

THE
NATIONAL
CAMPAIGN TO
PREVENT TEEN PREGNANCY

Get Organized:

A Guide to Preventing Teen Pregnancy

A THREE VOLUME SET

Focusing on the Kids

Involving the Key Players

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PRESERVATION**

**PHOTOCOPY
PRESERVATION**

Get Organized:

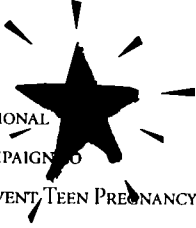
**A Guide to Preventing
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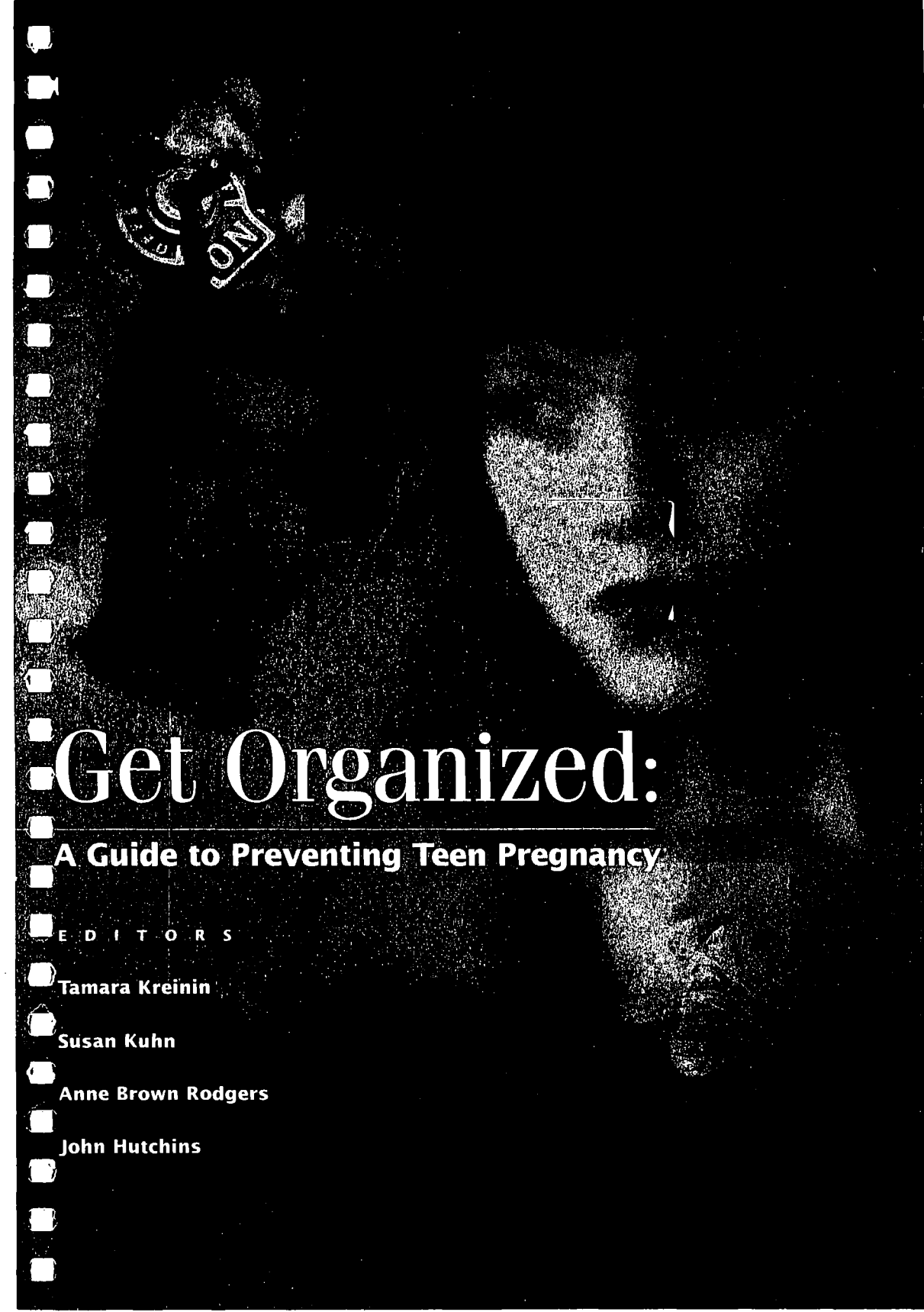
Focusing on the Kids

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Making It Happen

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Get Organized:

A Guide to Preventing Teen Pregnancy

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Get Organized:

A Guide to Preventing Teen Pregnancy

V O L U M E 1

Focusing on the Kids

The National Campaign to Prevent Teen Pregnancy

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PUBLICATIONS ORDER FORM

Introduction

The 1990s have brought some good news regarding teen pregnancy in the United States: after two decades of increasing teen pregnancy and birth rates, the numbers have declined. Overall, the teen birth rate declined by 16 percent from 1991 to 1997, with all states recording a decline in the birth rate of 15- to 19-year-olds. It is the sixth year in a row that the teen birth rate has declined. Nevertheless, 4 out of 10 American girls get pregnant at least once before they turn 20, leading to nearly one million teen pregnancies a year. Clearly, teen pregnancy remains a serious problem, and the economic, social, and personal costs for teens, their children, and society are great. As a nation, we are at a severe competitive disadvantage when our teen pregnancy and birth rates are at least double—even triple—those of other industrialized nations.

Communities around the country increasingly recognize that helping teens avoid pregnancy can't be accomplished by any single program or strategy. Because the causes of teen pregnancy are complicated and overlapping, solutions must have many parts and approaches. This means doing things differently: getting new people and organizations involved, committing for the long term, and measuring carefully the effectiveness of programs. This three-volume publication, *Get Organized: A Guide to Preventing Teen Pregnancy*, is meant to be a practical manual, a toolkit of sorts, for people at the state and local levels who are interested in taking action to prevent teen pregnancy in their communities. It covers a lot of ground—from strategies for collecting basic data and for reaching out to religious leaders to practical advice about how to raise money and conduct program evaluation. Yet it remains easy to read and simple to use, with many examples from promising programs around the country. We hope it will be useful as communities unite to address this issue and to design programs that are right for them.

Get Organized was developed primarily for those creating a state or local coalition or strategy to prevent teen pregnancy, although anyone interested in developing a single, small program to help teens avoid pregnancy should find valuable information in these chapters. Several overarching principles bind these chapters together:

- Multiple, mutually complementary strategies are more likely to make a difference. There are no easy answers to the problem of teen pregnancy.
- Involving new partners, like the business community, or traditional partners in new ways enhances any prevention strategy.
- Preventing teen pregnancy requires long-term, intense effort. One six-week program will not have much lasting effect, nor will a couple of classroom hours. And, because a new crop of teenagers arrives on the scene every year, prevention efforts must be constantly reinvented.
- Communities can unite around the *need* to address teen pregnancy without expecting unanimity about *ways* to prevent it. Different organizations and members of the community can adopt different strategies to reach the same end—fewer pregnant teens. Sometimes strategies even seem to conflict with each other, but that is not necessarily a problem. Teen pregnancy is a complicated—even messy—problem, and “messy” strategies can often be useful.
- Parents are important influences on their children’s decisions about sexual behavior. They should be supported in their roles and included in planning and developing strategies to prevent teen pregnancy. And, needless to say, involving teens themselves—the “target audience”—is always essential.
- Focusing on boys and young men is critical to any effort to prevent teen pregnancy. Girls are indeed the ones who get pregnant, but it takes two to cause a pregnancy.

As the accompanying matrix shows, *Get Organized* is divided into three complementary volumes:

Volume I: Focusing on the Kids opens with an overview of the promising programs that can help prevent teen pregnancy. The other chapters explain how to tailor programs to stages of adolescent development, create interventions for girls, involve boys and young men in prevention efforts, and involve young people themselves in developing and implementing programs.

Volume II: Involving the Key Players focuses on the roles of traditional participants in prevention efforts, like schools and health

Get Organized Matrix

**Volume 1:
Focusing on
the Kids**

- 1. Promising Approaches to Preventing Teen Pregnancy
- 2. Tailoring Pregnancy Prevention Programs to Stages of Adolescent Development
- 3. Developing Pregnancy Prevention Programs for Girls and Young Women
- 4. Involving Teen Boys and Young Men in Teen Pregnancy Prevention
- 5. Involving Youth in Teen Pregnancy Prevention Programs

**Volume 2:
Involving the
Key Players**

- 6. Involving Parents and Other Adults
- 7. Involving the Faith Community
- 8. Involving the Business Community
- 9. Involving Schools
- 10. Involving Health Care Professionals

**Volume 3:
Making It
Happen**

- 11. Getting Your Community Involved in a Teen Pregnancy Prevention Project
- 12. Tailoring a Program to Your Community Through Needs Assessment
- 13. Planning and Carrying Out a Teen Pregnancy Prevention Project
- 14. Raising Funds for Teen Pregnancy Prevention
- 15. Working with the Media to Promote Teen Pregnancy Prevention
- 16. Building Evaluation into Your Work
- 17. Moving Forward in the Face of Conflict

care professionals, as well as some often overlooked players, including faith leaders, the business community, and parents.

Volume III: Making It Happen concentrates on the logistics of developing a state or local coalition—or any major effort—to prevent teen pregnancy, including involving the community, assessing the needs of the community, planning, fundraising, working with the media, evaluating initiatives, and dealing with conflict.

Each chapter of *Get Organized* follows a similar format. The tab divider briefly describes how the information is organized and lists a handful of the chapter's key ideas. Throughout the chapters, readers will find easy-to-read boxes, checklists, and nuggets of factual information. Boxes labeled "Research Notes" offer useful findings from published studies. "Field Notes" offer the best advice from practitioners in the field. "Case in Point" boxes illustrate specific issues with real-life examples. Every chapter concludes with a list of helpful references and resources. While the chapters and vol-

umes of *Get Organized* certainly work in tandem, each individual chapter is also meant to stand on its own as a resource.

Many talented people have worked on *Get Organized*, and they are recognized by name in the Acknowledgments, but I would like to thank, in particular, our partners and funders, the U.S. Department of Health and Human Services and the Johnson & Johnson Family of Companies, for their support.

Good work is being done around the country to prevent teen pregnancy. We at the National Campaign hope that *Get Organized* serves both to catalyze new initiatives and reinvigorate existing ones at the state and local levels.

Isabel V. Sawhill
President
National Campaign to Prevent Teen Pregnancy
September 1999

Promising Approaches to Preventing Teen Pregnancy

by John Hutchins

T H I S C H A P T E R

Gives some insight into three important factors that contribute to teen pregnancy—individual behavior, community, and culture;

Describes promising ways communities can prevent teen pregnancy—education programs, reproductive health services, efforts to strengthen family and community bonds, youth development programs, media campaigns, and multiple component campaigns; and

Provides references and resources for further information.

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Key Ideas in this Chapter

Give teens something to say “yes” to. Activities that provide teens with engaging activities and help them develop future goals also help them avoid teen pregnancy.

Don’t give up hope—teen pregnancy is not inevitable. Teen pregnancy and birth rates have declined in the 1990s, led by less sexual activity and more contraceptive use among teens. There are many good strategies for helping to further these trends.

Avoid looking for one “right” strategy. No single strategy alone is sufficiently powerful to reduce teen pregnancy rates very much. Teens need a constant message about pregnancy-free adolescence and need many types of assistance to reach adulthood without being derailed by pregnancy and childbearing.

Make a long-term commitment. The most successful programs are the ones that have multiple components, sufficient financial and leadership resources, and a real plan for being around for years.

Target teens most at risk before they become sexually active. Programs have the best chance of reducing teen pregnancy rates if they focus on the teens who are most at risk of unprotected sex and unplanned pregnancy.

Promising Approaches to Preventing Teen Pregnancy

What's behind high rates of teen pregnancy?

Growing up today is challenging. Teens live in a culture that sends them mixed and often destructive messages about sexuality, relationships, and developing a mature identity. Even the most advantaged teen faces pressure to make unwise and unhealthy decisions about sex.

About one million teens get pregnant each year, and each teen pregnancy has its own story. Many teens grow up in the inhospitable environments of poverty, unsafe neighborhoods, inadequate schools, and troubled families. They see career or economic opportunities as out of their reach and have little motivation to remain abstinent and delay pregnancy and parenting. Some teens have sex and get pregnant or cause a pregnancy because they are trying to prove they are adults. Others get pregnant by accident or because they lack the information that can help them avoid a pregnancy.

Research has identified a host of factors—related to individual behavior, family and community situations, and cultural pressures—that contribute to teen pregnancy. Most programs to

prevent teen pregnancy focus on one of these groups of factors.

Individual behavior: risk-taking by teens

Teens who get pregnant or cause a pregnancy are often engaged in a pattern of poor choices. Teens who use or abuse drugs and alcohol, who have had a history of violence and delinquency, or are failing at or dropped out of school have higher rates of sexual activity. Teens using drugs and alcohol are more likely to put themselves in sexually risky situations and are much less likely to use contraception. Teen girls whose first partners are older teens or adult men are also less likely to use contraception and are more likely to report that their first sexual experience was involuntary or unwanted. And, teens who begin intercourse at a young age have a higher risk of getting pregnant or causing a pregnancy.

Despite recent declines, the U.S. continues to have the highest teen pregnancy rate in the industrialized world.

Giving teens the skills and motivation to make informed decisions about sexuality can reduce sexual risk-taking. Helping teens avoid other risk-taking behaviors may also help teens avoid a pregnancy.

Community: fragmented or abusive families and unstable communities

The environments that children grow up in have an important influence on their risk of teen pregnancy. As one researcher recently wrote:

"Research shows that youths at greatest risk [for teen pregnancy] are more likely to live in areas with: high poverty rates, low levels of education, high residential turnover, and high divorce rates. Their parents are more likely to have low levels of education, to be poor, to have experienced a divorce or separation, or to never have married, and their mothers and older sisters are more likely to have given birth as adolescents" (Kirby, 1997).

Increasing the capacity of families and communities to nurture teens and help them stay in school and set goals for their lives may contribute to lower rates of teen pregnancy. Young people who feel supported by parents, school, and community during their adolescence are

buffered against the risk of too-early pregnancy.

Culture: negative cultural and media messages

Teens are barraged by TV shows, films, songs, and advertising in which sex has little meaning, unplanned pregnancy seldom happens, and sexual partners are rarely married, let alone committed to each other. Sexual themes permeate the pictures and plot lines. Teens may spend more time in the presence of these messages than in the presence of alternative messages that value staying in school and preparing for adulthood.

Teen pregnancy is just one problem young people face in our culture today—and perhaps not the most pressing one. Parents identify violence, gangs, drugs, and pressure from peers to engage in unhealthy behaviors as even greater risks than early pregnancy (National Campaign to Prevent Teen Pregnancy, 1998a).

Communities can help prevent teen pregnancy even when that issue is not the primary focus of an initiative. Pregnancy prevention can be adopted as part of a strategy that focuses on more immediate concerns of that community.

Strategies for preventing teen pregnancy

Most teen pregnancy prevention programs have emphasized education, skills, abstinence, and access to contraception. However, the definition of what constitutes teen pregnancy prevention is best expanded to include activities that seek to instill teens with confidence and a sense of the future. This speaks to motivation to avoid pregnancy, a critical element in a pregnancy-free adolescence.

Many different kinds of programs exist to help teens avoid pregnancy. They can be divided into several categories:

- education for teens about sex, relationships, pregnancy, and parenthood;

- reproductive health services for teens;
- programs to strengthen teens' bonds with family and community;
- youth development and school-to-career programs;
- media campaigns; and
- multiple component campaigns.

Each is described here along with examples of specific programs. Contact information for these programs can be found at the end of the chapter.

Education for teens about sex, relationships, pregnancy, and parenthood

Sometimes, what teens need most to avoid pregnancy is information. In schools, community centers, and houses of worship, teachers and other practitioners have developed a broad range of education programs to teach young people of all ages to avoid too-early pregnancy. These programs come in many different varieties, but they are generally described in terms of their emphasis on abstinence or sexuality education. Most of these programs focus on delaying sexual activity. Some are considered

Teen pregnancy prevention efforts focus on many different issues:

- education
- reproductive health
- family and community bonds
- youth development
- media
- all of the above

BEST BET:

Give teens access to many types of programs.

"abstinence-only," while others are called "abstinence-plus" because they include discussion of contraception. Those called "comprehensive" concentrate more on contraception—the many methods now available, how to use them, and where to get them.

Abstinence education programs and curricula

Abstinence education programs seek to help teens understand that the only fail-safe method of preventing pregnancy and sexually transmitted diseases (STDs) is sexual abstinence. "Abstinence-only" programs motivate young people to resist

media and peer pressures to have sex and actively support the many teens who choose to abstain from sexual activity. Some abstinence programs also encourage sexually active teens to renew their abstinence.

Abstinence education programs come in a few varieties. Some programs promote sexual abstinence until marriage. Others encourage abstinence at least through high school, but do not explicitly expect teens to refrain from sex until marriage. Still others (often termed "abstinence-plus") deliver a strong abstinence message to younger teens, but offer information on contraception

FIELD NOTES

Promising abstinence education strategies

Start early. Messages about abstinence are more likely to work if they are delivered to teens when they are young and not sexually active.

Talk about values. Responsibility, self-control, self-respect, and respect for others are important values underlying a strong abstinence message.

Do not be fear-based. Teens are more likely to respond to positive messages about abstinence. Scare tactics may turn them off, preventing them from practicing skills that would keep them safe.

Include youth development components. Some of the most promising abstinence programs—like **Best Friends**—include mentoring, community service, and other youth development activities that create supportive networks for teens who choose abstinence.

Address sexual abuse. Given the connection between early sexual abuse and teen sexual activity, abstinence education programs should identify and help teens who have been victims of sexual abuse.

as well, recognizing that many teens become sexually active in later adolescence.

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (federal welfare reform legislation) set aside \$50 million a year for grants to states for abstinence-only education. Researchers and practitioners are working to identify effective abstinence-only curricula and programs to replicate around the country. To date, few peer-reviewed evaluations of abstinence-only programs have been published. Existing evaluations are inconclusive about such programs' effectiveness (Kirby, 1997).

The federal government is funding an evaluation of the impact of selected abstinence-only education programs receiving funding from this new program. This evaluation began in late 1998. The goal of the evaluation is to determine the effects of these programs in achieving key results, including reduced teen pregnancy and reduced teen sexual activity.

Sexuality and STD/HIV education programs and curricula

Sexuality education programs teach young people about human sexual development, pregnancy and reproduction, and contraceptives and how they work. They also help teens

RESEARCH SHOWS

Sexuality education does not increase teen sexual activity.

learn how to deal with sexual situations—that is, how to refuse sex if one is not ready for it, and how to negotiate contraceptive use. STD/HIV education programs focus especially on safer sex practices.

Despite the fears of some, research results are unequivocal: Sexuality education does not increase teen sexual activity (Kirby, 1997). In fact, some programs have been shown to delay the onset and reduce the frequency of intercourse and to reduce the number of sexual partners among teens. Certain HIV education programs, in particular, seem to delay sexual activity and increase the use of contraceptives, especially condoms. The condom use rate among teens has increased substantially in the last 15 years.

Reproductive health services for teens

Teens who are sexually active must use some type of contraception to avoid pregnancy. This is why many teen pregnancy prevention programs offer access to reproductive health services and products, including condoms and emergency contraception. Teens can get these services in a number of ways.

Family planning clinics

Many teens and adults receive health and reproductive health care services from public and private family planning clinics.

Through its 137 private affiliates, the **Planned Parenthood Federation of America** offers reproductive health care and sexual health information to more than five million Americans in 900 local health centers. Planned Parenthood's many services include:

- family planning counseling and birth control;
- pregnancy testing and counseling;
- gynecological care, including Pap tests;
- breast exams;
- emergency contraception;
- HIV testing and counseling;
- age-appropriate sexuality education; and

RESEARCH NOTES

Sexuality education programs

Research has shown that those sexuality and STD/HIV education programs that have a positive effect on behavior share nine characteristics. They:

- Focus clearly on reducing one or more sexual behaviors that lead to unintended pregnancy or HIV/STD infection.
- Incorporate behavioral goals, teaching methods, and material that are appropriate to the age, sexual experience, and culture of the students.
- Are based on approaches that are proven to effectively influence other risky behaviors.
- Last long enough for participants to complete important activities adequately.
- Provide basic, accurate information about the risks of unprotected intercourse and methods of avoiding unprotected intercourse.
- Use teaching methods that involve the participants and personalize the information.
- Address social pressures related to sex.
- Practice communication, negotiation, and refusal skills.
- Select teachers or peers to deliver the program who believe in the approach and then provide them with thorough training, including practice sessions.

Source: Kirby, 1997

- screening and treatment for sexually transmitted infections.

School-based health centers

Some school districts offer reproductive health services through the approximately 1,200 school-based health centers in the United States. According to **Making the Grade**, a national program of the Robert Wood Johnson Foundation, comprehensive school-based health centers vary in the services they provide, but they share some common features, including:

- written consent from parents for their children to enroll;
- advisory boards of community representatives, parents, youth, and family organizations;
- cooperation with school nurses, coaches, counselors, classroom teachers, and school principals;
- clinical services offered by multidisciplinary teams of qualified health providers; and
- comprehensive services and referrals, including reproductive health care.

School-based condom distribution programs

Recent studies have shown that making condoms available in high schools increases condom use a bit but does not increase sexual activity (Schuster et al.,

1998). Nonetheless, these programs remain controversial in many communities; only about 400 schools in the U.S. distribute condoms. In those schools with health clinics or condom distribution programs, many sexually active teens do obtain contraceptives, particularly condoms. Some evaluation research shows that increasing access to contraceptives at school does not have a marked effect on better contraceptive use or on reducing pregnancy or birth rates. This may be due to a “substitution effect”—students would have found condoms from other widely available sources if the schools had not provided them.

Private physicians’ offices

Many teens get regular health care from a family physician or pediatrician. In some cases, these doctors provide counseling and contraceptive services to their teen patients. Some teens are more comfortable getting care in such settings rather than in a family planning clinic.

These offices vary in their approach to counseling teens about sexuality and contraception. Several medical associations, including the American College of Obstetricians and Gynecologists, the American Academy of Pediatrics, and the American Nurses Association, have guidelines and best practices for their members to help

them work effectively with teens to prevent pregnancy.

Teen medical clinics

Some communities have established free-standing health clinics that serve the broad medical needs of teens. For example, a teen health center in Nashua, New Hampshire, provides health care for teens on a drop-in basis. While teens are waiting for medical care, peer counselors are available. The health center has become a popular hub of activity for teens in that community.

Emergency contraception prescription

Emergency contraceptives are "morning after" methods used following sexual intercourse, but before pregnancy is established. In early 1997, the Food and Drug Administration ruled that taking larger doses of regular contraceptive pills was a safe way to prevent a pregnancy within 72 hours of unprotected sex.

Programs to strengthen teens' bonds with family and community

Teens who have good communication with their parents and support from other adults and the community are at lowered risk for having or causing a teen pregnancy. Parents and families have a far greater influence on their teens' sexual decision-making than they might think,

according to a recent research review (Miller, 1993).

Parents are children's first and best teachers about love, sex, and relationships. Teens say they want to hear from their parents about sex and relationships, yet many parents do not believe they can make a difference in helping their teenage children avoid pregnancy.

Communications programs for parents and teens

Many brief interventions have been developed to help encourage better communication between parents and teens. There are programs for parents only, programs for parents and their children together, classroom homework in sexuality education classes requiring communication with parents, and videotapes and written materials for families to use at home.

Several evaluated programs demonstrate a clear short-term increase in parent/child communication and in parents' and teens' comfort with discussing sexual issues. Examples of efforts to encourage parent/teen communication about sexual issues include:

The National Campaign to Prevent Teen Pregnancy has published a fold-out brochure for parents, *Ten Tips for Parents to Help Their Children Avoid*

Teen Pregnancy. It includes a list of resources specifically for parents.

Girls Inc., a national youth development program, developed **Growing Together**, a four- to five-session curriculum that seeks to delay the onset of

teen sexual activity by fostering mother/daughter communication.

Since 1997, Advocates for Youth has promoted October as national **Let's Talk Month** to encourage parents in their roles as the primary sexuality educators of their children. They offer printed and video materials for practitioners and parents, and tips on how to develop seminars for parents.

FIELD NOTES

Improving reproductive health services

Make services timely. Teens should be able to schedule an appointment within 24 or 48 hours; waiting longer than that can feel like an eternity to teens.

Make services accessible. Clinic hours should fit with the schedules of students—after school, in the evenings, on the weekends. If teens have trouble getting to the clinic, the clinic should go to them.

Ensure confidentiality to teens, and let them know up front if something cannot stay confidential. Teens will be reluctant to use services if they fear their confidentiality might be breached.

Offer counseling at negative pregnancy tests. A negative pregnancy test is a great opportunity to offer teens in-depth counseling to prevent future pregnancies.

Be “male-friendly.” Reproductive health clinics are traditionally the province of women and

girls, but men and boys need counseling and services, too. Some clinics offer regular “male-only” clinic hours so that boys and young men feel comfortable coming in for services.

Wrap other youth services around reproductive health. Some reproductive health clinics offer youth development activities, including after-school activities such as tutoring.

Get a teen perspective. Programs should seek the advice of teens about how they should provide services. Some programs create formal teen advisory panels.

Know the program's reputation. Word travels fast among teens, particularly about issues of confidentiality and teen-friendliness. Teens will take the word of other teens about a program. Programs should check in with teens who do use services and those who do not to find out what they have heard.

RESEARCH SHOWS

Teens who are close to their parents are more likely to remain sexually abstinent, postpone intercourse, have fewer sexual partners, and use contraception consistently.

Sharing Healthy Adolescent and Parent Experiences

(SHAPE) is a six-session course on human sexuality, relationships, and responsibility offered to parents and teens by the Coalition for Children, Adolescents, and Parents in Orange County, California. Offered in English, Spanish, and Vietnamese, SHAPE I is for 9- to 12-year-olds in daughter/parent and son/parent pairings. SHAPE II, which is co-ed, is designed for 13- to 15-year-olds and their parents.

As a complement to its large media campaign to encourage teens to remain abstinent, **Not Me, Not Now** of Rochester, New York, has developed a booklet for parents, *Unlocking the Secret—A Parent Guide to Talking About Sex*.

The five cities in the Annie E. Casey Foundation's **Plain Talk Initiative**—Atlanta, Hartford, New Orleans, San Diego, and Seattle—have created innovative ways to get parents and teens to talk about sex. In New Orleans and Atlanta, parent-led Plain Talk Parties, built on the Tupperware party model, bring together parents in homes to learn how to talk more effectively with their teens about sex.

The **Planned Parenthood Association of Hidalgo County, Texas**, which serves a low-income Latino community near the Mexican border, has trained a cadre of Spanish-speaking health workers (*promotoras*) who go door-to-door to reach teens and their mothers.

Parent-teen and adult-teen programs

Some programs help build teens' relationships with their parents and other adults in different ways. Parent-teen activities or classes can help strengthen relationships. Teens who participate in youth development activities, volunteer service, mentoring programs, and other similar activities have a chance to develop relationships with a range of adults and learn more about adult life. This contact is particularly important if teens have few positive role models in their lives.

Youth development and school-to-career programs

Teens who have future educational or career goals are less likely to have or cause a teen pregnancy. Increasingly, communities are looking beyond interventions that focus solely on skill-building and access to contraception to programs that help teens develop their talents and interests and pursue long-term goals.

Youth development programs

Youth development programs provide youth with engaging activities and a chance to develop their talents and interests. They are sponsored by schools, churches, community organizations, civic groups, and local and state government, and involve young people in recreation, theater, sports, community service, and religious activities, among others. Many young people develop long-term interests and goals out of these kinds of activities.

Youth development activities are particularly powerful for young people who are vulnerable and who live in unstable families and communities. For example, research by the Search Institute found that in communities where youth are provided opportunities for structured activities, fewer youth are engaged in risk-taking behaviors (Blyth, 1992).

Most youth development programs focus on promoting good health behaviors, even if they do not specifically address sexual issues. Some seem to have a positive effect on reducing teen pregnancy and birth rates.

Many good youth development programs exist in every community, sponsored by familiar organizations. Some communities also have programs designed specifically to prevent

teen pregnancy. Two that have shown positive results are:

Quantum Opportunities

Program—Begun in 1989 as a pilot program in five communities, the Quantum Opportunities Program is a four-year, year-round program for 9th-12th graders that provides educational activities (tutoring, computer-based instruction, and other educational services), development activities (learning about health, alcohol, drug abuse, sex, family planning, arts, career, and college planning), and community service opportunities and summer jobs. Students receive hourly stipends and performance bonuses. When rigorous evaluation showed positive effects, including higher graduation and lower teen birth rates, the U.S. Department of Labor began funding a national replication.

Teen Outreach Program

Designed for 12- to 17-year-olds, the Teen Outreach Program seeks to promote teens' healthy behavior, life skills development, and sense of purpose. It has three components:

- community service for participants to teach them new skills and connect them to their communities and caring adults;
- classroom-based activities, including the Teen Outreach

Program curriculum, "Changing Scenes," to help teens develop competencies to move from dependence to independence; and

- service learning, in which young people connect their community service experiences to classroom learning

through discussions, writings, research activities, and creative presentations.

School-to-career programs

A lack of future orientation is thought to contribute to some teen pregnancies. One way

FIELD NOTES

Working with parents to prevent teen pregnancy

Emphasize the long-term conversation. Programs and activities encouraging parent and adult involvement should stress that communication with children about love, sex, marriage, parenthood, and values is a lifetime conversation, not a one-time lecture.

Remember that teens need their parents as much as infants and toddlers do. The importance of parents does not diminish as children get older.

Find ways to make talking about tough issues more comfortable for parents and teens.

Involve community organizations, schools, and businesses. Changing the way these groups interact with families can generate long-term support for a program.

Encourage parents to lead programs. Sometimes the best way to get parents involved is to put them in charge.

Reach parents where they are—at work and in their

neighborhoods. Many parents cannot attend workshops at night, and evenings are often the only time parents have with their children.

Get to know the community well. Make sure a parent involvement program reflects the cultural language and values of the community.

Involve other adults in the lives of teens. These adults can be effective role models, mentors, and friends.

Remember that intensity of effort matters.

Be creative in developing outreach efforts. Paycheck stuffers, inserts in utility bills, and other creative, attention-getting promotions can boost attendance.

Reprinted with permission from the National Campaign to Prevent Teen Pregnancy's *Snapshots from the Front Line II: Lessons from Programs that Involve Parents and Other Adults in Preventing Teen Pregnancy*, 1998b.

communities help teens set goals for their future is by connecting them with work and career opportunities.

In our increasingly high-tech society, teens need quality education and skills to succeed as productive, working adults. Teens who do poorly in school or drop out are not only more likely to get pregnant or cause a pregnancy, they are less able to provide for themselves and their families once they become adults.

School-to-career programs give teens opportunities to learn and train in and out of school. Under the rubrics of education reform, worker preparation, or economic development programs, communities are bringing together schools, business, labor, government, and community organizations. Community colleges also are pivotal players in the school-to-career movement.

The 1994 Federal School-to-Work Opportunities Act provides seed money to states and local communities to develop school-to-work systems that offer:

- School-based learning—classroom instruction based on high academic and business-defined occupational skill standards.
- Work-based learning—career exploration, work experience,

YOUTH DEVELOPMENT ACTIVITIES ARE...

particularly powerful for young people who are vulnerable and who live in unstable families and communities.

structured training, and mentoring at job sites.

- Connecting activities—courses that integrate classroom and on-the-job instruction, matching students with participating employers, training mentors, and building bridges between school and work.

Two programs that highlight the potential of school-to-career opportunities for youth are:

Youth Corps—Youth Corps, typically, are full-time programs that provide young people with a combination of work experience and education within a framework of community service. There are approximately 120 Corps programs nationwide, serving 26,000 participants annually. Twenty-one states operate state-wide programs. Participants are enrolled for 6 to 12 months and receive a stipend, usually equivalent to the minimum wage or less. Educational stipends or cash awards are often available for those who complete the programs. Since 1993, many Youth Corps programs have received AmeriCorps funding. Research has shown that Youth Corps programs have positive effects on education and employment.

success and on pregnancy rates among unmarried young women (Jaztrzeb et al., 1997).

The **Maine Career Advantage (MCA)** is a program of the Maine Technical College System, in partnership with Maine high schools and businesses. MCA offers students two internship options: an eight-week summer internship and a two-year career internship. In the two-year internship, participants take academic classes as they master a series of specific occupational and workplace skills taught by employers. Interns work full-time in the summer

and part-time during the school year. They receive tuition-free classes at a technical college and a weekly stipend. Once they have successfully completed the program, students earn a Certificate of Skill Mastery, listing the specific skills they have mastered.

Media campaigns

The power of the media can help prevent teen pregnancy by inspiring positive change in attitudes and behavior. Teen pregnancy prevention media campaigns

RESEARCH NOTES

Youth development programs

The best youth development programs seek to:

- Enhance teens' sense of personal responsibility.
- Develop the capacity of teens to set goals, organize resources, and take positive action. Strong programs build on strengths, and assume that all teens have assets that can be used as building blocks for future growth and improvement.
- Build critical thinking skills so teens can independently assess situations, make important judgments, and take action.
- Enhance teens' sense of self-reliance and confidence.
- Help teens learn to accept themselves, embrace who they are, and recognize their own natural strengths.
- Understand teens in the context of their families and communities.
- Encourage teens to chart their own course in life. Teens who receive consistent and positive support view themselves as able to act on their own behalf.
- Provide opportunities for teens to contribute and get involved. Giving teens the chance to serve others helps them develop a sense of competence, power, attachment, and commitment to their most important environments: families, schools, peers, and communities.
- Provide a sense of belonging by creating positive social support networks for teens within their community.
- Encourage teens to have meaningful, supportive, and positive interactions with caring adults.

Source: Samuels, 1995.

directed at teens and adults have been launched or contemplated in more than 40 states.

Media activities rarely make a difference by themselves. However, as seen in these examples, when well-designed and properly executed, public service media campaigns can play a significant role in changing attitudes and behavior, particularly when combined with long-term complementary activities at the community or individual level (DeJong and Winsten, 1998).

Michigan Abstinence

Partnership—The Michigan Abstinence Partnership, a government-led public-private collaboration, targets 9- to 15-year-olds and their parents with a message of abstinence from sex, alcohol, tobacco, and drugs.

Maryland's Campaign for Our Children

—The state of Maryland has used TV, radio, print, transit, and billboard advertisements to reach 9- to 14-year-olds and their parents with messages about abstinence, male responsibility, and parent-child communication.

The South Carolina Council on Adolescent Pregnancy

Prevention developed a guide for youth agencies that includes tips for attracting the attention of the news media and state

officials through the use of inexpensive media strategies.

California has three multimillion-dollar teen pregnancy media campaigns that target different audiences with different, reinforcing messages:

- The **California Wellness Foundation** targets parents and policymakers with a message that teen pregnancy is an adult-driven social problem.
- A **Department of Health Services** campaign targets boys with a message of sexual responsibility.
- A **Department of Social Services** media project informs welfare recipients about access to family planning services.

Multiple component campaigns

Another promising approach that some communities have adopted is to develop campaigns that combine some or all of the education, access, and youth development strategies described above.

The few evaluation studies that have been completed on multiple component programs suggest that those initiatives that are the most intensive—that is, work intensely on several fronts simultaneously over a long period of time—have

MEDIA HAVE POWER—THEY CAN...

