Festival of Light
Australia
Resource Paper
NOVEMBER 1981

SEX EDUCATION AND TEENAGE PREGNANCY

by
Dr James H. Ford and Mr Micheal Schwartz
Catholic League for Religious and Civil Rights, U.S.A.
Reprinted from Linacre Quarterly, February 1979



"What disturbs me," wrote Fr John Fleming in "The Advertiser" (10/8/81) about an Australian Family Planning Association campaign for more government funding, "is that it seems mainly directed at the unmarried, particularly teenagers."

This is not family planning, he points out. The promotion of contraceptives among teenagers is instead an invitation to promiscuity.

"Is it right," he asks, "for adults to assist teenagers to go against their parents' wishes in this matter, and encourage unlawful sexual intercourse with girls under the age of 17 years?"

A letter defending the Family Planning Association published two days later in the same paper argued: "it is surely better to have effective contraceptives readily available to anyone, and a back-up abortion service, than unwanted pregnancies."

However, that argument begs a very important question: "DOES THE READY AVAILABILITY OF CONTRACEPTIVES REDUCE UNWANTED PREGNANCIES? The following article provides powerful evidence that CONTRACEPTIVE EDUCATION PROGRAMS ACTUALLY INCREASE TEENAGE PREGNANCIES — the very opposite of their stated aim!

THE PROBLEM OF TEENAGE PREGNANCY

For at least the past two years, the primary thrust of the research and lobbying activities of Planned Parenthood and its satellite agencies has been in the area of teenage pregnancy. Through impressive-looking publications such as *11 Million Teenagers*,[1] and a steady stream of research articles, press releases and legislative testimony, these agencies have made the question of teenage pregnancy a major public policy issue. They have convinced an important segment of the population that Planned Parenthood-type contraceptive programs hold out the only hope of curbing the burgeoning rate of pregnancy among teenagers, and they are now in the process of winning millions of dollars in government appropriations to institute and expand such programs.

Studies of Teenage Girls

In this entire campaign, the most important single resource for Planned Parenthood and its allies has been a series of studies conducted under the auspices of the National Institute of Child Health and Human Development by Professors Melvin Zelnik and John Kantner of the Department of Population Dynamics at Johns Hopkins University. Zelnik and Kantner conducted surveys of the sexual and contraceptive experience of American girls aged 15 to 19. An early study, in 1971, was incorporated into the Research Reports of the U.S. Commission on Population Growth and the American Future, under the title "Sexuality, Contraception and Pregnancy Among Young Unwed Females in the United States."[2] A later study, conducted in 1976, has formed the basis for three major articles in *Family Planning Perspectives*,[3] the bi-monthly publication of the Alan Guttmacher Institute.

The tacit purpose of the Zelnik-Kantner studies was to provide a rationale for the Planned Parenthood solution to the teenage pregnancy problem by demonstrating the necessity of making the extension of family planning services to teenagers a national priority backed by millions of public dollars. This, at least, is the spirit in which Zelnik and Kantner have presented their data,[4] and it is certainly the purpose to which Planned Parenthood has put it, so it would be simply naive to attribute to them some sort of Olympian scientific detachment. We cannot presume that their methodology in collecting and evaluating information was not colored by their presuppositions. Nevertheless, for purposes of discussion, we are willing to accept the validity of their data. Our main disagreement with them lies in the conclusions which they have drawn from the data.

False Conclusions

In their haste to reach the expected results and to recommend policy solutions that were determined in advance, both Planned Parenthood and Zelnik and Kantner seem to have glossed over the fact that the survey results do not support the intended conclusions. In fact, it is our contention that nothing could be more damaging to Planned Parenthood's cause than a comparison of Kantner and Zelnik's statistics to those obtained in 1976. Such a comparison tends towards a conclusion contrary to the accepted orthodoxy of Planned Parenthood: that nothing would be more likely to accelerate the rate of teenage pregnancy than increasing the exposure of teenagers to contraceptive programs. By publishing these studies, Planned Parenthood has unwittingly refuted the very theory it is trying to confirm.

