

# Movers and Stayers: Transition in Hot Spot Communities

The Teen Pregnancy Prevention Initiative was funded by grants from The California Wellness Foundation (TCWF). Created in 1992 as an independent, private foundation, TCWF's mission is to improve the health of the people of California by making grants for health promotion, wellness education and disease prevention programs.

The evaluation of the Teen Pregnancy Prevention Initiative is a joint project of Philliber Research Associates; SRI International's Center for Education and Human Services; and the University of California, San Francisco's Institute for Health Policy Studies.

For further information on evaluation results of the Teen Pregnancy Prevention Initiative contact:

Philliber Research Associates  
16 Main Street  
Accord, NY 12404  
(845) 626-2126  
pra@philliberresearch.com

Findings from The California Wellness Foundation  
Teen Pregnancy Prevention Initiative

Prepared by  
Philliber Research Associates  
SRI International – Center for Education & Human Services  
University of California, San Francisco – Institute for Health Policy Studies

Funded by a grant from The California Wellness Foundation

In 1996 The California Wellness Foundation began the \$60 million 10-year Teen Pregnancy Prevention Initiative (TPPI), designed to decrease the incidence of teen pregnancy by increasing the proportion of teens who delay the initiation of sexual activity and/or effectively use contraception. With input from a variety of constituencies, a comprehensive grant making program was designed that included funding for:

- community action;
- public education and policy advocacy;
- professional development and leadership recognition;
- research; and
- substantial evaluation.

Seven California hot spot communities were selected as target communities to reduce teen pregnancy.<sup>1</sup> These communities included neighborhoods of large cities (Hollywood and South Los Angeles), suburban communities (Oceanside and Richmond), and small cities (Indio, Madera and Modesto). Some were in southern California, some in northern California, while the rest were in the Central Valley.

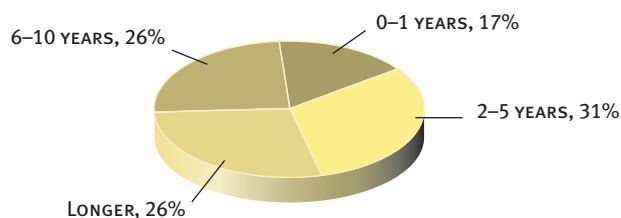
Random samples were drawn of households and pairs of interviewers screened those households to find where adolescents lived. In households with adolescents, a randomly selected adolescent and caregiver (most often a parent) were paid to complete interviews. A total of 2,995 pairs of surveys were completed in 1999 and 1,600 pairs of adolescents and caregivers were interviewed in 2003.

This brief explores stability within the target communities, including:

- the rate that families enter and leave the community;
- demographic differences between movers and stayers;
- risk characteristics of movers and stayers; and
- the implications of moving and staying for community change.

## Moving and Staying

Communities with high rates of teen pregnancy also have high rates of people moving in and out.



## Length of Residence in Community

Based upon data from the 2003 surveys, almost half of the families with adolescents had lived in the community for five years or less. One in six had been in the community not more than a year. This means that a substantial number of the families initially targeted for TPPI efforts in 1999 were gone from the community by 2003 and replaced by newcomers. Only a quarter of the families have been in the community for more than ten years.

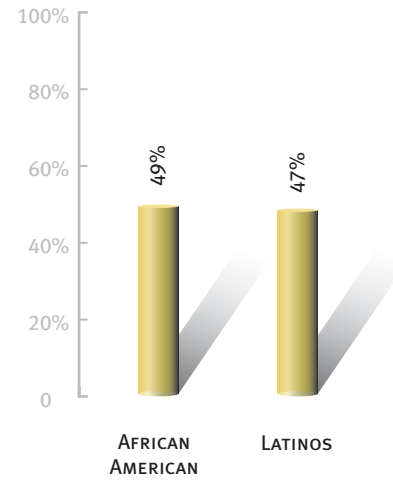
<sup>1</sup> Hot spot communities are the 25% of California ZIP codes that contain the highest rate of births to 15-17 year olds (Jeffrey Gould California Potential Project Areas for Adolescent Pregnancy Prevention Programs UC Berkeley School of Public Health, 1996.)