- educate teens
- reach parents
- build support among community leaders
- encourage politicians to support teen pregnancy prevention programs

the greatest likelihood of affecting teen pregnancy rates.

Two multiple component programs have shown particularly good results—as long as the intervention lasted (Kirby, 1997):

The **School/Community Program for Sexual Risk Reduction Among Teens**, centered in rural Denmark, South Carolina, included several components:

- sexuality education training for teachers, administrators, and community leaders;
- sexuality education in all school grades;
- training for peer counselors;

- initiatives by the school nurse to counsel students, provide males with condoms, and take female students to a nearby family planning clinic; and

- special events and clear messages about avoiding pregnancy promoted by local media, churches, and community organizations.

The result? The pregnancy rate for 14- to 17-year-olds declined significantly for several years.

Project Action, a community mobilization initiative in Portland, Oregon, that was designed to increase teen condom use included a public service announcement (PSA) TV campaign, installation of condom vending machines, and teen skills-building workshops. The program did increase the rate of teens using condoms with casual partners.

What can individual communities do?

Surveys show that most Americans believe that high school-age teens should not be sexually active, and a vast majority of both adults and teens believe that society should promote a strong abstinence message to teens. This is a good place to start in any community.

Many programs have found that expressing a strong preference for abstinence among teens—especially younger ones—is well-received by teens and enjoys widespread support in the community. The messages are often bold and direct—for instance, Campaign for Our Children's

motto is “Virgin: Teach Your Kids It’s Not a Dirty Word.”

Even though the majority of adults think teens should not have sex, most also say that sexually active teens should have access to contraception to avoid pregnancy as well as AIDS and other sexually transmitted diseases.

Each community must decide how best to promote a strong abstinence message while still dealing with the problem of teens who are sexually active—especially as efforts to prevent teen pregnancy intersect with schools. In general, a pregnancy prevention program must add value to what the community is already doing to help its teens, be targeted to the teens who are at risk, pursue the strategy most likely to work in that community, and, perhaps most importantly, fit with the community’s values and beliefs.

Given those guidelines, what approach should any one community take? The bottom line from research is that no single intervention is enough to prevent teen pregnancy. Programs that provide multiple avenues for action, including positive youth development activities, show the most promise.

The remaining chapters of the *Guide* will help communities and programs decide what actions to

take. They will describe more about the key players in effective programs and how to involve them, and they will offer ways to tailor an approach that meets the community’s—and especially their teens’—needs.

The remaining chapters of the *Guide* also will explain and demonstrate some basic principles that all successful teen pregnancy prevention programs should strive for:

Maintain a long-term, intense effort—of at least five years, if possible. Not only is teen pregnancy a tough, longstanding problem, but a new crop of teens arrives every year.

Avoid one-shot programs. Communities must address the teen pregnancy problem on multiple fronts simultaneously.

Involve the community. Programs must work from day one with parents and community leaders when designing and implementing prevention initiatives—their buy-in is essential to success and to avoiding controversy.

Start young. Begin prevention interventions with young people early. Teens report feeling pressure about sex by the start of middle school.

Tailor programs to teens’ age levels. What works for a 17-year-old is probably wrong for a 12-year-old.

THE BOTTOM LINE FROM RESEARCH

No single intervention is enough to prevent teen pregnancy—multiple approaches are best.

Use peer leaders. Peers can be an important influence on teens; peer education should tap into this power.

Be flexible. Be aware that different groups of teens need different types of interventions at various degrees of intensity and time.

Understand the audience. Respect and reflect the cultural, religious, and social traditions of the community in program activities. Learn about the community before designing programs for it.

Deal with drugs and alcohol. Sexual risk-taking by teens is often related to other risky behaviors, including drug and alcohol use and violence.

Include boys and young men. Involve the male partners of teen girls in prevention efforts.

Get outside the classroom. Remember that some of the teens

at highest risk are the least likely to be attending school.

Help teens postpone sex. The increasing number of teens who stay abstinent demonstrates that decreasing teen sexual activity is a realistic goal.

Encourage teens who are sexually active to use contraception consistently and correctly. Make sure teens know that they need to use contraception every time they have intercourse.

Teach sexual decision-making skills. Give teens specific skills to avoid pregnancy through abstinence and responsible contraceptive use.

Support and motivate teens. Abstinence and responsible contraceptive use both require daily motivation by teens.

Support parents in their roles as strong and loving influences on their teen children.

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PREGNANCY PREVENTION PROGRAMS MUST...

- **add value to existing community efforts**
- **be targeted to at-risk teens**
- **pursue most-likely-to-succeed strategies**
- **fit with the community's values and beliefs**

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Programs mentioned in this chapter (grouped by program type)

Reproductive health services for teens

Making the Grade

1350 Connecticut Ave., NW
Suite 505
Washington, DC 20036
(202) 466-3396
Fax: (202) 466-3467
www.gwnu.edu/~mtg.

Making the Grade is a national grant program supported by the Robert Wood Johnson Foundation. Under this initiative, the Foundation has made \$17.5 million available to support state-community partnerships to establish comprehensive school-based health centers.

The Planned Parenthood Federation of America

310 7th Ave.
New York, NY 10019
(800) 829-PPFA
Fax: (212) 247-6269
www.plannedparenthood.org

Planned Parenthood provides reproductive and general health care services through its 137 affiliates and 900 health centers nationwide. It also offers education programs and curricula, publications, training, and technical assistance.

Programs to strengthen teens' bonds with family and community

Growing Together

Girls Inc.'s National Resource Center
441 West Michigan St.
Indianapolis, IN 46202
(317) 634-7546
Fax: (317) 634-3024

Let's Talk Month

Advocates for Youth
1025 Vermont Ave., NW
Suite 200
Washington, DC 20005
(202) 347-5700
Fax: (202) 347-2263
www.advocatesforyouth.org

Sharing Healthy Adolescent and Parent Experiences (SHAPE I and II)

Coalition for Children, Adolescents, and Parents (CCAP)
820 Town and Country Rd.
Orange, CA 92868
(714) 972-8859
Fax: (714) 541-4527

Not Me, Not Now

Monroe County Department of Communications and Special Events
39 West Main St
Suite 204
Rochester, NY 14614
(716) 428-2380
Fax: (716) 428-3268
www.notmenotnow.org

Plain Talk

The Annie E. Casey Foundation
701 St. Paul St.
Baltimore, MD 21202
(410) 547-6600
Fax: (410) 223-2923
www.aecf.org

Promotoras Program

Planned Parenthood Association of Hidalgo County, Inc.
Martha Leos, Education Director
1017 Pecan
McAllen, TX 78501-4345
(956) 686-0587
Fax: (956) 618-3718

Youth development and school-to-career programs

Maine Career Advantage

The Center for Career Development
Southern Maine Technical College
Fort Rd
South Portland, ME 04106
(207) 767-5210
Fax: (207) 767-2542

Quantum Opportunities Program

Opportunities Industrialization Centers of America, Inc.
1415 North Broad St.
Philadelphia, PA 19122
(215) 236-4500
Fax: (215) 236-7480

Teen Outreach Program (TOP)

Cornerstone Consulting Group
PO Box 7100882
Houston, TX 77271-0082
(215) 572-9463

Youth Corps

AmeriCorps, Corporation for National Service
1201 New York Ave., N.W.
8th Floor
Washington, DC 20525
(888) 507-5962
www.cns.gov

Media campaigns

Campaign for Our Children

Hal Donofrio, Executive Director
Campaign for Our Children
120 W. Lafayette St
Suite 1200
Baltimore, MD 21201
(410) 576-9000
Fax: (410) 528-8809

Michigan Abstinence Partnership

Shelley Schadeewald
Abstinence Coordinator
Michigan Department of Community
Health
3423 N. Martin Luther King Blvd.
Lansing, MI 48909
(517) 335-8908
Fax: (517) 335-9222

South Carolina Council on Adolescent Pregnancy Prevention

P.O. Box 383
Columbia, SC 29202
(803) 777-1180

Teen Pregnancy Prevention Initiative

The California Wellness Foundation
6320 Canoga Ave.
Suite 1700
Woodland Hills, CA 91367
(818) 593-6600
Fax: (818) 593-6614
www.cwf.org

Partnership for Responsible Parenting

Julie B. Linderman, Public Health
Education Consultant
California Department of Human
Services
714 P St.
Room 440
Sacramento, CA 95814
(916) 657-2949
Fax: (916) 657-1608

AFDC Family Planning Information Campaign

Beverly Young, CalWORKS
Family Planning Information
Campaign
744 P St., MS 16-54
Sacramento, CA 95814
(916) 654-1806
Fax: (916) 654-1048

Multiple component initiatives

Project Action

534 S.W. Third Ave.
Suite 512
Portland, OR 97204
(503) 294-0554
Fax: (503) 294-0565

The School/Community Program for Sexual Risk Reduction Among Teens

University of South Carolina, School
of Public Health
Department of Health Promotion
and Education
Columbia, SC 29208
(803) 777-5152
Fax: (803) 777-6255

Other useful resources (grouped by program type)

Education for teens about sex, relationships, pregnancy, and parenthood

Be Proud! Be Responsible!

Published by Select Media
60 Warren St.
New York, NY 10007
(212) 752-4437

Becoming a Responsible Teen

Published by Select Media
60 Warren St.
New York, NY 10007
(212) 752-4437

Get Real About AIDS

Published by Altschul Group
1560 Sherman Ave.
Suite 100
Evanston, IL 60201
(708) 328-6700

Sociometrics, a research and development firm specializing in social science research applications, has developed the Program Archive on Sexuality, Health and Adolescence (PASHA), a collection of promising teen pregnancy and STD/HIV/AIDS prevention programs, which it sells to schools, clinics, and community-based organizations across the country. Among the programs it offers are

Be Proud! Be Responsible!,
Becoming a Responsible Teen,
and **Get Real About AIDS**. Contact
Sociometrics Corporation 170 State St.,
Suite 260, Los Altos, CA 94022-2812.
(650) 949-3282. Fax: (650) 949-3299.
Web: www.socio.com.

Best Friends

The Best Friends Foundation
Ann Hingston, National Program
Director
4455 Connecticut Ave., NW
Suite 310
Washington, DC 20008
(202) 822-9266
Fax: (202) 822-9276
www.bfriends.org

Best Friends is a nationwide program that teaches adolescent girls about the importance of friendship and abstinence from sex, drugs, and alcohol.

Reducing the Risk: Building Skills to Prevent Pregnancy, STD, and HIV

ETR Associates
PO Box 1830
Santa Cruz, CA 95061-1830
(408) 438-4060
www.etr.org

ETR Associates provides comprehensive services for health and sexuality education, including teacher and staff training, research, project and program evaluation, development of model programs, technical assistance in program implementation, and curriculum and materials development.

National Center for Education in Maternal and Child Health

2000 15th St., North
Suite 701, Arlington, VA 22201-2617
(703) 524-7802
www.nccmch.org

The National Center for Education in Maternal and Child Health published The MCH Program Interchange, *Focus on Abstinence Education*, in August 1997. This special issue describes the major publications offering general information on abstinence education, as well as particular curricula and teaching materials. It includes an introduction by the head of federal Maternal and Child Health

Bureau, which administers the abstinence education program. Available free

National Abstinence Clearinghouse

801 East 41st St.
Sioux Falls, SD 57105
(888) 577-2966.
www.abstinence.net

The National Abstinence Clearinghouse publishes the *1998 Directory of Abstinence Resources*, an up-to-date catalog of programs and curricula.

Sex Information and Education Council of the United States (SIECUS)

130 West 42nd St
Suite 350
New York, NY 10036
(212) 819-9770
Fax: (212) 819-9776
www.siecus.org

Founded in 1964, SIECUS affirms that sexuality is a natural and healthy part of living and advocates for the rights of individuals to make responsible sexual decisions. It offers programs and training in sexuality education.

American College Health Association

PO Box 28937
Baltimore, MD 21240-8937
(410) 859-1500
Fax: (410) 859-1510
www.acha.org
acha@access.digex.net

Reproductive health services for teens

The National Assembly on School-Based Health Care

1522 K St., NW
Suite 600
Washington, DC 20005
(202) 289-5400
Fax: (202) 289-0776

The National Assembly on School-Based Health Care is a membership organization supporting organizers,

providers, and advocates of school-based health care. Its members offer the following programs: adolescent health, clinical services for reproductive health, delaying second pregnancies, HIV/AIDS and STD education, parent/child communication, primary teen pregnancy prevention, and broad-based sexuality education.

The Henry J. Kaiser Family Foundation

2400 Sand Hill Rd.
Menlo Park, CA 94025
(650) 854-9400
Fax: (650) 854-4800
www.kff.org

The Kaiser Family Foundation, which promotes the use of emergency contraception, is an independent health care philanthropy that focuses on four main areas: health policy, reproductive health, HIV policy, and health and development in South Africa.

Youth development and school-to-career programs

School-to-Work Initiative of the U.S. Departments of Labor and Education

The National School-to-Work Learning and Information Center
400 Virginia Ave., SW
Room 150, Washington, DC 20024
(800) 251-7236, (202) 401-6222
Fax: (202) 401-6211
www.stw.ed.gov



Tailoring Pregnancy Prevention Programs to Stages of Adolescent Development

by Leslie Kantor

T H I S C H A P T E R

Describes the physical, cognitive, and social and emotional changes that occur during the three stages of adolescence:

Presents principles of programs and educational strategies for all teens:

Provides suggestions for program strategies for teens at each stage of development; and

Provides references and resources for further information.

Key Ideas in this Chapter

Fit the program to teens' developmental level.

Learn the key characteristics of each stage of adolescence (early, middle, and late) and match activities to the developmental stage of the teen participants.

Use peer educators in efforts to educate other adolescents.

Help parents understand adolescent development.

Encourage parents to stay involved in their children's lives during adolescence.

Use effective teaching techniques. Learning should be active and relevant to real situations in teens' lives.

Help teens stay in school. Dropping out of school increases the risk of teen pregnancy.

Tailoring Pregnancy Prevention Programs to Stages of Adolescent Development

Stages of adolescent development

Adolescence can be summed up in one word: change. Only infants grow and change as rapidly and extensively as do adolescents. Understanding adolescent development—how children mature between the ages of 9 and 21, how those changes affect their families and other people around them, and how the surrounding culture and society influences that development—is critical to planning and implementing programs that can give teens the tools and skills they need to make and carry out responsible decisions.

Although adolescence is often discussed as one phase, teens actually pass through three distinct stages on their path to adulthood—early, middle, and late adolescence. Specific physical, cognitive, and social and emotional developments mark each of these stages. The changes that occur and the timing of those changes differ for boys and girls and vary greatly among individuals. However, in general, early adolescence is from the ages of 9–13, middle adolescence is from 13–16, and late adolescence is 16 and older.

Early adolescence

Physical changes and characteristics

Early adolescence is marked by significant physical changes. Girls develop breasts, grow underarm and pubic hair, and begin menstruating. Boys develop deeper voices, grow hair under the arms and around the genitals, and begin to show other physical signs of sexual maturity.

In response to these physical changes, young adolescents—girls in particular—begin to be treated in a new way by their families and by society. As their sexuality becomes more apparent, girls begin to feel differently about themselves and they engender new reactions from those around them. They may no longer be seen as just children, but as sexual beings to be protected—or targeted. Parents may become overprotective or begin to allow greater freedom.

EARLY ADOLESCENCE

9-13 years old

MIDDLE ADOLESCENCE

13-16 years old

LATE ADOLESCENCE

16 years old and older

These changes are complicated by the fact that girls mature at different ages.

Boys tend to receive less information about the physical changes that accompany their transition to manhood than do girls about their maturation. For example, school classes and parents will explain menstruation, but often leave out mention of wet dreams, erections, and ejaculation when talking to boys out of fear that these topics are too sexual or controversial. Boys may start to face pressure to differentiate themselves from their mothers and from female behavior. In addition, boys often face ridicule from peers if they are slower to develop physically.

Whatever the response from the people around them, girls and boys are treated differently as they move into adolescence because they look grown up and society has specific social expectations for how young men and women should behave.

These pressures can be difficult for teens to deal with, especially without guidance and support from caring, competent adults.

To further complicate this transition, recent studies have found that for some girls, adolescence is starting earlier. While the average age of onset of menstruation is close to 12.5 years, a small but growing minority of girls, particularly African American girls, are actually beginning to menstruate as early as age 8 (Marano, 1997).

For these children, the shift in how they are treated by the people around them may be even more difficult to cope with. New data from the National Longitudinal Study on Adolescent Health has found that looking older than one actually is constitutes a risk factor for early intercourse, although it does not place one at higher risk of teen pregnancy (Blum and Rinehart, 1997).

Cognitive changes and characteristics

Most early adolescents still think predominantly in concrete terms. They relate information and experiences to what they currently know and have a hard time thinking about the future or about things they have never been exposed to. Their ability to think abstractly—to project into the future and to understand

KEYS TO EARLY ADOLESCENCE

- **significant physical/sexual maturation**
- **concrete thinking**
- **increasing influence of peers**
- **growing independence in decision-making**
- **transition from elementary to middle or junior high school**

KEYS TO MIDDLE ADOLESCENCE

- **continuing physical/sexual changes**
- **intense focus on body image**
- **beginning of capacity to think abstractly**
- **enormous influence of peers/school environment**
- **risk-taking**

intangible concepts—develops as adolescence progresses.

The fact that most early adolescents cannot think abstractly has important implications for program planning and necessitates different program approaches than would be created for older adolescents. For example, pregnancy prevention programs that ask early adolescents to picture what future opportunities would be lost by becoming a teen parent will not be very effective with young people.

Social and emotional changes and characteristics

In the early teen years, the values that children have learned from their parents begin to be tested by peers. Peers start to exert a stronger influence, and young teens will begin to be preoccupied with how their peers dress and behave. Young adolescents will start to experiment with their identity, trying out different ways of acting and seeing how people around them react to these various strategies.

Young teens also begin to enjoy more freedom to make their own decisions and may receive less ongoing supervision. Because they have little experience with the consequences of their

actions, early adolescence can be a time when risks are taken unknowingly. These young teens may not appreciate the potential impact of their actions.

Young adolescents may also experience a transition within the school setting from elementary school to middle and junior high school. Middle and junior high school brings with it increased responsibility and independence for which some young people are not prepared. For some young teens, a difficult transition to middle school and an unsuccessful middle school experience increases the likelihood that they will drop out of school. This is associated with a higher risk of teen pregnancy. Young people experiencing difficulty in school merit special attention.

Middle adolescence

Physical and cognitive changes and characteristics

Middle adolescents are portrayed most frequently in the media and thought of by most adults as the “typical teenager.” In this stage, the physical changes continue. Middle adolescents begin to develop the capacity to think abstractly, but it will be several years before those habits of thought are firmly established.

One day a middle teen is able to think long-term and project his or her thinking far into the future. The next day, he or she is back at a very concrete level, focused on the here and now, the day to day.

Social and emotional changes and characteristics

Teen girls, in particular, become extremely susceptible to the cultural messages they receive about appropriate body size and grooming. One observer of contemporary teen women comments: "In the twentieth century, the body has become the central

personal project of American girls" (Brumberg, 1997). While a large percentage of American girls report dieting behavior as early as the 4th grade, middle adolescents sometimes develop eating disorders and other body image disturbances. Increasingly, boys in our society are also receiving pressure to look a certain way and some boys are also experiencing eating disorders and other body image problems.

FIELD NOTES

Tips for working effectively with teens

Ensure that program staff are trained in adolescent development, are comfortable with adolescents, and refrain from stereotyping teens.

Allow teens to develop outreach and marketing materials for programs. This will ensure that posters, flyers, and advertisements are in teen-friendly language and are culturally appropriate.

Appreciate the pressures and issues faced by today's teens. Provide opportunities to discuss these broad struggles and not just the single issue on which a program focuses.

Be sure program hours are convenient and that appropriate stipends, food, transportation money, or incentives are offered for participation.

Assure confidentiality to teens, and let them know up front if something cannot stay confidential. Teens are more likely to open up to adults when they trust that what they say or do will remain confidential.

Coordinate efforts with other youth-serving providers to try to eliminate duplication of services and to give young people the comprehensive information, skills, and opportunities they need to successfully negotiate adolescence.

Teens' focus on physical attractiveness is heightened by the huge effect of peers on one another during this stage of development. Parents and their beliefs now may be secondary to the norms and pressures—both positive and negative—of a teenager's peer group. Research has found that groups of friends have a greater influence than a best friend and that teens who choose positive peer groups fare much better than those who choose groups that may influence them to engage in negative behaviors.

Parents can also have an effect on how teens deal with friendships. An effective parenting style in helping to moderate peers' influence is an "authoritative parenting style" that combines control and warmth (McIntosh, 1996)—that is, parents who maintain a close, warm relationship with their teen and who set and monitor reasonable limits for his or her behavior.

For many teens at this stage of development, school can become a less hospitable place. More than 80 percent of public school students in grades 8-11 say that they have been the recipient of unwelcome sexual comments or advances, usually from another student (Blum and Kinchart, 1997). More than 42 percent of students report that they have carried a weapon to

school in the past month (Blum and Kinchart, 1997).

This is particularly problematic because "school connectedness"—a student's school attendance and perceptions that she or he gets along with and is close to teachers and students, and feels that other students are not prejudiced—can protect against many harmful behaviors, such as too early intercourse, emotional distress, suicidal thoughts and attempts, violence, cigarette use, alcohol use, and marijuana use (Blum and Kinchart, 1997). Young people who are being harassed or fear violence in school settings are less likely to remain connected and feel positive about that setting and are at risk for dropping out. This, in turn, puts young people at higher risk of early and unprotected sex.

Risk-taking is often associated with middle adolescence. Adults who work with youth must keep in mind that risk-taking behavior has positive as well as negative aspects. Adolescence is an appropriate time for trying new things and taking new risks. However, adolescents have often been portrayed as taking extreme, ill-considered risks. In fact, research shows that adolescents are about as good at assessing the actual risks of a situation or action as are their parents. This recent work

KEYS TO LATE ADOLESCENCE

- **physical/sexual changes complete**
- **capacity for abstract thought in place**
- **adult cognitive functioning**
- **family influence in balance with peer influences**
- **transition to work, college, independent living**

suggests that helping parents to be better judges of risk will also help young people.

Physical, social, emotional, and cognitive changes and characteristics

Late adolescence is often thought of as early adulthood in our culture. Teens in this stage

are beginning to take on adult roles and responsibilities and may be living independently from their families. The physical changes of adolescence are complete. At this stage, family influence comes into balance with messages from peers. Most older adolescents have developed a sense of identity and a sense of both their similarities and their differences from parents. Late adolescents are firmly rooted in abstract thinking. They are thinking about the future and functioning, cognitively, as adults.

Experience over many years and types of programs has shown that a few key program techniques and basic education strategies can help to increase the effectiveness of a teen pregnancy prevention effort.

Provide both single and mixed-gender settings

Many communities have debated the pros and cons of programs that work exclusively with girls or boys rather than dealing with

sexuality and related issues in mixed-gender settings. Those who promote single-gender programs point out the studies on girls in the classroom, which show that young women are often interrupted by young men or are not called on to speak as frequently. Those who advocate mixed-gender settings point out that for young people to successfully navigate their relationships with each other, they must be given opportunities to practice communicating in program settings. Without these opportunities,

young women may be left without the skills they need to deal with real-life situations.

Include a diversity of teens in programs as participants and peer educators

One key skill needed by adolescents is the ability to deal with difference and diversity in an increasingly pluralistic world. Programs that use a diversity of peer educators will appeal to a wider range of young people in the community. Sexually active youth, abstinent youth, and teen parents all have powerful messages to send to other young people.

Give teens strong role models

Role models for young people can help young women resist messages about passivity and stereotypical feminine behavior, and young men resist messages that emphasize conquest.

Girl Power!, an initiative of the U.S. Department of Health and Human Services, seeks to give young women a positive set of role models and a sense of broad possibilities. Program components, which include public service announcements and other materials featuring female athletes and other role models, were developed nationally but can be used locally in communities to begin building support for strong, assertive behavior on the part of young women.

The director of the Boston's **Youth Education and Development Program**, a school-linked initiative sponsored by the Urban League, credits his four young male staffers—who dress in suits and ties, speak professionally, and do not raise their voices—with attracting to the program young men who seek to emulate them.

Help teens postpone sexual intercourse

Postponing sexual intercourse is an important goal for any program that seeks to reduce teen pregnancy. Programs that have been most successful in achieving this goal are those that begin working with youth before they become sexually active, starting as early as late elementary or early middle school.

Reducing the Risk was one of the first sexuality education curricula to be rigorously evaluated. The evaluation found that among students who had not initiated intercourse before the class, the curriculum significantly reduced the likelihood that they would have had intercourse 18 months later. Among these students, effects seem to have extended across a variety of subgroups, including whites and Latinos, and lower-risk and higher-risk youths.

Promising educational strategies

Many promising strategies and techniques can be used to develop educational components for pregnancy prevention programs.

Involve teens in their own learning

Experiential learning techniques that get participants to role play, engage in small group discussion and decision-making, or require them to experience some activity are more effective than traditional educational approaches that rely on lectures.

Help teens examine their values and beliefs

Adolescents need opportunities to examine their own beliefs and attitudes. They also need a chance to develop the skills they will need to adopt healthy behaviors. Many programs simply provide information. In order to prevent pregnancy, young people need to explore their values and attitudes about relationships, sexuality, and personal goals and to have those beliefs challenged by people who care about them. They also need the skills to refuse unwanted sexual behavior and to communicate with

members of the opposite sex. They must be able to carry out their decision to avoid sex or to obtain and use contraception.

Effective education will give young people the opportunity to practice refusal, communication, and negotiation skills. It will also give them the chance to think about what they would do if faced with a sexual situation.

Make materials and examples relevant to the audience

Some curricula give examples of what young people can do on dates, such as go to the mall or go out to dinner, but these examples will not help people living in certain areas or people who do not have any money. Other programs have scripted role-plays that may use language that adolescents find silly.

Programs need to be adapted to fit the age, geographical area, and teen culture of the participants. Even more important, programs should be ethnically appropriate and relevant.

Use instructors who are comfortable with the course material

Educators may need additional training related to sexuality, pregnancy prevention, or the particular groups with whom

THE BOTTOM LINE OF SUCCESSFUL PROGRAMS

Make them participant-centered, not planner-centered.

People remember about 10 percent of what they read and 20 percent of what they hear, but they remember nearly 90 percent of what they do.

they will work. Any program that deals with pregnancy prevention will bring up questions and issues related to sexuality. Educators must be comfortable dealing with the topics and providing referrals for further information when these issues arise.

Work with what participants already know

Repeating information that is already familiar to teens or jumping into information without laying a foundation will be ineffective. Programs should set up a mechanism for finding out about the group in advance or develop a quick assessment that can be used at the beginning of

a workshop to get a feel for what people already know and what they want to learn.

Match written materials to the literacy level of participants

Written materials for lower literacy groups should include many illustrations and appropriate vocabulary. If written materials are used as part of an exercise, the facilitator should read the selection out loud or suggest that someone in each group read aloud so that any participants who are unable to read can still get the benefit of the activity.

Reaching early, middle, and late adolescents: programs and educational strategies

Young people will turn to whatever opportunities exist that give them a feeling of being connected, important, and valued. When positive outlets do not exist, it is more likely that teens will look to less socially desirable ways of meeting their needs.

Successful youth development and enrichment programs that focus on sexuality and

pregnancy prevention need to be structured around the techniques and strategies outlined above. They also need to be focused on the specific needs and characteristics of the teens they serve. The following table describes strategies that programs can use to focus on early, middle, and late adolescents.

Early adolescents

Start programs younger. The groundwork for prevention must be laid in the early adolescent years. Early adolescents need tools and skills to deal with the messages they are already hearing.

Take concrete thinking into account. Focus on familiar, real-life situations, not abstract future possibilities (such as "what would your life be like if you had a baby"). Ask young teens to practice communication, decision-making, and negotiation skills using the situations they face every day.

Give the same information to boys and girls. Young teens need information about the other gender as well as their own. One reason for inappropriate language or activity around sexuality issues is that a person may be seeking answers to questions.

Teach about healthy and unhealthy relationships. This is a good time to help young teens think about the qualities friends should have, what healthy and hurtful friendships look like, and how to choose enhancing, not risky relationships. Program examples: **Best Friends** and **S.N.E.A.K.E.R.S.** (See Resources).

Middle adolescents

Use peer educators. Given the importance of peers for this group, peer educators can help create social norms around abstinence and contraception. Their modeling of good coping, negotiating, and decision-making behaviors can have a strong impact.

Include opportunities for safe risk-taking. Programs can provide protected settings for middle teens to take physical risks (ropes courses, field trips to new places, new types of activities) and emotional risks (role plays). These opportunities can help teens build relationships and learn about trust, responsibility, sharing feelings, expressing needs, and weighing and taking risks. Program example: **Outward Bound** (See Resources).

Help parents stay connected to their teens. Middle teens need independence as well as careful supervision. Parents struggle with finding this balance and with a sense of loss as their child grows up. Programs should allow parents to vent these feelings and provide opportunities for adults and teens to be together. Program example: **Growing Together** (See Resources).

Take cognitive changes into account. Programs need to be attuned to middle teens' shifts between concrete and abstract thinking. Hands-on learning is good; lectures are ineffective.

Late adolescents

Reach 18- and 19-year-olds where they are. Look beyond colleges. Reach late adolescents through their workplaces, churches, community organizations.

Use the media. TV, radio, advertising, print, and the Internet can be used to reach this audience and to illustrate the importance of establishing oneself before becoming a parent. Use media to publicize pregnancy prevention services and resources.

Re-cast ages 18 and 19 as part of adolescence. Most concern about teen pregnancy focuses on girls younger than 17. However, most teen pregnancies occur to 18- and 19-year-olds. Older adolescents also need the message that it is better to wait until one is established before having a baby.

Conclusion

A clear understanding and appreciation of adolescent development is necessary to implement effective prevention efforts. "One size fits all" programs are not as effective. When planning, programs need to consider the age range of participants. While the chronological ages in this chapter are general guidelines, particular teens will vary from this framework based on their experiences and background.

The key is to assess what the young people in a particular target population need, try out an intervention, and then continuously evaluate whether the program is meeting participants' needs and moving toward goals consistent with delaying pregnancy.

When programs match the developmental needs of adolescents and make use of effective teaching techniques, working with youth can be rewarding, powerful, and effective in reducing adolescent pregnancy.

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McIntosh, H. (1996, June). Adolescent friends not always a bad influence. *APA Monitor*.

National Commission on Adolescent Sexual Health. (1995). *Facing facts: Sexual health for America's adolescents*. New York: SIECUS.

Programs mentioned in this chapter

Best Friends

The Best Friends Foundation
Ann Hingston, National Program Director
4455 Connecticut Ave. NW, Suite 310
Washington, DC 20008
(202) 822-9266
Fax: (202) 822-9276
www.bffriends.org

Best Friends is a nationwide program that teaches adolescent girls about the importance of friendship and abstinence from sex, drugs, and alcohol.

Girl Power!

Eileen R. Fruch, Campaign Manager
U.S. Department of Health and Human Services
National Clearinghouse for Alcohol and Drug Information
P.O. Box 2345
Rockville, MD 20847-2345
(800) 729-6686
Fax: (301) 468-7374
www.health.org/gpower

Girl Power! is a national public education campaign sponsored by the Department of the Health and Human Services to help encourage and empower

9- to 14-year-old girls to make the most of their lives.

Growing Together

Girls Inc.—National Resource Center
Bernice Humphrey, Director, Healthy Girls Initiative
441 West Michigan St.
Indianapolis, IN 46202
(317) 634-7546
Fax: (317) 634-3024
www.girlsinc.org

Girls Inc., a national youth development program, has created **Growing Together**, a four- to five-session curriculum that seeks to delay the onset of teen sexual activity by fostering mother/daughter communication.

S.N.E.A.K.E.R.S.

Crystal Holland, Program Director
Florence Crittendon Services of Greater Washington
815 Silver Spring Ave.
Silver Spring, MD 20910
(301) 565-9333
Fax: (301) 565-0872

S.N.E.A.K.E.R.S. uses small group work to build relationships between participants and explores a variety of

aspects of growing up and forming friendships and romantic relationships.

Outward Bound

0110 Southwest Bancroft St.
Portland, OR 97201-4050
(800) 547-3312
Fax: (503) 274-7723
www.pcobs.org

Outward Bound provides many opportunities for rigorous outdoor experiences that teach young people about taking physical risks and learning about trust and responsibility.

Reducing the Risk

ETR Associates
PO Box 1830
Santa Cruz, CA 95061-1830
(408) 438-4060
www.etr.org

Reducing the Risk: Building Skills to Prevent Pregnancy, STD, and HIV is a classroom-tested program emphasizing that teens should avoid unprotected intercourse through abstinence or consistent and effective use of protection.

Youth Education and Development Program

Urban League
E. Franklin Miller
Program Director
Urban League of Eastern
Massachusetts
88 Warren St
Roxbury, MA 02119
(617) 442-4519



Developing Pregnancy Prevention Programs for Girls and Young Women

by Leslie Kantor

T H I S C H A P T E R

Discusses the challenges facing young women as they navigate through adolescence, particularly with respect to gender roles and sexuality;

Suggests strategies for pregnancy prevention programs targeted to girls and young women; and

Provides references and resources for further information.

Key Ideas in this Chapter

Help young women acquire information and skills to successfully negotiate relationships and avoid adolescent pregnancy, especially those young women at highest risk.

Work with young women as well as the people in their lives, including partners, parents, and such community institutions as schools and churches.

Pay special attention to young sexually active teen girls, who are at greater risk for unprotected intercourse than are older girls.

Make programs comprehensive and flexible to deal with the many influences that can lead to a pregnancy. The reasons that young women become pregnant and the choices they make when faced with a pregnancy are complex.

Be prepared to respond to girls who have specific risk factors, such as victims of sexual abuse or sisters of teen parents.

Developing Pregnancy Prevention Programs for Girls and Young Women

Teen women and the challenges of adolescence

How well do American girls progress through adolescence? Research indicates that before adolescence, girls are mentally healthier than boys. During adolescence, however, girls suffer more depression, disturbances about their appearance, eating disorders, stress, and other manifestations of distress than do boys. Girls also engage in more suicide attempts and lose ground academically.

A major challenge for adolescent girls negotiating the passage to womanhood is that gender role expectations for girls directly contradict the two skills a young woman needs to avoid pregnancy—refusing sexual intercourse or using contraception effectively. For a young woman to successfully postpone sexual behavior or engage in intercourse responsibly, she must first formulate her own preferences and then be able to assert them in her relationship with a boy or man.

What makes this particularly difficult is that adolescent women are encouraged to focus on other people's needs and

desires. As a result, they often lose touch with their own clear ideas. Carol Gilligan and other researchers have spent considerable time exploring this phenomenon. These researchers have spoken with girls across the country and have observed that adolescent girls face tremendous pressure to conform to specific ideas about femininity, including the idea that they should be agreeable and not assert their own needs, opinions, and desires.

Young women trying to negotiate this societal pressure often become unsure of themselves; even their patterns of speech change. Girls who once asserted themselves clearly may start to check everything with the person they are speaking with (punctuating sentences with "you know?") or even speak less and less.

Girls and boys often deal with the challenges of adolescence in different ways. For example, young men are more likely to be involved in violence or damage to other people or property, while young women tend toward

depression and eating disorders, behaviors that are less likely to be noticed by the people around them or by society at large. As a result, girls may not get needed attention until their problems become serious.