THE RESULTS OF SEX EDUCATION PROGRAMS

The first thing to note in comparing these studies is that during the five-year span under consideration, Planned Parenthood and other family planning agencies made great strides in reaching more teenagers with more of their services. The number of teenagers in organized family planning programs quadrupled between 1970 and 1975, from 300,000 to 1.2 million.[5] Abortion became legal and widely available to teenagers. Instruction in the use of contraceptives became a normal (if unofficial) part of the curriculum in sex education courses all across the country. While it might have been possible in 1971 to claim that only a small proportion of the teenage population found family planning information and services available, this simply was not the case five years later.

It would be reasonable, then, if Planned Parenthood's premises were correct, to expect a decline in teenage pregnancy and childbearing during this period. But Kantner and Zelnik's findings show just the opposite.

More Premarital Pregnancy

In the 1971 study, 6.4% of the girls interviewed had experienced a premarital pregnancy. By 1976, this proportion had jumped to 9.3%, an increase of 45%.[6] This was very obviously related to a nearly equal increase (41%) in the percentage of girls who had experienced premarital intercourse, from 26.3% in 1971 to 37.2% in 1976.[7] The rate of out-of-wedlock births, despite the legalization of and widespread recourse to abortion, increased from 10.3 per 1000 in 1971 to 12.1 per 1000 in 1975, up 18%.[8] And even if we take into account the increase in sexual activity among teenagers, and consider only the rate of premarital pregnancy among those who were sexually active, there was still an increase of about 4%, from 24.3% in 1971 to 25.2% in 1976.[9]

Zelnik and Kantner themselves admit to having a little difficulty with this anomaly:

> If all other factors had remained the same, the substantial increase in the prevalence of premarital sexual experience among teenage women between 1971 and 1976 might have been expected to result in an increase in premarital pregnancy. Over the same period, however, these same young women reported a dramatic increase in overall contraceptive use, in use of the most effective methods, and in more regular use of all methods — changes which, other things being equal, should have led to a decrease in premarital pregnancy . . . . The lack of decline is somewhat surprising in light of data previously presented on changes in contraceptive practices.[10]

Those changes in contraceptive practices were significant indeed during the five-year study period. In 1971, only 19.7% of the sexually active girls had used a contraceptive every time they had intercourse. By 1976, this had grown to 30.2%.[11] Perhaps more significant, fewer than half the girls in the 1971 sample (45.1%) had used a contraceptive on their last sexual encounter before they were interviewed. In 1976, almost two-thirds (64.8%) had.[12] And they were using the most effective medical methods of contraception. In 1971, only 13.8% of the sexually active girls were using birth control pills or IUDs. This percentage more than doubled by 1976, to 33.3%.[13] Zelnik and Kantner had good reason for expressing surprise at the "lack of decline" in teenage pregnancy. This "lack of decline," let it be recalled, is actually an increase.

More Unintended Pregnancies among Contraceptive Users

But can this increase in teenage pregnancy be explained away by saying that pregnancy is something that happens only to girls who do not have access to contraceptives, as Planned Parenthood seems to imply in *11 Million Teenagers?*[14] Is it possible that, in spite of the apparently damaging statistics presented above, contraceptive programs really are effective in preventing teenage pregnancy? Could Planned Parenthood be right in claiming that there would be fewer teenage pregnancies if only their programs and others like them could be expanded? Once again, Zelnik and Kantner's findings lead to a negative answer to these questions.

