

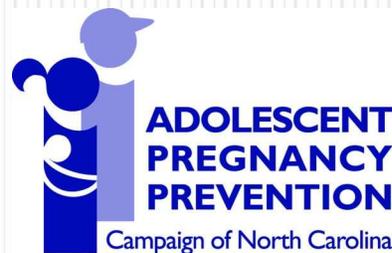
NCIOM Adolescent Sexual Health NC Prevention Programs

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North Carolina



What I'll Talk About...

Partnership with DHHS – Teen Pregnancy Prevention Initiatives
(TPPI)

APPCNC Scope of Work

CDC Project – Promoting Science-Based Approaches Using Getting to
Outcomes

Programs Used in NC

Challenges and Barriers

What Can We Do?



NORTH CAROLINA

TEEN

**Pregnancy
Prevention**

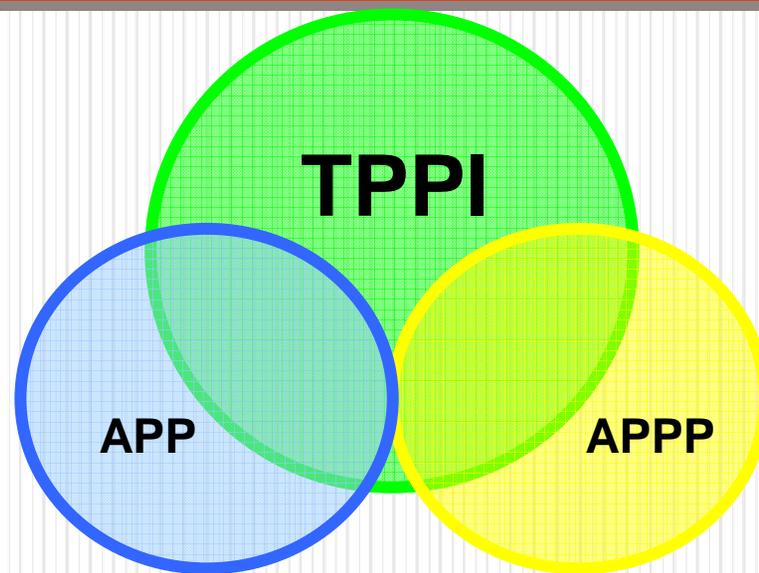
INITIATIVES

Invests in NC youth by providing grants to local agencies to implement teen pregnancy prevention and teen parenting programs

Is required by NC General Statutes to administer primary and secondary pregnancy prevention programs

Is a program of the Division of Public Health, Women's and Children's Health Section, Women's Health Branch, Family Planning and Reproductive Health Unit

TPPI Programs



Adolescent Parenting Program (APP)

Adolescent Pregnancy Prevention Program (APPP)

Adolescent Parenting Program



Is an investment in teen parents that will be paid back by its participants, and eventually by their babies, through a lifetime of productive contributions to their communities

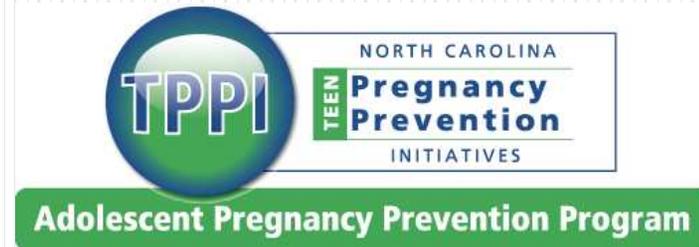
Serves first time pregnant or parenting teens

Provides intensive individual case management, educational sessions, and educational or cultural enrichment activities to participants

APP Goals

- Prevent a second pregnancy
- Graduate from high school
- Utilize appropriate healthcare for self and child
- Enhance parenting abilities
- Prepare for employment
- Eliminate substantiated referrals of abuse and neglect

Adolescent Pregnancy Prevention Program

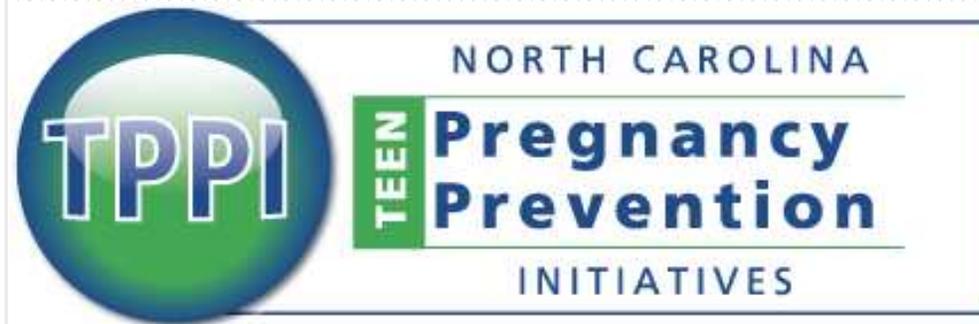


Provides essential education, supports academic achievement, encourages parent/teen communication, promotes responsible citizenship, and builds self confidence

Aims to reduce teen pregnancies in NC by delaying the initiation of sexual activity and increasing the use of contraceptives

Requires grantees to utilize a program model that is shown through evaluation to be effective

For More Information
Visit the TPPI Website



www.teenpregnancy.ncdhhs.gov

TPPI and APPCNC Partner:

Convene and co-host annual conference dedicated to teen pregnancy prevention strategies and research dissemination

Collaborate to ensure that best practices are being implemented with fidelity and with a commitment to implementing all essential, core components

Collaborate to provide needed training and technical assistance

APPCNC Work

Advocacy

Training

Research dissemination

Resource pool and archive

Awareness

Program technical assistance

Coalition or council building assistance

CDC Promoting Science-Based Approaches A National Project

In 2002, CDC's Dept. of Reproductive Health funded a National Project to promote science-based approaches in teen pregnancy, HIV and STI prevention.