## Demographic Characteristics of Movers and Stayers

Parents who have moved into the community within the past five years are more likely to be younger and have less education than parents who have lived there longer.

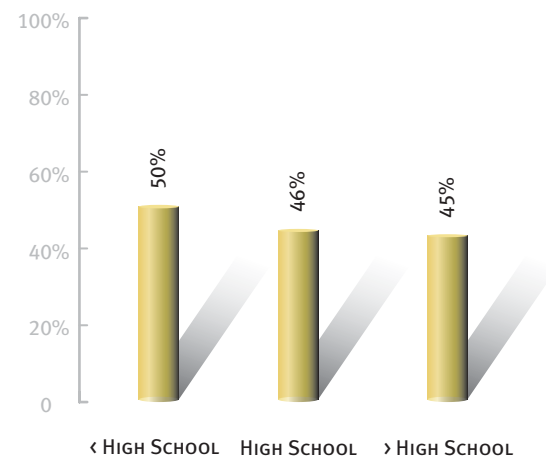
### Percent Living in Community Five Years or Less

Ethnicity was unrelated to how long families had lived in the community. Almost all of the residents were either African-Americans or Latinos (87%). About half of each group had lived in the community five years or less and half had lived there longer.



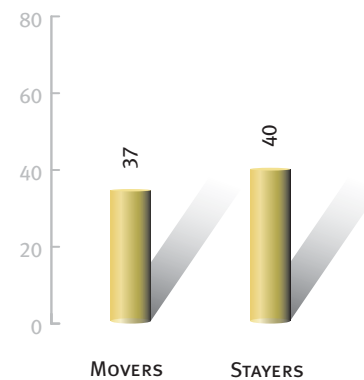
### Percent Living in Community Five Years or Less

On average, parents with more education had lived in the community longer than parents with less. Half of the parents with less than a high school education had lived in the community five years or less while the majority of parents (55%) with more than a high school education had lived in the community longer.



### Average Age of Movers and Stayers

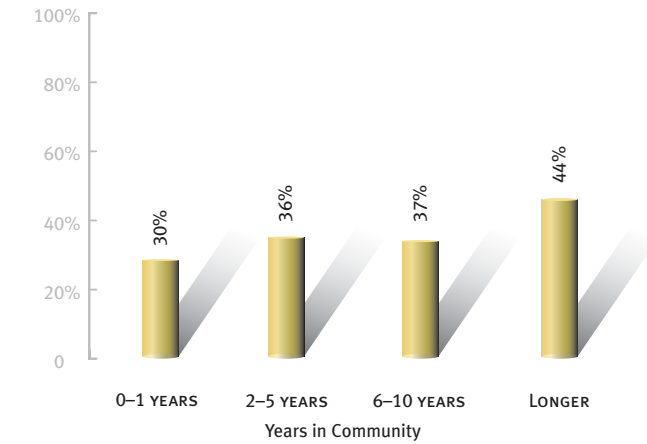
The average age of movers was three years younger than the average age of stayers. Caregivers who have lived in the community five years or less were 37 years old, on average, compared to an average age of 40 among people who had lived in the community more than five years.



## Movers and Stayers Knowledge of Community Resources

Newcomers are less knowledgeable of community resources than are people who have lived there longer.

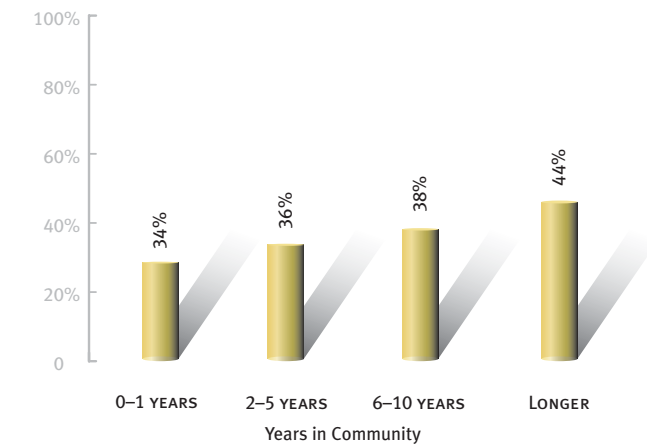
### Parents' Knowledge of Programs by Length of Community Residence



