



LEGISLATURE OF PUERTO RICO

Office of Legislative Services

CERTIFICATION

I hereby certify to the Secretary of State that the following Act No. 93 (H.B. 1679) of the 5th Session of the 14th Legislature of Puerto Rico:

AN ACT to declare the first week of August of each year as “Protection of Safe and Healthy Gestation Processes in the Commonwealth of Puerto Rico Week”,

has been translated from Spanish to English and that the English version is correct.

In San Juan, Puerto Rico, today 25th of February of 2004.


Elba Rosa Rodríguez-Fuentes
Director

(S. B. 1679)

(No. 93)

(Approved March 25, 2003)

AN ACT

To declare the first week of August of each year as "Protection of Safe and Healthy Gestation Processes in the Commonwealth of Puerto Rico Week."

STATEMENT OF MOTIVES

Puerto Rico is currently going through one of the most transcendental moments in its history. The high incidence of child abuse has multiple ramifications with the well-known consequences that shall mark them when they reach adulthood. There is a wide spectrum of variables in the types of child abuse, and the causes are numerous. However, its effects are not measured until much later, when the repercussions of said effects have dreadful consequences for our country.

Physical, emotional, sexual and abandonment are among the most common types of child abuse. If we analyze the matter at hand deeply, we must consider a series of variables that, even if they are not necessarily the main causes of abuse, they influence greatly upon the increase of this abominable behavior, which as time goes by, assumes the characteristics of a national epidemic. The disintegration of the family nucleus is doubtlessly, a precipitant factor of our social problems. Extreme poverty, the absence of sources of employment, and others, are the causes that contribute toward the creation of the climate of despair that extends over our Island.

In the same manner in which international AIDS awareness day is observed, and many others have been decreed by Law for a variety of purposes, it is also important to observe the first week of August of each year by Law as "Protection of Safe and Healthy Gestation Processes in the Commonwealth of Puerto Rico Week." As we understand it, given the high incidence of adolescent and single mother pregnancies, our participation plays a very important role in the Puerto Rico of today.

To educate women about the benefits of receiving pre-natal care while they are gestating is very beneficial for unborn children, reduces risks for the mothers, and liberates the State from the burdensome costs that must be incurred for the post-natal care of babies born with health problems, including the problems that are faced when the mother is at serious risk.

Education about care for the gestating mother and child must be emphasized for mothers to understand that not receiving such care places their life and the life of the unborn child under potential risk. The risk of illness for the children may begin much earlier than at childbirth. A potential mother who does not receive medical care, and does not take folic acid, vitamins, etc., places her own and the unborn child's health under serious risk, by injuring the unborn baby's right to a physically and mentally healthy childbirth.

The statistics obtained from the Informative Bulletin of the Office of the Assistant Secretary of Planning, Evaluation, Statistics, and Information Systems reveal an alarming situation that we must address with the warranted promptness. Below, we present the most relevant data to support our position.

By Service Sector

Approximately 9,233 adolescent mothers (69.4 percent) gave birth in public hospitals, while 4,047 mothers (30.4 percent) gave birth in private hospitals.

By Childbirth Method

Out of a total of 13,305 adolescent mother childbirths, 77.8 percent (10,347) were vaginal, and 22.2 percent (2,958) were caesarean.

Of the 10,347 vaginal childbirths, 68.9 percent (7,131) started their pre-natal care in the first trimester of the pregnancy, 26.9 percent (2,786) in the second trimester, 2.6 percent (274) in the third trimester, and 1.4 percent (142) did not receive any pre-natal care.

Of the 2,958 caesarean childbirths, 73.6 percent (2,177) started their pre-natal care in the first trimester of the pregnancy, 23.3 percent (690) in the second trimester, 2.2 percent (64) in the third trimester, and 0.7 percent (20) did not receive any pre-natal care.

Of the 2,958 adolescent mother caesarean childbirths, 71.6 percent (2,117) it was their first childbirth, 22.1 percent (655) it was their second childbirth, 4.3 percent (133) it was their third childbirth, and for 1.8 percent (53) it was their fourth to sixth child.

By Gestation Period

Of the 13,305 adolescent mother childbirths, 50.4 percent (6,706) gave birth between 37-39 weeks of gestation, 36.2 percent (4,812) between 40 forty or more weeks of gestation, 6.2 percent (828) between 32-35 weeks of gestation, 4.9 percent (653) at 36 weeks of gestation, and 2.3 percent (301) between 20-31 weeks of gestation.