Teen sexual activity

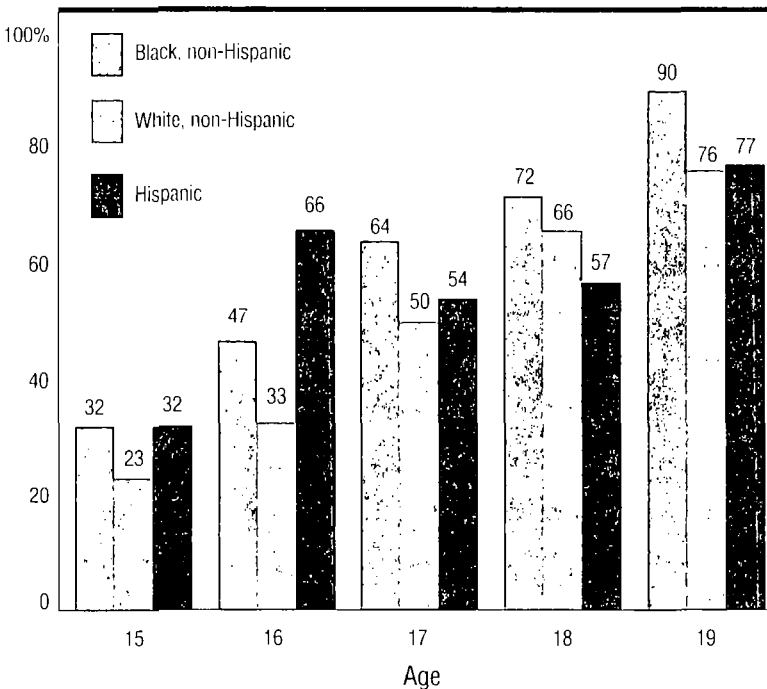
About one-half of teen girls aged 15-19 have had sex, and this proportion increases as they grow older. As the following graph illustrates, sexual activity rates among teenage girls vary by race and ethnicity. About one-third of both black and

sex, compared to one-quarter of white 15-year-olds. Among the oldest teens, about 75 percent of white and Hispanic and 90 percent of black 19-year-olds have had sex.

Teen pregnancy and birth

Rates of adolescent pregnancy and birth are major indicators of how well young women are doing in the United States. They help tell us whether young women are acquiring the support, information, and skills they need to make healthy decisions regarding their sexuality. Teen childbearing also indicates

Percent of Females 15-19 Who Have Ever Had Sex, by Race and Ethnicity



Source: Moore et al. Cross-tabulations of 1995 National Survey of Family Growth

TEEN PREGNANCY FACTS

- **almost one million adolescent women get pregnant every year**
- **one in five teen women has a child by the time she turns 20**

whether young women feel they have a future full of educational, career, and family life opportunities or whether they perceive that their circumstances provide few outlets (other than early motherhood) for self-esteem and satisfaction.

The U.S. birth rate was 62 births per 1,000 teen girls aged 15-19

in 1991, its highest point in two decades. Since then, the rate has declined by approximately 16 percent to 52.3 births per 1,000 teen girls in 1997. While this recent trend is encouraging, the U.S. rate remains at least twice that of other industrialized nations.

Developing pregnancy prevention programs for girls

Current knowledge about the cultural pressures on girls and knowledge about adolescent sexual behavior, contraceptive use, and pregnancy outcomes suggest a number of guidelines for programs centering on girls and young women.

Build healthy connections between young women and their families and communities

Promising programs for girls go beyond a focus on the young woman to an emphasis on building a healthy family and community environment around her.

Help young women build successful futures

Future orientation is a necessary component of being motivated to postpone pregnancy. Simply put,

a young person's life needs to be full of options more attractive and rewarding than early pregnancy and parenthood. Some young people may see little reason to avoid pregnancy if they live in impoverished communities with few opportunities for college or steady employment.

A number of teen pregnancy prevention programs are working to ensure young people a better future. Comprehensive programs that use a broad array of youth development strategies can help young women move toward successful futures.

The **Children's Aid Society** has developed a long-term, comprehensive approach that includes parental involvement, education, employment, guaranteed work

opportunities for all young people in the program, bank accounts, medical, health, and dental services, individual sports, creative self-expression, counseling services, and family life/sexuality education programs. All teens are guaranteed reproductive health services as needed. In certain programs, young people and their parents who participate in the program are guaranteed college admission to a school in their community.

Focus on couples, families, and communities

Many young women need support to communicate and negotiate with their boyfriends about sexual issues. Programs that work to influence community norms and support girls in behaviors that prevent teen pregnancy are helping to confront the complex factors that lead to adolescent pregnancy.

The Annie E. Casey Foundation's **Plain Talk** initiative works to engage the broader community in dealing with issues related to teen pregnancy. These programs do not try to prevent young people from exploring relationships and sexual behavior, but work to ensure that young people, their parents, and other adults have the tools to help young people avoid pregnancy. (For more information on current activities, see the Resource list at the end of the chapter.)

Programs should also work with teen couples to help them maintain responsible behaviors and communicate effectively within their relationships. Though few programs are working with couples as a unit, this approach is likely to have beneficial effects because it does not put the burden on one partner or the other and it allows both to learn the same information so that the accuracy of health messages is not an issue in the relationship. For example, many young women report that when they tell their partners to use condoms, the partner is suspicious about their motivation for doing so. Or teens have trouble knowing how to say "no" to sex. Giving couples information and interpersonal skills together is a way to help teen relationships be healthy and responsible.

Help teens to be abstinent

Helping all teens delay sexual initiation is an important pregnancy prevention strategy. Girls who initiate sexual activity at young ages are at high risk for teen pregnancy. Teens need to be reminded that not everyone is "doing it" and that there are a lot of good reasons for waiting.

Washington, DC's **Best Friends** program teaches young girls about the importance of friendship, and encourages girls to abstain from sex, drugs, and alcohol.

Discourage teen girls from relationships with much older men

An aspect of teen pregnancy that has received much attention is the age discrepancy that frequently occurs between teens who get pregnant and go on to have children and the men who father those children. Early adolescents with significantly older partners are less likely to use contraception than other teens.

Young women need opportunities to discuss the qualities of healthy and unhealthy relationships and the realities of their current relationships. Teens also need adults who will question aspects of relationships that are potentially detrimental or abusive.

Providers serving young women must be familiar with their state's existing laws related to statutory rape, particularly regarding reporting requirements. They must also determine the messages they want to communicate about the appropriateness of older male partners. Relationships between young teen girls and much older men should obviously be discouraged, and young women with older partners must be encouraged to take advantage of programs and services available to them.

Professionals in educational programs must be aware that the reasons young women enter such relationships are complex,

and range from the benign to the troubling. Programs should deal sensitively with the power differences in these relationships and understand that age differences that are acceptable between adult partners may not be appropriate for teen girls.

Work with parents, especially mothers

Mothers have a powerful role to play in helping their daughters have a healthy, successful adolescence. Research continues to affirm the importance of family connectedness to young people's health and well-being. Family connectedness means teens' feelings of closeness to their parents, their satisfaction with family relationships, and their sense of being loved and cared for. Family connectedness protects teens against emotional distress, including suicidal thoughts or attempts, smoking, alcohol use, marijuana use, and early intercourse.

Parents have the opportunity to be the primary sexuality educators of their children, and many

ONE STUDY SHOWED

- **for 15-year-old mothers, 30 percent of the fathers of their children are at least six years older**
- **for 17-year-old mothers, 18 percent of the fathers are at least six years older**

Source: Alan Guttmacher Institute, 1994

TALKING ABOUT SEX

- **one-third of 15-year-old girls in one study said neither parent has talked to them about how pregnancy occurs**
- **about half said a parent had not discussed birth control methods or STDs with them**

Source: Alan Guttmacher Institute, 1994

are. But some report that they do not have the necessary conversations because they are uncomfortable and do not know how to approach these sensitive subjects. Parents need education about how to raise issues related to sexuality throughout their children's lives and a forum to think about how they will respond to particular questions about values, sexual behavior, and their own sexual histories.

Some promising programs are working with parents to give them the information and confidence to address their children's need for sexuality information throughout their lives:

Promotoras programs run by Planned Parenthood affiliates in California and Texas train Latina mothers to speak with other mothers about sexuality and how to speak to children and teenagers about these issues.

Programs run by the Girl Scouts, Girls Inc., and other youth-serving organizations provide forums for girls and young women to communicate with their mothers.

Mother-Daughter Revolution: From Betrayal to Power,

a 1993 book by Elizabeth Debold and colleagues, provides strategies that can be developed into programs for helping mothers consider the messages they are sending to their daughters about femininity and appropriate roles for girls and women.

Deal with broader societal messages and myths

Valuable programs for girls help them understand many of the cultural influences that shape their lives; useful programs also give them accurate information about many aspects of sexuality, including abstinence and contraception.

Help young women resist negative media messages

Young women need skills to look critically at the messages being sent by the media about body image, appropriate gender roles, and relationships. For young teens, television is the major media consumed; for middle and older adolescents, music becomes predominant. On some popular television shows, girls learn that the ideal body type is thin yet buxom, and that girls ought to respond to boys with giggling and flirting. Rarely are girls shown as confident or assertive, equal to the boys and men around them.

Advertising can contribute to girls' negative feelings about

their bodies by promoting products using idealized images of the body and by featuring models who are thinner and more beautiful than most women will ever be.

Girl Power!, an initiative of the U.S. Department of Health and Human Services, seeks to give young women a positive set of role models and a sense of broad possibilities by developing public service announcements and other materials featuring female athletes and other role models.

Girls Re-Cast TV, a program developed by Girls Inc., gives teens the opportunity to look critically at the messages being sent by television and other media sources and encourages girls to advocate for new and different messages.

Learning to resist the stereotypical images of young womanhood and understanding that there are actions one can take to effect change can lead girls to feel more in control of their own lives and confident of their abilities. Programs such as those just noted can help teach young people critical skills they can use throughout their lives.

Provide accurate information about abstinence and contraception

It is not true that "everyone is doing it." In fact, about one-half

of teens aged 15-19 are not sexually active. It is important to express to teen girls that abstinence is the only 100-percent safe way to avoid pregnancy and sexually transmitted diseases. Abstinence programs that address a variety of topics, including relationships, life skills training, positive youth development, career development, and educational achievement, can help girls clarify their values and ideas about sex, love, and relationships.

Among sexually active teens, many couples fail to use contraception because of worrisome stories or myths they have heard about various methods. African American young women, in particular, may have a number of suspicions about the most effective methods because of ways that birth control has been promoted in their communities. Young women often express worries that they will gain weight on the pill, or will never be able to become pregnant later in life if they use Norplant or Depo-Provera.

CONTRACEPTIVE MYTHS AND CONCERNS

- **"The pill will make me gain a lot of weight."**
- **"I won't be able to become pregnant later if I use Norplant now."**
- **"My partner won't like it."**
- **"It's hard to use."**
- **"It will reduce pleasure."**

Others worry about how partners will react to these methods or feel that barrier methods are awkward to use and reduce pleasure and comfort. Clinic workers hear all these concerns and more—some young women have almost nothing positive to say about any method.

Programs that give young people accurate information about contraception as well as skills for discussing appropriate pregnancy prevention strategies with their partners are critical to efforts to reduce teen pregnancy.

Positive Images: Teaching about Abstinence, Contraception, and Sexual Health

includes lessons and exercises to give young people information and the chance to practice refusal, communication, and negotiation skills. The lessons can be used in school or community-based settings, and can be taught as a stand-alone program or in the context of a more broadly based effort.

Provide referrals for family planning and reproductive health services

Any program addressing teen sexuality should expect that some teens will ask for help in finding reproductive health services. Even in those that stress abstinence, it is likely that some girls will become sexually active

while still in the program. It is important that sexually active young women be connected with good counseling and care. Some may elect to cease sexual activity; others will continue. However, many sexually active teens have sex less frequently than adults would guess, sometimes only a few times a year.

Even if staff anticipate little need for reproductive health services, advance planning and decision-making will help programs deal with participants consistently and effectively. Preparation can include:

- creating policies on referrals for family planning and other reproductive health services and informing participants and parents of these policies;
- reviewing national and available local data about the onset of intercourse; even programs for middle school students will include some young people who are sexually active and who will need preventive clinical services; and
- developing referral lists and, when possible, cultivating relationships with referral sources so young people can get accurate, complete information about available services, fees, and other issues.

Tailor programs for young women with special needs

Given the societal pressures young women face, it is clear that all young women need some assistance in successfully avoiding too-early pregnancy. However, several groups of girls have particular needs and will benefit from more intensive programming.

Young women who have experienced sexual abuse

Programs should expect that some female participants will have been sexually abused. This is especially likely to be true among young sexually active girls. Experiencing sexual abuse can lead to higher pregnancy risk in a number of ways. Young women who have learned about sexual behavior from nonconsensual experiences may learn patterns that make them more prone to repeated victimization. They may feel that it is normal to give into the sexual demands of men. They need to learn about what is appropriate and inappropriate in a relationship.

Sexual abuse is also linked to school performance problems and school dropout, which are associated with teen pregnancy. Young women who have been abused may also use alcohol or drugs to deal with the pain of their experiences, and this can lead to unsafe sexual situations.

RESEARCH SHOWS

- **74 percent of young women who had intercourse before age 14 reported having had intercourse involuntarily**
- **7 percent of all young women ages 15-19 report that their first sexual experience was not voluntary**

*Sources: Alan Guttmacher Institute, 1994;
Moore et al., 1998*

Thus, these young women have a cluster of needs and issues that place them at particularly high risk of adolescent pregnancy.

Programs for sexually abused teens will need to be more intensive and long term than interventions for other young women. Professionals serving this population will need to be particularly sensitive about trust, because early sexual abuse often takes place with family members or other people who are known to the young woman. Only skilled staff with training in dealing with sexual abuse survivors should work with this population and attempt to deal with their myriad issues.

Daughters and sisters of teen mothers

Young women whose mothers were themselves teen parents are much more likely to become teen mothers themselves. Similarly, the younger sisters of teen mothers are also at higher risk of becoming teen mothers. There are a number of reasons for this:

- Because sisters are raised in the same household, some factors that contributed to the older sister's pregnancy will also be part of the younger sister's experience.
- Younger sisters may be socialized toward early motherhood through the experience of caring for an older sister's baby.

Younger sisters of teen mothers may be identified through programs serving pregnant and parenting teens and can benefit from intensive interventions.

Young women with disabilities

Although there are no data showing that young women with mental or physical disabilities have higher rates of teen pregnancy than other teens, these girls have special needs that warrant attention. Often, young women with disabilities are assumed to be uninterested in or incapable of engaging in sexual behavior.

Considerations in working with girls

Pay attention to the values girls express about motherhood and education—programs should help girls examine the relationship between these often conflicting aspects of life.

Programs that provide information on sexuality tend to assume that sexual activity will be forced on young women with disabilities and that they will not have their own desires to form relationships and explore sexual intimacy. Sometimes, materials for people with disabilities are extremely explicit, out of concern that young people must avoid sexual victimization.

Young women with disabilities need to be seen as sexual, with the same developmental needs as other adolescents. However, programs must be crafted to their particular needs. Care must be taken not to confuse physical disabilities and mental disabilities.

Meet the special needs of parenting teens

Data have shown that teen mothers with more than one baby have a difficult time finishing high school. Services for

FIELD NOTES

Become familiar with the way gender roles are defined, particularly in different cultures.

Stay open and ask questions—programs should try to broaden their view of young women and their cultural background and values.

parenting teens tend to focus on the needs of the baby, ignoring the fact that young mothers need information and education, too.

The good news is that the rate of second births to teens has also declined—by 21 percent between 1991 and 1996. While numerous programs have worked to reduce the rate of second births to teens, few have been proven successful. To help adolescent mothers avoid another pregnancy, communities should pursue several strategies.

Help young mothers stay in school or return to school

Completing high school is essential to the economic well-being of both the teen mother and her baby. To support continued school participation, services—including child care, transportation for both mother and baby, and social services—need to be in place. Social services should be accessible, either by being located at the school or by being easily reached outside of school hours.

The **Program for Pregnant and Parenting Teens** is a multi-service program under the Superintendent of Alternative High Schools, Adult and Continuing Education of the New York City Board of Education. Designed to assist pregnant and parenting adolescents to graduate

YOUNG MOTHERS NEED EDUCATION ABOUT...

- **skills for negotiating contraceptive use in their relationships**
- **the consequences of having a second child while still an adolescent**

from high school, this varied program includes health care facilities for students at risk of dropping out of school (Babygram Program), five alternative school programs for pregnant and parenting teens (Family Centers), 41 on-site infant-toddler day care centers, and the Teenage Outreach Pregnancy Prevention Program. A teen parent resource center provides staff development, ongoing field support, and student leadership and empowerment training.

Include the teen mother's partner

Many policies and programs ignore the role of the baby's father and assume that teen mothers are unattached. Keeping the young father involved can be key to reducing parenting pressure on the young mother, improving parenting, and providing economic stability. Partners of teen mothers need to be counseled about not causing additional teen pregnancies.

CONCLUSION

Young women in our society face many challenges in negotiating the passage from childhood to adulthood. Pressures from peers, the media, and society at large encourage young women to be agreeable and meet the needs of others. To successfully resist too-early sexual intercourse, pregnancy, and early parenthood, young women must be given the information and skills

they need and they must have opportunities to participate in effective programs taught by well-trained, accessible adults.

Using what is known about young women's development and effective programming, communities can implement learning opportunities for young women that ensure a successful passage to adulthood.

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PROFESSIONAL INFORMATION FOR THIS CHAPTER

Best Friends

The Best Friends Foundation
4455 Connecticut Ave., NW
Suite 310
Washington, DC 20008
(202) 822-9266
Fax: (202) 822-9276
www.bffriends.org

Best Friends is a nationwide program that teaches adolescent girls about the importance of friendship and abstinence from sex, drugs, and alcohol.

Children's Aid Society

Dr. Michael Carrera, Director
National Adolescent Sexuality
Training Center
350 East 88th St.
New York, NY 10128
(212) 876-9716
Fax: (212) 477-3705
email: casntc@ibm.net

"Girl Power!"

Eileen R. Fruch, Campaign Manager
U.S. Department of Health and
Human Services
National Clearinghouse for Alcohol
and Drug Information
P.O. Box 2345
Rockville, MD 20847-2345
(800) 729-6686
Fax: (301) 468-7374
www.health.org/gpower

"Girls Re-Cast TV" and "Preventing Adolescent Pregnancy"

The National Resource Center of
Girls Inc.
441 W. Michigan St.
Indianapolis, IN 46202
(317) 634-7546 ext. 24
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Program for Pregnant and Parenting Teens

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These **Plain Talk** programs, funded by the Annie E. Casey Foundation, are currently developing publications describing the various program components and lessons learned from each of the communities in the course of implementing their multicomponent interventions. The Annie E. Casey Foundation is also developing a *Voices from the Field* document to provide the residents' and local partners' perspectives on working together to improve adolescent reproductive health outcomes. In addition, most of the sites are producing manuals that describe local strategies, implementation challenges, and outcomes

"Positive Images" curriculum
Planned Parenthood of Greater
Northern New Jersey
Center for Family Life Education
575 Main St.
Hackensack, NJ 07601
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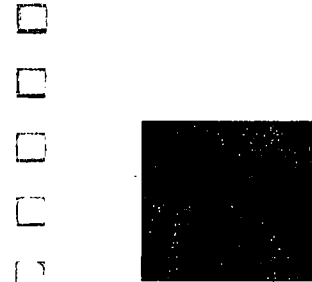
**"Promotoras" Programs—
3 sites (Los Angeles, San Diego,
McAllen TX)**
Planned Parenthood of Los Angeles
Melinda Cordero, Coordinator
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**Planned Parenthood of San Diego
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Involving Teen Boys and Young Men in Teen Pregnancy Prevention

by John Hutchins

T H I S C H A P T E R

Explains the increasing focus on boys and young men as a key element of pregnancy prevention efforts;

Provides background on the sexual behavior and contraceptive use of boys and young men;

Suggests strategies for involving boys and young men in pregnancy prevention efforts;

Provides references and resources for further information.

Key Ideas in this Chapter

Most young men want to be sexually responsible.

Teen sexual activity has leveled off—perhaps even decreased a bit—and condom use has increased. Most teen males agree that they *should* discuss contraception before sex, use contraception to protect against unwanted pregnancy, and take responsibility for a pregnancy.

Boys influence girls' sexual behavior. It is not enough to teach girls about sex and sexual decision-making if boys are not learning the same things.

Male involvement is a philosophy—not a program.

It means making males a part of teen pregnancy prevention efforts, making programs comfortable for males, and making efforts to reach young men and boys who do not attend programs.

Go to where boys and men are. Use employment, job training, or sports as a way to connect with young men. Pregnancy prevention work can be done informally in community settings.

Help teen males define what manhood is. Many of the ideas teen males hold about what it means to be a man and to relate to a woman increase the chances of unintended pregnancy and other relationship problems. Challenge those ideas and help young men come to a clearer sense of who they are as men.

Involving Teen Boys and Young Men in Teen Pregnancy Prevention

The increased interest in teen boys and young men

Long a neglected piece in the teen pregnancy puzzle, boys and men are increasingly recognized as a key part of prevention efforts. Much has happened in just the last few years:

- Forty states are implementing or planning to implement strategies to prevent unwanted or too-early fatherhood, according to the National Center for Children in Poverty.
- More than half these states are adopting school- or community-based initiatives, often by adding a male component to existing activities to prevent teen pregnancy. Several states report developing curricula for middle school students to teach responsible fatherhood.
- Some family planning clinics that have traditionally served girls and women are now teaching young men to be effective users of contraception.
- Community-based programs, led by adult men, are helping adolescent boys negotiate the difficult passage to responsible manhood.
- Male juveniles in the criminal justice system are being included in prevention efforts.
- Media campaigns are encouraging teen boys to abstain from sex and to use contraception if they are sexually active.
- Led by a broad initiative in California, seven states are enforcing statutory rape laws against adult men involved with much younger minor girls as a way to reduce teen pregnancy.

This new focus on the male role in teen pregnancy prevention comes at a time of renewed interest in the importance of responsible fatherhood. States and the federal government have stepped up child support enforcement and efforts to

The author is indebted to Knitzer et al. (1997), Moore et al. (1997), and Sonenstein et al. (1998), whose work is the basis for much of the material in this chapter.

establish paternity. Family service providers whose programs have traditionally focused on mothers and their children—such as Head Start—are beginning to reach out to include fathers. A grassroots fatherhood movement has emerged, led by small, community-based support groups for fathers as well as by national initiatives like the National Fathers' Network for

fathers of children with disabilities, the National Fatherhood Initiative, and Vice President Gore's Father-to-Father Initiative. In addition, in the wake of the HIV epidemic and increases in other sexually transmitted diseases, public health efforts increasingly encourage males to be more consistent users of condoms.

10 reasons to include boys and men in teen pregnancy prevention

1. It takes two to create a pregnancy.
2. Boys and men should be held responsible for their sexual behavior. Just because they cannot get pregnant does not mean they should be irresponsible.
3. Boys and men want to be more responsible about their sexual behavior. In one recent survey, more than 90 percent of teen males agreed that male responsibilities include talking about contraception before sex, using contraception to protect against unwanted pregnancy, and taking responsibility for a child they father.
4. Most boys and men are more likely to make better decisions about sex if they are given reasons to do so and are treated with respect.
5. Male partners strongly influence what decisions teen girls make about sex and contraception, especially when they are older than the teen girl.
6. Older men who become sexually involved with much younger minor girls can be held criminally accountable through statutory rape laws.
7. Prevention programs that provide mentoring and youth development activities can help young men by offering education, skills, employment opportunities, and hope, all of which build self-respect.
8. Building young men's self-respect helps them respect their partners.
9. Older teens and adult men are an untapped resource as leaders for teen pregnancy prevention programs.
10. Involving boys and men makes programming for girls more effective by addressing both sides of the teen pregnancy equation.

Source: Sonenstein et al., 1998.

Boys and men, sexual behavior, and teen pregnancy

Reaching out successfully to boys and men requires knowing how males think and react. And how they think depends, in part, on how old they are. For example, teen boys age 14 and under are less likely to feel the “male invulnerability” of middle adolescence and are more likely to listen to what their parents or other adults say. By their late teens, males generally develop a more realistic sense of the risks of irresponsible sexual behavior.

Of course, boys and young men differ in many ways—class, race, family environment, and where they live. They share a lot, as well, including a similar search for their place in the world. Throughout their teenage years, young men are developing a sense of identity—in terms of gender (what does it mean to be a man?), vocation (what skills do I have? what work can I do?), and relationships (whom will I love? who are my friends?). They strive for autonomy and independence, yet need to stay connected with their families. They learn more abstract modes of thinking and gradually develop the ability to weigh present gains against future costs.

Results from recent surveys of both teen boys and girls tell much about men's and boys' sexual behavior and attitudes and have important implications for male involvement programs (Moore and Driscoll, 1997; Moore et al., 1998; Ooms, 1997; Sonenstein et al., 1998).

Sexual activity

Although rates of sexual activity among teens have leveled off in recent years, males continue to become sexually active at young ages. More than half of all males 15 to 19 years old have had sexual intercourse. Among 19-year-olds, 85 percent of males have had sex, while only 77 percent of females have. Teen males who have used drugs, been involved with crime, or are behind in school are more likely to be sexually experienced at younger ages.

Teen males tend to be quite monogamous. Most sexually experienced teen males have no

**FOR MORE INFORMATION
ABOUT ADOLESCENT
DEVELOPMENT...**

**See Chapter 2 (Volume 1),
“Tailoring Pregnancy Prevention
Programs to Stages of
Adolescent Development.”**

more than one sexual partner in a year. Only 20 percent have three or more partners a year.

There are differences regarding sexual activity by racial and ethnic groups. For instance, African American males tend to initiate sexual activity earlier; they are also a bit more likely to use condoms.

Contraceptive use

Perhaps the greatest recent change in teen males' sexual behavior has been their increased use of condoms. Between 1988 and 1995, condom use at first intercourse by males aged 15-19 increased from 55 percent to 69 percent. Nonetheless, about half do not use condoms every time they have sexual intercourse. It is unclear whether the increased use of condoms is related to fear of HIV or concern about causing a pregnancy.

In recent surveys, teen males acknowledge a clear sense of responsibility for contraceptive use (Sonenstein et al., 1998).

More than 90 percent of teen males agree that male responsibilities include talking about contraception before sex, using contraception to protect against unwanted pregnancy, and taking responsibility for a child they father.

Although most teen males report being fairly comfortable using and talking about condoms, many also say they are embarrassed buying them and are concerned about reduced physical pleasure.

Age differences between teen girls and male partners

On average, the male partners of teen girls tend to be only two to three years older—an age difference common among older couples, too. Most sexually experienced *teen* males have sexual partners close to their own age—the average age difference is less than six months.

Most adult men who have sex with teens are in their early twenties and their partners are likely to be 18 or 19 years old. Nineteen percent of men ages 20 and 21 report having sex with a minor female in the last year; most of the girls were 17 years old. About one-quarter of sexually active men ages 22 to 26 report have sex with a teenage female in the past year; however, only 4 percent had sex

TEEN BOYS AND PREGNANCY

- **about 14 percent of sexually experienced males aged 15-19 report having caused a pregnancy**
- **6 percent say they have fathered a child**

with a minor. Nonetheless, some teen males—and some young men—have sex with significantly younger girls.

WHEN DOES AN AGE GAP BECOME A PROBLEM?

The wider the age difference between a girl and her partner, the more likely that first sex was involuntary or unwanted

Developing pregnancy prevention programs for boys and young men

While most male involvement programs are too new to have been properly evaluated, experienced practitioners have learned a thing or two about what strategies work best—and what pitfalls to avoid. Male involvement initiatives in teen pregnancy prevention come in several varieties:

- programs exclusively for teen boys and young men;
- male-focused additions to programs that primarily serve teen girls;
- media campaigns encouraging responsible male behavior; and
- programs that encourage young unwed fathers not to cause additional pregnancies.

The experience of these programs suggests that whatever form the male involvement effort takes, the following principles are important guideposts.

Get to know young men, their families, and their communities

Good programs find out about young men, their families and their communities before they even begin to develop activities and outreach strategies. To be effective, these information-gathering activities need to involve members of the community directly. This has important benefits for all concerned. Community members, for example, are often able to:

- share their valuable perspectives and insight; and
- learn about a program and its goals and objectives and, as a result, become a program's best advocate.

Programs benefit because these information-gathering activities allow them to:

- consult with parents—a group often excluded—as they

develop their teen pregnancy prevention efforts, and

- learn about other agencies and programs in the community, thus paving the way for collaboration and effective outreach to teens and young men.

Brothers to Brother, a family life education and peer mentoring program, works with African American 9- to 14-year-old boys in Wake County, North Carolina, public housing projects and middle schools. In its early days, staff members went door-to-door to tell community members about their plans. Today, the program is well-established, serving 100 young men a year. Brothers to Brother also hosts two Parents Days as part of its family life education curriculum.

Conducting a neighborhood survey, convening focus groups of teens and adults, or creating a panel of teen advisors are all good ways to find out about the boys and young men in a community. The box on the opposite page provides a checklist of topics to cover.

Collaborate with other agencies

The most promising male involvement initiatives embed themselves in their communities by creating partnerships with local leaders, parents, service agencies, schools, churches,

youth development programs, and other community institutions. Collaboration builds constituencies for a program, generates a network of referrals, and creates credibility in the community, which can be invaluable when trying to maintain funding, a constant struggle for these programs. For initiatives not affiliated with health programs, for example, it is critical to be able to refer males to reproductive health services.

Collaboration is made easier when programs go to groups and experts in their community who have already developed networks of young men.

Project Alpha, a pilot project in San Jose, California, sponsored by a national college fraternity, began by getting support from local teen service organizations, churches, Planned Parenthood, the Native American Community Center, and the African American Community Center.

Actively reach out to teen males and young men

Most teen pregnancy prevention programs for both boys and girls are either in schools or linked to them. While school may offer a captive audience of teens, school-linked teen pregnancy prevention programs do not reach the late-teen and adult partners of teen girls. Nor do they reach younger

Learning about young men in the community

- ☐ What are the local rates of teen pregnancy and single-parent births?
- ☐ What issues are young men interested in?
- ☐ Where do young men hang out?
- ☐ What programs and activities are currently available to males?
- ☐ What is the job situation for young men like in the community?
- ☐ What do parents and other adults in the community worry most about in relation to boys and young men?

teens who have dropped out or attend alternative schools.

To reach such boys and men—and as a general recruitment strategy—male involvement programs should consider adopting inventive outreach strategies that appeal to young men's interests—using employment, job training, or recreation services as a means of connecting participants to programs focused on reducing teen pregnancy.

Sports activities

Many young men participate in athletic activities, both in and out of school.

Male staff members at **Hablando Claro** in San Diego have initiated discussions about sex and responsibility on buses while traveling to sporting events.

The **Healthy Teens Center** in Landover, Maryland, offers free sports physicals for middle school and high school boys.

BEST PLACES TO REACH TEEN MALES

- **school**
- **sports activities**
- **clubs and youth groups**
- **employment and job training activities**
- **criminal justice efforts**
- **drug treatment programs**
- **health care centers**

Once in the clinic, the staff draw them into discussions of sports stars' good and bad sexual behavior and offer them reproductive health information. The male involvement coordinators recruit teen males on basketball courts and in community centers.

Clubs or youth groups

Some programs partner with existing clubs or start their own youth groups.

Planned Parenthood of Southern New Jersey's **Teens On Track** hosts teen nights, cultural events, and basketball and swimming leagues at a local YMCA. Before each event, participants attend a one-hour program, including informal rap sessions, outside speakers, and workshops on male responsibility, self-esteem, and communication. This program found that although the teens may come for the fun activities, they'll also participate in a lively, relevant discussion.

Employment and job training efforts

Unemployed young men and school dropouts are particularly at risk for teen pregnancy. Some programs reach this population through job training and employment activities.

The **Young Dads Program** of the Employment Action Center in Minneapolis, which works primarily with unemployed and home-

less young fathers, focuses first on employment training, then draws participants into education about parenting and health.

Criminal justice and drug treatment programs

Many young men in trouble with the law or in drug treatment can benefit from male involvement programs.

Planned Parenthood of Nassau County, New York, takes its **Male Involvement Program** workshops into group homes for boys, substance abuse programs, runaway homes, and juvenile detention centers in an effort to target high-risk males.

The **Teen Parenting Skills** project in Albuquerque's Bernalillo County Juvenile Detention Center attracts incarcerated teens to the program with the incentive of more visits with their girlfriends and family. They seek to make the teens "family men," more responsible in all aspects of their lives.

Health care centers

According to surveys, although most young men have received medical care in the last 12 months, doctors and nurses are the least frequent sources of contraceptive information for them. Practitioners say that young men are less likely to get preventive health care than are young women.

Baltimore's Healthy Start, which provides prenatal care, pediatric care, and family planning to low-income families, has made men a central focus of its mission through its **Men's Services Program**.

Focus programs on the audience

Tailoring pregnancy prevention programs to the audience means recognizing that males at different stages of development respond to different approaches. It also means ensuring that the program is truly male-friendly and not just a casual add-on to a program fundamentally designed for girls. The checklist on the next page highlights aspects of programs that can help boys and young men feel welcome and at home.

Tailor programs to the age of participants

Scare tactics about AIDS, other sexually transmitted diseases, or pregnancy are unlikely to motivate a 15-year-old who feels invulnerable. Keeping the developmental stages of adolescence in mind when crafting content and approaches can help ensure success.

In Washington, DC, the **Male Youth Enhancement Project** of Shiloh Baptist Church runs an after-school program for African American males, mostly from low-income homes. Boys of

Making sure a program is male-friendly

- ☐ Does it employ male staff or recruit male volunteers?
- ☐ Are female staff comfortable working with men and boys?
- ☐ Do program messages affirm the value of men?
- ☐ Do staff avoid using judgmental language about males?
- ☐ Is the program site inviting to boys and men? Are there pictures of young men on the walls?
- ☐ Can young men get to the program easily? Does the program offer activities that attract young men?
- ☐ Are participants recruited in places where young men hang out?
- ☐ Are young men in the program planning group?

various ages work on their homework for the first hour, then break into life skills workshops grouped by age:

- 8-10—focusing on doing well at home and in school and growing up without a father at home;
- 11-13—focusing on communication and decision-making, sexuality, and peer teaching; and
- 14-18—focusing on a 16-part Rites of Passage program, including sexuality, contraception, job training, financial management, community service, and African American history.

Reach boys by late elementary or early middle school

Waiting until a young man reaches mid-adolescence is usually too late. For example, by age 15, boys begin to reject messages about postponing sexual involvement and they may also begin to believe that they “know everything” about contraception. Programs need to get to them early—before they become sexually active.

The **Not Me, Not Now** media campaign in Monroe County, New York, which promotes sexual abstinence for teens, targets middle-school aged boys and girls.

Provide male-only discussion time and services

Many young men are shy about discussing sexual issues and reproduction, particularly in the presence of women. According to many practitioners, this means keeping things male-only, at least for part of the program.

The Young Adult Clinic in New York found that the only way to get men and boys in the door was to create the **Young Men’s Clinic**, a men-only session held once a week at night.