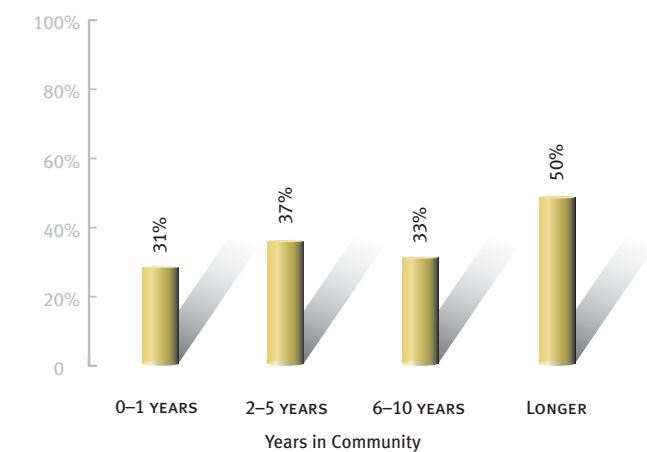
### Know Program to Help Child Get Better Education

The newer parents and their teens were to the community, the less knowledgeable they were about community resources. Compared with parents who had lived in the community for more than ten years, parents who had lived in the community a year or less were:

- a third less likely to know of a place that could help their children get a better education;
- a quarter less likely to know of a place that could help their children get a job or learn skills; and
- almost 40% less likely to know of a place that could help their children choose a career.



### Know Program to Help Child Get Job



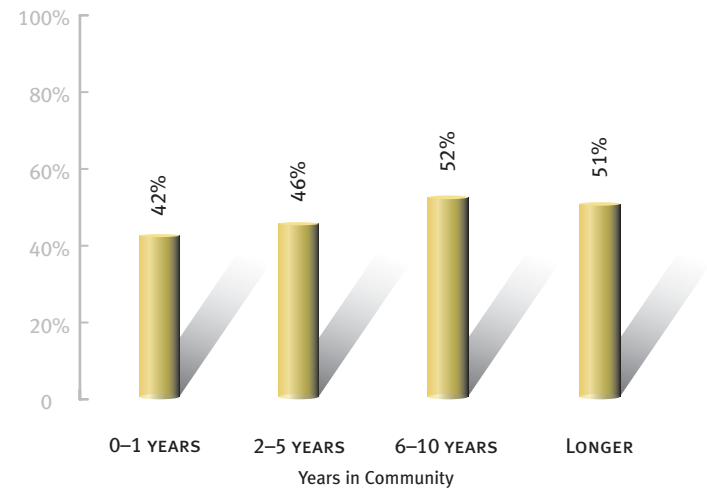
### Know Program to Help Child Choose Career

### Know Program to Help Get Better Education

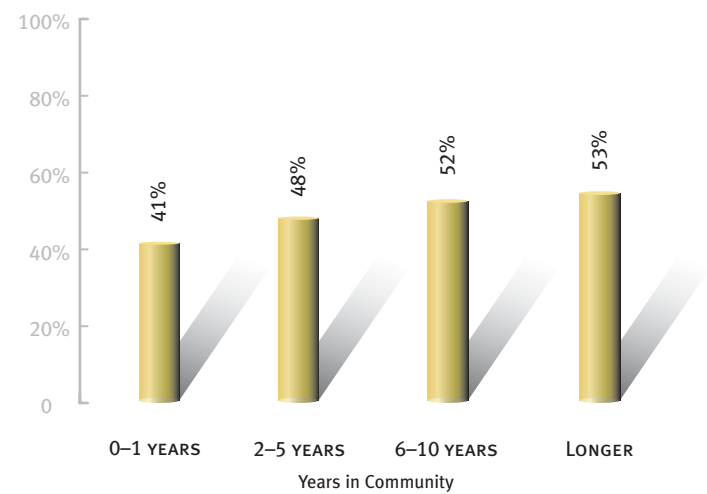
Adolescents who had lived in the community a year or less had deficits similar to their parents. They were:

- a sixth less likely to know of a place that could help them get a better education;
- a quarter less likely to know of a place that could help them get a job or learn skills; and
- a third less likely to know of a place that could help them choose a career.