Assuming that the proportion of girls who used a contraceptive at their last sexual encounter are regular contraceptive users (an assumption that is, to say the least, generous to Planned Parenthood's interests), we find that 20% of the never-married teenagers surveyed in 1976 were contraceptive users (30.8% sexually experienced[15] x 64.8% last-time contraceptive users).[16] Yet 23.5% of the never-married teenagers who had experienced an unintended pregnancy became pregnant while they were using a contraceptive.[17] The following equation shows that contraceptive users were more than 20% more likely to become unintentionally pregnant than were girls who did not use contraception:

$$\frac{23.5 \text{ (pregnancies to contraceptive users)} \,/\, 20 \text{ (contraceptive users)} = 117.5\%}{76.5 \text{ (pregnancies to non-users)} \,/\, 80 \text{ (non-users)} = 95.625\%} = 121.6\%$$

In their most recent article in *Family Planning Perspectives*, Zelnik and Kantner confirm directly the disproportionately high rate of unintended pregnancy among contraceptive users. As noted previously, the overall percentage of girls in the 1976 study who reported a premarital pregnancy was 9.3%. But Zelnik and Kantner found that over 28% of those pregnancies were intended.[18] Whatever the motivation may have been among those girls who wanted to become pregnant, it is clear that the availability of family planning services is not going to do away with that class of pregnancies. Therefore, a more relevant figure for comparative purposes is the rate of unintended pregnancies among teenage girls, which was 6.7%.

Among girls who used a contraceptive every single time they had intercourse, the rate of unintended pregnancy was 11.2%,[19] about two-thirds higher than the rate of unintended pregnancy among the entire teenage population. Among always-users who used a medical method of contraception, the pregnancy rate was 6.1%.20 This last group is following the ideal pattern of contraceptive use recommended by Planned Parenthood, yet its rate of unintended pregnancy is only 10% less than the overall rate for teenagers.

The plain fact is that contraception is not very effective among teenagers, even though many of them have been led to believe otherwise by the propaganda of Planned Parenthood and other family planning agencies. Kantner and Zelnik themselves remark, with reference to pregnant teenagers, that "Most of those who had taken the pill did not think that there was a good chance they they would become pregnant."[21] Yet they became pregnant anyway, in a proportion only slightly less than that of all other teenage girls. Perhaps if they knew what Planned Parenthood knows, as opposed to believing what Planned Parenthood says, about the level of protection afforded teenagers, by contraception, they would not have allowed themselves to be misled.

The ineffectiveness of contraception for teenagers is something that Planned Parenthood has been well aware of at least since 1973, when Norman Ryder published his study in *Family Planning Perspectives* showing that the failure rate among young women using oral contraceptives was four to five times higher than that among older women.[22] And when this fact is read in light of the earlier study by Ryder and Westoff,[23] showing that even older, married women are none too successful in preventing unintended conceptions, the situation appears even worse.

In view of these devastating findings, of which every family planning professional should be aware, it is dangerously misleading to tell a girl that she won't get pregnant if she takes the pill.

More Illegitimacy

Having come this far, we believe it is clear that whatever family planning programs for teenagers may do, the one thing they will not do is reduce the incidence of unintended pregnancy among the target group. Yet even this is not a new discovery; it is something that Phillips Cutright, for example, admitted in the paper he presented to the U.S. Commission on Population Growth and the American Future. Cutright, a sociologist from Indiana University who writes for *Family Planning Perspectives* and places himself squarely in agreement with Planned Parenthood, studied contraceptive programs in Georgia and Tennessee and their effects on the illegitimacy rate among teenagers served.

He concluded, "In these younger groups, we find no evidence that the programs reduced white illegitimacy, because areas with weak programs or no programs at all experience smaller increases or larger declines than are found in (areas with strong contraceptive programs)."[24] Cutright let that cat out of the bag because he needed to convince the Commission that abortion was necessary as a back-up to contraceptive services if the illegitimacy rate was to be curbed among teenagers.