Recognize the full potential of staff and volunteers

Program staff and volunteers do more than organize programs and lead activities. Just by being themselves, they can have a strong and positive impact on a program’s ability to attract, keep, and influence the teen boys and young men who participate.

Use older boys and men as mentors and role models

Young men, especially those without a strong male figure in their lives, respond well to program staff and volunteers who offer positive models of responsible manhood. Local men also offer a critical link to the community.

Always on Saturday, a Hartford, Connecticut, program that serves low-income, minority teen boys, found a local gang

violence expert who volunteered to negotiate an agreement with gang leaders to leave program participants alone.

Recruit peers to deliver the message

Programs should take advantage of the fact that teens listen to what their peers say. Training peers to work in program activities can be an effective strategy.

HiTOPS (Health-Interested Teens' Own Program on Sexuality)

in Princeton, New Jersey, uses peer leaders to run entertaining and educational co-ed programs on sexuality, contraception, and date rape. HiTOPS invests heavily in training, taking new peer leaders on a retreat to build cooperation, trust, and a strong, supportive group.

Use positive messages with boys and young men

The language of teen pregnancy prevention can be off-putting to young men—especially if it implies all men are predatory. Even seemingly neutral language may not appeal to teen boys. For example, Iowa's **It Takes Two** program uses the term "male investment" rather than "male responsibility" to avoid the assumption that males are irresponsible.

The best messages appeal to boys' and men's hopes—for instance, "Be Proud, Be

Responsible, Be a Man," from California's state-wide male involvement program. Messages should be playful, entertaining, and nonthreatening; be jargon-free; and use clear, concise, and concrete language.

Target the message to young men's primary needs

Working with young men means understanding and valuing their perspectives. It's important to realize that teen pregnancy prevention may not be the first thing on the minds of boys, especially those most at-risk—those who are homeless, unemployed, or substance abusers.

Educators in the Male

Outreach Program of the Valley Community Clinic in San Fernando Valley, California, found that it is sometimes better to talk first about protection from sexually transmitted diseases—a more real concern for boys than pregnancy.

In communities beset by violence, programs should deal directly with young men's fatalism and the sense that they must become fathers before they die, which, they feel, could occur at any time.

Recast manhood as respect for self, family, and community

Any male can have sex, but a man demonstrates sexual

A KEY MESSAGE FOR YOUNG MEN

Male responsibility means respecting women, but first it means respecting one's self.

responsibility. Program practitioners report that young men are hungry to learn what it is to be a man. That is why rite-of-passage programs have become popular in many communities.

In Los Angeles, the **Hombres Jovenes Con Palabra** program, which serves Latino males aged 13 to 25, uses the traditional Latino concept of "El Hombre Noble," which redefines "manhood" to mean taking responsibility for one's family and community.

The **Young Dads Program** in Minneapolis works first to get young men to feel good about themselves, the first step in valuing others and maintaining responsible health behavior.

Many youth development programs offer teens opportunities to perform community service. By giving something back, young men can earn self-respect and self-esteem.

Help young men to be abstinent

Not all teens are sexually active—especially those who are still in school. In fact, one national survey shows that only 27 percent of 15-year-old boys have ever had sex (Moore et al., 1998). Helping teen boys delay sex is an important way to prevent teen pregnancy.

True Love Waits, a program developed by the Southern Baptist Church, encourages young people to be sexually abstinent until marriage.

Help teen males overcome their concerns about condom use

While most sexually active young men have used condoms, many do not do so consistently. Some are embarrassed about buying condoms or discussing them with their girlfriends. Some say they are concerned that condoms will reduce their physical pleasure.

Help boys and young men connect sex with fatherhood

Because boys and young men do not become pregnant, it's easy for them to disassociate sex and fatherhood. Reestablishing that connection is an important element of successful pregnancy prevention efforts.

Dads Make a Difference, a school-based, peer-led paternity education program in Minnesota, found through focus group research that teens did not connect sex with parenthood. This led the program to develop teen male/female pairs to run discussions on the consequences of early sexuality. The peer leaders describe in detail the legal,

financial, and emotional responsibilities of fatherhood.

Speak the cultural language of participating boys and men

Teens tune out messages that do not sound credible. A message that reflects a teen boy's culture gains credibility and depth of meaning. Programs should ask questions and learn what boys and young men think about what it means to be a man—every culture has its own perspective.

Los Compadres in Santa Barbara, California, teaches Latino young men the true meaning of machismo—that is, being a responsible man.

Baltimore's **Rites of Passage Collective** draws upon African concepts of social hierarchy and respect for elders in its rituals of manhood development.

Teach young men to understand, communicate with, and respect women

Supervised mixed-sex peer groups help boys and girls learn to respect each other and communicate in nonsexual ways, according to some experts. Some male-only programs also instruct young men about how to communicate better with girls and women.

A recent increase in dating violence in the community led **Wise Guys**, an abstinence-based program of the Family Life Council of Greater Greensboro, North Carolina, to add a focus on sexual abuse.

POSSIBLE SOURCES OF FUNDING

- **traditional teen pregnancy funding**
- **Weed and Seed grants for local housing authorities**
- **national fraternities**
- **AIDS education funding**
- **state and federal child support enforcement grants**
- **agricultural extension money**
- **federal and state juvenile justice grants**
- **private foundation funding**
- **Temporary Assistance to Needy Families funds**
- **Title XX**
- **Title X**

Be creative to stay afloat

Male involvement programs face several unique hurdles as well. Boys and men can be hard to reach and harder to keep in a program. It is important for programs to be both flexible and persistent in recruitment strategies. And because men and boys can be a reluctant population to serve, investing in high quality front-line staff is essential.

In addition, little federal, state, or private funding is earmarked specifically for programs to work

with teen boys and young men in pregnancy prevention. Male involvement initiatives must be creative in securing support from a wide variety of sources.

Some funding, however, has become available. In 1998, the Office of Population Affairs at the U.S. Department of Health and Human Services awarded ten new research grants, through the Title X Family Planning Program, to support community-based organizations in developing, implementing, and testing approaches for involving young men in family planning education and reproductive services programs. Examples of these programs include:

The Fifth Ward Enrichment Programs' Adolescent Life Project in Houston targets inner-city minority male youth, ages 9-19, who are in school. Most have experienced either academic or behavioral problems. The project uses a comprehensive approach to provide reproductive health education and referrals, including mentoring by role models who help in decision-making about reproductive health issues; community service; cultural and recreational activities; and life skills instruction, specifically providing information about health and reproductive issues.

Youth Opportunities Unlimited, Inc., in Marks, Mississippi, operates the **Boyz-to-Men Male Mentoring Program** for 10- to 14-year-old males in three rural school districts. This project provides education in reproductive health, family planning, responsible fatherhood, and self-esteem through mentoring, community service, and recreational and cultural activities. Youth mentors, aged 15 to 18, are paired with adult mentors. Together, each pair provides counseling to five younger adolescents on male sexual health, family and community responsibility, and education, job, and career opportunities.

The El Joven Noble Male Responsibility Project at the Bienvenidos Children's Center, Inc., in Altadena, California, targets young males aged 16-25 years, focusing its efforts on an underserved and high-risk Latino population. The Project offers activities in three areas: prevention, culturally-appropriate family planning services, and adult males as community educators and supporters. The "Hombres Jovenes con Palabra" curriculum has been piloted and revised to meet the needs of the project's population in preventing unintended pregnancy and STDs and in promoting male responsibility. Substantial effort is being put in to developing a local kinship network.

The National Organization of Concerned Black Men's **Peer Education and Reproductive Counseling for Young Men Project (PERCY)** targets young males in the third to eighth grades living in the District of Columbia; Alexandria and Richmond, Virginia; and Willingboro, New Jersey. The project is focused on increasing young males' knowledge of human anatomy and sexuality and the risks of early sexual

involvement and adolescent parenthood, as well as on developing skills with respect to decisionmaking, effective communication, and responsible behavior. Educational sessions are held not only for the young males but also for their parents, adult volunteers, and the older adolescents who provide mentoring and peer counseling. Referrals for health and social services are available.

Conclusion

Involving boys and men in teen pregnancy prevention is challenging. Being successful requires more than just hiring male staff and developing a few new programs; it means putting the issue of male responsibility at the center of prevention efforts

and bringing a male-friendly sensibility to every initiative. The good news is that young men are responsive to programs that take their concerns seriously, offer them good reasons to participate, and appeal to their sense of responsibility.

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Knitzer, J., Bernard, S., with Brenner, E., & Gadsden, V. *Map and*

track: State initiatives to encourage responsible fatherhood. New York: The National Center for Children in Poverty, 1997.

This comprehensive survey of state fatherhood initiatives offers an overview of trends across states, profiles specific state strategies to encourage fathers to be responsible, and summarizes state-by-state fatherhood-related data. One of the

six trends it emphasizes is preventing unwanted or too-early fatherhood. Available for \$19.95 (prepaid) from The National Center for Children in Poverty, Columbia School of Public Health 154 Haven Avenue, New York, NY 10032. (212) 304-7100. Make checks payable to Columbia University.

Moore, K.A., Driscoll, A.K., & Lindberg, L.D. (1998). *A statistical portrait of adolescent sex, contraception, and childbearing*. Washington, DC: The National Campaign to Prevent Teen Pregnancy.

Moore, K.A., Driscoll, A.K., & Ooms, T. (1997). *Not just for girls: The roles of boys and men in teen pregnancy prevention*. Washington, DC: The National Campaign to Prevent Teen Pregnancy.

A two-chapter report, *Not Just for Girls* offers concrete, new information from the 1995 National Survey of Family Growth on the roles men and boys play in causing and preventing teen pregnancy. It carefully explains the controversial issue of age difference between pregnant teens and their often older partners. It also emphasizes the importance of understanding male physical, sexual, and psychological development when designing prevention initiatives, highlights lessons

learned from practitioners, and offers some suggestions for funding opportunities. Available for \$15 (prepaid) from the National Campaign to Prevent Teen Pregnancy, 2100 M St., NW, Suite 300, Washington, DC 20037. (202) 261-5655, www.teenpregnancy.org.

Sonenstein, E.L., Stewart, K., Lindberg, L.D., Parnas, M., & Williams, S. (1998). *Involving males in preventing teen pregnancy: A guide for program planners*. Washington, DC: The Urban Institute.

This excellent guide includes new information on young men and their sexual behavior from the 1995 National Survey of Adolescent Males, descriptions of 24 exemplary male involvement programs, a chapter of practical advice for program planners, and very useful appendices on program resources. Available for \$5.00 from the Urban Institute Press, 2100 M St., NW, Suite 500, Washington, DC 20037. (202) 833-7200, www.urban.org.

Sonenstein, E.L., Ku, L., Lindberg, L.D., Turner, C.E., & Pleck, J.M. (1997). *New data on the sexual behaviors of teen males. Sexual activity declines, contraception use increases from 1988 to 1995*. Washington, DC: The Urban Institute.

Programs mentioned in this chapter

Always on Saturday
Flora Parisky
Chief Operation Officer
Hartford Action Plan
30 Arbor St.
Hartford, CT 06106
(860) 232-0641

Baylor Teen Clinic
Peggy B. Smith
Clinic Coordinator
Baylor Teen Health Clinic
8111 Lawn, Box 2
Houston, TX 77088
(713) 793-3601

Brothers to Brother

Delmonte Jefferson
Project Coordinator
Wake County Health Department
P.O. Box 14049
Raleigh, NC 27620
(919) 250-3990

Dads Make a Difference

Gary Greenfield
Project Coordinator
University of Minnesota Extension
Service
2020 White Bear Ave.
St. Paul, MN 55109
(612) 704-2060

El Joven Noble Male Responsibility Project

Bienvenidos Family Services
205 E. Palm Street
Altadena, CA 91001
(323) 728-9577
Fax: (323) 728-3483

Fifth Ward Enrichment Program

Ernest McMillan
Fifth Ward Enrichment Program
4014 Market St.
Houston, TX 77020
(713) 229-8353

Hablando Claro

Marta Flores
Director
Logan Heights Family Health Center
3538 30th St., Suite B
San Diego, CA 92104
(619) 6883-7563, ext. 145

Healthy Teens Center

Darryl Bryant
Male Involvement Coordinator
Healthy Teens Center
7824 Central Ave.
Landover, MD 20785
(301) 386-0134

HiTOPS

Bonnie Parke
Director
HiTOPS, Inc.
21 Wiggins St.
Princeton, NJ 08540
(609) 683-5155

Hombres Jovenes Con Palabra

Jerry Tello
Director
15865-B Gale Ave., Suite 1004
Hacienda Heights, CA 91745
(818) 333-5033

It Takes Two

Tom Klaus
President
Legacy Resource Group
155 N. First St., Suite 2
P. O. Box 700
Carlisle, IA 50047
(515) 989-3391

Los Compadres

Project Manager
Los Compadres: The Young Men's
Project
401 North Milpas St.
Santa Barbara, CA 93103

Male Involvement Program— Planned Parenthood

Matthew Buscemi
Male Involvement Program
Coordinator
Planned Parenthood of Nassau
County
540 Fulton Ave.
Hempstead, NY 11550
(516) 483-3193, ext. 3018

Male Outreach Program—Valley Community Clinic

Connie Kruzan
Director
Valley Community Clinic
5648 Vineland Ave.
North Hollywood, CA 91601
(818) 763-1718, ext. 210

Male Youth Enhancement—Shiloh Baptist Church

Rev. Barry Hargrove
Director
Shiloh Baptist Church Family
Life Center
1510 9th St., NW
Washington, DC 20001
(202) 332-0213

**Men's Services Program—
Healthy Start**

Joseph Jones
Director of Men's Services
Baltimore Healthy Start, Inc.
600 N. Carey St.
Baltimore, MD 21217
(410) 728-7470

Not Me, Not Now

John Riley
Director
Monroe County Department of
Communications
39 W. Main St., Suite 204
Rochester, NY 14614
(716) 428-2380
www.notmenotnow.org

**Peer Education and Reproductive
Counseling for Young Men Project
(PERCY)**

The National Organization of
Concerned Black Men
1511 K Street, NW, Suite 4100
Washington, DC 20005
(202) 783-6119
Fax: (202) 783-4842
www.libertynet.org/chmno

Project Alpha

Wilbur Jackson
Regional Coordinator, Project Alpha
6716 Indian Spring Ct.
San Jose, CA 95120
(408) 268-6171

Rites of Passage Collective

Ademola Eklona
President
Adisa Future Positive Systems
11 East Chase St.
Baltimore, MD 21202

Teen Parenting Skills

Bernalillo County Juvenile Detention
Center
Robert Pacheco
Program Manager
Juvenile Detention Center
5100 Second St., NW
Albuquerque, NM 87107
(505) 761-6606

Teens on Track

Planned Parenthood
Joyce Kurzweil
Executive Vice President
Planned Parenthood of Southern
New Jersey
317 Broadway
Camden, NJ 08103
(609) 365-3519, ext. 219

True Love Waits

Southern Baptist Church
True Love Waits
Sunday School Board
MSN 152
127 Ninth Ave. North
Nashville, TN 37234
(800) 588-9248
70423.3230@compuserve.com

Wise Guys

Family Life Council
Jeff Will
Male Responsibility Educator
Family Life Council of Greater
Greensboro
301 East Washington St., Suite 204
Greensboro, NC 27401
(910) 333-6890

Young Dads Program

Clarence Jones
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Employment Action Center
2104 Park Ave., So.
Minneapolis, MN 55404
(612) 871-6002

Young Men's Clinic

Bruce Armstrong
Clinic Coordinator
Columbia University School of
Public Health
Center for Population and Family
Health
60 Haven Ave., B-3
New York, NY 10032
(212) 304-5247

Further resources on responsible fatherhood

Although the literature on male involvement programs in teen pregnancy prevention remains limited, there is a wealth of information available on responsible fatherhood initiatives, which may prove useful to programs. The organizations listed below subscribe to the tenet that the first step in being a responsible father is waiting until you are emotionally and financially ready to support a child.

California Male Involvement Initiative

Barbara Marquez
Chief, Health Education Section
DHHS/Office of Family Planning
714 P St., Room 440
Sacramento, CA 95814

This is a state program that funds many California male involvement pregnancy prevention programs.

National Center on Fathers and Families

University of Pennsylvania
Graduate School of Education
3700 Walnut St., Box 58
Philadelphia, PA 19104-6216
(215) 573-5500

The National Center hosts FatherLink (www.ncoff.gse.upenn.edu/fatherlink), which offers access to the Center's comprehensive research, policy, and practice-related database on fathers and families.

The National Practitioners Network for Fathers and Families

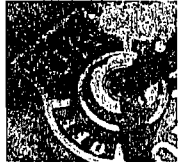
The Fatherhood Project
Families and Work Institute
330 Seventh Ave., 14th Floor
New York, NY 10001
(212) 465-2044
www.fatherhoodproject.org

The National Practitioners Network is a national network of community-based practitioners designed to facilitate and promote local activities that support fathers and strengthen family support for children. Its web site provides links to other fatherhood initiatives. The Fatherhood Project, which houses the Network, publishes:

Levine, J.A., & Pitt, E.W. (1995). *New expectations: Community strategies for responsible fatherhood*. New York: Families and Work Institute.

New Expectations is a hands-on guide for people working in early childhood programs who want to involve fathers and other significant males in children's lives. The first part outlines four stages of reaching and working with men and includes over 100 practical strategies. The second part profiles 14 exemplary programs throughout the United States.

To order, send \$22.00 (add \$3.50 for shipping and handling) to Publications, c/o James Levine, Fatherhood Project, 330 Seventh Avenue, 14th Floor, New York, NY 10001.



Involving Youth in Teen Pregnancy Prevention Programs

by Donna Butts

THIS CHAPTER

Defines meaningful youth involvement
and explains why such involvement is
crucial to the success of teen pregnancy
prevention efforts;

Describes the different ways in which
youth can be involved in pregnancy
prevention initiatives;

Provides strategies for youth involvement;
and

Provides resources for further
information.

101
NATIONAL
CAMPAIGN TO
PREVENT TEEN PREGNANCY

Key Ideas in this Chapter

Youth involvement is key to any teen pregnancy prevention program. Young people's contributions will make a program relevant, credible, and accessible.

Young people are resources and valuable partners in helping to solve problems in a community.

Young people who feel connected to and invested in their communities are at less risk of a host of problems, including teen pregnancy.

Don't necessarily call a program "teen pregnancy prevention." It may be better to highlight its positive youth development qualities—call the program the teen leaders' club or the youth theater group instead.

Involve young people earlier rather than later in program development. Consult them on all significant program decisions.

Youth is a generic term, but not all young people are the same. Programs should be tailored to the teens' needs and interests. They need to offer opportunities that fit teens' age, ethnicity, gender, existing support systems, and individual history.

Involving Youth in Teen Pregnancy Prevention

Why involve young people?

No matter how good adults are at empathizing, they cannot know what it is like to be young today. Involving young people in planning and directing a program helps the program be relevant to what is happening today in the lives of teens. It also benefits the teens themselves: recent research points toward youth development programs—which by definition emphasize the active participation of young people—as a significant and effective way to prevent teen pregnancy.

Authentic youth involvement means...

- involving lots of teens;
- giving them real authority over appropriate parts of a program or planning process;
- listening to them intently and helping them see how their opinions shape the decisions and views of others; and
- designing programs that accommodate the styles, schedules, and preferences of the targeted teens.

Authentic youth involvement is not...

- asking teens to react to an already formed idea;
- soliciting suggestions from only a few young people, then dismissing what they say if it doesn't seem to fit in;
- adding one young person to an advisory board; or
- inviting teens to join projects that were fully designed by adults.

Really involving youth is demanding. Having young people as true partners means active engagement. It means letting young people define what is needed and using adult skills to make it happen in a way that most benefits the teens. In this way, the adults in the program can become that special somebody in the life of a teen—someone who cares about them, takes their opinions and feelings

STUDIES SHOW

Sustained connections to the people and institutions around them help young people...

- **avoid risky behavior**
- **decrease the chance of early pregnancy**

seriously, holds them accountable, and believes in them.

Society too often looks at youth as a series of problems to prevent. We have largely come to ignore the natural give and take between

the generations. An effective program that really reaches out to young people and involves them sincerely can help restore the connection between adults and young people that has broken down in many communities.

Ideas for youth involvement

Youth involvement programs come in many varieties. Some are wholly independent entities; others are attached to an established youth organization. While some youth involvement programs explicitly address ways to avoid problems like teen pregnancy, most concentrate on engaging young people in activities and encouraging active planning for a brighter future. Programs may want to mix and match several

different types of youth involvement or try several activities over time. This section describes the major categories of youth involvement and provides examples of existing programs.

Boards, committees, and advisory groups

Young people serve in many ways on boards, committees, and commissions in full partnership with adults. Many cities

8 reasons to involve youth in pregnancy prevention programs

1. Youth involvement itself can help prevent teen pregnancy.
2. Teens can design authentic programs that speak to their real needs.
3. Teen involvement may create a favorable reputation for a program among teens.
4. Teens themselves often are the best recruiters for a program.
5. Teens can help develop messages that make a difference.
6. Teens can help hire staff whom young people will respond to.
7. Teens can help design an accessible program. Teen suggestions for sites, activities, and hours of service will help create a program that works.
8. Teens can help keep a program strong. Regularly asking teens for feedback can help staff make the ongoing, small improvements that maintain a successful program.

and states have separate youth boards or councils whose role is to advise on issues and provide a youth perspective.

Options for boards, committees, and advisory groups:

- establishing an adolescent pregnancy prevention youth advisory board within an organization
- establishing a youth planning committee to develop a youth-led program or project
- teaching a cadre of young people about serving on local boards, helping to place them on a variety of boards, and providing ongoing support
- developing a youth committee to review publications, meet with editorial boards, and comment on community events. Peer counselors, such as older adolescents or teen parents, work directly with other youth. Generally, they are assisted by one or more adults, who provide specific training. Regular support group meetings give them a further mechanism for discussing their work and learning new information.

These groups are primarily made up of youth, but may include some adults. Local government can provide information on what already exists and can help

programs determine if there is a need for such a group in a particular area. A Massachusetts organization, **Youth on Board**, provides technical assistance and publications to help programs recruit youth to serve in these governance and advisory roles (see Resources for more information).

The **National 4-H Council** began gradually by adding two youths to its board, which was primarily composed of corporate members. The young representatives proved to be such a rich addition that the board later added two more and recently voted to increase the number to ten. Not only has the National 4-H Council board created a place for youth, they have committed to financially support youth participation in national board work. While some parts of the organization were skeptical in the beginning, the young members quickly proved their merit.

YOUTH CAN BE INVOLVED IN MANY WAYS

- **boards, committees, and advisory groups**
- **peer counseling and education**
- **youth-led publications**
- **youth theater groups**
- **Internet and web site activities**
- **civic activism and media campaigns**
- **youth forums**
- **entrepreneurial programs**

An organization with a history of partnering with youth is the **National Network for Youth**, formally known as the National Network of Runaway and Youth Services. In addition to board, committee, and council representation, the Network features a strong youth presence at its annual symposium and includes youth as well as adult keynote addresses. The Network has a scholarship program that supports some youth participants. There are regional networks in every part of the country that provide technical assistance and may have resources to help programs.

Before enlisting youth to serve on boards or advisory groups, programs should find out whether there are any legal or other barriers. For example, many states require a person to be of voting age (18 years old) to serve on a board. To accommodate this requirement, programs can:

- develop a Memorandum of Understanding so youth can participate; or
- develop parallel youth and adult boards, with the youth board sending representatives to the adult board; the individual boards set priorities and then hold a “weaving session” to develop a common agenda.

Peer counseling and education

Peer education can be considered a tiered youth involvement program. The first tier is the peer counselors and educators. They are the group most likely to benefit from the program because it offers them a chance to use their leadership skills, connect with adults, and feel they are performing a valuable service.

Options for peer counseling and education:

- teaching in schools and shopping malls, on the streets, or in any number of other community locations
 - providing outreach in school or informal settings, such as churches, temples, or clubs
 - delivering adolescent pregnancy prevention information
 - working with younger adolescents
-

MEDIA LITERACY—A GREAT TOPIC FOR PEER EDUCATION

Young people may not be aware of the messages they are receiving and how to dissect them. Peer-led discussion groups can address the role of TV shows, movies, magazines, and billboards in promoting:

- **accurate (and inaccurate) images of males and females**
- **responsible (and irresponsible) sexual behavior**
- **violence**
- **substance abuse**

The second tier consists of the youth they reach. Even though the contact may be too brief to make a lasting difference, the intervention can help with a short-term problem. Peer leadership can help to change the norms in a school and support teens in certain behaviors, even if the contact is short-lived.

Since 1995, the Centers for Disease Control and Prevention (CDC) has been working cooperatively with 13 communities to delay adolescent pregnancy and childbearing. Youth development and involvement have been key components of the **CDC Community Coalition Partnerships Program for the Prevention of Teen Pregnancy**. In addition to peer counseling, young people help with needs assessments, resource mapping, and program planning, promotion, and implementation. Young people also help determine the “youth-friendliness” of some programs and services targeted to their age group by acting as clients. Staff share the findings with program managers and service providers, which leads to changes in program planning, training, services, and environment. They then issue a report to the service providers rating their “youth friendliness.”

Peer workers need thorough training and ongoing support. Without accurate information,

A TIP FOR PUBLICATIONS WRITTEN BY AND FOR YOUTH IN HIGH-RISK SITUATIONS

Use only the contributors’ first names as bylines.

their influence can be more harmful than helpful.

Youth-led publications

Youth can communicate on a variety of issues in a way that connects with other young people.

Options for youth-led publications:

- creating an ongoing newspaper or magazine for youth by youth
- working with youth to write one-time publications, such as a comic book or brochure
- developing a creative writing publication that includes short stories, poetry, and art

Sex Etc., published by Rutgers University’s Network for Family Life Education, is one example of youth-led journalism. The newspaper features sexuality and health stories written by teenagers for teenagers. It is available to youth at no cost.

Comic books designed and written by young people for young people can be effective and fun education tools. Over the years, young writers have crafted comic books about sexually transmitted diseases, pregnancy prevention, and other topics. The

focus does not have to be adolescent pregnancy, but can be on other areas that interest young people. The publication can be a hook to draw youth into a discussion of teen pregnancy.

Some programs that work with youth in high-risk situations have developed excellent publications. These programs provide young people with a creative conduit to express the complex emotions they are experiencing. These can be juried and edited by a peer editorial board.

Youth theater groups

Many young people love theater. It appeals to their natural sense of drama and allows a creative release for writing, editing, and stage design skills. For those youth who are outside the mainstream in school, theater can provide a way of staying connected.

Options for youth theater groups:

- beginning a youth theater troupe to perform at community events
 - working with young people to perform street theater
 - offering an intergenerational theater program
 - training young people to work with younger adolescents in interactive theater
-

The Los Angeles Free Clinic sponsors a teen theater troupe called **Project ABLE** (AIDS Beliefs Learned through Education), which focuses on AIDS information and prevention.

Theater groups and approaches vary, and programs can focus on theater exercises or actually work toward putting on a public performance. One effective, and

CASE IN POINT

Two creative ways to help youth achieve meaningful involvement

- One community holds retreats to teach young people about governance structures, roles, and responsibilities. After this training, they meet weekly, before board meetings, to review and discuss the agenda. This helps youth prepare and participate more effectively.
- In another community, a board decided to provide adult mentors for each of its youth representatives. This worked so well, they expanded the program. Now, each new board member, regardless of age, gets an experienced board member as a mentor when he or she joins.

growing, approach is intergenerational theater.

The **Full Circle Theater**, operating out of the Temple University Center for Intergenerational Learning, boasts that its youngest actor is 15 and the oldest almost 90. The Theater performs interactive drama in schools, nursing homes, and other settings. Performances deal with tough topics such as aging, teen sexuality, and suicide. Discussions with the audience follow each performance.

Community theaters can be a good resource for information and assistance. They have a stage and may have volunteer actors and behind-the-scenes people who can work with a youth group. Another possibility is to integrate street performances into local festivals and art shows. A youth drama group can perform mime, act as clowns, or act out short skits. The local arts council can be a good resource and can work with programs to develop a schedule.

Surfing the Internet and creating web pages

The World Wide Web has opened up a new universe of communication. Many young people are more comfortable with computers and know more about the Internet than do adults. A computer club can work with those teens who might otherwise be

left behind in the cyber-arena. A program can put up its own web page to advertise its publications, report on its work, or create an interactive section for teens to talk.

Options for the Internet:

- working with young people to establish and maintain a web page
 - using the Internet to connect one youth group with others
 - using the computer as a vehicle for community service
 - beginning a youth-run business creating web pages
-

Teen participants in **Not Me, Not Now**, an abstinence program in Rochester, New York, have created an interactive web page: www.notmenotnow.org.

Baltimore's **Campaign for Our Children** has a web page and an on-line club house for adolescent discussion called Room 411 (www.cfoc.org/room411).

Programs can also use the Internet to connect their youth groups with other similar groups or to earn funds for activities by marketing their services in the community. For example, one California youth group charges a small fee to design web pages for nonprofits.

KEEP IN MIND...

not all home pages are appropriate for young surfers

- **establish ground rules for what youth can view and what is best left alone**
- **consider “watchdog” software packages that block access to inappropriate pages**

Computers also provide an opportunity for intergenerational service and this may appeal to some programs.

The University of Pittsburgh's **Generations Together** sponsors a program in which teens teach seniors how to access and surf the Internet. The program is so popular with seniors they have a hard time finding enough young people to participate.

Civic activism and media projects

Young people can be powerful and persuasive speakers, whether addressing youth concerns or general community issues. They offer a new voice and often a fresh perspective. **Toastmasters** has a youth program and can provide help in establishing a young speaker's program.

Options for civic activism:

- develop a youth speakers' bureau that can address a variety of topics, including teen pregnancy
- work with the media to use youth spokespeople
- involve youth in current issues in the community

- work with young people to make their views public
 - involve young people in fundraising visits
-

Teens can become involved in any issue that concerns them—it does not have to be teen pregnancy. The connection to adults and community and the sense of value that young people will derive from working to benefit the community provide an important foundation that help young people make healthy choices and avoid too-early pregnancy.

From the start, **Earth Day** celebrations were planned with the involvement of all ages. In New Mexico, youth and older adults have successfully tackled several issues related to the environment. Currently they are working together to save whooping cranes.

Young people can become involved in civic issues in various arenas. They can do the research and report their findings on a particular issue. They can meet with local newspaper editorial boards to discuss important community issues. They can also work with teachers, who are often looking for ways to link classroom lessons to real-world problems. In helping youth become involved, however, programs need to be sure to prepare youth properly, by making sure the youth are

briefed in advance on the issue and by helping them communicate their thoughts clearly.

Young people also can be good media spokespeople. Editors, researchers, producers, and writers often search for the “youth viewpoint.” While any one young person does not represent all young people, working as a spokesperson can be a good way for teens to express themselves. Print media, such as newspapers and magazines, or electronic media, such as radio and television, can offer opportunities for young people in a program. Local newspapers may have regular high school correspondents.

The **National Campaign to Prevent Teen Pregnancy** publishes a useful guide, *Sending the Message: State-Based Media Campaigns for Teen Pregnancy Prevention*, which describes the efforts of many media campaigns that involve young people in their planning and implementation.

Youth forums

Town halls, youth summits, and focus groups all provide avenues for youth involvement.

Options for youth forums:

- planning a youth summit on general issues of concern to young people
- working with youth focus groups to provide guidance to proposed programs

The **Community of Caring** in Kansas City, Missouri, uses this approach to integrate values in school curricula. Young people are brought together in student forums to share their ideas, experiences, and values with teachers, administrators, peers, and a variety of adults who represent the community. The meeting provides opportunities for participants to identify the difficult problems facing young people in school, family, and community. The meeting sets in motion active solutions to prevent and reduce the impact of the problems.

Entrepreneurial programs

Young people say employment opportunities and preparation for future employment are major concerns. Developing a youth-run business can teach valuable skills and provide financial support to a program. Many

FOR MORE ON MEDIA

See Chapter 15 (Volume 3), “Working With the Media to Promote Teen Pregnancy Prevention.”

successful youth-run businesses exist around the country.

Options for entrepreneurial programs:

- working with young people to develop a business plan for a youth-run business
 - creating a youth-run business
-

In Texas, one of Public/Private Ventures' **Community Change for Youth Development** projects helps young people run a concession stand in their Family Resource Center. They are responsible for maintaining the inventory and the accounts. They also meet as a group to decide how to spend the profits. In the warmer months they run a lawn care service.

In New Britain, Connecticut, the **Pathways Senderos** program has embarked on a youth-run bulk mail service. The program trains young people in technology, postal regulations, and other areas of business operations, including marketing. The business not only provides revenue for their pregnancy prevention program, but also keeps older teens involved in the program, its values, and philosophy.

Venture capital can be a concern in developing youth entrepreneurial programs: it takes money to make money. Many business opportunities require that money

be invested in the beginning to buy inventory and equipment. Programs should consider approaching local businesses or civic organizations for a loan, grant, or donation of materials to help get the effort started.

Several international web sites give encouragement and advice to young entrepreneurs, including

Aboriginal Youth Business Council (www.aybc.org) and **Canadian Youth Business Foundation** (www.cybf.ca/frames/index.htm).

Community service

Many school districts now require students to perform community service in order to graduate. They hope to encourage life-long civic involvement. Programs should contact local school districts to obtain further details and to determine how to recruit students who will receive credit for community service.

Options for community service:

- involving youth in efforts to combine service and learning
 - contacting national volunteer groups to begin a local chapter
-

Several current national efforts have local or state chapters.

America's Promise, created at the April 1997 President's Summit for America's Promise in Philadelphia, encourages

youth and adults to volunteer in their communities. Many states have had or are planning to have their own summits.

Created in 1993, **The Corporation for National Service** is a public-private partnership that oversees **AmeriCorps** and **Learn and Serve America**. Learn and

Serve America provides models and assistance to help teachers integrate service and learning from kindergarten through college. State commissions on national and community service (which can be contacted through a governor's office or a state's higher education board) can provide more information on Learn and Serve America programs.

Program strategies for involving youth in pregnancy prevention

Results of research and experience from many different types of youth development programs suggest a number of strategies for programs to follow in creating and sustaining meaningful youth involvement in pregnancy prevention initiatives. Some programs can start from scratch and can choose a locale best suited to kids, hire staff, and set teen-friendly hours; others have less flexibility because they are part of larger institutions or have other restrictions. Both types of programs should find the following strategies for involving youth helpful.

Plan deliberately

Communities and organizations that are creating or expanding a teen pregnancy prevention effort—or a more general youth

development program—need to lay the groundwork for successful youth involvement.

Determine what kind of program to offer

Pregnancy prevention efforts do not necessarily need to be, and in some cases should not be, labeled as pregnancy prevention. Young people are more likely to come to the “Youth Leadership Club” than the “Let’s Not Get Pregnant Group.” They can tell their friends and family about the activity without feeling stigmatized.

Listen to youth

Before describing a program’s goals, intentions, and activities or promising anything, its leaders need to make time to hear

what the young people in a community think. What is on their minds? What are their interests? What do they worry about?

Other ideas for listening to youth:

- get to know teens through their churches, schools, or other clubs or institutions;
- get to know youth workers and youth-serving organizations and talk to teens who are active in those groups;
- volunteer in a school or youth-serving organization;
- organize informal focus groups over pizza; and
- gather teens to provide feedback about the program and, more generally, talk about their lives and needs.