By Order of Birth

Of the 10,347 adolescent mother vaginal childbirths, 67.1 percent (6,942) it was their first childbirth, 23.9 percent (2,474) it was their second childbirth, 7.2 percent (740) it was their third childbirth, and for 1.8 percent (190) it was their fourth to seventh childbirth.

Of the 2,958 adolescent mother caesarean childbirths, 71.6 percent (2,117) it was their first childbirth, 22.1 percent (655) it was their second childbirth, 4.5

percent (133) it was their third childbirth, and for 1.8 percent (53) it was their fourth to seventh childbirth.

By Weight at Birth and Order of Pregnancy

12.0 percent (1,590) of these 13,305 adolescent mother childbirths were underweight babies. 25.6 percent (407) of the 1,590 were underweight childbirths by 19 year old mothers, 24.6 percent (391) were by 18 year old mothers, 20.8 percent (331) were by 17 year old mothers, 17.0 percent (271) were by 16 year old mothers, and 1.9 percent (190) were by less than 16 years old mothers.

Regarding the order of the pregnancy, statistics show that for 68.1 percent (9,059) of the adolescent mother childbirths it was their first; for 23.5 percent (3,129) it was their second, 6.6 percent (873) it was their third, 1.5 percent (205) it was their fourth, and for 0.3 percent (39) it was the fifth or more.

By Education Level and Place of Birth

The proportion of live births whose adolescent mothers (9,002) had less than 12 years of school was 67.7 percent; with 12 years of school, 24.0 percent (3,195), and with more than 12 years of school, 8.2 percent (1,085).

Of the 10,347 live births whose adolescent mothers had vaginal childbirths, 68.6 percent (7,100) had less than 12 years of school, 23.6 percent (2,437) had 12 years of school, and 7.67 percent (794) had more than 12 years of school.

Of the 2,958 live births whose adolescent mothers had caesarean childbirths, 64.3 percent (1,902) had less than 12 years of school, 25.6 percent (758) with 12 years of school and 9.83 percent (291) had more than 12 years of school.

Of the 13,305 adolescent mother childbirths that took place in Puerto Rico, 87.0 percent (11,577) were of mothers born in Puerto Rico; 10.8 percent (1,433) were of mothers born in the United States (including the Virgin Islands), and 2.2 percent (303) were born elsewhere (of which 239 were mothers born in the Dominican Republic). Out of a total of adolescent mothers born in the United

States 41.7 percent (597) were born in New York.

By Civil Status of the Mother and Residential Zone

70.9 percent (9, 437) of the 13,305 adolescent mother childbirths were single adolescent mothers, and 29.1 percent (3, 868) were married adolescent mothers.

Of the 9,437 single adolescent mother childbirths, 3.5 percent (331) were less than 15 years old, 46.0 percent (4,339) were 15-17 years old, 23.7 percent (2,240) were 18 years old, and 26.8 percent (2,527) were 19 years old.

Of the 3,868 married adolescent mother childbirths, 0.9 percent (35) were less than 15 years old, 33.0 percent (1,277) were 15-17 years old, 27.5 percent (1,064) were 18 years old, and 38.6 percent (1,492) were 19 years old.

Among the 13,305 adolescent mother childbirths, 46.2 percent (6,148) of the adolescent mothers lived in the urban zone, and 53.8 percent (7,155) in the rural zone. Of the childbirths of mothers who lived in the urban zone, (6,148), 51.1 percent (3,144) had a male child, and 48.9 percent (3,004) had a female child. Of the 7,155 childbirths of mothers who lived in the rural zone, 52.0 percent (3,718) of the babies were male, and 48.0 percent (3,437) were female.

By Region and Municipality of Residence of the Mother

Of the 13,305 adolescent mother childbirths that took place in Puerto Rico, 19.6 percent (2,612) took place in the Metropolitan Region; 19.6 percent (2,610) in the Region of Ponce; 17.5 percent (2,333) in the Region of Bayamón; 15.3 percent (2,042) in the Region of Caguas; 12.8 percent (1,702) in the Region of Arecibo; 6.5 percent (868) in the Region of Mayagüez, 5.6 percent (742) in the Sub-region of Aguadilla, and in the Sub-region of Fajardo, 3.7 percent (486).