More Teenage Abortions

Subsequent events have shown that he was at least partially correct in this opinion, since the rate of out-of-wedlock births has increased at a considerably slower pace than the rate of premarital pregnancy, largely as a result of the significantly higher recourse to abortion. Kantner and Zelnik show that in 1971 only 38.3% of premarital teenage pregnancies ended in induced abortion, while in 1976, 50.7% did.[25] Obviously, the legalisation of abortion played a major part in this proportional increase in abortion, but the fact remains that even contraception plus abortion has succeeded only in slowing, not in reducing the rate of out-of-wedlock births among teenagers.

There are some, no doubt, who would look upon family planning programs for teenagers as an alternative to abortion, in spite of Planned Parenthood's admissions that abortion is inseparable from contraception in reducing out-of-wedlock or other unintended births. Kantner and Zelnik show how illusory is the hope of reducing the so-called "need" for abortions by giving teenagers contraceptives. They compared the percentage of contraceptive users among those girls who obtained an abortion with the percentage of contraceptive users among those with some other pregnancy outcome, and found that "those young women having an abortion are seen to be almost twice as likely to have been contracepting at the time pregnancy occurred."[26] In other words, girls who become pregnant while using a contraceptive are more likely to seek abortion than those who become pregnant without using a contraceptive. Furthermore, this observation holds true even if intended pregnancies are left

out of consideration.

So, far from being an alternative, family planning programs for teenagers are an inducement to abortion. They help to build a new clientele for the abortion clinics.

More Teenage Promiscuity

There is one other significant trend observable in a comparison between the 1971 and 1976 survey results: a marked increase in promiscuity among teenagers. Kantner and Zelnik posed two questions relevant to this subject, one dealing with frequency of intercourse in the four weeks prior to the interview, and the other with the number of sexual partners. In both cases, the maximum response was listed as "six or more." These maximum responses can reasonably stand as a fair working index of promiscuity. The percentage of sexually active girls who reported having intercourse six or more times in the four weeks prior to interview increased by about one-fourth between the two studies, from 14% to 17.4%.[27] Those who had had six or more partners increased by nearly two-thirds, from 7% to 11.3%.[28]

(It is noteworthy that approximately half the "sexually active" girls in the 1976 study had not had intercourse at all in the four weeks prior to their interviews; half had had only one partner; and 14% had experienced premarital intercourse only once.[29] These figures indicate that "secondary virginity" is not all that rare among teenagers. In other words, an appreciable percentage of unmarried teenagers who have experienced premarital intercourse are not currently "sexually active," although they are classified that way in Kantner and Zelnik's studies. This means that the alarm generated by Planned Parenthood publications such as *11 Million Teenagers,* implying that the "risk" of premarital pregnancy is almost universal among teenagers, is somewhat overdone. This is one more example of Planned Parenthood's tactic of using only that information which serves its immediate political purposes.)

It would not be possible, on the basis of the data before us, to state categorically that the increase of promiscuity among teenagers is directly linked with the increased availability of contraception and abortion. However, that hypothesis must be admitted as a most likely factor since this was the only major change in the sexual environment of teenagers in the five-year period under discussion. Dr. Robert Kistner of Harvard Medical School, a developer of the oral contraceptive, advanced this thesis when he told the American College of Surgeons in December, 1977, "About ten years ago I declared that the pill would not lead to promiscuity. Well, I was wrong."[30]

More Venereal Disease and Cervical Cancer

Kistner's *volte-face* on this question was prompted by his own experience in treating a steadily increasing number of young pill users for venereal disease and cervical cancer, both of which are clearly linked to sexual promiscuity.[31] Kistner asserts that the introduction of the birth control pill has been a major causal factor in the rapid increase in both VD and cervical cancer among adolescents by stimulating higher levels of promiscuity.[32]

DANGERS OF GOVERNMENT SUPPORT

The evidence shows, then, that increased exposure of teenagers to contraception, at least during this five-year period, has led to more premarital pregnancy, more illegitimacy, more abortions, more promiscuity, more venereal disease, and more cervical cancer. The obvious cause of all these problems has been the enormous increase in sexual activity among teenagers during this period. The only way these problems could be curbed would be by reducing the rate of sexual activity among teenagers. Public agencies, schools and other authority figures today are tacitly approving of premarital sex by making contraceptives available, instructing children in their use, and actually encouraging them to put these contraceptives to their intended use. It stands to reason, then, that teenagers will be very much more likely to become involved in sexual activity or, if they are already sexually active, to increase their level of sexual activity.