Assess what the program has to offer teens

Assessing the characteristics, talents, and resources of a pro-

gram and its staff and volunteers will help a program determine its focus, activities, and approaches. Staff in an existing program may be talented as artists, entrepreneurs, activists, or athletes. Or, a staff member or volunteer may be a teacher with lots of experience working with teens. The program may be housed in a church that does community service, or it may be a business looking for a way to become involved in the community. The program could be a newly established effort or be part of an existing teen pregnancy prevention or other youth program looking to strengthen its work. Whatever these special strengths, programs should know what they are so that they can be made available in a meaningful way to the young people in the target audience.

CASE IN POINT

Creative listening

One program staffer spent five evenings a week, including Fridays and Saturdays, on a town's main strip where young people hung around parking lots and drove their cars back and forth. Several months went by, and the teens realized that she was not going to go away. She wanted to talk with them about creating alternative recreation programs. The young people that

she recruited to help plan dances, car shows, and late night softball games would have never responded to a flyer posted at school or a story in the local newspaper. They did respond to her actual presence, her personal invitation, and the way she listened to their ideas and supported them as they designed their own activities.

Plan for a multi-year commitment

Sustained commitment is critical to the success of any teen pregnancy prevention work or youth development activity. To be effective, programs must be involved over the long term. Long-term involvement with a small group of young people will have far greater potential to prevent early pregnancy and other ills than large, one-time-only activities that last only a few months. Instability and change are not uncommon for young people and the participating young men and women need to know they can depend on the program to be there. Moreover, the underlying causes and attitudes that can lead to teen pregnancy are often complicated, and it would be unrealistic to think that a brief intervention could make much difference.

One highly-regarded program developed by Dr. Michael A. Carrera, Director of the **National Adolescent Sexuality and Pregnancy Prevention Training Center** at the Children's Aid Society in New York, begins with young people in the sixth grade and continues with them until they graduate from high school.

Determine the target group of young people

Programs need to tailor their approaches and activities to the

age group they plan to work with. Research suggests that preventing teen pregnancy requires interventions that begin sooner rather than later—waiting until teens are in high school may be too late. Part of designing an intervention is determining what age groups most need activities in the community. For example, most communities lack programs for late elementary and middle school youth. Yet these are the ages when young people most need support. Risky behavior, including sexual activity, first start at this age for many young people.

Other considerations include:

- Will it be possible to mix ages and backgrounds? Often, older teens will want to spend time with younger teens only if they are in a service or leadership role. For recreational or social activities, older teens would rather be with their own age.
- What are the social and economic backgrounds of youth in the community? Just like adults, youth will feel more comfortable spending time with young people from similar circumstances.
- What are the gang structures in the community? It's wise not to compromise the safety of young people by bringing together youth from different neighborhoods who, but for

CHECKLIST

Before planning a youth program

- ☐ List five things staff members (or the organization) love to do.

- ☐ List five things staff members (or the organization) do well.

- ☐ What days and times of the week could staff members be available to work with young people?

- ☐ What age group would the organization prefer to work with?

- ☐ List others who could be recruited to participate.

the program, would not otherwise mix socially. The local police department's gang unit or officer who has responsibility for gang monitoring can be a good source of information on this issue.

Learn from existing efforts

Many community groups already work with or have access to young people. New programs being organized to reduce teen pregnancy may want to take advantage of the infrastructure, expertise, and community connections of existing efforts. These groups include, for example:

- schools, including alternative schools for youth who are not in mainstream settings;
- churches, temples, and other houses of worship;
- community-based organizations, such as YWCAs, YMCAs, Boys and Girls Clubs, Girls Inc., Girl Scouts, Boy Scouts, and Camp Fire Girls;
- government-funded groups, such as a County Extension's

4-H youth development program, youth employment programs, mayor's and governor's youth councils, juvenile court programs, foster care, and child welfare systems; and

- sports programs.

Programs focused on pregnancy prevention should consider attaching their efforts to existing organizations that promote positive youth development, especially because a broader youth development approach is increasingly recognized as effective in reducing teen pregnancy. Even if a formal association does not result, meetings with members of the groups to discuss ideas and learn about what they do will help a program refine its plans and determine whether it can go it alone or should operate inside an already existing organization.

Work with young people to create and sustain program efforts

Outlined below are some of the many special considerations for

JOINING WITH AN EXISTING ORGANIZATION THAT PROMOTES YOUTH DEVELOPMENT CAN BE A GOOD IDEA BECAUSE IT...

- **enables faster start-up**
- **can provide an immediate source of credibility and trust with youth**
- **offers an existing knowledge base of best practices**
- **may offer risk management policies and practices**
- **may offer insurance**

GOOD PLACES TO RECRUIT YOUTH

- **amusement parks**
- **concerts—especially flyers in the bathrooms**
- **outdoor skating parks and indoor rinks**
- **music stores**
- **schools and alternative schools**
- **parks and beaches**
- **shopping malls**
- **coffee shops**
- **movie theaters**

working with youth in a sustained and meaningful way.

Recruit a core group of young people who can recruit others

Recruiting young people is not necessarily difficult, but it does usually require a personal invitation from an adult or a teen. Programs should start their recruitment efforts by building a core group of young people who can then reach out and involve

other youth. Peer recruitment can be effective and gives the recruiters a sense of ownership in the program. The message they give other teens about the program will be stated in a way that appeals to their peers.

A core group can also help programs identify where they should concentrate their recruitment efforts. These teens can help through a process called "youth mapping," which involves developing a map of the area that highlights the various locations youth congregate. The map should include demographic information such as age, socioeconomic data, racial and ethnic make-up, and gang boundaries.

It may take several attempts for a core group to successfully reach out to their peers, especially ones who are socially isolated or disconnected. Staff can help the group persist and be creative. Young people have many demands on their time. They may or may not be in school. Some are so bright they find school boring and drop out. Others are slower and give up. They may spend time hanging out on the street, in malls, and at parks or coffee shops. They may or may not work, and they may have responsibilities at home for younger siblings or other family members. To make contact with youth, especially those who are not already

PEOPLE WHO CAN HELP WITH RECRUITMENT

- **school activity directors**
- **school counselors**
- **special education teachers**
- **parents**
- **juvenile probation officers**
- **juvenile court judges and lawyers**
- **teachers in alternative schools**
- **police**
- **owners or managers of businesses that attract young people (music stores, clothing stores, coffee shops)**

participating in other youth development programs—and often more at risk of early pregnancy—programs will need to reach out and meet them on their own turf. Reaching higher-risk youth may well require intense efforts, but the difficulty of doing so should not be a deterrent. Disconnected youth are the teens most at risk, who often need attention and intervention the most, even if they don't know it yet. Persistence will pay off.

Be a guide and a coach

Young people need support in their leadership roles in programs. Often, the best way for adults to work with teens is to act as a guide or coach.

FIELD NOTES

Sometimes young people in a program come up with ideas that staff may think are crazy. The goal should be to help the youth fully explore the merits and feasibility of an idea, not to make the decision for them. Staff should ask questions, probe gently, and help teens reach conclusions for themselves. Of course, there may be times when an adult needs to assert more direct authority.

Staff should ask the teens to help establish the goals and the rules under which the youth group will operate. This list can be posted at meetings or printed and included in materials group members receive. Teens will be more likely to follow the rules if they help decide what they are rather than have a list

Getting started with young people

- Determine the general type and focus of the group you want to form.
- Work with your core group of young people to organize the first meeting or event.
- Get contact information on all those present and discuss how you can reach each other.
- Ask those who participate to help identify and recruit other young people.
- Follow up on commitments made during the first meeting or contact.
- Arrange to contact parents, school officials, or other

responsible adults to tell them about the group, answer any questions, and provide contact information.

If a youth involvement group is being formed within an existing program or organization, there may be some additional tasks:

- Talk with adult staff about how the youth involvement program will benefit the organization.
- Train adult staff in how to bring in teen voices (see Ideas for Youth Involvement).

imposed on them. The group can then amend or change the rules as it evolves. Depending on the purpose of the group, rules may include:

- confidentiality—what is said in the group, stays in the group;
- mutual respect—each member is respected as an individual;
- value for each contribution—there are no dumb ideas;
- careful listening—each person will have an opportunity to talk and when not talking, will listen;
- promptness—meetings and other events will begin and end on time;
- no swearing;
- no gang colors or markings;
- no violence or weapons; and
- no drugs or alcohol—no one under the influence will be allowed to stay.

Expect young people to outgrow the program

Young people do not stay young forever. They grow up and become adults. One of the biggest challenges youth organizations face is losing teens as they progress into high school and beyond. A program may be well-received by a teenager for a year or two and then he or she will decide to move on to other things. Programs need to be continually reinvented. A good way to do this is to let the young people continue to change the program and recruit new members.

Make the program accessible and “teen-friendly”

Arrange transportation

How do young people get to the program? If it is located in an urban area with good mass transit, teens may need help covering the cost of public

FIELD NOTES

Considerations for adults in working with young people

Listen openly to what young people have to say—which may mean suspending judgment for awhile.

Focus on building a relationship with the young people based on mutual respect—respect is gained when it is given.

Share information about themselves—young people are curious about adults, how they think and how they make decisions; this kind of personal connection can be the most powerful part of a program for a young person.

transportation. Young people in smaller towns and rural areas face a major barrier when it comes to getting to and from activities. Middle school youth in particular may need help with carpooling and rides. Older youth may be able to share driving responsibilities.

Survival Skills, a collaboration between Planned Parenthood and the YWCA in Lincoln, Nebraska, that was replicating a teen pregnancy prevention program in New York, found that the program model was fine, but the lack of transportation locally was a big potential problem. They ended up using the YWCA's van to get young people to and from the program, but this required funds to pay for the driver and mileage.

If the program takes place right after school, transportation is

less of a problem because the young people will already be there. This frees staff to concentrate on how they will get home.

Provide food

Providing free food is a near-certain requirement for a well-attended meeting, particularly with young people. As with all other aspects of the program, staff should be sure to find out what the young people want—healthy snacks and meals may be preferable, but if that's not what they want, they won't eat it. If buying food is too costly, the group can work together to raise a little money for a food fund. Some young people or their families may be able to contribute personally, but others will not have the resources. Programs need to be sensitive to the individual situations of members.

Retaining youth is the key to success

Recruitment is the easy part—the harder part is keeping young people involved. Young people are pulled in many directions. They may be in school full time. They may also work for pay part time or have other volunteer commitments. Sports, drama, church or temple, and clubs all vie for attention. And, just like adults, young people want to see their friends and have fun.

Recruitment and retention strategies work hand in hand.

Programs can successfully retain youth by:

- involving teens early in developing the program
- listening to their ideas
- remembering that the teens are equal partners
- accepting and caring about each teen
- encouraging staff to become trusted mentors
- having high expectations for each and every teen
- letting teens grow with—and out of—the program

Arrange accessible meeting times and locations

Young people should help determine meeting times. This may mean Saturday mornings or Friday nights. Recruit staff who are able to work during times they might normally save for themselves.

Program times also will depend on the age group. Young adolescents may not be able to stay out as late as older teens.

Friday nights can be bad during football season and Wednesdays, a traditional church night, can be bad all year round. Once established, the meeting time and day should stay the same unless the group requests a change. The location may also help staff determine the hours—some areas may not be safe after dark, for instance.

If a program is partnering or working with the support of an existing youth group, such as a YWCA, YMCA, Boys and Girls Club, religious institution, school, community theater, or community center, space may already be available for the program. If there is a fee involved, the existing organization may be willing to waive it as part of their contribution to the program. When choosing a particular space, programs should consider the following:

- Does the space need to be swept and cleaned up afterward?
- Will there be heat or air conditioning?
- How will participants and leaders lock up when they are done?
- Will young people be able to safely wait around outside for their transportation?
- Is it safe to walk to the subway?
- Is it on a bus line?
- Is it in any gang's territory that would keep it from being safe for all the young people who might be involved?

Conclusion

Chances are that in every successful person's youth an adult stepped forward to make a difference. The adults who staff pregnancy prevention programs have a chance to be that adult for a young person, a chance to change someone's life. Teens need adult involvement. They

need adults to care enough to provide the safe environment that is necessary for learning, growth, and development. Involving youth in meaningful and significant ways in planning and carrying out programs can ensure that all young people get a vital chance to succeed.

Programs and resources mentioned in this chapter

America's Promise

909 N. Washington St., Suite 400
Alexandria, VA 22314
(888) 55-YOUTH
www.americaspromise.org

Newsletter, information about local and national activities.

Campaign for Our Children

120 W. Fayette St., Suite 1200
Baltimore, MD 21201
(410) 576-9000
www.cloc.org/room411

CDC Community Coalition

Partnerships Program for the Prevention of Teen Pregnancy
Teen Pregnancy Prevention Program
Centers for Disease Control and Prevention
4770 Buford Highway NE
Atlanta, GA 30341-3724

Community of Caring

1325 G St., NW, #500
Washington, DC 20005
(202) 824-0215

Corporation for National Service

1201 New York Ave., NW
Washington, DC 20525
www.nationalservice.org

AmeriCorps and Learn and Serve America information.

Full Circle Theater

Center for Intergenerational Learning
Temple University
1601 North Broad St., Room 206
Philadelphia, PA 19122
(215) 204-6970

Generations Together

University of Pittsburgh
121 University Place
Pittsburgh, PA 15260
(412) 648-7150

National 4-H Council

7100 Connecticut Ave.
Chevy Chase, MD 20815-4999
(301) 961-2800
www.fourhcouncil.org

National Network for Youth

1319 F St., NW, Suite 401
Washington, DC 20004
(202) 783-7949
www.nn4youth.org

Regional networks and individual members; new training/consultation subsidiary called Strategic Innovations Group; national conference. The National Network also publishes *New Designs for Youth Development*, a quarterly journal dedicated to voicing progressive, humane, and caring approaches to the development of youth and community. Annual subscription rate: \$29.

Not Me, Not Now

John Riley, Director
Monroe County Department of Communications and Special Events
39 W. Main St., Suite 204
Rochester, NY 14614
(716) 428-2380
www.notmenotnow.org

Pathways Senderos

Greater New Britain Teen Pregnancy Prevention, Inc.
100 Arch St.
New Britain, CT 06051
(860) 229-2776

Project ABLE

Mill Street Loft
20 Maple St.
Poughkeepsie, NY 12601
(914) 471-7477

Public/Private Ventures

One Commerce Square
2005 Market St., Suite 900
Philadelphia, PA 19103
(215) 557-4400

Publications and information on mentoring, including information on its Community Change for Youth Development project.

Search Institute

Thresher Square West
Suite 210
700 South Third St.
Minneapolis, MN 55415
(612) 376-8955
www.search-institute.org

Healthy community characteristics, developmental asset framework, publications, training.

Sending the Message: State-Based Media Campaigns for Teen Pregnancy Prevention

The National Campaign to Prevent Teen Pregnancy
2100 M St., NW, Suite 300
Washington, DC 20037
(202) 261-5655

Sex Etc. (a free newsletter for teens by teens)

Network for Family Life Education
Rutgers University
Building 4161
Livingston Campus
New Brunswick, NJ 08903
(732) 445-7929
(732) 445-4154 Fax
sexetc@rci.rutgers.edu

Youth on Board

58 Day St., Third Floor
Somerville, MA 02144
(617) 623-9900

Technical assistance and publications, including the new book, *Youth Governance: 14 Points to Involving Young People Successfully on Boards of Directors*.

Other helpful resources

Academy for Educational Development

Center for Youth Development and Policy Research

Academy for Educational Development
1875 Connecticut Ave., NW
Washington, DC 20009-1202
(202) 484-8267

email: cyd@aed.org

Youth development publications, free *Center Connections* quarterly newsletter.

Advocates for Youth

1025 Vermont Ave., NW, Suite 200
Washington, DC 20005
(202) 347-5700

Mentoring clearinghouse, annual conference, resource library, publications.

Lessons for Lifeguards: Working with Teens When the Topic Is Hope

Donkey Press
PO Box 20583
New York, NY 10021-0071

An inspirational book by Dr. Michael A. Carrera for people who care about teens.

National Youth Leadership Council

1910 West County Road B
St. Paul, MN 55113
www.nylc.org

Service learning, conference, publications, clearinghouse.

The New Community Collaboration Manual

The National Assembly
1319 F St., NW, Suite 601
Washington, DC 20004
(202) 347-2080

Includes a chapter on youth involvement.

Reducing the Risk: Connections that Make a Difference in the Lives of Youth

Add Health
c/o Burness Communications
7910 Woodmont Ave., Suite 1401
Bethesda, MD 20814

Research based on the National Longitudinal Study of Adolescent Health published in 1997.

Some Things Make a Difference for Youth: A Compendium of Youth Programs and Practices

American Youth Policy Forum
1001 Connecticut Ave., NW, Suite 719
Washington, DC 20036-5541
(202) 775-9731

Young and Old Serving Together: Meeting Community Needs through Intergenerational Partnerships

Generations United
440 First St., NW, Suite 480
Washington, DC 20001
(202) 662-4283
www.gu.org

Contributors—Volume I

Donna Butts

Donna Butts is the Executive Director of Generations United, the only national organization working to foster intergenerational cooperation and support in public policy initiatives and programs. For more than 25 years she has held leadership positions in the nonprofit world working with and on behalf of children and youth. She is the author of numerous articles and is a strong national advocate for children, youth, and the elderly. She is also a Certified Fund Raising Executive (CFRE).

John Hutchins

John Hutchins is Senior Editor for the National Campaign to Prevent Teen Pregnancy. He has worked for the past twelve years as a writer, editor, policy analyst, and public relations professional for health care associations and public policy organizations in Washington, DC. Hutchins is the author of *Coming Together for Children and Families: How Cabinet-Level Collaboration is Changing State Policymaking* (Family Impact Seminar, 1998) and co-editor of *Charting a Course for the Future of Women's and Perinatal Health* (Johns Hopkins University, 1999).

Leslie M. Kantor

Leslie M. Kantor is the Co-Chair of the State and Local Action Task Force of the National Campaign to Prevent Teen Pregnancy and the Vice President of Education at Planned Parenthood of New York City. In this latter role, Kantor gives overall direction to a department that provides workshops on sexuality to over 20,000 New Yorkers each year, and trains professionals and parents to be effective sexuality educators for youth. A widely acclaimed speaker on sexuality, Kantor is the recipient of the Jay S. Drotman Memorial Award from the American Public Health Association, which recognizes accomplishments in "challenging public health policy or practices in a creative or positive manner."

Tamara Kreinin

Tamara Kreinin, M.H.S.A., has worked extensively in health care and human services for over twenty years. Kreinin holds a master's degree in Health Services Administration from the University of Michigan. She is currently the Director of State and Local Affairs at the National Campaign to Prevent Teen Pregnancy. Kreinin started and served as Executive Director of The New Orleans Council For

Young Children. She is a spokesperson and resource for the press on issues of importance to children and families and she lectures and conducts workshops frequently on a variety of topics.

Susan M. Kuhn

Susan M. Kuhn is a Washington-based consultant who helps nonprofit organizations launch new activities and products. A 20-year veteran of the nonprofit and philanthropy fields, she has started new organizations, created new publications, authored and edited books, and designed and implemented new organizational strategies and structures. Kuhn's background is in development, editorial work, and strategic planning.

Anne Brown Rodgers

Anne Brown Rodgers has been a writer and editor for more than twenty years, working on publications for technical as well as lay audiences. Her primary focus is on health-related issues, and she has covered a broad range of topics, including women's health, prenatal care, HIV/AIDS, cancer, rural health care delivery, nutrition, and managed care. Since 1992, she has managed her own writing and editorial services business.

ORDERING *GET ORGANIZED: A GUIDE
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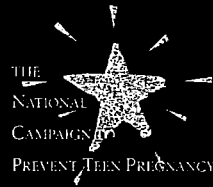
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VOLUME 1

Focusing on the Kids

Get Organized: A Guide to Preventing Teen Pregnancy

VOLUME 1: Focusing on the Kids



The National Campaign to Prevent Teen Pregnancy is a nonprofit, nonpartisan initiative supported almost entirely by private donations. The Campaign's two-part strategy involves (1) changing the culture by working with the entertainment media, parents, teens, and others, and (2) building a more coordinated and effective grassroots movement by working with local communities. Both components of our strategy are anchored in strong research on effective approaches and respect for the role of religion and values in shaping solutions.

The National Campaign to Prevent Teen Pregnancy
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Get Organized:

A Guide to Preventing Teen Pregnancy

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V O L U M E 2

Involving the Key Players

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September 1999

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VOLUME

Involving the Key Players

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Introduction

The 1990s have brought some good news regarding teen pregnancy in the United States: after two decades of increasing teen pregnancy and birth rates, the numbers have declined. Overall, the teen birth rate declined by 16 percent from 1991 to 1997, with all states recording a decline in the birth rate of 15- to 19-year-olds. It is the sixth year in a row that the teen birth rate has declined. Nevertheless, 4 out of 10 American girls get pregnant at least once before they turn 20, leading to nearly one million teen pregnancies a year. Clearly, teen pregnancy remains a serious problem, and the economic, social, and personal costs for teens, their children, and society are great. As a nation, we are at a severe competitive disadvantage when our teen pregnancy and birth rates are at least double—even triple—those of other industrialized nations.

Communities around the country increasingly recognize that helping teens avoid pregnancy can't be accomplished by any single program or strategy. Because the causes of teen pregnancy are complicated and overlapping, solutions must have many parts and approaches. This means doing things differently: getting new people and organizations involved, committing for the long term, and measuring carefully the effectiveness of programs. This three-volume publication, *Get Organized: A Guide to Preventing Teen Pregnancy*, is meant to be a practical manual, a toolkit of sorts, for people at the state and local levels who are interested in taking action to prevent teen pregnancy in their communities. It covers a lot of ground—from strategies for collecting basic data and for reaching out to religious leaders to practical advice about how to raise money and conduct program evaluation. Yet it remains easy to read and simple to use, with many examples from promising programs around the country. We hope it will be useful as communities unite to address this issue and to design programs that are right for them.

Get Organized was developed primarily for those creating a state or local coalition or strategy to prevent teen pregnancy, although anyone interested in developing a single, small program to help teens avoid pregnancy should find valuable information in these chapters. Several overarching principles bind these chapters together:

- Multiple, mutually complementary strategies are more likely to make a difference. There are no easy answers to the problem of teen pregnancy.
- Involving new partners, like the business community, or traditional partners in new ways enhances any prevention strategy.
- Preventing teen pregnancy requires long-term, intense effort. One six-week program will not have much lasting effect, nor will a couple of classroom hours. And, because a new crop of teenagers arrives on the scene every year, prevention efforts must be constantly reinvented.
- Communities can unite around the *need* to address teen pregnancy without expecting unanimity about *ways* to prevent it. Different organizations and members of the community can adopt different strategies to reach the same end—fewer pregnant teens. Sometimes strategies even seem to conflict with each other, but that is not necessarily a problem. Teen pregnancy is a complicated—even messy—problem, and “messy” strategies can often be useful.
- Parents are important influences on their children’s decisions about sexual behavior. They should be supported in their roles and included in planning and developing strategies to prevent teen pregnancy. And, needless to say, involving teens themselves—the “target audience”—is always essential.
- Focusing on boys and young men is critical to any effort to prevent teen pregnancy. Girls are indeed the ones who get pregnant, but it takes two to cause a pregnancy.

As the accompanying matrix shows, *Get Organized* is divided into three complementary volumes:

Volume I: Focusing on the Kids opens with an overview of the promising programs that can help prevent teen pregnancy. The other chapters explain how to tailor programs to stages of adolescent development, create interventions for girls, involve boys and young men in prevention efforts, and involve young people themselves in developing and implementing programs.

Volume II: Involving the Key Players focuses on the roles of traditional participants in prevention efforts, like schools and health

Get Organized Matrix

Volume 1: Focusing on the Kids

1. Promising Approaches to Preventing Teen Pregnancy
2. Tailoring Pregnancy Prevention Programs to Stages of Adolescent Development
3. Developing Pregnancy Prevention Programs for Girls and Young Women
4. Involving Teen Boys and Young Men in Teen Pregnancy Prevention
5. Involving Youth in Teen Pregnancy Prevention Programs

Volume 2: Involving the Key Players

6. Involving Parents and Other Adults
7. Involving the Faith Community
8. Involving the Business Community
9. Involving Schools
10. Involving Health Care Professionals

Volume 3: Making It Happen

11. Getting Your Community Involved in a Teen Pregnancy Prevention Project
12. Tailoring a Program to Your Community Through Needs Assessment
13. Planning and Carrying Out a Teen Pregnancy Prevention Project
14. Raising Funds for Teen Pregnancy Prevention
15. Working with the Media to Promote Teen Pregnancy Prevention
16. Building Evaluation into Your Work
17. Moving Forward in the Face of Conflict

care professionals, as well as some often overlooked players, including faith leaders, the business community, and parents.

Volume III: Making It Happen concentrates on the logistics of developing a state or local coalition—or any major effort—to prevent teen pregnancy, including involving the community, assessing the needs of the community, planning, fundraising, working with the media, evaluating initiatives, and dealing with conflict.

Each chapter of *Get Organized* follows a similar format. The tab divider briefly describes how the information is organized and lists a handful of the chapter's key ideas. Throughout the chapters, readers will find easy-to-read boxes, checklists, and nuggets of factual information. Boxes labeled "Research Notes" offer useful findings from published studies. "Field Notes" offer the best advice from practitioners in the field. "Case in Point" boxes illustrate specific issues with real-life examples. Every chapter concludes with a list of helpful references and resources. While the chapters and vol-

umes of *Get Organized* certainly work in tandem, each individual chapter is also meant to stand on its own as a resource.

Many talented people have worked on *Get Organized*, and they are recognized by name in the Acknowledgments, but I would like to thank, in particular, our partners and funders, the U.S. Department of Health and Human Services and the Johnson & Johnson Family of Companies, for their support.

Good work is being done around the country to prevent teen pregnancy. We at the National Campaign hope that *Get Organized* serves both to catalyze new initiatives and reinvigorate existing ones at the state and local levels.

Isabel V. Sawhill

President

National Campaign to Prevent Teen Pregnancy

September 1999



Involving Parents and Other Adults in Teen Pregnancy Prevention

by Lisa Hoeschele

T H I S C H A P T E R

Explains the importance of including parents as well as other adults in teen pregnancy prevention efforts;

Describes ways in which parents and other adults can work together for pregnancy prevention; and

Provides references and resources for further information.

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National
Commission on
Prevention
Pregnancy Prevention

Key Ideas in this Chapter

The more parents and teens participate in shared activities, the less likely those teens are to get pregnant.

Teens who feel connected to their communities are at reduced risk of teen pregnancy. Having other adults involved in their lives in constructive ways helps teens build a sense of connection.

Parents often want help in communicating their values to their children.

Adults and teens may be wary of working with each other, but once past their initial fears, both are usually pleasantly surprised at how much fun time spent together can be.

Involving Parents and Other Adults in Teen Pregnancy Prevention

Why involve parents in teen pregnancy prevention? Because communication is key

Here are just a few of the comments and questions heard by the teacher of an upstate New York parent-child communications class:

- "My teen does not want to hear from me."
- "My daughter thinks she knows it all already."
- "I think my son is having sex. How can I get him to talk to me without scaring him off?"

She hears parents complain about feeling powerless in the face of a media and music culture that promotes risk-taking behavior among young people. Parents feel as though their opinions do not matter to their teens, and that their values mean little to their children.

Studies show, however, that these parents are mistaken. Children want to talk with their parents. A solid relationship between a teen and his or her parents is consistently related to healthy emotional functioning and self-esteem. When the topic is sex, parents are even more

important in helping their children make the right decisions.

It is *ongoing, sustained* communication between parents and their teens that helps prevent teen pregnancy, as well as a host of other risky behaviors. For example, the more parents talk to their children about responsible decision-making, the less likely those children are to engage in sexual intercourse as adolescents. Studies show that teens with little support from their parents say they have more problems in school and are more likely to abuse alcohol and drugs than are teens who have strong parental support (Licitra-Kleckler and Waas, 1994). Thus, the first step is helping parents and their children open the lines of communication.

A 1999 SURVEY SHOWED THE IMPORTANCE OF PARENTS...

Teens ranked parents as the biggest influence in their decisions about sex.

National Campaign, 1999

Program strategies to strengthen parent-teenager connectedness

Organized programs can do a lot to help parents and teens communicate more openly and lovingly. The following strategies, based on the experience of others, can help programs develop effective interventions.

Reassure parents that communication difficulties are normal

Many parents are afraid to admit they need help communicating with their children. The best programs offer parents the opportunity to share their experiences with other parents, reassuring them that they are not alone in their difficulties.

Make it convenient for parents to participate

Parents are often too busy to come out on the weekends and too tired for evening classes. Programs should consider meeting parents on their own turf by offering a parent-education program at the worksite. Any program needs to be convenient for parents.

Let parents set the agenda

Allow parents to define their own needs. This offers them a chance to gain information about issues they may be dealing with at the time. It is also important for parents to be able to ask questions without being embarrassed.

Ideas for getting parents and children to talk

- Teach parents that listening can be even more important than talking.
- Offer information about the importance of parent-child communications to parents on their own turf: at the worksite, in the home, at the gym, and at the church, synagogue, or mosque.
- Promote the value of parent-child communication among youth; encourage teens to ask their parents for information and guidance.
- Give families the courage and motivation to turn off the television and talk. Begin simply by reminding families that time spent together builds strong families.
- Develop volunteer activities for parents and children to do together: serving food at a soup kitchen or cleaning up a littered highway.
- Encourage family dinner or breakfast hours as a time for sharing experiences and personal events.
- Encourage a faith community, employer, school, or community organization to sponsor parent-child communications programs.
- Organize opportunities for parents and their teens to socialize together: a neighborhood picnic, a church social, or a school Super Bowl party.

The **Family Guidance Center** in St. Joseph's, Missouri, collects questions anonymously and answers them at the next class session. Answering the questions this way allows parents the freedom to ask about anything they want and makes class content much more meaningful.

Have teens and parents practice listening skills

Talking together in class about difficult and sometimes embarrassing issues—and learning how to listen—helps promote positive communication at home.

The **Family Guidance Center** uses a variety of ways to get parents and teens talking together, from a “Human Sexuality Board Game” to a pretend “Dear Abby” advice column activity.

Teach parents about the developmental stages of youth

Educating parents about the stages of adolescent development allows parents to better communicate with their children. It helps them get their point across effectively and helps them adjust their expectations for teen behavior.

Know the cultural norms and literacy levels of teen and parent participants

Programs should consider surveying area adults and teens

FOR MORE INFORMATION ON THE WAYS TEENS GROW UP...

**See Chapter 2 (Volume 1)
“Tailoring Pregnancy
Prevention Programs to
Stages of Adolescent
Development.”**

about their values and feelings on sexual issues. This will reveal important information about what parents and their children want in discussions of sexuality and relationships.

Before they began their efforts with parents, **Plain Talk Seattle** surveyed adults and youth in the area to get a feel for their cultural values about sexual issues. Plain Talk then developed classroom activities that reflected those values.

It is also important to make communications materials as easy to understand as possible. Materials need to be appropriate for the language and literacy level of participants, allowing both parents and teens of any educational level to comprehend them. Materials should use examples or situations that reflect real-life issues and that are relevant to the community.

Innovative parent-child communication programs

Several promising parent-child communications programs have been developed in recent years. These programs tend to focus on sexual issues, but the basic message is the same no matter

TIPS FOR SUCCESSFUL PROGRAMS

- **try a humorous approach when recruiting participants**
- **class size is important—too small and discussions will flop; too big and no one will have a chance to talk (try for at least 6 participants)**
- **try to work with parent-child couples of the same gender to help avoid embarrassment when discussing sensitive subjects like menstruation or wet dreams**

what the topic. Parents and teens need to talk *together* about values, experiences, and expectations.

Cortland, New York: A Lunch 'n' Learn Work-Site Program

Reaching parents is often the greatest obstacle to success for any program. The **Zero Adolescent Pregnancy (ZAP)** program in rural Cortland, New York, decided to take their program directly to worksites. ZAP's program, called "Lunch 'n' Learn—How to Talk With Your Teens About Sex," is offered

through many area employers, both large and small.

The course is given once a week for six weeks over a brown bag lunch. It focuses on helping parents and their children develop open and honest communications. Participants are recruited directly by the employer through posters, paycheck stuffers, memos, and e-mail. Businesses are asked to participate through personal phone calls, mailings, networking, and advertising in the local newspaper.

FIELD NOTES

Diversity considerations when involving parents

- Programs that work with immigrant cultures need to get a clear picture of how parents and children deal with acculturation differently. The children may be more "Americanized" than their parents—perhaps becoming more independent as a result—and, therefore, programs that work with immigrant parents and their children need to reflect such differences.
- For many cultures and individuals, sexuality is very private. It may not be possible to start the discussion with sexuality or pregnancy prevention. A better tack may be to start with less-charged topics, probe for sensitivities, and gradually move to issues related to sexuality.
- Some minority cultures have had negative experiences with the way contraception and birth control have been promoted in their communities. Programs need to know this history.
- There may be parents in the class who were themselves teen parents. Programs need to be sensitive to this.

ZAP's facilitator conducts a survey of participants before the first class. Topics requested by parents have included:

- peer pressure and dating;
- family planning;
- sexual decisionmaking and values;
- STDs/AIDS;
- homosexuality;
- masturbation;
- puberty; and
- sexual assault and rape.

To break the ice, the facilitator encourages participants to bring pictures of their children and share funny stories. During the class itself, ZAP offers parents precise information on what to say and how and when to say it, as well as specific information on child and adolescent development. Although the course is called "How to Talk With Your Kids About Sex," ZAP's facilitator includes general communication issues in classroom discussion to help parents talk with their teens about all kinds of subjects.

Seattle, Washington: Plain Talk for Parents—A Community-Wide Approach

One of five community programs funded by the Annie E. Casey Foundation, **Plain Talk Seattle** is a community-wide campaign

to promote teen health through training workshops for parents, educators, youth workers, and health care providers. The program helps parents communicate with their children about sexual issues and relationships. Four one-hour classes are offered to parents at area schools, libraries, churches, and other similar settings. During the class, parents of children grades 4 through 12 are encouraged to share family values on sexuality and sexual relationships, and to become advocates for teen health and sexuality issues in their community. Videos, worksheets, and role plays strengthen and encourage classroom discussion.

Plain Talk Seattle has developed a complete training package and provides them to many parent and parent-school organizations and local agencies. For communities where many different languages are spoken, classes are offered with help from trained English as a Second Language (ESL) coaches or translators. Participants are

MANY PARENTS ARE HUNGRY FOR INFORMATION BUT HESITANT TO PARTICIPATE...

"Sometimes the courageous souls who attend are mobbed after class by those who did not. They are pumped for information and strategies for talking with their own teens."

Andrea Rankin, ZAP Director

recruited through local media and personal contacts with schools and other sponsoring agencies.

The classes offered are: Personal Boundaries, Sex on TV, Decision Making, and Healthy Neighborhoods. A survey conducted afterward is used to track the impact of the class and to gain feedback on course content, classroom activities, and printed information.

St. Joseph, Missouri: Parents and Teens Learn Together

The Family Planning Department of the **Family Guidance Center** in St. Joseph, Missouri, serves nine counties in rural northwest Missouri, an area with high rates of teen pregnancy. The Family Guidance Center offers reproductive health services and pregnancy counseling as well as sexuality and family life programs with schools and other local organizations in an area where most local schools do not offer comprehensive sexuality education.