Of the 2,612 adolescent mother childbirths that took place in the Metropolitan Region, 3.0 percent (79) were less than 15 years old, 42.5 percent (1,109) were less than 18 years old, and 54.5 percent (1,424) were 18 and 19 year

old mothers. 2.9 percent (75) of the adolescent mother childbirths that took place in the Region of Ponce were adolescent mothers less than 15 years old, 43.8 percent (1,143) less than 18 years old, and 53.3 percent (1,392) were 18 to 19 year old adolescents. In the Region of Bayamón, 2.4 percent (57) were childbirths of adolescent mothers less than 15 years old, 39.2 percent (915) were less than 18 years old, and 54.1 percent (1,261) were 18 and 19 years old.

By the Age of the Father

Of the 13,305 live births by the age of the father, 8.1 percent (1,083) were less than 18 years old, 8.9 percent (1,182) were 18 years old, 12.4 percent (1,656) were 19 years old, 47.4 percent (6,303) were 20-24 years old, 13.5 percent (1,802) were 25-29 years old, 3.3 percent (445) were 30-34 years old, 1.9 percent (253) were 35 years old or more, and 4.4 percent (581) did not specify their age.

By Obstetrics Procedure

Of the 11,132 adolescent mother childbirths with obstetrics procedures, 97.2 percent (10,821) were adolescent mothers 15-19 years old, and 2.8 percent (311) were less than 15-year-old adolescent mothers. Of the 17,294 procedures performed, 97.3 percent (16,833) were adolescent mothers 15-19 years old, and 2.7 percent (461) were less than 15-year-old adolescent mothers.

The most common obstetrics procedures among adolescent mothers were electronic Foetal monitoring, with 59.8 percent (10,342); childbirth stimulation, with 13.3 percent (2,296); ultrasound with 19.1 percent (3,310), and induced childbirth, with 5.0 percent (860).

By Risk Factors

Of the 1,856 adolescent mother childbirths with risk factors, 96.8 percent (1,797) were adolescent mothers 15-19 years old, and 3.2 percent (59) were less than 15-year-old adolescent mothers. Hypertension associated to pregnancy was the highest risk factor among adolescents with 20.7 percent (413), and anemia,

with 12.2 percent (243).

By Complications During Childbirth

Of the 2,845 adolescent mother childbirths with complications, 97.1 percent (2,762) were adolescent mothers 15-19 years old, and 2.9 percent (83) were less than 15-year-old adolescent mothers. The most common adolescent childbirth complications were cephalopelvic disproportion, with 21.7 percent (686), moderate/excessive meconium, with 10.6 percent (336), premature rupture of Foetal membranes, with 7.8 percent (248), breech birth, with 7.7 percent (242), and Foetal suffering, with 5.5 percent (175).

PROFILE OF LIVE BIRTHS TO ADOLESCENT MOTHERS BY METHOD OF CHILDBIRTH PUERTO RICO, 1997

| CHILDBIRTH CHARACTERISTICS | METHOD OF CHILDBIRTH | | | | TOTAL |
|---------------------------------------------------------------------|-----------------------------|----------|------------------|----------|--------------|
| | VAGINAL | | CAESAREAN | | |
| | NO. | % | NO. | % | |
| TOTAL BIRTHS | 42,754 | 66.6 | 21,460 | 33.4 | 64,214 |
| CHILDBIRTHS OF ADOLESCENT MOTHERS (<20 YEARS OLD) | 10,347 | 77.8 | 2,958 | 22.2 | 13,305 |
| UNDERWEIGHT CHILDBIRTHS | 1,173 | 73.8 | 417 | 26.2 | 1,590 |

| TRIMESTER IN WHICH PRE-NATAL CARE BEGAN | | | | | |
|-----------------------------------------|-------|------|-------|------|-------|
| 1 ST TRIMESTER | 7,131 | 76.6 | 2,177 | 23.4 | 9,308 |
| 2 ND TRIMESTER | 2,786 | 80.1 | 690 | 19.9 | 3,476 |
| 3 RD TRIMESTER | 274 | 81.1 | 64 | 18.9 | 338 |
| UNSPECIFIED | 14 | 66.7 | 7 | 33.3 | 21 |
| CHILDBIRTH WITHOUT PRE-NATAL CARE | 142 | 87.7 | 20 | 12.3 | 162 |

**TABLE 2: LIVE BIRTHS TO ADOLESCENT MOTHERS
BY AGE OF THE MOTHER, METHOD OF CHILDBIRTH, AND
PREGNANCY TRIMESTER IN WHICH PRE-NATAL CARE BEGAN
PUERTO RICO, 1997**