New Clientele for Contraceptive Services

The fundamental reason why these family planning programs for teenagers have been such a disaster is that they create a new clientele for the services offered. We have already seen this happen in the case of abortion. Before abortion was legal, Planned Parenthood and others argued that legalization would not lead to an increase in the number of abortions, but would merely guarantee safety for those women who would obtain illegal abortions anyway. Yet the number of abortions performed on teenagers doubled between 1971 and 1976; the total number of abortions performed has increased significantly in every year since 1973; and that increase has been especially marked among teenagers.[33] It would be impossible to deny that the legalization of abortion has created a new clientele for abortion clinics.

In the same way it is obvious, on the basis of the sudden and steep rise in the percentage of teenage girls who are sexually active, that family planning services for teenagers have led to the creation of a new clientele for those very services. Indisputably, more teenagers are engaging in premarital sex and beginning their sexual activity at an earlier age than ever before, because they are given the means to avoid the most apparent consequences of their sexual activity.

Motivational Factors Ignored

But Kantner and Zelnik steadfastly refuse to inquire into the deeper motivational factors for the increase in teenage sexual activity, and even act as if such behaviour is inexorably determined. At one point, on the basis of absolutely no evidence, they assert, "It is a fairly safe assumption that sexual activity among adolescents is unlikely to decrease."[34] Why should it be such a safe assumption, when we have seen a startling 40% increase in just five years?

Of course, if Planned Parenthood and company have their way, and every child in the United States is instructed in how and why to use contraceptives and how to get an abortion when those contraceptives fail, then that assumption would be a safe one. But if those programs were cut back or discontinued, it would be equally safe to assume that the level of teenage sexual activity would decline, and as a result, so would premarital pregnancy, abortion, VD and all the rest.

Government Support Legitimates Immorality

But this is not mere naivete on the part of Kantner and Zelnik. They and their friends at Planned Parenthood are well aware that government support is necessary to assure them a clientele for their services. They know, because it was Planned Parenthood which published, in a special issue of *Family Planning Perspectives,* the 1971 article "Illegitimacy: Myths, Causes and Cures" by Phillips Cutright. This has served as a blueprint for all of Planned Parenthood's activities with regard to teenagers since then. Cutright put the family planning establishment on notice that government support was indispensable to its programs, when he wrote: "Some empirical evidence that a government program will, *in itself,* legitimate contraceptive use by unmarried (as well as married) women irrespective of financial and location barriers, is reported in a study examining the correlates of public support for government family planning clinics in Nashville, Tennessee. The study indicates that the government program may have legitimated use of contraception among persons who had moral reservations about birth control, and accomplished this because the program provided manifest evidence that contraception is approved by the established authorities." He then noted the increased rate of approval for abortion in Colorado which followed that state's legalization of abortion in ,1977, and concluded, "Both of these examples, from Tennessee and Colorado, indicate that institution of a government program can, in itself, have a significant effect on the removal of pseudo-moral barriers to fertility control."[35] The point is clear: government sanction is an important factor in helping people make moral choices, so if the government will support distributing contraceptives to children and instructing them in their use, then those programs (and *ipso facto* premarital sexual activity) will be more readily approved by the teenage population, and the agencies will be assured a new clientele.

Refusal to Recognize Harm

The mere fact that these programs do not achieve their announced purposes is not a central question for those who advocate them. Whether it is a case of ideologically motivated blindness, or a less honorable motivation, Kantner and Zelnik and

the Planned Parenthood establishment refuse to recognize how much harm these programs have already done. Yet the only policy they can recommend, in the face of the catastrophic failures they have already achieved, is more of the same.