Working with the support of parent groups, youth organizations, local religious institutions, and area educators, the Family Guidance Center offers a series of six parent-child sexuality education classes to:

- mothers and daughters aged 9-12;
- mothers and daughters aged 13-17;
- fathers and sons aged 9-12; and
- fathers and sons aged 13-17.

The first class is for parents only, offering an overview of the course and information on the role of the parent in the classroom and at home. The importance of including the nonparticipating parent is also stressed. The classes that follow cover biology, reproduction, pregnancy and childbirth, and feelings and values. Classes for parents and older teens (ages 13-17) also include information about birth control methods, breast and pelvic examinations, STDs and HIV, teenage sexual

**PLAIN TALK FOR PARENTS—
A SPRINGBOARD FOR COMMUNITY ACTION**

Many other community activities have developed as a result of Plain Talk's efforts:

- the opening of a school-linked health center
- a Plain Talk Training Institute
- a recent public policy forum on teen health issues

behavior, values clarification, and decisionmaking and communications skills.

To keep embarrassment to a minimum, the instructor places a "question box" at the back of the classroom where individual participants can place questions anonymously. The instructor answers the questions at the following week's class session.

One of the most popular exercises has been the "Dear Abby" activity. This game helps parent-child pairs focus on decision-making and problem solving in a relevant, fun way. The class is divided into groups of two parent-child pairs. Each group is given a "Dear Abby" card with a letter asking for advice. Developing the answer allows parents and their children to begin discussing differing values, feelings, and beliefs.

Parent participants report feeling closer to their children, and say that they will continue to talk with them about sexual issues outside of class. Teen and pre-teen participants say that they develop a more positive understanding of the values and beliefs of their parents, and that they feel more comfortable talking about sexual issues with their parents after taking the class.

FAMILY GUIDANCE CENTER KEYS TO SUCCESS

- **small classes**
- **real-life, relevant topics geared to specific age groups**
- **varied activities that reinforce learning and foster skills-building**
- **shared participation that creates a bond between parents and teens**

Girls Inc.

Girls Inc. is a youth organization which, for the past 50 years, has dedicated itself to helping girls become "bold, smart, and strong." Girls Inc. serves over 350,000 girls ages 6 to 18 in over 1,000 communities across the country through educational programs that encourage girls to take risks and master challenges. Programming includes education, media literacy, health, sports, and substance abuse and pregnancy prevention.

Among its teen pregnancy prevention programs, **Growing Together** is the most important in helping parents and their daughters communicate about sex and pregnancy. In five, 90-minute classes, Growing Together works to increase communication between parents and daughters about sexuality, reinforce the idea that parents are the primary sexuality educators of their children, help parents learn how to start conversations and answer questions about

Developing a parent-child communications program

- ☐ Create a planning committee, including community leaders, members of the school community, business people, clergy, teens, and others.
- ☐ Assess community needs and values.
- ☐ Set content area and program goals. Set realistic participation targets.
- ☐ Gather materials from established programs and review. Choose the approach that will best meet identified needs.
- ☐ Learn about local PTA and public and private school systems. Enlist their support and involvement.
- ☐ Secure financial and in-kind support.
- ☐ Prepare promotional materials to show the benefit of the program to potential sponsoring agencies, business leaders, faith communities, and participants.
- ☐ Recruit and train class leaders/facilitators. Choose class sites.
- ☐ Market the program to potential sponsors and participants:
 - ☐ Circulate press releases and place advertisements with local media.
 - ☐ Make personal contacts with community organizations like the YWCA and YMCA, the PTA, and religious institutions as well as area service clubs, Chambers of Commerce, local industry councils, and human resources groups.
 - ☐ Place posters in area department stores, malls, schools, and other community gathering places.
- ☐ Prepare and order materials for classes, including videos, classroom activities, homework, and printed information.
- ☐ Develop any evaluation instruments that will be needed, such as pre- and post-course surveys.
- ☐ Make arrangements for props, audio-visual aids, and refreshments.
- ☐ Assess the program to the extent feasible. Meet with facilitators for fine-tuning and program changes.
- ☐ Follow up with mailings, a newsletter, or other communication to reinforce new skills in parent-child communications.

sexuality, and help parents and their children clarify feelings and values.

Let's Talk Month

In 1980, the Adolescent Pregnancy Prevention Coalition of North Carolina designated October as **Let's Talk Month** to encourage parents in their role as the primary sexuality educators of their children. In 1997,

Advocates for Youth, a national youth advocacy organization began a national promotion of Let's Talk Month, encouraging every state, community, religious institution, school, youth organization, and parent to get involved. Its extensive *Let's Talk Month Campaign Manual* offers materials, suggestions, and organizing tips for community groups.

The goals of Let's Talk Month are to provide parents with factual information, to help them feel more comfortable discussing sexual matters with their children, and to encourage ongoing communication. The typical schedule has a variety of activities, including:

- press conferences;
- film festivals;
- parent/child sexuality education seminars;

- teen parent panel discussions;
- lecture series;
- clergy conferences;
- professional training programs for educators; and
- teen theater performances.

Some communities offer special events for teens as well, such as teen essay and/or poster contests and awards for outstanding local teens. Suggestions for lecture topics include healthy relationships, being an "askable" parent, peer pressure, sexual relationships, abstinence/postponing sexual activity, HIV/STDs and other health issues, and life and career planning.

"Working together, parents and their communities can provide the information and support necessary to prepare today's young people for their responsibilities as adults and parents of tomorrow."

*North Carolina Gov.
James B. Hunt Jr. in his 1995
Let's Talk Month Proclamation*

Planning and carrying out a *Let's Talk Month* campaign

- ☐ Organize a community advisory board. Be sure to include representatives from all important community groups, including teens.
- ☐ Think about possible nontraditional partners, such as detention centers, group homes, child care centers, and foster parents. Send them promotional mailings.
- ☐ Encourage the mayor and city or county legislative body to endorse the campaign with an official proclamation.
- ☐ Involve the media as much as possible through press releases, feature stories, ads, interviews, and public service announcements.
- ☐ Develop a list of activities and a calendar of events.
- ☐ Schedule dates, times, and locations of all activities. Be sure to consider transportation limitations.
- ☐ Send a promotional mailing to schools, businesses, service clubs, social service agencies, religious organizations, and the local media.
- ☐ Post program listings throughout the community.
- ☐ Assess the effectiveness of each activity to the extent feasible and decide if that activity will be repeated during subsequent campaigns.
- ☐ Send a personal thank-you note to each program participant.
- ☐ Follow up with ads or a letter to the editor of the local newspaper thanking the community for its involvement.

Why involve other adults in teen pregnancy prevention? Because they make a difference one teen at a time

Parents do the best they can, but often teens need more adult involvement in their lives—particularly those kids in single-parent families or whose parents are not available to them. Studies show that involving adults in the lives of teens can be important. Teens who have adult role models are less likely to get pregnant, cause a pregnancy, or engage in substance abuse or criminal behavior.

Research also shows that even youth development programs whose primary goal is not teen pregnancy prevention may act to reduce teen pregnancy among participants (Kirby, 1997). For example, a poor, fifteen-year-old girl, whether she lives in a city or the rural American countryside, can feel powerless to make decisions that will positively influence her life. College is probably not even an option; just finishing high school will be a challenge. She has no money for transportation outside of her immediate community, and sees no alternatives for her future other than as a poor, teen parent. Who can help her and how? By focusing on education, employment, and life options, programs may reduce teen

pregnancy rates among girls like her, while helping them with other issues at the same time.

Program strategies for building relationships among teens and adults

Many of the programs working to bring adults and youth together use the following strategies to foster positive relationships. The examples mentioned here are described in more detail later in this chapter.

Offer positive role models to youth

Mentoring programs often work with teens who have few positive adult influences in their lives.

Cincinnati's **Project ASPIRE** helps teens think about the future by developing a positive relationship with a caring adult who has already been successful in starting a career. This strategy offers the student a chance to see that life holds options other than teen parenthood, crime, or a dead-end job. Project ASPIRE also focuses on helping all mentored students, even those who may not be planning on attending college, to set and meet academic goals.

Liability issues when working with adult volunteers

Safety and liability issues must be taken into consideration when developing programs that include adult involvement in the lives of youth. Screening the adults who participate in mentoring activities is necessary. Failure by a volunteer candidate to complete the screening process should be considered a red flag because it may indicate that the applicant has something to hide. The following recommendations are adapted from a guide on screening potential volunteers in youth development organizations, developed by the **National Collaboration for Youth**.

Assess the level of risk for child sexual abuse at the organization's activities based on factors such as location, frequency and duration of meetings, monitoring of activities, and parental involvement. For example, a mentoring program with activities and meetings that are held in public places, such as schools, would present a lower risk than a program with activities that occur in private homes.

FIELD NOTES

Decide what screening information is necessary

to determine if a potential volunteer poses a risk for child sexual abuse:

- a past history of sexual abuse or conviction of any crime dealing with children
- a history of sexually exploitative behavior or violence
- termination from a paid or volunteer position because of misconduct with a child

Choose appropriate screening tools. Based on the level of risk, an organization may choose one of three levels of screening:

Basic screening

- information provided by the applicant
- references provided by the applicant
- personal interviews

Intermediate screening (may be necessary for programs that will involve a fair amount of unsupervised contact between volunteers and children)

- home visits
- checks against state criminal and sex offender registries

Comprehensive screening (probably not necessary for every volunteer or for every program)

- checks against FBI criminal records
- checks against national child abuse registries
- psychological evaluations

Encourage parents, adults, and schools to work together

Positive influence works best when all the sources of influence are working together.

EPIC in Buffalo, NY, helps parents and teachers work together to help children develop a positive sense of values and a strong sense of right and wrong.

The **Teen Outreach Program (TOP)** in Roanoke, VA, holds monthly family night out events to allow parents and mentors to come together in celebration of young people and their importance in the community.

Encourage long-term relationships between teens and adults

Most mentoring programs ask that mentors make a commitment of at least one year. However, many mentors and teens continue to have positive relationships long after the mentoring experience has ended.

Innovative adult involvement programs

With more and more children living in single-parent families, the involvement of an adult outside the family unit can be crucial. This section provides examples of programs that have worked in a variety of communities. Some seek to address

directly the problem of teen pregnancy; others focus on other related problems, like school failure, which are strongly associated with risk of teen pregnancy.

Cincinnati, Ohio: Project ASPIRE

In 1987, Procter & Gamble (P&G) decided to address the teen dropout rate in Cincinnati with an adult-teen mentoring project. With help from the local government, the Cincinnati Youth Collaborative, and the Cincinnati Public School System, P&G began its pilot project at Cincinnati's Woodward High School with 100 employees and students.

Project ASPIRE (which stands for *advise, support, prepare, inform, respect, and encourage*) is designed to "assist students in developing attitudes necessary to succeed in an academic program and to provide opportunities for personal development and success," through building self-esteem and cultivating a positive attitude toward learning. Project ASPIRE now matches over 150 students with mentors from both P&G and the community at large.

The program has a simple philosophy—one caring adult for every teen. Although a mentor's commitment is initially for one year, many mentors become

friends with their students and continue their relationship for a long time. Mentors must be confident, enthusiastic about the program, and genuinely interested in the student, and they must meet with their student at least once a month. Primary responsibilities include helping the student with study habits and school assignments, working with the student to overcome difficulties standing in the way of future success, showing the student how to use outside resources, and guiding the student in setting and reaching short- and long-term life goals.

Mentors are also in contact with the student's parents, teachers, and counselors and may receive a copy of the student's report card, attend school functions, participate in academic activities, and go to other outside events with their student. They document a

student's progress on a quarterly basis with simple forms that record specific goals set and attained, offering important feedback and encouragement.

Project ASPIRE has developed specific mentoring components to meet the needs of three different types of students—high-risk teens, career-oriented youth, and college-bound students.

For high-risk teens, mentors:

- meet with parents and teachers to set goals for the student;
- help encourage good study habits;
- offer tutoring and counseling when necessary; and
- periodically evaluate goals to attaining specific skills and attitudes.

MEASURING SUCCESS IN NUMBERS

Since Project ASPIRE began:

- **the dropout rate and the number of discipline referrals at Woodward High School have declined**

In 1990:

- **86% of ASPIRE students graduating from high school went on to college, while only 25% of non-ASPIRE students went to college**

MEASURING SUCCESS IN WORDS

“...what I like about my mentor is that I can trust him and he can help me with any problem I have.”

Terrell Larkin, a Project ASPIRE student

For work-oriented youth, mentors:

- encourage the student to participate in job-preparation programs;
- offer information on careers;
- help the teen select a course of study in high school;
- assist in developing work habits and good conduct;
- help the teen build a resume; and
- encourage the student to dress neatly and use proper language.

For college-bound students, mentors:

- help the teen prepare admissions and financial aid applications;
- visit or arrange visits to college campuses and information sessions;
- assist students in study skills and test preparation; and
- help with decisions on courses of study.

BIG BROTHERS/BIG SISTERS WORKS

According to a rigorous evaluation, mentored teens were:

- **46% less likely to start using drugs**
- **27% less likely to begin using alcohol**
- **33% less likely to hit someone**

and they demonstrated better:

- **school attendance**
- **school performance**
- **attitudes toward completing schoolwork**
- **peer and family relationships**

than unmentored teens

Public/Private Ventures, 1996

Big Brothers/Big Sisters of America

Big Brothers/Big Sisters of America is the country's oldest mentoring organization and currently maintains 100,000 active mentoring relationships nationwide. Each local Big Brothers/Big Sisters of America agency is autonomous. Affiliates adopt a set of national standards governing the screening of mentors and youth, the training of mentors, the matching process, required meeting frequency, and ongoing supervision.

Most local agencies recruit and screen volunteer mentors, screen and accept youth candidates, and carefully match youth with mentors based on background, stated preferences of youth and adults, and geographic proximity. Most matches meet for three to four hours every week. The adult volunteer is asked to commit at least one year to the match. Many agencies have alternative programs for volunteers who

cannot meet the traditional time requirement.

Boys and Girls Clubs of America

Boys and Girls Clubs of America has a long history of helping teens reach their full potential. First established in 1860 as the Boys Club, this nationally recognized organization expanded its focus to serve the needs of all youth in 1990 when it became the Boys and Girls Clubs of America. Boys and Girls Clubs of America now serves some 2.8 million youth annually in over 2,000 clubs across the country.

The Clubs' Skills Mastery and Resistance Training (SMART Moves) and Skills Mastery and Resistance Training for Girls (SMART Girls) programs

focus on primary prevention of drug and alcohol use and premature sexual activity among youth ages 6-15. SMART Moves is based on a team approach to prevention. Its six-component curriculum stresses life skills enrichment, resistance skills, stress reduction, parent-child communications, and community involvement. Club staff, volunteers, and community leaders are trained to provide guidance

Ten innovative ideas for involving adults with teens

1. Ask faith communities, service clubs, and employers how an organization can get involved with area youth.
2. Encourage adults to volunteer at a local school as tutors, mentors, coaches, or advisors to clubs.
3. Meet with the school district's administration to ask them how they are promoting adult involvement and teen pregnancy prevention.
4. Organize a Career Day for youth at worksites, religious institutions, schools, or service clubs.
5. Institute an internship program through worksites, religious organizations, or service clubs.
6. Help youth organizations (Boy Scouts, Girl Scouts, YMCA, YWCA, schools) implement career planning programs.
7. Provide financial contributions to youth/teen programs or offer a scholarship to teen parents through a local community college.
8. Develop opportunities for youth to meet with adults in social settings, at schools, faith communities, and youth community centers.
9. Help develop a community center where youth and adults can meet. Arrange for intergenerational activities, community campaigns, or skills exchange programs.
10. Encourage adults to be a role model in the life of the child of a close friend or relative.

Starting and maintaining an adult-youth mentoring program

- ☐ Collect information on mentoring programs in this and other communities to learn from their experience.
- ☐ Organize a steering committee that includes parents, business leaders, youth, and other members of the community.
- ☐ Contact the local school administration to help design a program that meets the community's specific needs.
- ☐ Develop program plans, goals, and objectives.
- ☐ Establish procedures to ensure the safety of all participants.
- ☐ Choose a program coordinator who can skillfully recruit students and mentors, provide materials, suggest activities, help resolve conflicts, and evaluate the program. This person will be crucial to the program's success.
- ☐ Begin recruiting mentors.
- ☐ Recruit student candidates. Work with school administrators and teachers to target those who will benefit most from a mentoring relationship.
- ☐ Inform parents and get their permission for students to participate.
- ☐ Develop lists of suggested activities for participants.
- ☐ Set goals for program meetings.
- ☐ Develop goal-setting and feedback forms.
- ☐ Build into the program opportunities for sharing experiences, both mentor-to-mentor and student-to-student.
- ☐ Include opportunities for older students to mentor younger students.
- ☐ Offer volunteer opportunities for those who want to become involved but who may not feel comfortable entering into a mentoring relationship. These opportunities can include:
 - tutoring;
 - judging a science fair;
 - serving on a school committee;
 - speaking in a classroom; or
 - answering the phone for a student hotline.
- ☐ Check in regularly with mentors and students.
- ☐ Conduct program evaluation.

In 1983, Girl Scouts of the U.S.A. adopted a resolution including sexuality education and human sexuality programming as components of the Girl Scout program.

on offering the clear and consistent "Say No" message to teens.

The similar SMART Girls program helps young girls ages 10-15 develop healthy and positive attitudes, useful life skills, and enriching lifestyles, and helps them make sound, positive decisions. Female mentors play an important role in the SMART Girls program.

Boy Scouts of America

Founded in 1910, the Boy Scouts of America provides educational programs to boys and young men that build character, citizenship, and personal fitness. Community-based organizations that have goals similar to those of Boy Scouts of America can receive a national charter to become a part of the Boy Scouts of America program. Starting with Tiger Cubs in first grade, Boy Scouts of America has family and community-based programs for boys up to young adulthood, offering participants outdoor activities, life skills training, and character education.

Girl Scouts of the U.S.A.

Girl Scouts of the U.S.A., the world's largest organization for girls, is open to ages 5 to 17. Its membership totals over 2.5

million girls and over 850,000 adult members, including volunteer leaders, consultants, board members, and staff specialists. Its goal is to meet the special needs of girls in partnership with adult volunteers. Adult troop leaders help young girls live up to their full potential through self-discovery activities in science, the arts, the outdoors, and with people.

Recognizing that teen pregnancy is a serious problem, Girl Scouts of the U.S.A. developed a booklet called *Contemporary Issues: Preventing Teenage Pregnancy—Decisions for Your Life*, which outlines specific teen pregnancy prevention activities for troops. These activities include:

- offering factual information to young girls about pregnancy prevention and abstaining from sexual activity; and
- fostering self-esteem and peer support among girls.

The booklet also discusses risk factors for teen pregnancy and various approaches that may help troop leaders in their prevention activities.

Other booklets in the *Contemporary Issues* series offer program suggestions for girls who may be having problems with family conflict or difficulties

in developing a positive self image. *Growing Up Female—Girls are Great* helps troop leaders deal with eating disorders, self-esteem issues, the media, school and social roles, stress, sex roles, and stereotypes. *Facing Family Crises—Caring*

and Coping offers suggestions for dealing with poverty, homelessness, divorce, remarriage, or a death in the family. Both booklets help adult troop leaders develop positive interactions with young girls.

Parents and other adults working together to benefit youth

The two programs highlighted below work to involve both parents and the broader community in the lives of children of all ages, including teens.

EPIC combines the efforts of parents and other adults

Founded in Buffalo, New York,

Every Person Influences

Children, Inc. (EPIC) is a non-profit organization that sponsors community programs throughout New York State and in other areas of the country, including North Carolina, New Jersey, Texas, Wisconsin, and Pennsylvania.

EPIC seeks to draw communities together, positively influencing children and strengthening families to prevent teen pregnancy, substance abuse, crime, and juvenile dropout. EPIC offers workshops for parents and training for teachers and support staff, and it encourages collaboration among social service agencies, faith communities, governmental agencies, local businesses, and health care providers.

Workshops, led by EPIC-trained facilitators, are centered around supportive discussions that

WORKING ACROSS THE AGES AND ACROSS THE COMMUNITY TO STRENGTHEN FAMILIES

EPIC sponsors:

- **workshops for parents**
- **workshops for fathers**
- **training for teachers and support staff**
- **efforts to promote collaboration among community groups**

allow parents to exchange experiences and techniques. Information on child/youth developmental stages and ideas to help parents build skills are offered in manuals provided in both English and Spanish.

EPIC offers a range of workshops, in both English and Spanish, for parents of children of all ages—from toddlers to teenagers. It even offers a “Just for Fathers” workshop. For example, workshops for parents of children offer information on:

- communicating with teachers;
- structure and limits;
- coping with daily conflicts;
- rewards and punishments;
- sexuality education in the home;
- sibling rivalry;
- coping with the guilt and stress of working while parenting; and
- building character, conscience, and values.

Workshops for parents of adolescents cover:

- character development;
- communications problems and strategies;
- peer groups and friends;

- identity and independence;
- making and revising rules;
- school issues;
- teen value systems;
- emerging sexuality and teen pregnancy; and
- self-destructive thoughts and actions.

EPIC teacher and support staff training emphasizes character and life skills development. It tries to build strong home/school partnerships and help teachers identify and overcome barriers to parental involvement in the education of their children. EPIC also offers programs for child care providers of very young children.

One innovative example of EPIC’s work took place in Westchester County, NY, where the Department of Corrections recently asked EPIC to work with teens who had had their first run-in with the law. EPIC is providing its workshop for parents of young adolescents to the youths’ parents, as well as specialized joint parent-teen workshops to help the Department reach its goal of reducing recidivism by at least 15 percent.

The Teen Outreach Program

The Association of Junior Leagues International developed the nationwide **Teen Outreach**

MEASURING A PROGRAM'S SUCCESS BY A TEEN'S SUCCESS

J.T., a young man who often struggled with the temptation to become involved in drug dealing, volunteered with TOP to read to kindergartners in his neighborhood elementary school. His ability to inspire confidence in a shy kindergartner became his motivation to finish high school and begin a career in the military.

Program (TOP) to offer at-risk youth the opportunity to volunteer their services to others in a school-based setting.

TOP offers volunteer opportunities through partnerships with the local health department, area schools, faith communities, local nursing homes, preschools, museums, area businesses, and service clubs such as the Junior League. These partners provide participants, places for volunteer activities, mentors, tutors, role models, and support in celebrating the contributions of youth.

One of the most important elements in TOP Roanoke's program is its family involvement component:

- It plans monthly celebration activities, called "Family Night Out Events," where student participants make presentations showcasing their volunteer activities to their families.
- It works to bridge the gap between home and school by encouraging parents to attend parent-teacher conferences (providing transportation and child care if necessary) and by helping families who might be struggling to communicate

with school personnel. Parental ideas are always sought, from opinions on curriculum content to suggestions for volunteer activities.

One of TOP's main goals is opening lines of communication between teens and their parents. TOP Roanoke empowers parents to share personal values with their children while showing respect for their teens' decisions and values.

TOP Roanoke has a strong mentoring element as well. Adult supervisors from TOP or at the volunteer site act as mentors and role models to teen participants, offering encouragement and guidance in everyday life as well as on the job. Mentors often stay in contact with the young people long after the volunteer experiences have ended.

Conclusion

There are many ways that programs can support increased communication between parents and children and foster stronger connections between adults and young people. One thing that most successful programs have in common is that they help adults make their values known while still respecting young people's values and concerns. At the same time, they convey to youth participants the need to respect and listen to the views of the parents or adults

involved. This mutual respect, seemingly missing from the media's portrayal of youth-adult interaction, is absolutely vital for healthy communication and for healthy youth development. As research affirms, this solid foundation can help teens achieve their full and positive potential and avoid a host of problems, including too-early sexual activity, pregnancy, and drug and alcohol abuse.

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Public/Private Ventures. (1996).
*Executive summary: Making a
difference. An impact study of
Big Brothers/Big Sisters.*
Philadelphia, PA; author
{<http://cpn.org/ppv/ppbbbs.html>}.

Programs mentioned in this chapter

Advocates For Youth

Barbara Huberman
Director of Training and Sexuality
Education
1025 Vermont Ave., NW, Suite 200
Washington, DC 20005
(202) 347-5700

Ask about:

- Let's Talk Month
- *Open Up, Listen Up! Family
Communication about Sexual Health*
- *Talking with TV: A Guide to Starting
Dialogue with Youth*
- Teen Pregnancy Prevention
Clearinghouse

Big Brothers/Big Sisters Of America

230 North 43th St.
Philadelphia, PA 19107-1510
(215) 567-7000
www.bbbsa.org

Ask about:

- Mentoring

Boys and Girls Clubs Of America

Jan Still-Lindeman
1230 West Peachtree St., North
West
Atlanta, GA 30309
(404) 815-5700
Fax: (404) 815-5757

Ask about:

- SMART Moves
- SMART Girls

Boy Scouts Of America

Marilyn Herrington
1325 West Walnut Hill Ln.
Irving, TX 75015-2079
(972) 580-2224

EPIC, Inc.—Every Person Influences Children

Vito Borrello, President
State University College at Buffalo
1300 Elmwood Ave.
Cassady Hall, Room 340
Buffalo, NY 14222
(716) 886-6396
Fax: (716) 886-0221

Ask about:

- Parent and teacher communications
materials
- EPIC can be purchased as a fully
integrated program with training,
materials, and technical assistance

Family Guidance Center

Anne Douglas
940 Edmond St.
St. Joseph, MO 64501
(806) 364-1944

Ask about:

- Parent-child sexuality course
materials
- *The Human Sexuality Game*

Girls Inc.

National Headquarters
30 East 33rd St.
New York, NY 10016-5394
(212) 509-2000
www.girlsinc.org
Ask about:

- *Growing Together* materials

Girl Scouts Of The USA

420 Fifth Ave.
New York, NY 10018-3000
(212) 852-3000
Fax: (212) 852-6544
Ask about:

- *Contemporary Issues: Preventing Teenage Pregnancy—Decisions for Your Life*
- *Contemporary Issues: Facing Families in Crisis—Caring and Coping*
- *Contemporary Issues: Growing Up Female—Girls are Great*

Plain Talk Seattle

Howard Martin
Manager
Park Lake Neighborhood House
10041 6th Ave., SW
Seattle, WA 98146
(206) 767-9244
Fax: (206) 767-7674
howard@neighborhoodhousewa.org
Ask about:

- *Plain Talk for Parents* curriculum and parent guide
- Plain Talk training packet and training

Project Aspire

Paula S. Long, Manager
Contributions and Community Relations
The Procter & Gamble Company
P.O. Box 599
Cincinnati, OH 45201-0599
(513) 945-8457
Fax: (513) 945-8979
Ask about:

- Project ASPIRE brochure and mentoring materials

Teen Outreach Program—Roanoke

Dr. Cheri Hartman
Family Service of Roanoke Valley
3208 Hershberger Rd., NW
P.O. Box 6600
Roanoke, VA 24017
(540) 563-5316
Fax: (540) 563-5254

Zero Adolescent Pregnancy (ZAP)

Andrea Rankin
Jacobus Center for Reproductive Health
60 Central Ave.
Cortland, NY 13045
(607) 753-5088
Fax: (607) 756-3488
Andrear@co.cortland.ny.us
www.cortlandny.com/zap
Ask about:

- *How to Talk With Your Teens about Sex* program information

Other useful resources

Healthy Mothers, Healthy Babies Coalition

Adolescent Pregnancy and Related Health Issues Committee
409 12th St., SW
Washington, DC 20024-2188
(202) 863-2458
Fax: (202) 554-4346
Ask about:

- *Adolescent Pregnancy Prevention: A Compendium of Programs*

Not Me, Not Now

John Riley
Director
Monroe County Department of Communications and Special Events
39 West Main St., Suite 204
Rochester, NY 14614
(716) 428-2330
Fax: (716) 428-3268
www.notmenotnow.org
Ask about:

- *Unlocking the Secret: A Parent's Guide to Communicating with your Teens*

One-To-One/The National Mentoring Project

Gail Manza, Executive Director
2801 M St., NW
Washington, DC 20007
(202) 338-3844
www.mentoring.org
Ask about:

- National Collaboration for Youth guide: *Screening Volunteers to Prevent Child Sexual Abuse: A Community Guide for Youth Organizations*
- *ABCs of Mentoring Kit*
- *Partnerships for Success: A Mentoring Program Manual*
- *The Mentoring Training Curriculum*

The National Campaign to Prevent Teen Pregnancy

2100 M St., NW
Washington, DC 20037
(202) 261-5655
www.teenpregnancy.org
Ask about:

- *Ten Tips for Parents to Help Their Children Avoid Teen Pregnancy*
- *Families Matter: A Research Synthesis of Family Influences on Teen Pregnancy*
- *Snapshots from the Front Line II: Lessons from Programs That Involve Parents and Other Adults in Teen Pregnancy Prevention*

Project Taking Charge

American Association of Family and Consumer Sciences
1555 King St., 4th Floor
Alexandria, VA 22314
(703) 706-4600
Ask about:

- The *Project Taking Charge* Family Life curriculum for young adolescents



Involving the Faith Community in Teen Pregnancy Prevention

by Tom Klaus

T H I S C H A P T E R

Explains the importance of including faith communities in teen pregnancy prevention;

Describes the many assets that faith communities can bring to pregnancy prevention efforts;

Describes ways in which programs and faith communities can work together for pregnancy prevention; and

Provides references and resources for further information.

Key Ideas in this Chapter

Faith communities are natural and important allies in efforts to reduce teen pregnancy. Their contribution may take a variety of forms, many of which focus on youth development and stronger families generally, rather than sexual behavior specifically.

The key to working effectively with the faith community is trusting, personal relationships built on:

- a shared interest in youth development;
- time invested up front in learning about local faith communities and identifying potential partners; and
- persistent, patient, and continuous efforts.

Involving the Faith Community in Teen Pregnancy Prevention

Why involve the faith community?

Programs to reduce teen pregnancy and faith communities are natural partners. A shared interest in strong families and the healthy development of young people provides an excellent foundation for mutually beneficial activities. This chapter describes a variety of ways that religious communities and programs to prevent teen pregnancy can work together productively.

There are at least five reasons to involve faith communities in preventing teen pregnancy. Faith communities:

- focus on values;
- have community credibility;
- have access to young people, parents, and potential volunteers;
- have skills in reducing conflict; and
- are willing to provide in-kind contributions.

Focus on values

Preventing teen pregnancy involves more than just biology. In fact, it touches complex issues of values, personal standards of behavior, power, parent-child relationships, feelings, and beliefs. These issues are at the

core of religious communities—what they teach about, pray over, and communicate. As such, they are natural allies for any program seeking to change the high-risk behavior of teens.

Interestingly, research is beginning to show what many have long known from working with teens—that religious faith and a strong moral sense play vital roles in protecting teenage boys and girls from too-early sexual activity and teen pregnancy. By teaching and preaching religious values, faith communities help shape the character of our children and give them answers to their most heartfelt questions.

- According to the 1995 National Survey of Family Growth, 48 percent of 15- to 19-year-old girls said that they were virgins, and nearly one-half of these young

WHAT DOES "FAITH COMMUNITY" MEAN?

In this chapter, the phrase is used in the most inclusive way to refer to churches, synagogues, mosques, meeting houses, and temples within a neighborhood, city, county, or state.

RESEARCH SHOWS...

Religious faith and a strong moral sense play vital roles in protecting teenage boys and girls from too-early sexual activity and teen pregnancy.

women said that the main reason they had abstained from sex was that it was against their religion or morals. No other single reason was cited more often (NCIS, 1995).

- Adolescents who feel religion and prayer are important are more likely to delay sexual

activity than are other teens (Blum and Rinehart, 1997).

- Adolescents reporting regular attendance in religious services are less likely to be sexually active than are other teens (Eklun and Rochkepartain, 1992).

Community credibility

Many churches and other religious organizations are deeply involved in their communities.

CASE IN POINT

HEART of OKC

When **Healthy, Empowered, And Responsible Teens of Oklahoma City (HEART of OKC)** went looking for partners in the faith community, it was not disappointed. It involved the faith community through an intentional, respectful outreach.

During the planning phase of HEART of OKC, youth and adult members of the faith community were actively involved. They helped identify needs and assets, create neighborhood task forces, and outline a positive youth development plan. Their work focused on selected high-needs neighborhoods.

Through needs assessment activities, the project identified many inner-city congregations that were currently involved in youth development, or had the potential to provide significant and positive resources. HEART of OKC staff members also conducted a personal survey of congregational

leaders from different denominations serving central city neighborhoods.

The survey process showcased several particularly innovative programs that were already actively engaging youth. One included a collaborative sexuality education program co-sponsored by Temple B'nai Israel and the Mayflower Congregational United Church of Christ. Every two years these congregations combined their middle school youth groups and provided a four-week program on sexuality and growing up. The series also offered an orientation session for parents. The final session featured the senior clergy from both congregations. Together they talked with the youth about how sexuality and growing-up issues relate to their spiritual growth. The program has been offered for six years now, and rave reviews from youth, their parents, and their congregations follow each series.

Their leadership can help teen pregnancy programs strengthen their presence in the areas they already serve. Even more, faith communities can open doors to new groups. A recent study funded by the American Association of Retired Persons found that each American belongs, on average, to four community groups. The most commonly cited is a religious organization (Love, 1997). The networking potential is substantial.

Moreover, in some communities, religious organizations are some of the only institutions that still function well, have credibility, and can reach out to families with a values-based message.

This community credibility that faith communities bring to a partnership is crucial because it can broaden the perception of a pregnancy prevention effort from a limited, "special interest" project to one that is seen as more closely tied to the larger community.

Access to young people, parents, and potential volunteers

Faith communities typically have a variety of special programs for young people, both boys and girls, and for parents—just the groups that most programs to prevent teen pregnancy target. As such, faith communities should be at the top of any community outreach list.

Parents in particular have an important part to play in preventing adolescent pregnancy, and religious congregations are a good place to reach them. Parents who are active in a congregation also tend to be active in the lives of their children, and faith communities typically support parents who are concerned for and want to be involved with the lives of their teens.

Faith communities also can be a source of the volunteer help and expertise that many programs need. For example, many churches and other religious organizations have strong traditions of community service

IT TAKES TWO

The **IT TAKES TWO** pregnancy prevention program, which involves professional male and female presentation teams delivering lively, motivational presentations in local schools, began in Des Moines, Iowa, over ten years ago. As it expanded to communities across the state and country, many programs

looked to volunteers from the community. Several turned to the faith community for help. Numerous clergy, representing a variety of traditions and denominations, have been trained as program presenters. These clergy have taken the program to the community and to their own congregations.

FOR MORE ON HANDLING CONFLICT

See Chapter 17 (Volume 3), "Moving Forward in the Face of Conflict."

and volunteering, and can help programs find mentors, public speakers, and other key players. There are few places a program could go to get better expertise or more diverse skills and professional abilities.

Skills in reducing conflict

One of the biggest stumbling blocks to reducing teen pregnancy is the amount of conflict and acrimony that this topic can cause among adults. Accordingly, finding ways to "turn down the heat" is often central to making any progress, and in this connection faith communities may be helpful.

Religious leaders are often skilled at finding common ground between people with diverse views and developing values of tolerance for differences. They strive to bridge differences and make personal connections even in difficult circumstances. These are all essential skills in decreasing the conflict that can surround community-based programs to prevent teen pregnancy.

Willingness to make in-kind contributions

Finally, faith communities can offer significant in-kind contributions, such as mailing lists, space in newsletters and newspapers, meeting facilities, child care, office support, help with transportation, and related services.