**TABLE 3: LIVE BIRTHS OF ADOLESCENT MOTHERS BY AGE OF
THE MOTHER, METHOD OF CHILDBIRTH,
AND MONTH IN WHICH PRE-NATAL CARE BEGAN
PUERTO RICO, 1997**

| Age of the Mother and Method of Childbirth | Month in which Pre-Natal Care Began | | | | | | | | | | | |
|--------------------------------------------|-------------------------------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|------|-------------|
| | Total | 1 st | 2 nd | 3 rd | 4 th | 5 th | 6 th | 7 th | 8 th | 9 th | None | Unsp. Other |
| TOTAL | 13,305 | 1,291 | 4,468 | 3,549 | 1,954 | 1,008 | 514 | 228 | 91 | 19 | 162 | 21 |
| < 15 | 366 | 27 | 101 | 102 | 65 | 34 | 18 | 7 | 6 | 0 | 5 | 1 |
| 15-19 | 12,939 | 1,264 | 4,367 | 3,447 | 1,889 | 974 | 496 | 221 | 85 | 19 | 157 | 20 |
| 15 | 930 | 83 | 294 | 256 | 148 | 76 | 38 | 21 | 3 | 1 | 9 | 1 |
| 16 | 1,981 | 200 | 664 | 545 | 286 | 145 | 67 | 30 | 12 | 4 | 24 | 4 |
| 17 | 2,705 | 268 | 843 | 716 | 444 | 209 | 114 | 52 | 20 | 2 | 34 | 3 |
| 18 | 3,304 | 302 | 1,113 | 881 | 483 | 263 | 129 | 55 | 24 | 4 | 47 | 3 |
| 19 | 4,019 | 411 | 1,453 | 1,049 | 528 | 281 | 148 | 63 | 26 | 8 | 43 | 9 |
| Vaginal Childbirth | 10,347 | 934 | 3,425 | 2,772 | 1,547 | 825 | 414 | 187 | 72 | 15 | 142 | 17 |
| < 15 | 294 | 17 | 78 | 83 | 57 | 28 | 14 | 6 | 6 | 0 | 5 | 0 |

| | | | | | | | | | | | | |
|-----------|--------|-----|-------|-------|-------|-----|-----|-----|----|----|-----|----|
| 15-19 | 10,053 | 917 | 3,347 | 2,689 | 1,490 | 797 | 400 | 181 | 66 | 15 | 137 | 14 |
| 15 | 741 | 63 | 234 | 210 | 113 | 63 | 28 | 17 | 2 | 1 | 9 | 1 |
| 16 | 1,595 | 140 | 536 | 445 | 236 | 118 | 52 | 28 | 12 | 3 | 22 | 3 |
| 17 | 2,107 | 186 | 663 | 560 | 347 | 168 | 92 | 43 | 15 | 2 | 29 | 2 |
| 18 | 2,555 | 227 | 837 | 670 | 392 | 219 | 107 | 46 | 15 | 2 | 37 | 3 |
| 19 | 3,055 | 301 | 1,077 | 804 | 402 | 229 | 121 | 47 | 22 | 7 | 40 | 5 |
| Caesarean | 2,858 | 357 | 1,013 | 794 | 407 | 236 | 120 | 54 | 24 | 8 | 42 | 6 |
| < 15 | 72 | 10 | 23 | 19 | 8 | 6 | 4 | 1 | 0 | 0 | 0 | 1 |
| 15-19 | 2,886 | 347 | 1,020 | 758 | 399 | 177 | 96 | 40 | 19 | 4 | 20 | 6 |
| 15 | 189 | 20 | 60 | 58 | 35 | 13 | 10 | 4 | 1 | 0 | 0 | 0 |
| 16 | 386 | 60 | 128 | 100 | 50 | 27 | 15 | 2 | 0 | 1 | 2 | 1 |
| 17 | 598 | 82 | 180 | 156 | 97 | 41 | 22 | 9 | 5 | 0 | 5 | 1 |
| 18 | 749 | 75 | 276 | 211 | 91 | 44 | 22 | 9 | 9 | 2 | 10 | 0 |
| 19 | 964 | 110 | 376 | 245 | 126 | 52 | 27 | 16 | 4 | 1 | 3 | 4 |

Source: Department of Health, Informative Bulletin of the Office of the Assistant Secretary of Planning, Evaluation, Statistics, and Information Systems, Statistics Division, San Juan, P.R.