Professor Kingsley Davis is a member of the Board of Sponsors of Zero Population Growth, and therefore holds views on many issues with which the authors would strenuously disagree. But in his report to the U.S. Commission on Population Growth and the American Future, he declared:

> The current belief that illegitimacy will be reduced if teenage girls are given an effective contraceptive is an extension of the same reasoning that created the problem in the first place. It reflects an unwillingness to face problems of social control and social discipline, while trusting some technological device to extricate society from its difficulties. The irony is that the illegitimacy rise occurred precisely while contraception was becoming more, rather than less, widespread and respectable.[36]

THE ONLY LONG TERM SOLUTION

Davis is focusing here on the folly of trusting in a "quick-fix" solution to a problem as complicated as that of teenage pregnancy and childbearing. He rightly asserts this is a difficult matter of discipline and control. The only long-term solution to it lies in strengthening the family unit.

Parents have been intimidated into silent acquiescence by the combined propaganda of family planning professions and government agencies. They have been told, in effect, that they are powerless to prevent their children from engaging in premarital intercourse, and that unless they hand their children over to the family planning clinics for contraceptive training and supplies, those children are virtually doomed to face premarital pregnancy. A poll taken early in 1978 by *Better Homes and Gardens* shows how middle-class parents have been manipulated by the family planning propagandists. A solid *57%* majority of the respondents considered premarital sexual intercourse unacceptable, and 70% of them believed that easy access to contraceptives has led to more promiscuity, yet 80% of them thought contraceptive services should be available to teenagers.[37] It is inconceivable that this group would have given such an overwhelming endorsement to contraceptive services for teenagers, in spite of their strongly negative attitude towards premarital sex, unless they had been intimidated into believing the platitudes of the advocates of contraception.

Parents Teaching Moral Responsibility

For generations, parents taught their children moral responsibility and gave them the foundation on which to build their own families. This system was not perfect, but it produced infinitely better results than the current programs. It gave children reasons for preserving their chastity and it supported them in doing so until they were mature enough to make responsible use of their sexual faculties. Parents could still do that. Indeed, many parents still are doing it, in spite of the general permissiveness around them. But if parents are to be effective in giving their children the moral training they so desperately need, they will have to be supported, not undermined, by their churches, schools, government agencies, and the medical profession.

Planned Parenthood has so aggressively and so effectively promoted its views over the past 10 to 15 years that its claim to be the nation's foremost agent of social change in the area of reproductive health[38] is clearly no idle boast. It is not surprising, then, that Planned Parenthood's prescription for reducing teenage pregnancies is accepted as an article of faith by the popular press media and most of the educational and medical professions. But that faith is contradicted by reality. The results are in and Planned Parenthood's remedies have failed miserably.

If matters had turned out otherwise, if teenage pregnancies had declined as contraceptives became more widely available to minors, then Planned Parenthood would certainly have demanded credit for that achievement. Let them and their allies now accept responsibility for the tragedies their programs have helped bring about, and let them stop trying out their misguided theories on our nation's young people.