Getting started on a partnership

Local faith communities generally are structured around congregations, religious organizations, or

individuals. In addition, many communities have a variety of "interfaith" or ecumenical councils where leaders of various faith groups come together for common purposes. Statewide, they may be represented by denominational offices, affiliates of national religious organizations, or public issue groups with religious affiliations. Some major faiths also have national and even international organizations. Programs may choose to focus on individual

THINKING ABOUT THE MEANING OF CONGREGATION...

A congregation is a place where parents and their children can be found at regular weekly activities, such as worship times, religious education, family fellowship, and committee meetings, as well as at special faith-based family events.

congregations or pursue relationships with these larger entities.

Forming partnerships with faith communities requires some up-front research and some leg work. Here are several ideas of where to begin and what to do.

Learn about local faith communities

Programs can begin by learning about the number and variety of faith communities in the area or region. They should also be aware of the longstanding involvement of many religious organizations

in community action and social work generally. The YMCA, YWCA, Lutheran Social Services, B'nai B'rith, and Catholic Charities are among the oldest and best known youth-serving agencies. Other faith-based service groups, such as Habitat for Humanity, are more recent. Many individual congregations and faith communities are active in social service work and youth development activities, such as working with homeless families, outreach groups, religious education, athletics, child care and preschool programs, and scout troops.

FIELD NOTES

10 tips for program staff who work with faith communities

1. Believe that the work requires the involvement of the faith community as a whole.
2. Put faith communities on a list of key friends and allies.
3. Get to know the members of individual congregations, parishes, temples, mosques, and other faith communities. Learn and understand everything possible about the beliefs and practices of each.
4. Acknowledge and respect the values of a faith community, even if they differ from those of the program staff.
5. Ask members of a faith community to explain their traditions, beliefs, and perspectives. Staff should not act as though they know these traditions when they do not.
6. Acknowledge biases or stereotypes. Staff should ask trusted members of a faith community to speak up when they see them operating from these biases.
7. Receive a faith community as a full partner in the program's efforts. Allow it to inform staff just as staff would like to inform it.
8. Focus on the points of agreement the program has with a faith community. Do not let the points of disagreement prevent collaboration on specific activities.
9. Publicly and privately acknowledge and appreciate the work a faith community has already been doing with its own youth.
10. Consistently do all of the above with every member of a faith community.

WAYS TO LEARN ABOUT FAITH COMMUNITIES

- **talk to others in the program who may be active in various faith groups or know about this general area**
- **talk to community leaders**
- **seek the advice of local foundations, who typically know their community well**
- **use the library**
- **visit public meetings of various faith communities, including worship services**
- **read their publications (this is a good way to learn a lot about the membership and its faith and practices)**

Select potential partners

After developing a general understanding of the faith communities active in the area, programs will need to select a few as potential partners. The most promising possibilities will be those that already show signs of being interested in the issue of preventing teen pregnancy. For example, potential faith community partners are probably:

- known for their work with teens (for example, they might have a youth office and staff member assigned to youth work, activities and programs for kids and teens, youth serving in leadership roles); the more involved a particular faith community already is with youth, the more likely it is to become involved with a pregnancy prevention project;
- involved in community initiatives on other youth social problems, like drug and alcohol abuse, tobacco use, violence, poverty, and juvenile crime; and

- already partnering with other nonprofit organizations on issues involving youth.

A second, important step, forgotten by many of those seeking to work with the faith community, is to understand the faith context of that organization and how it might influence a group's approach to teen pregnancy prevention. Each faith community will have a different "starting point" on teen pregnancy—that is, its basic ideas and beliefs about young people, sexuality, and outreach to the community.

Programs also should learn about who makes decisions. Some faith groups are governed locally, with each individual house of worship or faith leader exercising autonomous decision-making. For others, a leadership group (such as a parish council or board) will be the decision-making body. Some faith communities involve the whole membership in decisions. Still others are guided by regional and national leadership groups that establish policy and set priorities within a denomination.

Reach out respectfully and carefully

With the basic research done, programs can make concrete overtures to specific faith communities by:

- asking to meet with faith leaders—the best place to start is usually one-on-one meetings;
- outlining the problem of teen pregnancy;
- explaining what the program is already doing; and
- raising the issue of the faith community becoming more involved in teen pregnancy prevention.

In beginning the process of establishing a relationship—and possibly even a concrete program—with one or more groups, there are two key ideas for programs to keep in mind.

If faith communities are to sign on as partners in preventing teen pregnancy, they must first agree that teen pregnancy is a problem. This may seem like stating the obvious, but it bears emphasis. Not all groups and individuals see teen pregnancy as a problem, or perhaps not as a very important one, so it is essential that any real relationship begin with some basic information and explanation. Points to cover:

- Why is teen pregnancy a problem?
- What are its consequences?
- How large a problem is it in the community?
- Is it getting worse or getting better?
- What is its relevance to this particular faith community and why should this group care?

KEYS TO SUCCESS WHEN SELECTING POTENTIAL PARTNERS

Recognize that faith communities have varied starting points on teen pregnancy:

- **basic ideas and beliefs about young people, sexuality, and community outreach will differ from community to community.**

Recognize that faith communities have varied decision-making structures. Decisions can be made by:

- **individual faith leaders;**
- **leadership groups, such as a parish council;**
- **the entire membership; or**
- **regional or national denomination leaders.**

At any initial meetings, staff should be prepared to cover this ground. Without a common understanding of the problem, little energy for a real partnership will develop.

To help reduce teen pregnancy, faith communities do not have to implement sexuality education programs or become family planning clinics. In particular, they do not have to change their position on the value of delaying sex until marriage. This may be the most important idea of all. Much of what faith communities already do is helping to reduce teen pregnancy, and at no point should it be suggested that unless they begin providing sex education or related services, they are not helping to solve the problem. It may be that a particular faith community will want to support contraceptive clinics or sexuality education, but many will not, and it is vitally important that whatever their take on sex education, they still be among a program's friends and colleagues.

Faith communities are already making an enormous contribution through their work with youth generally, their support of families and marriage, their efforts to improve parent-child communication, their child care services and after-school programs, their sport and recreational activities, and their direct engagement with values and moral choices. Make it clear that regardless of what specific activities are undertaken, programs and faith communities can support each other as each tries to reach the young people within their particular sphere of influence. The main message to faith groups is one of support and respect.

At some point, a program may want to ask a community to do something more explicitly aimed at preventing teen pregnancy, but in making such a pitch, it is essential for programs to honor what faith communities are already doing.

One model for faith-based youth development is **Uniting Congregations for Youth Development**. This is a multi-year project designed to equip faith communities to strengthen the developmental foundation that all children and youth need to grow up healthy. The project offers the opportunity for youth workers to participate in inter-faith networks. They receive

REMEMBER...

Research increasingly suggests that broad youth development programs—some of the best of which are offered through faith communities—can make significant dents in teen pregnancy.

training and resource material. They also develop community-wide strategies for positive youth development.

The project is now being piloted in seven communities throughout the country.

As shown by the **Church Mentoring Network**, mentoring is a strategy that teen pregnancy prevention initiatives and the faith community may have in common. Formed in 1991, the Network believes that

congregations are key players in positive youth development. The Network's goal is to take a leadership role in starting mentoring and tutoring projects in faith communities. It also replicates successful mentoring projects in other faith communities. In addition, it serves as a resource center for organizations establishing their own programs. Volunteers trained by the Church Mentoring Network learn how to be mentors and how to train other mentors in their own faith communities.

CASE IN POINT

Fellowship of Friends

The **Chicago Fellowship of Friends** has a 22-year history of working in the Cabrini-Green Housing Project. For years, this Quaker congregation has been providing after-school programming for students in kindergarten through grade seven. Parents sign a release to allow some religious instruction. However, students are also taught basic social skills, friendship skills, and nonviolent conflict resolution skills.

The Chicago Fellowship of Friends originally started as a youth ministry in the 1970s. It has now become a faith community in its own right for people of all ages. Young men and women who grew up with the Chicago Fellowship of Friends are bringing their families back. They also

want to give back by offering to other youth what they received themselves.

The surrounding neighborhood turned to the Chicago Fellowship of Friends when violence nearly closed down a neighborhood school. The Fellowship and the local ministerial association created a plan to keep the school open and free of violence. The Superintendent of Schools agreed to let them try it. The plan included parents' meetings, Saturday activities for students, and escorts to accompany children to school. The school also provided a room where families could receive social services. The project quickly became a pilot program that will soon be expanded to several other schools in the district.

Be concrete

Once on firm ground, programs can offer some concrete suggestions about what the faith community might do to help reduce teen pregnancy and how such activities would fit in with other parts of the program. For example, in *Nine Tips to Help Faith Leaders and Their Communities Address Teen Pregnancy*, the National Campaign to Prevent Teen Pregnancy provides suggestions and resources to faith communities (see Appendix at the end of the chapter). A faith community will not join in an activity that conflicts with its beliefs and values, so programs should not require the church to support everything a prevention program does as a condition of partnership. However, a conflict in one area may still mean that a faith community can participate in other areas.

Offering a list of work needed, resources required, and activities to be undertaken gives a faith community the opportunity to choose activities that suit it best. Examples of tangible activities include:

- providing worship service bulletin inserts and flyers that draw attention to teen pregnancy;
- creating teen pregnancy-focused interfaith/inter-denominational worship services with clergy;
- offering to speak to religious education classes;
- sponsoring a coffee or brunch for clergy and other faith community leaders;
- visiting ministerial or clergy associations to raise awareness of the teen pregnancy problem;
- inviting faith community leaders to attend professional conferences, seminars, and training sessions;
- sponsoring seminars and other learning events just for the faith community or its leaders;
- using direct mail to keep the issue of teen pregnancy before the faith community;
- talking with faith community leaders to exchange information about each other's work; and
- writing, printing, and distributing placemats or other materials that provide facts and information about teen pregnancy for use at fellowship dinners.

An additional way to engage a given faith community is to ask for its participation in a community-wide coalition focused on preventing teen pregnancy. A faith community can actively participate in a coalition by:

- becoming full members;
- sending representatives to regular meetings;
- acknowledging coalition leadership at worship services and other public meetings of the congregation;
- printing coalition announcements in publications;
- bringing the concerns of the coalition before the membership through sermons, lessons, and other types of presentations;
- inviting coalition leaders to speak to groups, committees, and classes within the faith community; and
- publicly supporting the work of the coalition.

Some faith communities may be willing to help offer sexuality education and even family planning services within the context of their faith traditions. A strong case can be made that providing such information in the context of personal faith and spiritual values can be very effective. Many young people are receptive to such education when it comes from their faith community. Parents in particular are unlikely to object because they are confident that the instruction offers good information in the context of their faith's teachings. Most important, sexuality education from the viewpoint of a faith community encourages young people to consider sexuality in the context of faith and spiritual values.

If a faith community is uncomfortable with highly visible roles, it can still be a vital "behind the scenes" player by, for example, offering volunteer leaders for

CASE IN POINT

Planned Parenthood of Metropolitan Washington

Planned Parenthood of Metropolitan Washington learned just how much a faith community can offer. Allen Chapel African Methodist Episcopal Church offered two day care centers for the community. But Allen Chapel's pastor saw a greater need. He had a vision for a family planning clinic that would offer on-site services. He brought together leaders of his congregation and of Planned Parenthood

of Metropolitan Washington to share his vision. The result was a successful collaboration that continues today. The church provided space and other basic support for the clinic. Planned Parenthood provided the expertise and staff to run the clinic for 15 to 20 hours each week. Together a congregation and a Planned Parenthood helped a community receive much-needed services.

events and programs, or providing meeting space for program activities and special events.

Define the relationship

It is important for programs to define the relationship between their initiatives and the faith community. Many questions need to be explored together:

- How will the faith community be affiliated? Will it be an active member? Does it prefer to simply offer support from a distance?
- Does the faith organization feel comfortable making referrals to other members of the coalition (where relevant)?

Is it appropriate to make referrals to the faith organization? For what services?

- How much direction over the characteristics and growth of the community program does the faith group expect to provide? How will this direction happen? Will representatives be appointed to a governing board, various committees, or both?

This discussion helps establish a trusting, respectful, and clear relationship. It also allows programs to get to know, and be known better by, the faith community.

CASE IN POINT

National Black Religious Summit on Sexuality

An extensive effort to increase the capacity of churches to deal with teen pregnancy is currently being conducted by the **National Black Religious Summit on Sexuality**. In the summer of 1997, over 250 people met in the first Summit, which was hosted by the Howard University School of Divinity and sponsored by the Religious Coalition for Reproductive Choice. The Summit addressed issues of sexuality, teen pregnancy prevention, and other matters of

reproductive health. Primarily it sought "to break the silence on previously taboo topics and develop a sound theological framework" from which to address sexuality issues within churches. This Summit is a valuable resource for facilitating similar dialogues at the local or statewide level. A second Summit took place in 1998, and additional Summits are planned. Videos and print materials are available from the 1997 Summit.

Sustaining a relationship with faith community partners

Several activities can help turn a new partnership with the faith community into a long-term relationship.

Make sure communication is regular and personal

A successful partnership needs to be nourished by an ongoing conversation that includes all those involved. This dialogue allows the entire group to find common ground as well as to understand what ground cannot be shared. In addition, programs should solicit feedback on

substantive issues from faith community partners. They are knowledgeable about youth and working in the community, and their feedback, observations, and suggestions can strengthen a teen pregnancy prevention initiative.

As programs establish and continue a dialogue, they need to remember that similar conversations also may be going on within the faith community itself. In many communities, teen pregnancy can be a controversial issue. The members may have agreed that teen pregnancy

CASE IN POINT

Our Lady of Guadeloupe Catholic Church

Members of **Our Lady of Guadeloupe Catholic Church** in Denver, Colorado, were concerned that uninsured people in the predominantly Latino neighborhood could not get decent, basic health care. They decided to establish a free health clinic. Exams, immunizations, and diabetes screening are among the services offered by Clínica Tpeyac. As the clinic's clientele grew, staff began to focus on the needs of the young people in the neighborhood and parish. In response, the clinic started **Nuestros Milagros** (Our Miracles) to provide regular activities for youth.

In September 1997, the clinic conducted a survey of more-than 100 parish and neighborhood youth. In the survey, the youth identified two problems that they felt the clinic and the church needed to address—drug abuse and teen pregnancy. Clinic, church, and youth leaders from the Nuestros Milagros youth group agreed to focus on the issue of teen pregnancy. By the end of the year, they were preparing a training for peer educators and writing curricula for programs. By spring of 1998, the peer educators were ready for their programs.

is a problem, but may have serious disagreements about the best way to solve the problem. Just because congregations sit at one table does not mean they agree on all things. The nature and depth of these differences will affect efforts to unite the faith community on the issue of teen pregnancy. A program's intentional effort to create ongoing dialogue among members of the faith community will help them stay connected to the work.

Recognize the faith community's contribution

Appreciate the efforts made by the faith community to be a partner in prevention. Acknowledge its contributions to building

those personal "assets" that reduce the risks for adolescents. Programs should provide public acknowledgment of the efforts being made by their faith community partners, and express personal thanks to their partners.

Explore additional ways to work together

The more programs involve the faith community, the more opportunities for additional collaboration will materialize. As new ways open for programs and faith communities to work together, programs should be ready to explore the opening frontiers with faith community partners with the idea that it should be good for both.

Conclusion

The faith community is a key constituent in any community or state. When a teen pregnancy prevention program initiates and carries out a partnership with a faith community that is

characterized by positive intention, respect, and careful attention to cultivating areas of agreement and resolving potential areas of disagreement, it has everything to gain.

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Programs mentioned in this chapter

Allen Chapel AME Church

Rev. Leon Lipscombe
2498 Alabama Ave., SE
Washington, DC 20020
(202) 889-7296
Fax: (202) 889-2498

Chicago Fellowship of Friends

Steve and Marlene Pedigo, Co-Pastors
515 W. Oak
Chicago, IL 60610
(312) 944-4493

Church Mentoring Network

Bennie L. Scott, Area Mentoring Director
210 N. Community Center
3601 N. Broad St.
Philadelphia, PA 19140
(215) 223-8574
Fax: (215) 223-2105

Clínica Tpeyac, Nuestros

Milagros, and Our Lady of Guadeloupe Catholic Church
Florencia Gonzalez or Virginia Munoz
3617 Kalamath St.
Denver, CO 80211
(303) 458-5302
Fax: (303) 433-7452

HEART of OKC

Oklahoma Institute for Child Advocacy
Sharon Rodine, Project Director
420 N.W. 13th St., Suite 101
Oklahoma City, OK 73103
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Fax: (405) 236-1690
Email: sjrodine@aol.com

IT TAKES TWO and Worth The Wait: Pregnancy Prevention

Legacy Resource Group
Tom Klaus, President
P.O. Box 700
Carlisle, Iowa 50047
(515) 989-3360
Fax: (515) 989-3391
Email: legacyrg1@aol.com
www.legacyrg1.com

National Black Religious Summit on Sexuality

Religious Coalition for Reproductive Choice
Rev. Carlton Veazy, Executive Director
1025 Vermont Ave., NW, #1130
Washington, DC 20005
Phone: (202) 628-7700
Fax: (202) 628-7716
Email: info@rerc.org
Website: www.rerc.org

Uniting Congregations for Youth Development

Search Institute
Ann Betz, Project Manager
Thresher Square West
700 South Third St., Suite 210
Minneapolis, MN 55415
Phone: (612) 376-8955 or
(800) 888-7828
Fax: (612) 376-8956
Website: www.search_institute.org

Other useful resources

SIECUS Report, October/November 1997 (Volume 26, Number 1)

Sexuality Information and Education Council of the United States (SIECUS)
Monica Rodriguez, Director of Education
130 West 42nd St., Suite 350
New York, NY 10036-7802
(212) 819-9770
Fax: (212) 819-9776
Email: siecus@siecus.org
Website: <http://www.siecus.org>

Every article in this issue of the bimonthly publication would be helpful to program planners. Of particular interest are "The Journey of Sexuality Educators to Faith Communities" by Maggi Ruth P. Boyer and Ann Marie Donohue, as well as "The Sexuality Education Programs of Religious Groups and Denominations" by Elma Phillipson Cole. Also, SIECUS has

numerous annotated bibliographies of resources related to spirituality, religion, and sexuality.

Rochkepartain, Eugene C. (1998). *Building assets in congregations: A practical guide for helping youth grow up healthy*. Minneapolis, MN: Search Institute. (Cost, \$18.95. To order, call Search Institute at 800-888-7828.)

This resource offers practical ideas for congregations that want to engage in youth development through asset building. Chapter titles include: "Helping Youth Grow Up Healthy: A New Vision for Congregations," "Developmental Assets: A Framework for Focusing Congregational Life," "Integrating Asset Building into Programming for Youth," and "Reaching into the Community for Asset Building."

Nine Tips to Help Faith Leaders and Their Communities Address Teen Pregnancy

Introduction

Research is beginning to show what many of us have long known from working with teens—that religious faith and a strong moral sense play vital roles in protecting teenage boys and girls from too-early sexual activity and teen pregnancy. For example, according to the 1995 National Survey of Family Growth, 48 percent of 15- to 19-year-old girls said that they were virgins, and nearly one-half of these young women said that the main reason they had abstained from sex was that it was against their religion or morals. Clearly, the role of faith in preventing teen pregnancy is a vital and important one. By teaching and preaching religious values, faith communities can help shape the character of our children and give them answers to their most heartfelt questions.

To support faith communities in this regard, the National Campaign to Prevent Teen Pregnancy's Task Force on Religion and Public Values has compiled *Nine Tips to Help Faith Leaders and Their Communities Address Teen Pregnancy*. This brochure summarizes a wealth of experience and advice from faith leaders around the country. The members of the Task Force—religious and secular leaders representing a broad ideological spectrum and a range of faith traditions—hope these tips encourage religious leaders of all faiths and denominations to take on issue of teen pregnancy in the context of their religious beliefs. At the end of the tips, you will also find a list of helpful books, lesson plans, and other educational resources available from a number of religious and secular organizations.

Teen pregnancy and birth rates in the United States have begun to decline, although it remains true that our nation still has the highest rates in the industrialized world by far—with nearly one million teen pregnancies every year. Communities of faith know that teen pregnancy is a complicated problem. They also know that their work with young people must compete with messages from a wider culture

This is an eight-page brochure from the National Campaign to Prevent Teen Pregnancy. To order, contact the National Campaign, 2100 M St., NW, Suite 300, Washington, DC 20037, www.teenpregnancy.org. First five copies free. Bulk orders available for purchase.

often at odds with the ethics and morality of their religious traditions and beliefs. That's why it's so important for faith communities to get kids when they're young—and to stay with them through their teen years. As teenagers yearn for spiritual guidance, faith communities are uniquely situated to minister to this need, and faith communities quite properly place questions about sex firmly within the context of religious values and moral traditions.

God bless you as you continue the good work of helping young people meet the many ethical and moral challenges they confront every day.

Sister Mary Rose McGeady

President and Chief Executive Officer, Covenant House International
Member, National Campaign Task Force on Religion and Public Values
November 1998

The Nine Tips

1. Address the need teens have for spiritual fulfillment and help them find answers to the many challenging problems they face.

It is during the teenage years that many young people first struggle with the enduring questions of human existence, and the intensity and urgency of these questions can be very powerful to them. Many teens hunger for a framework of values and faith that can help them make moral decisions and manage the everyday problems of living that can be so stressful in these transition years. They also want help in seeing beyond the present moment. Because faith communities are uniquely able to provide the spiritual guidance that many teenagers crave, they should embrace this responsibility with energy and commitment.

2. Encourage parents to talk with their children about sex and morality within the context of your faith tradition.

Many parents are embarrassed and uncomfortable talking with their children about sex. This is not unusual, but it is unfortunate since parents are children's first and best teachers about values and moral expectations. A faith community is an ideal place for parents and children to learn how to talk with each other about these important topics. Consider sponsoring workshops for parents about how to talk with their children about sensitive subjects, such as human sexuality, according to the children's age and maturity and

within the context of your faith tradition. And help your parents set proper limits for their children's behavior.

3. Enlist adults in your faith community to help young people.

Teenagers develop character and personal values through interacting with respected and empathetic adults. Sometimes faith leaders themselves are available to work directly with teenagers, but often they carry so many responsibilities that they need help from others. If this is the case, ask highly trusted and knowledgeable adults in your faith community to assist in the important work with teenagers. Whether the adults create an organized mentoring program or something more informal, be sure they understand teenagers and can talk about values and relationships within the context of your faith's principles.

4. Make sure the children and teenagers in your faith community understand what your faith tradition says about sex, love, and marriage in general and teen pregnancy, in particular. Use clear and unambiguous language.

Young people need to know and understand where your faith tradition stands on matters of sexuality. Faith traditions can have a strong impact on helping teens avoid too-early sexual activity and pregnancy, but messages need to be clear, direct, and precise. Encourage open, honest, and frank discussions about the challenges—and choices—that young people face in their daily lives. Discussions about sex, love, and marriage within the context of religious faith should begin when children are young, rather than waiting until they're teens.

5. Learn about contemporary youth culture—what your young people are reading, listening to, watching, and doing.

Understanding the world of teens makes communicating with and caring for them easier. The influence of the entertainment media, in particular, on youth culture is extraordinary. Know the music that young people enjoy. Watch the television shows they watch so you'll know which characters they may be trying to emulate. Take a look at the magazines they are reading. With such information in hand, you can better explore with teens how the cultural messages they receive agree with or differ from what is expected of them as members of your faith community.

6. Organize supervised group activities for teenagers in your faith community.

Teenagers need things to say “yes” to, especially when we are asking them to say “no” to too-early sexual activity and pregnancy. Encourage the parents and other adults in your faith community to organize and lead group activities with teens. All the activities that you sponsor for young people—from prayer circles to field trips—are excellent opportunities for fostering fellowship and supportive friendships. By creating a positive and spiritually-oriented peer culture, you can help teens make the right decisions about sex.

7. Reach out to teenagers who are not involved in any faith community.

Though young people seek answers to spiritual questions, some are reluctant to find them in institutions of organized religion. And it is often the teens who are outside of faith communities and unattached to any positive group who are particularly likely to get in trouble. One dynamic youth minister in California reached out to neighborhood teens by encouraging them to structure their own youth program. He also moved his youth activities into a storefront center just a half-block from the church. A youth group of thirty teens that once met in the church basement now numbers in the hundreds.

8. Celebrate achievement and excellence.

By specifically supporting excellence and achievement of young people, faith communities can help to create an environment for young people that reduces the risk of early sexual activity and teen pregnancy. For example, research has shown that early school failure and dropping out of school are closely associated with becoming a teen parent. By encouraging educational achievement, faith communities may be able to help persuade teenagers to stay in school. Organize tutoring, homework assistance, and opportunities for community service. Encourage or offer scholarships for college and vocational training.

Celebrate spiritual and non-academic achievement as well, like volunteer work or excellence in the arts. Consider recognition ceremonies during regular worship services or designate specific days each year to honor teenagers for their accomplishments in a wide range of areas. Give the teenagers in your faith community a place to shine no matter what their abilities or interests.

9. Reach out to other faith communities, neighborhood organizations, and institutions that work with young people.

You don't have to go it alone. Working together, faith leaders can make a real difference in preventing teen pregnancy. Consider coordinating with fellow leaders to preach on the topic of teen pregnancy the same week. Or develop a particular prayer for all young people facing choices about sex and relationships. Look to clergy associations, ecumenical councils, and other local faith networks for support and collegiality in addressing this and other issues important to young people. And remember that other public and private institutions can be valuable partners in helping young people in your faith community—including schools, public health departments, YMCAs and YWCAs, Boys and Girls Clubs, libraries, and recreation centers.

Resources for Faith Communities On Talking with Kids About Love, Sex, and Relationships

To help faith communities talk more effectively about important issues like sex and pregnancy, the National Campaign has assembled this short list of faith-based resources. Although most of these materials are designed to be used within the setting of a faith community, they can also be helpful to others who want to teach and instruct young people about issues like sex, love, and marriage within a religiously-based context.

(NOTE: Inclusion in this list does not imply endorsement by the National Campaign. Look to local seminaries, religious schools, and ecumenical councils, as well as churches, synagogues, mosques, and temples, for materials that may be of use. In addition, many major denominations provide materials that can help explain sexuality within the context of their specific faith traditions.)

Hands-On Help for Youth Leaders: Addressing Sexuality—and Sexual Abstinence. The American Baptist Youth Ministry's four-page resource list provides an overview of a variety of print and audiovisual materials for educating youth and their parents about sexuality and the virtues of sexual abstinence before marriage. Contact: Educational Ministries, American Baptist Churches USA, P.O. Box 851, Valley Forge, PA 19482-0851. (800) ABC-3USA. Web: www.abc-usa.org.

Abstinence Education Resource Guide 1997. Not every listing in this directory is faith-based, but the guide identifies particular programs as appropriate for religious group settings. Contact: Americans for a Sound HIV/AIDS Policy, P.O. Box 16433, Washington, DC 20041, (703) 471-7350.

Parent-Teen Dialogue. Informal local dialogues between parents and their teens examine many contemporary topics, including sex, within a Jewish context. The B'nai Brith Youth Organization (BBYO) also directs a national effort called "Mind, Body, Attitude" (M.B.A.), which equips teen girls with the tools to make healthy decisions about their bodies. Local chapters of BBYO also sponsor programs on topics like safe sex. Contact: B'nai Brith Youth Organization, 1640 Rhode Island Ave., NW, Washington, DC 20036-3278, (202) 857-6600. Web: www.hubris.net/bnaibrith.org/bbyo/.

The Catholic Chastity Curriculum Directory. A review of available materials that are acceptable under Catholic teaching. Contact: The National Conference of Catholic Bishops, 3211 Fourth St., NE, Washington, DC 20017, (202) 541-3070.

1998 Directory of Abstinence Resources. This up-to-date catalog of programs and curricula includes many that are identified as having Christian content. Contact: National Abstinence Clearinghouse, 801 East 41st St., Sioux Falls, SD 57105, (888) 577-2966. Web: www.abstinence.net.

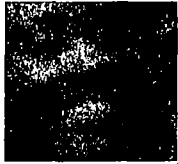
FACTS. This value-based curriculum deals with many issues, including dating, abstinence-until-marriage, and character education. The curriculum has three separate tracts—one for parents, one for junior-high kids, and one for senior-high teens. The organization also offers the Catholic family-life program, "Project Genesis." Contact: Northwest Family Services, 4805 Glisan St., Portland, OR 97213, (503) 245-6377.

A Promise To Keep: God's Gift of Human Sexuality. A Christian-based program using videos, peer ministry, and dialogue activities to teach teens to be abstinent outside of marriage. The peer ministry component is designed to have older, high school-aged students interact with 6th to 9th graders. Contact: A Promise to Keep, 1400 N. Meridian St., Indianapolis, IN 46202, (317) 236-1478.

The Role of Religious Congregations in Fostering Adolescent Sexual Health. A paper written by an experienced sexuality education leader that details how communities of worship can build adolescent sexual well-being. Contact: The Religious Coalition for Reproductive Choice, 1025 Vermont Ave., NW, Suite 1130, Washington, DC 20005. (202) 628-7700. Web: www.rerc.org.

Religion, Spirituality, and Sexuality. This annotated bibliography includes a broad range of resources, including curricula for religious settings, that encourage a comprehensive approach. One of these resources, "Family Sexuality Education: A Course for Parents," by Rev. Joe Leonard, is a five-unit, twelve-hour course that includes exercises for teenagers. Contact: Sexuality Information and Education Council of the United States (SIECUS), 130 West 42nd St., Suite 350, New York, NY 10036-7802. (212) 819-9770. Web: www.siecus.org.

Christian Sex Education Set. Published by the Southern Baptist Convention, the set contains *Boys and Girls—Alike and Different* (for ages 4-7), *My Body and Me* (for ages 8 and 9), *Sex! What's That?* (for ages 10-13), *Sexuality: God's Gift* (for ages 14-17), and *Christian Sex Education: Parents and Church Leader Guide*. Also available, "True Love Waits," a popular abstinence campaign used in many faith settings. Teens sign commitment cards to abstain from sex before marriage. Supporting materials include promotional items, like t-shirts and jewelry, and religiously-based sex education information in four languages. Each item is also available separately. Contact: LifeWay Christian Resources of the Southern Baptist Convention, 127 Ninth Ave. North, Nashville, TN 37234. (615) 251-2000.



Involving the Business Community in Teen Pregnancy Prevention

by Karen Troccoli

T H I S C H A P T E R

Explains the importance of involving the business community in efforts to prevent teen pregnancy;

Describes the various roles that businesses can play and activities that they can become involved in;

Provides strategies for business involvement; and

Provides references and resources for further information.

Chapter 8

THE
NATIONAL
CAMPAIGN TO
PREVENT TEEN PREGNANCY

Key Ideas in this Chapter

Businesses may not realize that teen pregnancy affects them, or that they have an important role to play in its prevention—part of the job is educating them.

The bottom line—dollars and cents—drives decision-making among business leaders. The relevance of teen pregnancy to their world must be framed in terms of real outcomes.

Getting one executive to ask another to help is a useful strategy.

Businesses will vary in how they want to approach teen pregnancy. Some will prefer to take on workplace activities, while others will be attracted to community-focused initiatives or volunteer service by their employees. *Programs need to be flexible and creative in the ways they work with business.*

Involving businesses can help programs prevent teen pregnancy, but it will also mean added work for the programs. Businesses will likely ask for help in developing materials, coming up with ideas for activities, and carrying out initiatives. Chances are it will be well worth the time and effort.

“You need to ask businesses for more than money. Ask them for their time and talent and, above all, their leadership.”

Jim Renier, retired CEO, Honeywell

Involving the Business Community in Teen Pregnancy Prevention

Why involve the business community?

Businesses can make a real difference in teen pregnancy prevention. Executives tend to be well-positioned in the community to take a leadership role. They can provide a variety of resources. Community leaders who have worked with businesses know from experience that it takes hard work, persistence, creativity, and insight into how business leaders think to draw them in as participants in teen pregnancy prevention efforts, but the payback can be well worth it. Programs will benefit from the business's contribution, which comes in many forms, the community will benefit from the enhanced activities, and the business may enjoy favorable publicity and satisfaction from participating in an important cause.

Businesses have a vested interest in working to prevent teen pregnancy because it has financial, social, and workforce-related consequences, all of which affect the for-profit world. However, business leaders may not be aware of the effect teen pregnancy has on their companies, and, therefore, education and explanation are often the first step to getting them involved.

"It is important to use statistics and the media to show the impact of the problem and its implications for society clearly. Once they see, some businesses will want to get involved," explains Skip Oppenheimer, President and Chief Executive Officer (CEO) of Oppenheimer Companies, Inc., and Chairman of the Governor's Council on Adolescent Pregnancy Prevention in Idaho. In addition to providing basic teen pregnancy statistics (the number of annual teen births in the community, for instance), programs can also use the following points to help make the case to business:

- *Lost productivity and economic growth.* A Robin Hood Foundation study estimated the annual cost to U.S. taxpayers of adolescent child-bearing in 1996 dollars at \$6.9 billion (Robin Hood Foundation, 1996).

3 BIG REASONS FOR BUSINESSES TO GET INVOLVED

Teen pregnancy leads to:

- **lost productivity and economic growth**
- **increased federal spending**
- **increased poverty**

- *Increased federal spending.* In fiscal year 1995, the federal government spent approximately \$39.3 billion to assist families that were begun when the mother was a teenager, and \$131 million on programs to prevent teen pregnancy (Flinn & Houser, 1998).
- *Increased poverty.* Teen parents and their children are less likely to complete high school and more likely to be poor. Teen mothers are also more likely to have low birthweight babies, who are at risk for lifelong developmental and health problems, all of which may prove to be

CASE IN POINT

Success by 6 in Polk, Highlands, and Hardee counties, Florida

In 1995, community representatives discussed starting a community-wide initiative to help Central Florida's children. The group reviewed several programs and chose **Success by 6**, a United Way program, as their vehicle. Success by 6 creates a community-wide partnership of private businesses, government, religious groups, labor, education, and health and human services organizations to focus on children's issues. Teen pregnancy is a frequent topic for the Florida program because these three counties have the highest teen pregnancy rates in the state, and everyone understood that by reducing teen pregnancy rates, child health and well-being would improve.

The Florida Success by 6 is guided by three prevention strategies: advocacy, collaboration, and access to services. The advocacy committee has developed a video and script featuring business leaders asking their peers to become involved and has produced a "What You Can Do Guide"

for businesses who want to become involved. The collaboration committee is working to help the communities' home visitors better coordinate their efforts and has developed a Home Visitor Clearinghouse. The access to services committee is using social marketing to expand parent education in the three counties to reach a wider audience.

A key leader of this initiative has been Carol Jenkins Barnett, Chair of **Publix Super Markets Charities, Inc.** Ms. Barnett was one of several volunteers who were sent by the local United Way to a United Way of America leadership training session. While there, she was sold on Success by 6 and, upon her return, became committed to using it to involve more business leaders in the local effort. She helped recruit executives for the board by issuing invitation letters to meetings and breakfasts. No one turned her down. The result was a 32-member board of CEO-level officials from the public and private sectors.

very costly (Southern Regional Project on Infant Mortality, 1997).

All of these factors affect the quality of the current and future workforce, an issue of great interest to businesses.

The business community has many potential roles

Preventing teen pregnancy requires a broad-based campaign that addresses health, economic, policy, social, and other issues. While that may make the task seem overwhelming, it also means that businesses can play a wide variety of

roles and that businesses of all sizes and types can join in.