TABLE 4: LIVE BIRTHS OF ADOLESCENT MOTHERS BY AGE OF THE MOTHER, METHOD OF CHILDBIRTH, BIRTH WEIGHT, AND PROPORTION OF UNDERWEIGHT

| Age of Mother and Method of Payment | Total | Total Underweight Childbirths (%) | | Weight at Birth | | | | |
|-------------------------------------|--------|-----------------------------------|-------|-----------------|------------------|-----------------------|-----------------------|-----------|
| | | Number | % | 1 LB | 1 LB - 2 LB 3 OZ | 2 LB 4 OZ - 3 LB 5 OZ | 3 LB 6 OZ - 4 LB 7 OZ | 4 LB 8 OZ |
| TOTAL | 13,305 | 1,590 | 12.00 | 2 | 72 | 127 | 262 | 1,127 |
| <15 | 366 | 60 | 0.50 | 0 | 3 | 3 | 11 | 43 |
| 15-19 | 12,939 | 1,530 | 11.50 | 2 | 69 | 124 | 251 | 1,084 |
| 15 | 930 | 130 | 1.00 | 1 | 9 | 11 | 25 | 84 |
| 16 | 1,981 | 271 | 2.00 | 0 | 12 | 23 | 45 | 191 |
| 17 | 2,705 | 331 | 2.50 | 0 | 12 | 20 | 58 | 241 |
| 18 | 3,304 | 391 | 2.90 | 0 | 15 | 36 | 64 | 276 |
| 19 | 4,019 | 407 | 3.10 | 1 | 21 | 34 | 59 | 292 |
| VAGINAL CHILDBIRTH | 10,347 | 1,173 | 8.80 | 2 | 47 | 83 | 179 | 862 |
| < 15 | 294 | 44 | 0.30 | 0 | 2 | 2 | 8 | 32 |
| 15-19 | 10,053 | 1,129 | 8.50 | 2 | 45 | 81 | 171 | 830 |
| 15 | 741 | 103 | 0.80 | 1 | 6 | 9 | 19 | 68 |
| 16 | 1,595 | 211 | 1.60 | 0 | 11 | 14 | 36 | 150 |
| 17 | 2,107 | 251 | 1.90 | 0 | 7 | 18 | 42 | 184 |

| | | | | | | | | |
|------------------|--------------|------------|-------------|----------|-----------|-----------|-----------|------------|
| 18 | 2,555 | 285 | 2.10 | 0 | 9 | 23 | 42 | 211 |
| 19 | 3,055 | 279 | 2.10 | 1 | 12 | 17 | 32 | 217 |
| CAESAREAN | 2,958 | 117 | 3.10 | 0 | 25 | 44 | 69 | 265 |
| < 15 | 72 | 16 | 0.10 | 0 | 1 | 1 | 3 | 11 |
| 15-19 | 2,886 | 401 | 3.00 | 0 | 24 | 43 | 80 | 254 |
| 15 | 189 | 27 | 0.20 | 0 | 3 | 2 | 6 | 16 |
| 16 | 386 | 60 | 0.50 | 0 | 1 | 9 | 9 | 41 |
| 17 | 598 | 80 | 0.60 | 0 | 5 | 2 | 16 | 57 |
| 18 | 749 | 106 | 0.80 | 0 | 6 | 13 | 22 | 65 |
| 19 | 964 | 128 | 1.00 | 0 | 9 | 17 | 27 | 75 |

SOURCE: DEPARTMENT OF HEALTH, INFORMATIVE BULLETIN OF THE OFFICE OF THE ASSISTANT SECRETARY OF PLANNING, EVALUATION, STATISTICS, AND INFORMATION SYSTEMS, STATISTICS DIVISION, SAN JUAN, P.R.

**TABLE 5: LIVE BIRTHS TO ADOLESCENT MOTHERS BY AGE, CHILDBIRTH METHOD, AND SCHOOL LEVEL OF THE MOTHER
PUERTO RICO, 1997**