The goal of this national project is to decrease teen pregnancy, STI and HIV rates by increasing the use of research-proven practices and programs, or what we call "science-based approaches."

What are SBA's?

Using local and state data to select and assess the priority populations for programs;

Identifying the risk and protective factors of the priority populations to be served;

Using health behavior or health education theory to guide the selection of risk and protective factors that will be addressed by the program, and also to guide the selection of program strategies;

What are SBA's

Using a logic model to link risk and protective factors with program strategies and outcomes;

Conducting process and outcome evaluation of the implemented program, and using evaluation data to make modifications; and

Selecting, adapting, if necessary, and implementing programs that are either science-based or are promising.

Definitions

Science-based programs are those that have been proven through rigorous evaluation to be effective in changing sexual risk-taking behavior.

Promising programs are those that have not been formally evaluated but have most of the characteristics of effective programs

Getting to Outcomes (GTO) FRAMEWORK



Some of the Science-based programs used in NC:

Becoming a Responsible Teen

Be Proud, Be Responsible

Draw the Line/Respect the Line

Making Proud Choices

Reducing the Risk

Safer Choices

Teen Outreach Program

There are also clinic-based sbps but I don't have a read on how many are being implemented or where....

Some of the Promising Programs used in NC

Wise Guys

Smart Girls

Teen Prevention Education Program (Teen PEP)

Plain Talk

Characteristics of Effective Programs

Three categories:

1. Program **Development**
2. Program **Content**
3. Program **Implementation**

Program DEVELOPMENT:

Involved multiple people with different backgrounds to design curriculum

Assessed relevant needs and assets of target group

Used logic model approach

Designed activities consistent with community values and resources available (staff time, staff skills, facility space, and supplies)

Pilot-tested the program

Program CONTENT

Focused on clear health goals: the prevention of STD/HIV and/or pregnancy

- Talked about these health goals, including susceptibility and negative consequences
- Gave a clear message about these goals
- Identified behaviors leading to the health goal (see next characteristic)

Focused narrowly on specific behaviors leading to these health goals

- STD/HIV: Abstinence, Frequency of sex, number of partners (less commonly), condom use
- Pregnancy: Abstinence, Frequency of sex, Contraceptive use

Program CONTENT

Addressed multiple sexual psychosocial risk and protective factors affecting sexual behaviors

Created a safe social environment for youth to participate

- Established and enforced class rules
- Divided class by gender (occasionally)

Included multiple activities to change each of the targeted risk and protective factors

Used effective teaching methods

Program CONTENT

Used activities, instructional methods and behavioral messages that were appropriate to the youths' culture, developmental age, gender and sexual experience

Covered topics in a logical sequence

Program IMPLEMENTATION

Secured at least minimal **support** from appropriate authorities

Selected educators with desired characteristics, and then **trained** them

If needed, implemented activities to recruit youth and overcome **barriers** to their involvement

Implemented virtually all activities with reasonable **fidelity**

NC Programs in Action

Intensive sites:

Vance County Health Department

Cape Fear Teen Health Council/WHAT

Thomasville City Schools/CIS Thomasville

Robeson County Health Department

Gaston County Health Department

Starting work with Northampton, Anson, Durham

Biggest challenges and needs

Hard to integrate effective programming into schools.

Sometimes “FIT” with community is the biggest barrier/perceived barrier.

There is, oddly, funding for ineffective approaches and programs in schools but no funding for effective programming in schools – some exceptions include TPPI funded school-based programs.

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“I was an abstinence-only baby.”

Reasons to cheer:

Pregnancy rates and births have trended downward over most of the past fifteen years.

If the teen birth rate in North Carolina had not declined 25% between 1991 and 2002 there would have been:

- Over 26,000 additional children born to teen mothers during that time period.
- Nearly 11,000 more children under age six living in poverty in 2002.
- Over 9,600 additional children under age six living with a single mother in 2002.

We have a body of research that can greatly inform how we proceed.

The watermark for public awareness is high – thanks to Sarah Palin, Juno and Jamie Lynn Spears....

Reasons to be on the edge of your chair screaming:

There were over 20,000 pregnancies to teens in 2007

In 2005, the number of actual births to teens could fill up 997 kindergarten classrooms

Reasons to be on the edge of your chair screaming

For the reasons Jeff touched on...the public costs, personal costs and likely negative outcomes for the teen parents, and the children of teen parents.

Our policies are NOT serving us:

They are confusing and contradictory and do not utilize what we know from the research actually works.

Implications for lifelong health – the teen years are fleeting and not discrete in terms of decision making and healthy choices.

What Will It Take to Sustain
Progress?

...

-
- Recognize problem isn't solved
 - Invest in programs that have been proven effective in changing teen sexual behavior (as TPPI does with its grants)
 - Divest in programs and approaches that have no evidence of changing or reinforcing behavior
 - Increase funding for Title X, the Federal Family Planning Program
 - Adopt a school health curriculum or guidelines that would require more complete education that is developmentally appropriate and based on what we know to work.
 - Recognize that there is no silver bullet

Any questions? Concerns?

Please contact me at:

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