REFERENCES

1. 11 Million Teenagers: What Can be Done About the Epidemic of Adolescent Pregnancies in the United States (New York: The Alan Guttmacher Institute, 1976).
2. Zelnik, Melvin and Kantner, John F., "Sexuality, Contraception and Pregnancy Among Young Unwed Females in the United States," Research Reports, Vol. 1, Demographic and Social Aspects of Population Growth, ed. by Robert Parke, Jr. and Charles F. Westoff (Washington D.C.: U.S. Govt. Printing Office), pp. 356-374.
3. Zelnik, Melvin and Kantner, John F., "Sexuality, Contraception and Pregnancy Among Young Unmarried Women in the United States, 1976 and 1971," Family Planning Perspectives, 9:2 (March/April, 1977), pp. 55-71 (herein cited as "Experience"). Family Planning Perspectives, 10:3 (May/June, 1978), pp.135-142 (herein cited as "contraceptives Patterns").
4. See, for example, the concluding section of Zelnik and Kantner, "Contraceptive Patterns," pp.141-142.
5. Dryfoos, Joy G. and Heiler, Toni, "Contraceptive Service for Adolescents: An Overview," Family Planning Perspectives, 10:4 (July/Aug., 1978), p. 224.
6. Zelnik and Kantner, "First Pregnancies," p. 12, Table 2. Let us note here and throughout this article, we are citing Kantner and Zelnik's figures for "white" teenagers (which includes all non-blacks). This is because, by their own admission, their figures are neither internally not externally correlational, and because the data for "white" display trends more clearly. Kantner and Zelnik's figures for blacks show the same general tendencies, but not as sharply because of the significantly higher level of sexual activity and pregnancy reported in 1971.
7. Ibid., Table 1.
8. Ibid., p. 19, citing U.S. Government statistics.
9. Ibid., p. 12, Table 2.
10. Ibid., p. 12, p. 12 n.
11. Zelnik and Kantner, "Experience," p. 62, Table 9.
12. Ibid.
13. Ibid., p. 67, Table 12.
14. 11 Million Teenagers, especially pp. 30, 45, 55.
15. Zelnik and Kantner, "First Pregnancies," p. 56, Table 1.
16. Ibid., p. 62, Table 9.
17. Zelnik and Kantner, "First Pregnancies," p. 14, Table 5.
18. Zelnik Kantner, "Contraceptives Patterns," p. 140, Table 3.
19. Ibid., p. 138, Table 8.
20. Ibid.
21. Zelnik and Kantner, "First Pregnancies," p. 14.
22. Ryder, Norman B., "Contraceptive Failure in the United States," Family Planning Perspectives, 5:3 (Summer 1973).
23. Ryder, Norman B. and Westoff, Charles F., "Fertility Planning Status: United States, 1965," Demography 6:435, 1969.
24. Cutright, Phillips, "Illegitimacy in the United States: 1920-1968," Research Reports, U.S. Commission of Population Growth and the American Future, Vol. 1, Demographic and Social Aspect of Population Growth, ed. by Robert Parke, Jr. and Charles F. Westoff (Washington, D.C. : U.S. Govt. Printing Office), p.421.
25. Zelnik and Kantner, "First Pregnancies," p. 14.
26. Zelnik Kantner, "Contraceptives Patterns," p. 140.
27. Zelnik and Kantner, "Experience," p. 60, Table 6.
28. Ibid., p. 61, Table 7.
29. Ibid., p.58, Table 2.
30. Family Practice News, Dec. 15, 1977.
31. California Medical Association Resolution 99-76. Adopted by House of Delegates, 2-11-76.
32. The Female Patient, August, 1978 p. 85.
33. Forrest, Jaqueline Darroch; Tietze, Christopher; and Sullivan, Ellen, "Abortion in the United States, 1976-1977," Family Planning Perspectives, 10:5 (Sept./Oct., 1978), p. 275.
34. Zelnik and Kantner, "Contraceptives Patterns," p. 141.
35. Cutright, Phillips, "Illegitimacy: Myths, Causes and Cures," Family Planning Perspectives, 3:1 (Jan., 1971), pp. 43-44.
36. Davis, Kingsley, "The American Family in Relation to Demographic Change," Research Reports, U.S. Commission on Population Growth and the American Future, Vol. 1, Demographic and Social Aspect of Population Growth, ed. by Robert Parke; Jr. and Charles F. Westoff (Washington D.C. : U.S Govt. Printing Office), p.253.
37. Better Homes and Gardens, April, 1978 as reported in Family Planning Perspectives, 10:5 (Sept./Oct., 1978), p. 301.
38. Planned Parenthood Federation of America, "A Five-year Plan: 1976-1980," p. 5.