| AGE OF MOTHER AND METHOD OF PAYMENT | SCHOOL LEVEL OF THE MOTHER | | | | | | | | | | |
|-------------------------------------|----------------------------|----------|-----------|------------|--------------|--------------|--------------|--------------|----------|----------|-----------|
| | TOTAL | 0 | 1-3 | 4-6 | 7-9 | 10-11 | 12 | 13-15 | 16 | 17+ | NO ESPEC |
| TOTAL | 13,305 | 2 | 27 | 535 | 4,529 | 3,909 | 3,195 | 1,079 | 6 | 0 | 23 |
| < 15 | 366 | 0 | 2 | 50 | 302 | 11 | 0 | 0 | 0 | 0 | 1 |
| 15-19 | 12,939 | 2 | 25 | 485 | 4,227 | 3,898 | 3,195 | 1,079 | 6 | 0 | 22 |
| 15 | 930 | 0 | 2 | 77 | 638 | 208 | 2 | 0 | 0 | 0 | 3 |
| 16 | 1,981 | 0 | 2 | 96 | 969 | 868 | 43 | 0 | 0 | 0 | 3 |
| 17 | 2,705 | 1 | 6 | 110 | 912 | 1,203 | 449 | 18 | 0 | 0 | 6 |
| 18 | 3,304 | 0 | 6 | 102 | 854 | 853 | 1,217 | 271 | 0 | 0 | 1 |
| 19 | 4,019 | 1 | 9 | 100 | 854 | 766 | 1,484 | 790 | 6 | 0 | 9 |
| VAGINAL CHILDBIRTH | 10,347 | 2 | 23 | 419 | 3,610 | 3,046 | 2,437 | 791 | 3 | 0 | 16 |
| < 15 | 294 | 0 | 2 | 44 | 238 | 10 | 0 | 0 | 0 | 0 | 0 |
| 15-19 | 10,053 | 2 | 21 | 375 | 3,372 | 3,036 | 2,437 | 791 | 3 | 0 | 16 |
| 15 | 741 | 0 | 2 | 64 | 502 | 169 | 2 | 0 | 0 | 0 | 2 |
| 16 | 1,595 | 0 | 274 | 74 | 803 | 680 | 34 | 0 | 0 | 0 | 2 |
| 17 | 2,107 | 1 | 5 | 83 | 729 | 928 | 343 | 12 | 0 | 0 | 6 |
| 18 | 2,555 | 0 | 6 | 80 | 693 | 661 | 920 | 194 | 0 | 0 | 1 |
| 19 | 3,055 | 1 | 6 | 74 | 645 | 598 | 1,138 | 585 | 3 | 0 | 5 |
| CAESAREAN | 2,958 | 0 | 4 | 116 | 919 | 863 | 758 | 288 | 3 | 0 | 7 |
| < 15 | 72 | 0 | 0 | 6 | 64 | 1 | 0 | 0 | 0 | 0 | 1 |

| | | | | | | | | | | | |
|-------|-------|---|---|-----|-----|-----|-----|-----|---|---|---|
| 15-19 | 2,886 | 0 | 4 | 110 | 855 | 862 | 758 | 288 | 3 | 0 | 6 |
| 15 | 189 | 0 | 0 | 13 | 136 | 39 | 0 | 0 | 0 | 0 | 1 |
| 16 | 386 | 0 | 0 | 22 | 166 | 188 | 9 | 0 | 0 | 0 | 1 |
| 17 | 598 | 0 | 1 | 27 | 183 | 275 | 106 | 6 | 0 | 0 | 0 |
| 18 | 749 | 0 | 0 | 22 | 161 | 192 | 77 | 0 | 0 | 0 | 0 |
| 19 | 964 | 0 | 3 | 26 | 209 | 168 | 346 | 205 | 3 | 0 | 4 |

SOURCE: DEPARTMENT OF HEALTH, INFORMATIVE BULLETIN OF THE OFFICE OF THE ASSISTANT SECRETARY OF PLANNING, EVALUATION, STATISTICS, AND INFORMATION SYSTEMS, STATISTICS DIVISION, SAN JUAN, PR

