurs, expanding businesses, homeowners, and others who might not otherwise be able to obtain credit.

*

① Has was Partnership put together initially
and annual report.

② NAMES: - JOE CALIFANO

- OPRAH WINFREY
- BILL WALSH - Community Coalition Bldg.
- JEANNE ROSOFF
- LOUIS SULLIVAN
- DAVID HANDBERG
- MARGARET BESE DONITZ - N.A.
- WILSON MANHILLER - N.A.
- BOB BLUM - U Mass - MD
- LORRAINE KLEINMAN - Yale / Robinson

We'll be
done by
3:30,
right?

Next to Surgeon General

TEEN PREGNANCY

(7/03 update)

~~Do~~
Do something nice for O/M
Shellen Lazzarus
scheduling request

1. Private Entity

- Call Belle to ask her to host meeting on Thursday 7/6
- If not, Maggie and Carol to host meeting
- By Wed 7/5, Janet and Jody to produce list and draft letter of invite
- By Fri 7/7, call Foster re: his role
- Meanwhile, Jody keep doing her outreach

o memo to POTUS
w/ invite letter
w/ plan
w/ risk
Monday we expect

- call to Hamburg
- call Belle, Jodie,

• FOUNDATION calls

2. Money for PSA

- Still unclear
- Memo to CHR, Rahm on 6/30 asking them to call Shalala
- Last agreement, HHS to make sure letter of intent done by 7/15
- As of 6/30 no one at HHS able to assure me of that

3. Fulfillment

- Brochure: HHS drafting; will circulate by Friday 7/7
- 800 number to be contracted by Ad Council; HHS, Ad Council, WH to talk by 7/7 about details

4. PSA

- HHS comments to O/M by July 6
- Review the concepts with teens on July 11
- Final summary of comments to O/M on July 12
- Letter of intent - July 15

* call KEVIN

* call EVA

* TM letters to Mecklen



Sally McDonough 331-9153 x146

Eva Kasten x147

TEEN PREGNANCY INITIATIVE

ISSUE 1: How to move forward with the creation of the National Campaign Against Teen Pregnancy called for by the President in the State of the Union?

Objective: Creation of an independent, private-sector organization dedicated to reducing the incidence of teenage pregnancy. The organization would be bi-partisan, with a board made up of prominent individuals from the business, religious, media, entertainment, civic, health care, education, and foundation communities.

What the Organization would do: The new organization would work to focus national attention on the problem of teen pregnancy and support community prevention efforts across the nation. Likely activities would include:

- spearheading a grassroots campaign to make teen pregnancy prevention a priority in communities throughout the U.S.
- establishing a clearinghouse of information on prevention efforts (There is now no central source of data on who's doing what in teen pregnancy.)
- supporting the evaluation of promising prevention strategies (A lot is going on in the field, but very few programs have been rigorously evaluated.)
- providing technical assistance to communities seeking to start programs
- conducting communications outreach on the issue

RECOMMENDED PLAN OF ACTION:

- (1) The President convenes a meeting with 10-15 individuals who have been identified as potential founders of the envisioned organization, plus several experts in the field. (early August or early September -- Please see attached scheduling request.)
- (2) One of the participants (ideally, the head of a major foundation) agrees (in advance) to host a follow-up the next month for attendees and others interested in starting such an organization. (Late September)
- (3) New organization launched by end of year. Foundations and/or private individuals provide start-up funding. Belle Sawhill and Sarah Brown have agreed to take lead on staff work (i.e., to be Executive Director).

Next Steps

- | | |
|------------|--|
| By July 14 | Provide President with list of invitees, draft invitation letter, draft agenda for meeting, and brief outline of organization's mission. |
| | Secure commitment from foundation to host September follow-up. |
| By July 21 | Presidential sign-off on concept, letter, invites; time scheduled on President's calendar |
| July 24 | Mail out invitations/background materials to invitees. |

Withdrawal/Redaction Marker

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
005. paper	re: Teen Pregnancy Initiative (partial) (1 page)	n.d.	P5

COLLECTION:

Clinton Presidential Records
Domestic Policy Council
Lyn Hogan
OA/Box Number: 11027

FOLDER TITLE:

Teen Pregnancy: National Campaign 2 [2]

2010-1083-S

rc451

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

- P1 National Security Classified Information [(a)(1) of the PRA]
- P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
- P3 Release would violate a Federal statute [(a)(3) of the PRA]
- P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
- P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [(a)(5) of the PRA]
- P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

C. Closed in accordance with restrictions contained in donor's deed of gift.

PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).

RR. Document will be reviewed upon request.

Freedom of Information Act - [5 U.S.C. 552(b)]

- b(1) National security classified information [(b)(1) of the FOIA]
- b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
- b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
- b(4) Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
- b(6) Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
- b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
- b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
- b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]



[005]

Next Steps

- | | |
|---------|---|
| ASAP | Sign-off on above recommendation or alternative. |
| July 19 | Final negotiation with Dr. Foster. Ethics/Hatch briefing for Dr. Foster. |
| | Announcement of Dr. Foster's position possible as soon after July 19 as desirable |

ISSUE 3: Presidential Public Service Announcement on Teen Pregnancy

Background: Plans have been underway for several months to produce a Presidential PSA on teen pregnancy with the Ad Council and Ogilvy & Mather/NYC. The PSA would have the President urging parents and other concerned adults to take action in their communities to help teens choose not to become pregnant. HHS would pay for production costs and the cost of operating an 800-number, which the audience would call to receive an informational brochure.