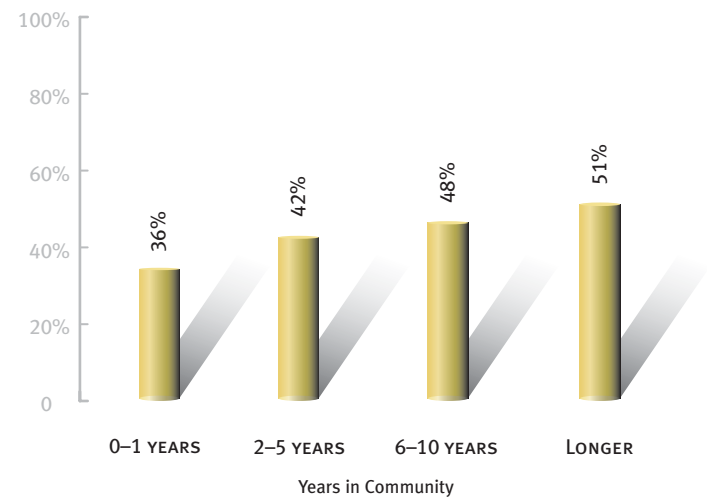
**Adolescents' Knowledge of Programs by Length of Community Residence**



### Know Program to Help Get Job

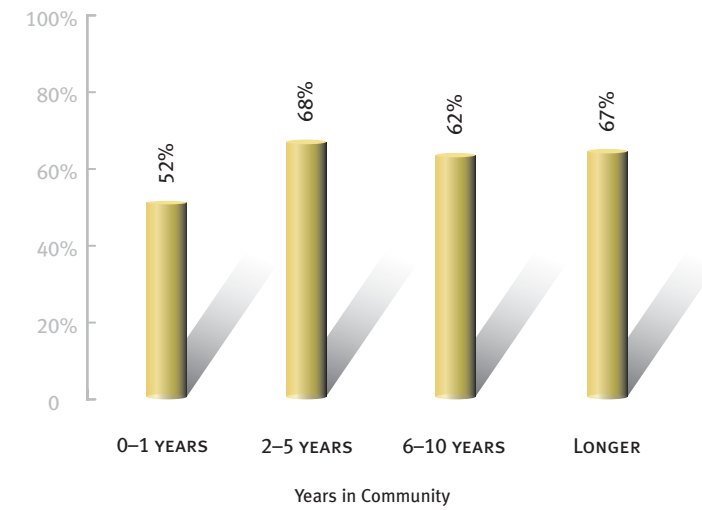


### Know Program to Help Choose Career

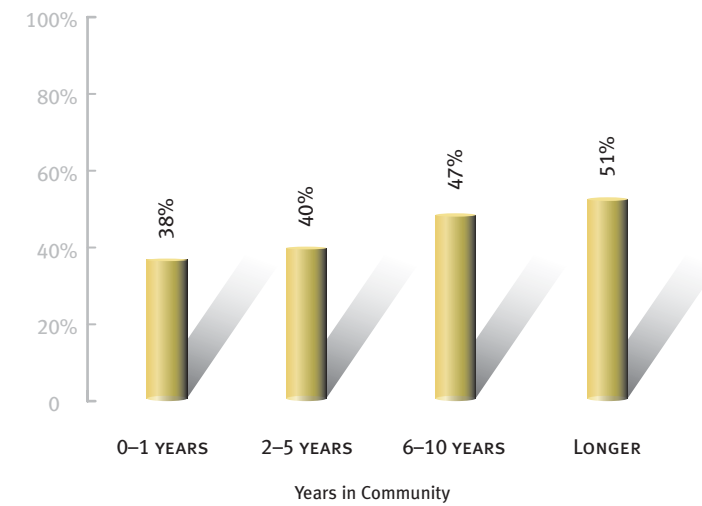


### Parents' Knowledge of Place to Get Contraception

In the area of reproductive health care, parents and adolescents who were new to the community were less likely to know of a place that could help them get contraceptives. Compared to those who had lived in the community more than ten years, both parents and adolescents who were newcomers were a quarter less likely to know of a place that could help adolescents get contraceptives.



### Adolescents' Knowledge of Place to Get Contraception

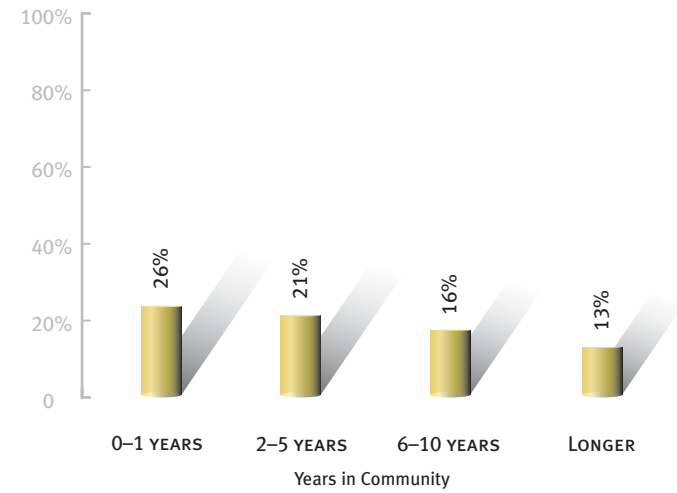