**TABLE 6: LIVE BIRTHS OF ADOLESCENT MOTHERS
BY AGE OF THE MOTHER AND AGE OF THE FATHER
PUERTO RICO, 1997**

| Age of the Mother | Total | Age of the Father | | | | | | | | | | | | | | | | |
|-------------------|--------|-------------------|-----|-----|-----|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----|-----------|
| | | <15 | 15 | 16 | 17 | 18 | 19 | 20-24 | 25-29 | 30-34 | 35-39 | 40-44 | 45-49 | 50-54 | 55-59 | 60-64 | 65 | NO ESPEC. |
| Total | 13,305 | 14 | 101 | 277 | 691 | 1,182 | 1,656 | 6,303 | 1,802 | 445 | 149 | 57 | 26 | 12 | 6 | 2 | 1 | 581 |
| <13 | 5 | 0 | 0 | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 3 |
| 13 | 52 | 1 | 0 | 7 | 6 | 8 | 6 | 15 | 3 | 0 | 0 | 1 | 1 | 0 | 0 | 0 | 0 | 4 |
| 14 | 309 | 1 | 17 | 21 | 42 | 47 | 34 | 104 | 15 | 6 | 3 | 1 | 0 | 0 | 0 | 0 | 0 | 18 |
| 15 | 930 | 5 | 25 | 49 | 98 | 123 | 139 | 321 | 77 | 16 | 7 | 5 | 2 | 1 | 0 | 0 | 0 | 62 |
| 16 | 1,981 | 3 | 29 | 89 | 178 | 226 | 286 | 819 | 183 | 49 | 13 | 5 | 3 | 3 | 1 | 1 | 0 | 93 |
| 17 | 2,705 | 1 | 16 | 60 | 167 | 302 | 385 | 1,223 | 293 | 84 | 25 | 10 | 6 | 2 | 0 | 1 | 0 | 130 |
| 18 | 3,304 | 1 | 9 | 28 | 117 | 290 | 397 | 1,650 | 502 | 127 | 35 | 12 | 4 | 0 | 3 | 0 | 1 | 128 |
| 19 | 4,019 | 2 | 50 | 22 | 83 | 186 | 408 | 2,171 | 729 | 163 | 66 | 23 | 10 | 6 | 2 | 0 | 0 | 143 |

**TABLE 7: LIVE BIRTHS TO ADOLESCENT MOTHERS BY
OBSTETRICS PROCEDURES, MEDICAL RISK FACTORS, AND
CHILDBIRTH COMPLICATIONS BY AGE OF THE MOTHER
PUERTO RICO, 1997**

| OBSTETRICS PROCEDURES PREGNANCY RISK FACTORS CHILDBIRTH COMPLICATIONS | TOTAL | AGE OF THE MOTHER | |
|-----------------------------------------------------------------------------|--------|-------------------|--------|
| | | <15 | 15-19 |
| TOTAL CHILDBIRTHS | 13,305 | 366 | 12,939 |
| TOTAL CHILDBIRTHS TO ADOLESCENT MOTHERS WITH OBSTETRICS PROCEDURES | 11,132 | 311 | 10,821 |

| | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|------------|---------------|
| Obstetrics Procedures 1/ | 17,294 | 461 | 16,833 |
| Amniocentesis | 221 | 6 | 215 |
| Electronic Foetal Monitoring | 10,342 | 291 | 10,051 |
| Induced Childbirth | 860 | 17 | 843 |
| Childbirth Stimulation | 2,296 | 65 | 2,231 |
| Tocolysis | 191 | 7 | 184 |
| Ultrasound | 3,312 | 74 | 3,238 |
| Others | 72 | 1 | 71 |
| TOTAL CHILDBIRTHS TO ADOLESCENT MOTHERS WITH MEDICAL RISK FACTORS | 25,288 | 882 | 24,406 |
| PREGNANCY RISK FACTORS | 1,994 | 61 | 1933 |
| Anemia(hct<30 / hgb<10) | 243 | 9 | 234 |
| Pregnancy Associated Hypertension | 413 | 8 | 405 |
| Diabetes | 49 | 0 | 49 |
| Chronic Hypertension | 31 | 0 | 31 |
| Cardiac Illness | 19 | 0 | 19 |
| Lung Disease | 34 | 0 | 34 |
| Sensitivity to the Rh Factor | 26 | 0 | 26 |
| Uterine Hemorrhage | 19 | 1 | 18 |
| Hydramnios / Oligohydramnios | 63 | 2 | 61 |
| Incompetent Cervix | 14 | 0 | 14 |
| Eclampsia | 25 | 2 | 23 |
| All Others | 1,058 | 39 | 1,019 |
| TOTAL CHILDBIRTHS TO ADOLESCENT MOTHERS WITH CHILDBIRTH COMPLICATIONS | 2,845 | 83 | 2,762 |
| Childbirth Complications | 3,162 | 94 | 3,068 |
| Cephalopelvic Disproportion | 686 | 16 | 670 |
| Moderate/Excessive Meconium | 336 | 7 | 329 |
| Premature Rupture of Membranes | 248 | 12 | 236 |
| Breech Births | 242 | 6 | 236 |
| Foetal Suffering | 175 | 5 | 170 |
| Uterine Dysfunction | 92 | 5 | 87 |
| Induced Childbirth | 49 | 3 | 46 |
| Others | 1,334 | 40 | 1,294 |
| 1/ the total of obstetrics procedures, medical risk factors, and complications is greater than the total of childbirths with procedures, risks, and complications, since there were mothers with more than one risk, procedure, or complication. | | | |

Source: Department of Health, Informative Bulletin of the Office of the Assistant Secretary of Planning, Evaluation, Statistics, and Information Systems, Statistics Division, San Juan, P.R.