There have been significant delays in securing funding through HHS. Secretary Shalala has recently expressed reservations about the project. First, she is concerned about negative reaction from the Hill. Several weeks ago, HHS staff informed House and Senate Appropriations Subcommittees about their intention to fund the ad campaign, and initial reception was not enthusiastic. Second, the Secretary wants to make sure that the PSA campaign is not the Administration's only public action on teen pregnancy; she believes it should complement more substantive initiatives, such as creation of the proposed private-sector organization.

If we cannot get a clear commitment for the funds soon, we will be put in a situation where we will either have to cancel the campaign altogether or delay airing of the ads until well into the fall. As each day passes and we move into the campaign season, it becomes less and less likely that media outlets will give the Presidential PSA the exposure it needs to be effective.

RECOMMENDED ACTION

Jeremy Ben-Ami, Janet Abrams, and Debbie Both (First Lady's Office) will meet with Secretary Shalala next week to discuss her concerns. Belle Sawhill and teen pregnancy expert Sarah Brown will also attend.

If, as recommended under Issues 1 & 2 above, a decision is made to plan a Presidential meeting to lay the groundwork for the private-sector campaign and to appoint Dr. Foster as a Senior Advisor to the President, Secretary Shalala may be convinced that sufficient progress is being made on the teen pregnancy front for us to move ahead with the PSA.

A call from the Chief of Staff or other senior White House official to the Secretary is needed to emphasize the importance of prompt action.

SCHEDULE PROPOSAL

Date: 7/12/95

☐ ACCEPT	☐ REGRET	☐ PENDING
---------------------------------	---------------------------------	----------------------------------

TO: Billy Webster
Deputy Assistant to the President
and Director of Scheduling and Advance

FROM:

REQUEST: That President Clinton hold a meeting on the issue of teen pregnancy with prominent individuals from the private sector and experts on adolescent health

PURPOSE: To demonstrate the Administration's commitment to addressing this serious problem; to follow up on the call made in the State of the Union Address for a national campaign against teen pregnancy.

BACKGROUND: In the State of the Union, President Clinton called on "parents and leaders across this country to join together" to help solve "our most serious social problem." Senior Administration staff, working in consultation with experts on teen pregnancy, have proposed the creation of an independent, private-sector organization to conduct a sustained national effort to help stem the tide of children having children.

Likely candidates to be founders of the envisioned organization have been identified. The target list includes prominent individuals from the business, religious, entertainment, media, sports, health care, education, civic, and foundation communities.

The President can help secure the commitment of these individuals by inviting them to the White House for a discussion about teen pregnancy. They will talk about the nature and scope of the problem, prevention efforts currently underway, and opportunities for public-private partnership on the national level.

One of the meeting participants will have agreed in advance to host a larger follow-on meeting a few weeks after the White House visit. The new organization would hopefully be launched this fall.

DATE AND TIME: ASAP

DURATION: 2 hours

LOCATION: White House

PARTICIPANTS: The President
Secretary Donna Shalala
Andrew Young
Sharon Buffett
Belle Sawhill, Urban Institute
Sarah Brown, Institute of Medicine
C. Everett Koop
Sen. Jack Danforth
Oprah Winfrey
Henry Foster
David Hamburg, Carnegie Foundation
Doug Nelson, Annie Casey Foundation
Susan Beresford, Ford Foundation
Elaine Bennett
1-2 corporate CEOs
Kris Moore, ChildTrends, Inc.
Marion Howard, Emory University
Genie Rosoff, Guttmacher Institute
Doug Besharov, American Enterprise Institute

OUTLINE OF EVENT: Teen pregnancy experts would brief President Clinton and the other guests. The group would then discuss the need for sustained leadership on the issue from both the public and private sectors. The President would offer his thoughts on what an independent, private-sector entity could do to support local communities in combatting teen pregnancy.

REMARKS: Yes

MEDIA: To be determined. (Very low-key)

FIRST LADY'S ATTENDANCE: If available

VICE PRESIDENT'S ATTENDANCE: If available

SECOND LADY'S ATTENDANCE: No

RECOMMENDED BY: Maggie Williams, Alexis Herman, and Jeremy Ben-Ami

CONTACT: Janet Abrams, 6-2857

DRAFT LETTER OF INVITATION

The White House

July 21, 1995

Dear _____:

This year in the United States, over 1 million girls will become pregnant before their 20th birthday. Teenage pregnancy -- so often linked to a debilitating cycle of poverty and welfare dependency -- is one of the most serious problems facing our nation.

The federal government can only do so much in addressing this complicated issue. All sectors of our society must come together to help stem the epidemic of children having children.

I would like to invite you to take part in a discussion of opportunities for waging a national campaign against teenage pregnancy. We are calling on a small group of leaders from the business, media, religious, health care, and education communities to contribute their ideas and experience in a meeting at the White House on _____, 1995.

Please join me and key members of the Administration from 2:00pm-4:00pm in the Roosevelt Room. A reception will follow.

I am enclosing for your review the results of a study just completed by the Department of Health and Human Services on adolescent pregnancy. I hope the report will provide useful background for our discussion.

I look forward to working with you to address this serious challenge facing America's youth.

Sincerely,

Bill Clinton

Enclosures