## Adolescent Movers' and Stayers' Risk Behaviors

Adolescents who are new to the community are less likely to attend school and more likely to have unprotected sexual intercourse.

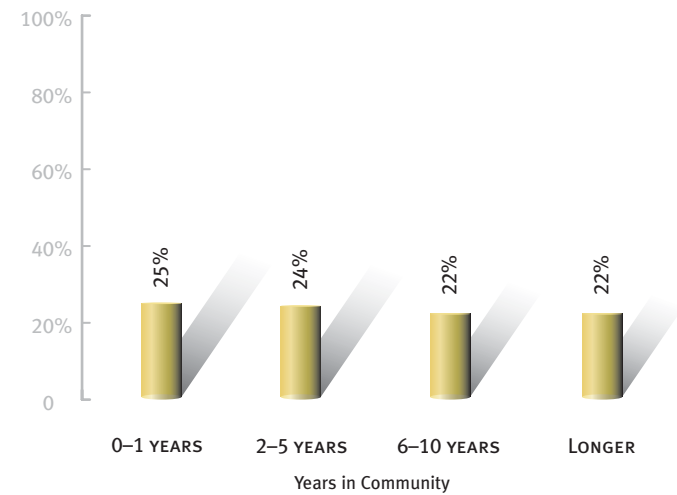
### Not Attending School

Adolescents living in the community less time were less likely to be attending school. Adolescents who had lived in the community a year or less were twice as likely not to be in school than those who had lived in the community more than ten years.



### Ever Had Sex

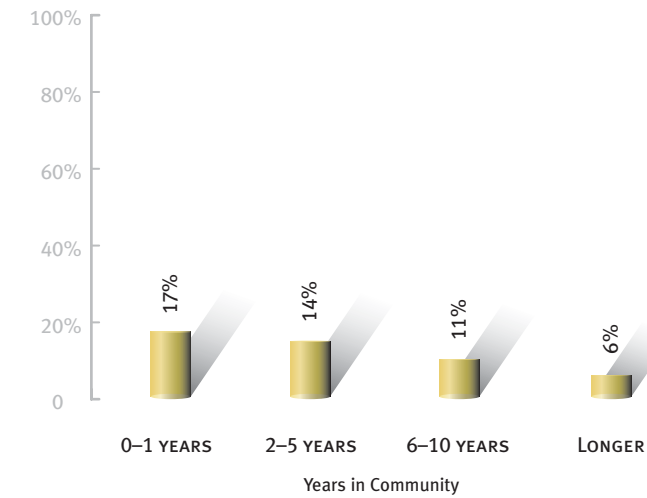
Whether or not an adolescent had experienced sexual intercourse was unrelated to how long they had lived in the community. Approximately a quarter of the adolescent movers and stayers reported having had sex.