Act No. 338 of December 31, 1998, known as the "Bill of Rights of the Child," sets forth in its Statement of Motives that "The greatest wealth of a country is its people. As part of this wealth, children are the most valuable, since

they are the promise for a better future. Hostos clearly stated the true worth of children when he wrote, "Children are the promise of mankind; mankind, the hope of humanity." The State aspires that in the future, our people will be healthier, more mentally poised and happier. To achieve this goal, it recognizes that we must provide the care, protection and opportunities in life for the children of today, that will allow them to develop to a maximum their potential as individuals."

On December 10, 1948, after the tragic experience of World War II, the General Assembly of the United Nations adopted and proclaimed the Declaration of Universal Human Rights. As the inalienable, universal and innate rights of man were more deeply pondered, the need to offer special protection to children emerged, and on November 20, 1989, the same General Assembly adopted the Convention on the Rights of the Child. With ten (10) years of preparation, and the contribution of representatives from diverse societies, religions, and cultures, the Convention was approved as an international human rights treaty by the General Assembly of the United Nations on November 20, 1989.

This Child Rights Assembly broke all records as the most widely approved treaty in all history. The Articles that constitute this treaty are based upon the Declaration of the Rights of the Child, approved by the General Assembly on November 20, 1989, and acknowledged in the Universal Declaration of Human Rights.

Currently, when in our country many children's most fundamental rights are being abused, it is necessary to proclaim "Protection of Safe and Healthy Gestation Processes in the Commonwealth of Puerto Rico Week."

The Constitution of the Commonwealth of Puerto Rico, in Article 11, Section 1, sets forth that "The dignity of the human being is inviolable." However, the Constitution of Puerto Rico does not define the moment in which

the life of the human being begins. At this juncture, Article 24 (31 LPRA, Section 81) of the Civil Code of Puerto Rico, defines the following: "Personality and civil capacity - Determined by birth; when born, birth determines personality and capacity." "A child shall be considered as born when completely separated from his mother's womb."

Although our juridical system does not acknowledge life until a person has been withdrawn from the maternal womb, it is no less certain that Act No. 338 of December 31, 1998, also known as the "Bill of Rights of the Child," in Section 2, subsection (20), sets forth the following: "Receive adequate medical care for its physical, mental and emotional health and integral pre-natal and post-natal care in accordance to the growth and development chart in effect, as preventive health measures." Therefore, it is urgently necessary for the Department of Health, the Department of the Family, and the Department of Education, as well as other organisms and public and private entities concerned in this matter, to adopt an aggressive public policy in the education, orientation, and disclosure of the benefits for the unborn child of having the future mother submit to all medical treatments in the pre-natal phase.

Therefore, it is necessary for this Legislature to assume a proactive role in the defense of unborn children, for our future generation to be both physically and emotionally healthy.

BE IT ENACTED BY THE LEGISLATURE OF PUERTO RICO:

Section 1.-The first week of August of each year is hereby declared as "Protection of Safe and Healthy Gestation Processes in the Commonwealth of Puerto Rico Week."

Section 2.-Every year, not less than ten (10) days prior to the first week of August, the Governor of the Commonwealth of Puerto Rico shall issue a proclamation to exhort the Puerto Rican people to joint the celebration set forth in

this Act.

Section 3.-The Department of Health, the Department of the Family, and the Department of Education, as well as other organisms and public and private entities concerned in this matter, shall adopt an aggressive public policy towards the education, orientation, and the disclosure of the benefits for unborn children of having future mothers submit to all medical treatments in the pre-natal phase, and shall offer any other necessary information for the accomplishment of the objectives of this Act, by means of the organization and celebration of activities that promote the celebration of the first week of August of each year as "Protection of Safe and Healthy Gestation Processes in the Commonwealth of Puerto Rico Week."

Section 4.-A copy of the Annual Proclamation shall be distributed to the mass communication media of the Island for its disclosure or publication.

Section 5.-This Act shall take effect immediately after its approval.