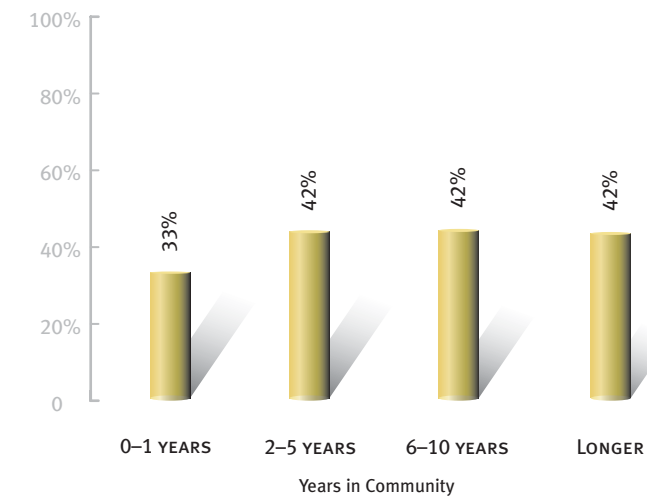
### Never Contracept

Adolescent newcomers were less likely to use contraceptives when having sexual intercourse. Compared to adolescents who had lived in the community more than ten years, adolescents who had lived in the community a year or less were:

- three times more likely to never contracept; and
- a fifth less likely to always contracept.



### Always Contracept



*Community change is made more difficult by the turnover within the community.* The hot spot communities targeted by the Teen Pregnancy Prevention Initiative are characterized by high rates of turnover. Almost half of the families have been in the community for five years or less. When the Initiative began, many of the people were not even living in the community and those who were have moved to other communities. This transition reduces the probability that any initiative will be able to show success.

For example, it would not be uncommon to include a public education campaign in the early part of an initiative. Such a campaign might work to increase awareness of a problem and direct people to available services. Having succeeded in increasing awareness, the initiative next might wish to work to increase the quantity and/or quality of services. However, it is difficult to get beyond the public education campaign because newcomers to the community lack awareness of the problem and of available services. The transition of people makes it difficult for the initiative to ever move beyond the first step.

It is equally difficult to develop leadership that can take ownership of an initiative within a high transition community. An initiative requires a critical level of stability in order to move forward. Changes in leadership require the initiative to return to an earlier point. New people have to be recruited and trained. In many cases, the newcomers must first develop an attachment to the community before they can be interested in working to change it. If they have an expectation that they will soon move, then they will not develop those attachments.

An alternative strategy is for the leadership of an initiative to be vested in organizations that work within the community. Some of these organizations have a long history within the community, and if that history is positive, they might be in a position to lead an initiative. However, while the organizations have a history, the staff from those organizations are often new and live outside the community. They may lack the contacts within the community that successful leadership requires.

*Those who are newest to the community may be the ones an initiative most needs to target.* In the Teen Pregnancy Prevention Initiative, newcomers were most likely to never use contraception and least likely to always do so. To reduce teen pregnancies, they were the ones who needed to be reached.

*Those who are newest to the community may have the weakest attachments.* Newcomers in the Teen Pregnancy Prevention Initiative were less likely to know where resources in the community were located. As a result, even if they recognized they had a need, they would be less likely to know where to look for resources, unless community organizations make a continuing effort to reach newcomers. Only the most motivated would recognize they had a need for services, find where to get those services, and then act to get those services. Such people probably would not need an initiative as much as individuals who are new to the community, but who feel less attached to their new home.