Convener

An invitation from one CEO to another to participate in a meeting or initiative carries a lot of weight. Carol Jenkins Barnett, Chair of Publix Super Markets Charities, Inc., has played this role very successfully.

Leader

The box below shows how a business leader like Jim Renier of Honeywell, who is willing to champion teen pregnancy issues, can create a big impact

Honeywell's New Vistas School

The **New Vistas School** in Minneapolis, Minnesota, is another example of the United Way's Success by 6 program in action. New Vistas opened in 1990 for students in grades 10 through 12 who are mothers or who are expecting a child. It offers individualized and small group instruction, as well as health and social services and parenting classes; there is also a clear emphasis on preventing repeat teen pregnancies. The school also provides child care and early childhood education for the students' children. There have been 142 graduates since the program began, and many have gone on to employment or further education. Repeat pregnancies are significantly lower among New Vistas students than would be expected, given national statistics. Honeywell started the school and provides the space for it. Partners in this

venture include the Minneapolis Public School System, the Minneapolis Health Department, and other organizations.

The champion behind this innovative school is Jim Renier, former CEO of Honeywell. His interest in children comes from two sources: his personal experience—he is a father of eight—and his corporate perspective, from which he understands the importance of investing early in children's lives to ensure a strong, educated workforce. "It's one of the most self-serving things in the world for a corporation," Mr. Renier says. Citing the Minneapolis experience, he also emphasizes that no single entity can tackle teen pregnancy. It requires community collaboration between business, government agencies, schools, parents, and kids themselves.

on a community and recruit other executives and community leaders at the same time.

Spokesperson

Business leaders often hold prominent positions within the community and attract the spotlight when they speak out. This can draw much-needed attention to issues such as teen pregnancy prevention. Once a business leader understands the importance of preventing teen pregnancy, he or she may be willing to serve as a public spokesperson on the issue. This increases attention paid to teen pregnancy prevention and can generate

favorable publicity for the company. A business spokesperson can be useful at legislative hearings, press conferences, public service announcements, or other public forums.

Program manager

A business may be comfortable developing and administering a youth development or teen pregnancy prevention program. Gunstock Ski Resort is a good example of this role.

Supporter

Local programs can always benefit from financial or in-kind

CASE IN POINT

Gunstock Ski Resort

Gunstock Ski Resort sponsors many activities that benefit youth, including mentoring programs with area schools, work programs with correctional facilities, and reduced rate children's skiing programs. Gunstock provides school "Outreach" skiing programs to over 55 New Hampshire area schools, involving over 8,000 students aged 5 to 18. These programs offer children the opportunity to ski at affordable rates, while providing a safe and social learning environment.

Gunstock works with several schools, including Gilford Middle High School, on a "School to Work" program. Students in this program enter

an individual mentor program with a Gunstock staff member who works in an area of the student's interest. Gunstock also develops various community projects with the Genesis Counseling Group, an organization that helps individuals and families cope with problems.

Gunstock management notes "that through educating and guiding the underprivileged and troubled youths of today, contributing members of society are likely to be formed for tomorrow." Gunstock also recognizes that the children involved in these programs may be future employees in the area and that these programs will benefit the county and Gunstock.

contributions, and many businesses are able to contribute in this way. The **Minnesota Organization on Adolescent Pregnancy, Prevention, and Parenting** has enjoyed such support.

Specific programs appropriate for businesses

While it is helpful to think of roles in broad terms, such as those above, it is important also to think of specific examples of what a business can do. The type of activities a business chooses to undertake will depend upon factors ranging from the size of the company to the chief executive's motivations. One business may find it best to sponsor a workplace program to assist employees in addressing teen pregnancy

prevention issues within their families. Another may become involved in community activities because they are concerned about the youth who are their future workforce. Still another may choose public policy activities to help shape better programs for at-risk children and families. All in all, no single activity is a cure-all for teen pregnancy. Each initiative is an important contribution.

Below are a sampling of the kinds of initiatives that businesses can spearhead. Some specifically address teen pregnancy prevention, while others *focus more broadly on youth development*. The latter may appeal to business leaders who understand the importance of investing in the future workforce.

MOAPPP

The **Minnesota Organization on Adolescent Pregnancy, Prevention, and Parenting (MOAPPP)** has been successful in getting many types of businesses to support their efforts with in-kind and other donations. For example, a marketing firm has taken on MOAPPP as a pro bono client and developed a new logo for the organization. The firm also provided templates for the group's brochures and conference materials. Another business has donated used copy machines to MOAPPP.

At a recent MOAPPP fundraiser, which featured Minnesota Attorney General Hubert H. Humphrey III and actress Jane Fonda, restaurants donated food for the reception and The Aveda Corporation donated a ballroom for the dinner. "Personal contacts are key," explained Donna Fishman, Co-Director of MOAPPP. "We rely on contacts we have developed over the years, and on our board members' contacts, to create interest in our work and convince businesses to help out." In return, MOAPPP makes sure to publicly acknowledge businesses' contributions.

PROGRAM OPTIONS FOR BUSINESS

- mentoring
- summer jobs
- youth development
- adopt-a-school
- workplace initiatives
- coalition membership
- business partnerships

but who may not want to limit their focus to teen pregnancy prevention.

Mentoring programs for youth

Businesses can participate in community mentoring programs by encouraging their employees to serve as volunteers in after-school tutoring programs, "Big Brother/Sister" programs, or similar efforts. For example, the Gunstock Ski Resort's applied learning program helps students connect study subjects to actual work environments. Companies can hold a "Bring Youth to Work Day," where they host students at the workplace and show them a typical day at the office. This exposes young people to an office setting, often for the first time in their lives.

"Support of mentoring programs lends itself well to corporate objectives of better utilizing human resources by promoting employee involvement and volunteer efforts in the community."

Committee for Economic Development, 1991

Summer jobs programs for youth

Providing youth with work experience can go a long way toward inspiring them to stay in school and in preparing them to enter the workforce as adults. Businesses can develop summer jobs programs and/or internship programs for community youth. Many cities spearhead summer jobs programs.

Youth development activities

In many communities, advocacy organizations and family support agencies create innovative youth development programs with temporary funding, such as foundation grants. By becoming a long-term sponsor of such a program, a business gains visibility and recognition as a supportive community member. Most businesses will give to programs that operate in their neighborhood or community. Monetary or in-kind contributions are helpful.

Adopt-a-school programs

A business can make a commitment to a local school and provide donations, volunteers, and other support as needed. This can help ensure that schools can adequately serve students so they will be better prepared to enter the workforce as adults. It also can bring recognition to the business as an active community member.

Workplace initiatives

Companies can carry out workplace programs that teach employees how to communicate with their children about sexual decision-making and teen pregnancy. Strategies range from disseminating information through bill stuffers, placemats, and bulletin boards to hosting brown-bag lunches with guest speakers. Business leaders can also encourage employees to volunteer at community youth development and/or teen pregnancy prevention programs by allowing them to use time during the work day. **Johnson & Johnson** not only allows its employees to use time during the workday to volunteer, but also makes cash grants to the

organizations in recognition of the volunteer. **Target Stores** also encourages volunteerism among its employees.

Membership in teen pregnancy prevention coalitions

Many communities have active teen pregnancy prevention coalitions that would welcome the participation of the business community. Businesses may also want to partner with individual organizations that are working on teen pregnancy as **Johnson & Johnson** has done with the National Organization on Adolescent Pregnancy, Parenting and Prevention (NOAPPP).

CASE IN POINT

Target Stores

Target Stores promotes family volunteering through the Points of Light Foundation's **Family Matters** volunteer initiative. The program, which Target has introduced nationwide, encourages Target team members to work with family members on volunteer projects. The headquarters office assists local efforts by providing direction, support, encouragement, funds, and opportunities for team members and their families to volunteer. Projects range from building school partnerships to delivering meals to the elderly.

A research report by The Conference Board found that this family volunteering program boosted employee morale, enhanced family life by providing "quality" time for family interaction, and improved Target's image in the community.

Through charitable contributions, Target contributes five percent of its pretax profits to the communities in which it does business. Target has received many awards for its community involvement, including the President's Service Award for its Family Matters program.

"Coalitions are required because so many organizations are involved in various aspects of developing human resources. Business is particularly well-suited to deal with this complex array of needs and institutions because of both the substance and geographic reach of its activities."

Committee for Economic Development, 1990

Business partnerships

Businesses may wish to initiate their own coalitions or partnerships to focus on youth development or teen pregnancy prevention. Many local business groups, such as Kiwanis and the Rotary Club, offer ready-made

gatherings at which to raise these issues. National organizations, such as the Committee for Economic Development and The Business Roundtable, also can provide business leaders with resources and contacts.

CASE IN POINT

Johnson & Johnson

Johnson & Johnson and the National Organization on Adolescent Pregnancy, Parenting and Prevention (NOAPPP) have joined together to form the **National Urban Adolescent Pregnancy Prevention**

Program. This three-year initiative is locating and evaluating urban pregnancy prevention programs that have operated for at least three years. To date, seven programs have been selected for in-depth evaluations by the program's Advisory Panel and Lead Evaluators. Each will also receive \$25,000 for their program.

Program staff are eager to have their programs evaluated and effectiveness documented. Potential funders will use results as guides for future program funding.

Johnson & Johnson joined in this effort because it understood the importance of having solid evaluation information about teen pregnancy prevention. It funds this effort through its Office of Corporate Contributions and participates on the Program's Advisory Committee.

Program strategies for involving business in teen pregnancy prevention

Results from numerous initiatives and collaborations that have involved business suggest a number of strategies to follow in creating and sustaining meaningful business involvement in teen pregnancy prevention efforts.

Generate a list of business prospects

Once a program, group, or coalition has developed clear ideas for activities that are appropriate for business to take on, the next step is to decide what kinds of businesses to target. Programs should think about which businesses, companies, and associations in the community would be receptive. One company might be interested in these issues because it is community-based and therefore interested in the welfare of the community itself. Another may be in the health care field and have an interest in women's health issues. Still another may be run by a business leader who has been affected by teen pregnancy or youth issues in his or her life and wants to take action on a more public level. Other businesses, such as advertising or media companies, may simply be logical partners in a community-based initiative.

One good place for a program to start researching potential prospects is a business's own publications. An annual report on company contributions or a community affairs publication will reveal a lot about a company's past involvement and potential interest in a teen pregnancy prevention effort.

Another approach is to contact business groups and membership organizations, such as the Rotary and Kiwanis Clubs, the Chamber of Commerce, and national social-issue organizations, such as The Business Roundtable and the Washington Business Group on Health. (See the resources section of this chapter for contact information for these and similar organizations.) These groups can provide information on the kinds of activities the members are involved in and may even be able to help identify businesses that would be particularly interested in teen pregnancy prevention.

Sometimes businesses are already involved in related activities or are already connected with other community-based or nonprofit organizations.

New Jersey's **New Brunswick Tomorrow** is a community-based revitalization initiative that includes business leaders on various committees. Coalitions such as these may be promising partners for related youth development activities.

Approach the business community

In many ways, approaching a company or organization is the most difficult part of involving business. Even those who have been successful in getting businesses to participate in youth development and/or teen pregnancy prevention activities find this to be the most challenging part of the task. This is because:

- Businesses receive frequent requests to participate in philanthropic activities and may resist additional commitments.

- Businesses may not understand how teen pregnancy affects their bottom line.
- Businesses may be hesitant to become involved in what they see as a controversial issue.
- Businesses may not see a clear role for themselves.

Programs need to tailor their approach in such a way that it takes into account these potential roadblocks to getting businesses on board. Success is more likely if programs approach business in a business-like style, with the following points in mind.

Talk the talk

For business, the bottom line is the bottom line. Business leaders want reassurance that their investments will result in a payback down the road. The challenge is to make a pitch in the context of results. This can be done by stressing the enormous impact that teen pregnancy has on businesses and citing statistics such as those included in the introduction to this chapter.

Make it a "win/win proposition"

Help businesses understand that taking on teen pregnancy prevention issues will benefit them as well as the community. Emphasize that employees view in-house parent education

KEYS TO SUCCESS

Recognize the diversity of the business community

Big companies have a lot of clout, but "mom and pop" businesses with ties to a community also may be very interested in getting involved.

Think broadly when considering how to contact businesses

Programs can reach a diverse group of business leaders through ethnic business organizations and neighborhood business associations.

programs as a benefit, and that such programs help to create a family-friendly workplace. For example,

- The company could offer a seminar on how to talk to children about sex, love, and relationships in developmentally appropriate ways that build on the values parents hold. Not only would such a program be appreciated by the employees, but it may contribute to fewer teen pregnancies and, consequently, a stronger future labor force.
- A summer jobs program for youth could benefit the company in the long and short run by providing inexpensive employees and contributing to the development of an experienced future workforce.

Address the cultural differences

Even when they share common concerns about an issue, advocacy organizations and businesses are different kinds of operations with different cultures. Businesses are very focused on management and outcomes—they care about results over process, setting and sticking to timelines, and the appearance of written products, for example. It is important that programs accommodate these priorities. A program's planning

“Business people know that it is less expensive to prevent failure than to try and correct it later—each year taxpayers spend \$16.6 billion to support the children of teen parents.”

Committee on Economic Development, 1991

may need to be more detailed than usual, and its written materials should be of the same quality as the business's own.

Make an effective case

Before a program goes knocking on a business's door, it needs to think carefully about who should do the knocking and on which door. The program may be inclined to make the initial contact because it knows the issues well, has ideas for how businesses can get involved, and has done all the legwork up to that point. But it may be more effective to have a business leader who already works with the program make the contact.

Here are a few more tips to maximize the chances of getting a positive response.

Go straight to the top

A CEO has the ultimate decision-making power about whether or not the business should take on community activities. Such a high-profile person will attract more attention to an issue than will a less senior employee. However, reduced access comes with that higher rank. Be prepared for the request to move down through the business

hierarchy. With CEO endorsement, a staff member may be assigned to work on the project. Public affairs or community liaison offices are often the contact points for community efforts such as teen pregnancy prevention. These staff are often dedicated to community activities and typically have the CEO's ear.

Use peer pressure

Many advocates have found that asking one business leader to ask another is effective in getting businesses to participate in activities. Programs can find their way to an executive through his or her existing contacts. This works because executives speak the same language and can discuss concerns and questions comfortably and candidly. Possible strategies for getting one business leader to involve others include:

- signing an invitation letter to a meeting;
- hosting a breakfast for interested community members; or
- asking other CEOs to join him or her on an advisory board.

A member of the **Minnesota Organization on Adolescent**

Pregnancy, Prevention, and Parenting's (MOAPPP)

board convinced her husband to donate free advertising space in his business magazine to MOAPPP so the organization could advertise for interns at the state university.

Respond to objections

Even if a program's initial presentation to the CEO or his or her designee is perfect, programs may still encounter resistance. Below are examples of the kinds of concerns that executives may express when asked to become involved in teen pregnancy prevention. They are followed by points that programs can use to respond.

Teen pregnancy does not affect my business. Teen pregnancy affects everyone, including businesses. Teen parents are more likely to drop out of school, live in poverty, be unemployed, and have children who suffer the same fate. This means a less competitive and productive workforce. It also means a heavy hit to the pocketbook.

We do not have time to get involved. There are lots of ways to get involved, and any amount of participation would be welcomed and valuable. The business can spend as much or as little time as it chooses:

FOR MORE SUPPORT IN RESPONDING TO OBJECTIONS

See the introduction to this chapter and the info sheet at the end of the chapter.

- If time is limited, the business could simply agree to make a donation or sponsor an ongoing teen pregnancy prevention initiative.
- A slightly more intensive time commitment might include such activities as having the CEO or another company official speak at a conference or at public hearings on an issue related to teen pregnancy.
- A substantial time commitment might involve such activities as convening a business coalition to focus on these issues.

Aren't community organizations already taking care of teen pregnancy? Community organizations play a critical role in mobilizing support for teen pregnancy prevention and in developing innovative programs. Teen pregnancy is complex, involving social, economic, and health issues. No one entity or approach can singlehandedly tackle it. If all sectors of a community participate—advocacy organizations, businesses, government, social service agencies, the media, and others—we can make a difference.

There's nothing I can do about teen pregnancy. Businesses can take on many roles in teen preg-

KEYS TO SUCCESS

Be creative in overcoming initial reluctance:

- **develop a list of potential activities**
- **provide technical assistance**
- **offer to help with tasks**

nancy prevention, as noted at the outset of this chapter.

This issue is too controversial. There's little disagreement that teen pregnancy and childbearing are not good ideas, and there are many non-controversial ways to help kids that are perfect for business to be involved in, such as youth development and jobs programs.

Think ahead about what to leave behind

Once the initial meeting is over, it is important for a potential business partner to have appropriate, user-friendly materials to review later. Chances are that the executive will want to discuss a program's proposition with others in his or her office before making a commitment. Programs need to make sure business leaders are left with written information that can be shared with those in the company who would do the day-to-day work. Such materials could include:

- the handout at the end of this chapter, which explains why and how business leaders should get involved;

- fact sheets on teen pregnancy in the community;
- a video that the program or another organization has developed; and
- materials from the program's existing activities.

Sustain the relationship

Getting businesses involved in teen pregnancy prevention issues does not happen overnight. It requires careful planning, material development, networking, and other hard work to cultivate and sustain the relationship.

Follow up

Follow up involves phone calls to set up appointments with the right people in each company, thank-you letters for meetings or referrals, responses to requests for more information that are made during meetings, and more phone calls after meetings to keep the issue alive and moving through the company's decision-making machinery. If the program was the one who made the initial contact with the executive, it can also ask other business community partners to make a follow-up phone call encouraging him or her to join the effort.

Stay connected and be a resource

Keep in mind that, as beneficial as it may be, involving busi-

nesses in your efforts will also mean more work for a program. Programs will need to provide businesses with suggestions for roles they can play and specific activities they can undertake, and they must be prepared to provide technical assistance and guidance throughout their involvement. That assistance may include:

- helping develop information materials for workplace programs;
- drafting talking points for a CEO who has agreed to speak at a public forum; or
- planning meetings that a business has agreed to host.

Shine the spotlight

Businesses want recognition for their philanthropic activities. Before seeking the involvement of a business, programs should think about how to publicize their efforts. Possibilities include:

- announcing a newly-formed partnership;
- providing a CEO with the opportunity to speak at an upcoming conference or meeting on teen pregnancy prevention;
- arranging an awards dinner for businesses who have

made important contributions to the community; or

- arranging for a CEO to speak out publicly on an issue related to teen pregnancy.

Conclusion

Involving businesses in teen pregnancy prevention is not an easy task. It requires persistence, creativity, flexibility, and—above all—hard work. Just as a program will need to convince business leaders that their investment of time and effort will pay off in the long run, programs must believe that their time and effort to involve

business leaders will, too. Through workplace initiatives, community-focused activities, or other public forums, businesses can contribute to teen pregnancy prevention efforts in unique ways. The challenge is to convince them of the importance of their participation and then make it easy and exciting for them to do so.

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Programs mentioned in this chapter

Gunstock Ski Resort

Gunstock
P.O. Box 1307
Laconia, NH 03247
(800) 486-7862

Honeywell, Inc.—New Vistas Schools

Chris Bremer, Manager
Education Programs
Honeywell, Inc.
MN12-5278
P.O. Box 524
Minneapolis, MN 55440-0524
(612) 954-2066

Minnesota Organization on Adolescent Pregnancy, Prevention, and Parenting (MOAPPP)

P.O. Box 40392
St. Paul, MN 55104
(651) 644-1417
Toll Free in MN (800) 657-3697
Fax: (651) 644-1417
www.cyfc.umn.edu/moappp/

National Urban Adolescent Pregnancy Prevention Program

Michael Bzdak, Director
Corporate Contributions
1 Johnson & Johnson Plaza
New Brunswick, NJ 08933
(732) 524-3698

Success by 6—Florida

Brittany Lowman
Director
Success by 6, United Way of Central Florida
P.O. Box 1357
Highland City, FL 33846-1357
(941) 648-1500

Target Stores

Amette Walz
Community Involvement Coordinator
33 South Sixth St.
P.O. Box 1392
Minneapolis, MN 55440-1392
(612) 304-8543

Other useful resources

The following organizations may be helpful in identifying businesses that are concerned about youth development and teen pregnancy issues. Others have information materials that may be useful in teen pregnancy prevention work.

America's Promise

909 N. Washington St.
Suite 400
Alexandria, VA 22314
(703) 684-4500
Fax: (703) 684-7328
www.americaspromise.org

America's Promise—the Alliance for Youth is the multi-year, national campaign to further the mission and goals of the Presidents' Summit for America's Future, held in April 1997. The organization works to help America's youth reach their full potential by building an alliance of corporations, foundations, organizations, communities, public agencies, and individuals. America's Promise offers written materials, how-to guides, videotapes, advertising/paid media materials, and event materials to interested communities.

The Business Roundtable

1615 L St., NW
Suite 1100
Washington, DC 20036
(202) 872-4260
Fax: (202) 466-3509
www.brttable.org

The Business Roundtable (BRT) is an association of chief executive officers who examine public issues that affect the economy and develop positions that seek to reflect sound economic and social principles. It believes that the basic

interests of business closely parallel the interests of the American people. The member CEOs work in task forces on specific issues, direct research, supervise preparation of position papers, recommend policy, and speak out on issues.

Businesses for Social Responsibility

609 Mission St.
Second Floor
San Francisco, CA 94105
(415) 537-0888
Fax: (415) 537-0889
www.bsr.org

Businesses for Social Responsibility (BSR) is a membership organization for companies of all sizes and sectors. Its mission is to help its member companies achieve long-term commercial success by carrying out policies and practices that honor high ethical standards and meet their responsibilities to all who are affected by their decisions. Its initiatives include the **Business & Community Program**, which seeks to facilitate greater and more effective involvement of the business sector in the community. Its goal is to work with companies and other groups to promote the innovative and effective use of corporate assets that results in economic benefits to disadvantaged communities.

Children's Defense Fund Child Watch Visitation Program

25 E St., NW
Washington, DC 20001
(202) 628-8787
Fax: (202) 662-3510
www.childrensdefense.org

The Children's Defense Fund (CDF) is a nonprofit advocacy organization working on issues that affect children, particularly those who are poor and disadvan-

Egged. The Child Watch Visitation

Program was designed by CDE to allow leaders to see first-hand what is happening to the nation's children by adding faces to the statistics and reports.

Organized by volunteers and advocates in local conditions around the country, the Child Watch Program uses onsite visits to programs serving children and families; briefings by public policy experts; written background materials; and experiential activities to educate and move executives and other community leaders to action on behalf of children and families.

Committee for Economic Development

477 Madison Ave.
New York, NY 10022
(212) 688-2063
Fax: (212) 758-9068
www.ced.org

The Committee for Economic Development (CED) is an independent, nonprofit, trustee-directed business organization. Through a business-academic partnership, CED seeks to develop policy statements and other research materials that serve as guides to public and business policy and that influence the formation of business and public policy. In recent years, CED's work on school reform has been credited with increasing business involvement in education. CED's trustees promote CED's positions through activities such as congressional testimony, local initiatives, and speaking at conferences.

March of Dimes Birth Defects Foundation

National Office
1275 Manaroneck Ave.
White Plains, NY 10605
(914) 428-7100
Fax: (914) 428-8203
www.modimes.org

The March of Dimes (MOD) is a nonprofit organization dedicated to improving the health of babies by reducing birth defects and infant mortality. It is one of the 10 largest voluntary health agencies in the country, with 101 chapters nationwide. Among its numerous activities, MOD has

focused on helping employers reduce their maternity-related health care costs and improve birth outcomes. Its programs, "Babies and You," and "Healthy Babies, Healthy Business," are widely used.

United Way of America

701 N. Fairfax St.
Alexandria, VA 22314
(703) 836-7100
Fax: (703) 683-7840
www.unitedway.org

United Way of America is the national service and training center for local United Ways nationwide. Its many programs include the **National Corporate Leadership Program (NCL)** and **Success by 6**. NCL seeks to increase funds and volunteers from the corporate community by heightening needs awareness and increasing partnerships with United Ways, companies, and employees. Success by 6 is a community-wide children's initiative that brings together resources from a partnership of private business, government, religious groups, educators, health and human service organizations, and neighbors and parents.

Washington Business Group on Health

777 North Capitol St., NE
Suite 800
Washington, DC 20002
(202) 408-9320
Fax: (202) 408-9332
www.wbgh.com

Washington Business Group on Health (WBGH) is a national nonprofit organization exclusively devoted to the analysis of health policy and related worksite issues from the perspective of large employers. Business group members are generally Fortune 500 and large public sector employers. Its initiatives include WBGH's **National Business Partnership to Improve Family Health**, which has worked to stimulate creative programs and spotlight corporate innovations in maternal and child health. WBGH provides a forum for the exchange of information on best practices that increase corporate competitiveness and productivity.

Businesses' role in teen pregnancy prevention: Why and how

Why should businesses become involved in teen pregnancy prevention?

- A Robin Hood Foundation study estimated the costs to taxpayers of adolescent childbearing in 1996 dollars at \$6.9 billion. This represents the "amount by which the social welfare of the nation would have increased" if society had implemented a policy (13 years ago) that successfully delayed childbearing until adolescents reached the age of 20 or 21 (Robin Hood Foundation, 1996).
- In fiscal year 1995, the U.S. government spent approximately \$39.3 billion to assist families that were begun when the mother was a teenager, and \$131 million on programs to prevent teen pregnancy (Flinn & Hanser, 1998).
- Teen parents and their children are less likely to complete high school and more likely to be poor. Teen mothers are also more likely to have low birthweight babies, who are at risk for life-long developmental and health problems (Southern Regional Project on Infant Mortality, 1997).

These factors affect the quality of the current and future workforce, an issue of great interest to business.

How can business become involved?

Businesses can make a real difference in teen pregnancy prevention efforts. They tend to be well-positioned in the community to take leadership roles and can provide a variety of resources. The list below offers a sampling of the kinds of initiatives that businesses can spearhead. Some specifically address teen pregnancy prevention, while others focus more broadly on youth development.

Mentoring programs for youth

The Committee for Economic Development states that "support of mentoring programs lends itself well to corporate objectives of better utilizing human resources by promoting employee involvement and volunteer efforts in the community" (CED, 1991). Businesses can participate in community mentoring programs by serving as volunteers in after-school tutoring programs, "Big Brother/Sister" programs, or similar activities. Companies can also hold a "Bring Youth

to Work Day” where they host students at the workplace and show them a typical day at the office. This exposes young people to an office setting, often for the first time in their lives.

Summer jobs programs for youth

Providing youth with work experience can go a long way toward inspiring them to stay in school and preparing them to enter the workforce as adults. Businesses can develop summer jobs programs and/or internship programs for community youth.

Support of youth development programs/activities

In many communities, advocacy organizations and/or family support agencies have spearheaded innovative youth development programs that rely on temporary funding, such as foundation grants. By becoming sponsors, businesses can help ensure these programs continue while gaining recognition as supportive community members. Most will give to programs that operate in their neighborhood or community. Monetary donations or in-kind contributions also are helpful.

Adopt-a-school programs

A business can make a commitment to a local school and provide donations, volunteers, and other support as needed. This can help ensure that schools can adequately serve students so they will be better prepared to enter the workforce as adults. It also can bring recognition to the business as a proactive community member.

Workplace initiatives

Companies can carry out workplace programs that teach employees how to communicate with their children about sexual decision-making and teen pregnancy. Strategies range from disseminating information through bill stuffers, placemats, and bulletin boards to sponsoring brown bag lunches with guest speakers. Business leaders can also encourage employees to volunteer at community youth development and/or teen pregnancy prevention programs by allowing them to use time during the work day.

Membership in teen pregnancy prevention coalitions

Many communities have active teen pregnancy prevention coalitions that would welcome the participation of businesses. According to the Committee for Economic Development, “Coalitions are required because so many organizations are involved in various aspects of

developing human resources. Business is particularly well suited to deal with this complex array of needs and institutions because of both the substance and geographic reach of its activities" (CED, 1990).

Convener of a business partnership

Businesses may wish to initiate their own coalition or partnership to focus on youth development or teen pregnancy prevention issues. Many local business groups, such as Kiwanis and the Rotary Club, offer ready-made gatherings at which to raise these issues. National organizations, such as the Council for Economic Development and The Business Roundtable, also can provide business leaders with resources and contacts.

Spokesperson for legislative hearings, press conferences, public service announcements, or other public forums

Once a business leader understands the importance of preventing teen pregnancy, he or she may be willing to serve as a public spokesperson on the issue. This benefits the issue by increasing attention to it and can generate favorable publicity for the company.

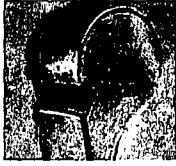
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Involving Schools in Teen Pregnancy Prevention

by Joy Dryfoos

T H I S C H A P T E R

Suggests roles that schools may play in a community's effort to prevent teen pregnancy;

Suggests strategies for involving schools in teen pregnancy prevention;

Describes five main types of school-based programs; and

Provides references and resources for further information.

THE
NATIONAL
COMMISSION ON
PREVENTING TEEN PREGNANCY

Key Ideas in this Chapter

The most important role for schools in pregnancy prevention is to offer all students the opportunity to succeed. Young people who are engaged in academic pursuits and have high expectations for the future are less likely to become involved in early sexual activity.

Young people who feel “connected” to school are more likely to avoid teen pregnancy and other problems.

Families, schools, community agencies, and youth can work together. Integrated approaches to teen pregnancy prevention that are carried out through partnerships are more likely to succeed.

The vast majority of schools provide some form of education about sexuality, abstinence, and/or contraception, but the programs differ in quality, quantity, timing, setting, and effectiveness.

An increasing number of schools provide access to reproductive health care. In more than 1,200 schools, health agencies operate school-based primary health care clinics. Few provide contraception, but almost all refer students to community health agencies for such assistance.

Involving Schools in Teen Pregnancy Prevention

Why involve schools in teen pregnancy prevention?

Because young people spend so much time in school, it is appropriate to ask what this major institution can do to help prevent teen pregnancies—especially when school failure, school disengagement, and dropping out are principal predictors of this problem. At the same time, schools have become battle grounds in many communities, the sites of intense struggles over many issues, such as teacher competence, student scores and

academic performance, safety, vouchers, and sexuality education.

There are ways in which schools can help, many of which are not at all controversial and are directly consonant with their core mission of education. This chapter describes five strategies that schools can pursue. These strategies help give students support, knowledge, and a sense of the future, all of which will help them delay sexual activity and avoid unprotected sex.

Strategies for involving schools

Several of these strategies will be acceptable to many communities, others less so. Some schools will have the resources and time to concentrate on only one type of intervention; others can do several simultaneously. A few schools are already doing all of them. Communities will choose those activities best suited to their own values, their own children, and their own schools. However, regardless of which activities are chosen, parent involvement is critical.

The five strategies are:

- promoting educational success and providing an enhanced sense that life holds positive options;

RESEARCH AND EXPERIENCE SHOW...

- **educational failure is a key predictor of teen pregnancy**
- **a strong connection to school and higher achievement is associated with delayed sexual intercourse**

- helping youth create and maintain strong connections to parents and other adults;
- providing knowledge, reinforcing positive social norms, and enhancing social skills through various types of abstinence or sex education;
- offering contraceptive services (either in school or nearby) or making referrals for them; and
- carrying out multiple approaches through school/community partnerships.

Promoting educational success and providing an enhanced sense that life holds positive options

Young people are more likely to avoid teen pregnancy when they believe in a positive future for themselves. Schools and communities must formulate powerful strategies for those young people who live on the margins, who are unsuccessful in school,

who do not have nurturing families, and who live in disadvantaged communities. These very high-risk young people must be convinced that delaying parenthood will have benefits, *and* that not having a baby will improve their chances in life.

But this strategy is not just a matter of motivating young people to abstain from sex until they are older or to avoid unprotected sex. It is a matter of changing their circumstances so that they truly do have access to quality education and employment opportunities, so they can set and meet high goals for their lives, so that they feel that the future holds the promise of positive options.

Teachers, guidance counselors, and other school personnel are in an excellent position to identify young people who are at high risk of teen pregnancy. One sure marker of vulnerability is

FOR MORE ON THESE STRATEGIES, SEE OTHER CHAPTERS IN *GET ORGANIZED*

Previous chapters have highlighted promising pregnancy prevention programs. Many of these are school-based; others, which are community-based, can be adapted for school use.

Some of the school-based programs described here are specifically focused on pregnancy prevention; others are not, even though they have been shown to prevent pregnancy.

Note: While all of these efforts take place in school buildings, most of them represent shared responsibilities between the school and one or more outside organizations.

THE LINK BETWEEN PREGNANCY PREVENTION AND YOUTH DEVELOPMENT

Involving youth—particularly high-risk youth—in thinking about and planning for higher education and career opportunities decreases their vulnerability to high-risk sexual activity and other problems.

Youth development programs convey high expectations to young people, and then give them the chance to achieve those expectations.

being left back in school. Young people who are two or more years older than their classmates are more likely to drop out and become parents while teenagers. Once high-risk teens are identified, it is essential to make sure that they receive early and intense interventions that will help them overcome the odds.

Many school systems have programs targeted to high-risk youth. There are thousands of alternative schools, schools-within-schools, mentoring programs, full-service community schools, and special projects that attempt to give needy young people individual attention and that tailor classroom experiences for different learning styles. Many of these schools are open from early in the morning until late at night and offer an array of health, mental health, social, and recreational services for the student and his or her family.

A new federal initiative, the **21st Century Community Learning Centers**, will provide support for after-school programs in many needy school districts

for middle-school children who are particularly vulnerable to risky behaviors during the hours after school. After-school programs can effectively offer educational enrichment and creative recreational opportunities that expand life options.

Community service is another way to expand the life options open to young people while they are still in school. Examples include:

- assigning students to community agencies, such as nursery schools, hospitals, or senior citizen's homes, where they provide services to clients under the supervision of the agency staff, and bring back their experiences to the classroom; this exposes young people to the world of work and helps them to understand how to prepare for careers; and
- encouraging high-risk students to participate in school-based peer programs, such as tutoring; such arrangements can help both groups because the peers gain confidence and

SUCCESS LEADS TO SUCCESS...

- **More than 80 Beacon Schools have been funded by the New York City Department of Youth and Community Development.**
- **The Beacon model has also been widely replicated around the country, as has the TOP program.**

status and the tutored students do better in school.

The **Teen Outreach Program (TOP)**, originally sponsored by the Association of Junior Leagues, combines volunteer community work assignments for high-school students with school-based group counseling and discussion groups. The discussions are guided by a curriculum emphasizing life planning and goal setting. Recent research from the program has shown that participating students have lower rates of school failure, school dropout, and pregnancy (The Association of Junior Leagues International, 1995).

The **Countee Cullen Community Center** is a Beacon School in New York City. This school-based program operates from 8 a.m. to 11 p.m. every day of the week, serving hundreds of youth and their families. It:

- has a Teen Youth Council that works on community beautification;
- sponsors workshops on job readiness and employment skills;

- runs a peer mediation program to prevent youth violence; and
- houses Narcotics Anonymous, Boy Scouts, and a Family Development Program with case managers who work with high-risk families.

An evaluation of the program has demonstrated its diverse benefits, including improved students' performance on reading tests and improved community safety.

Helping youth create and maintain strong connections with adults

Both research and everyday experience teach us that every young person needs at least one strong, authoritative, and dependable adult in his or her life. For most young people, this will be parents, but some parents have great difficulty communicating with their own children, not just about sex, but about many issues. School personnel, such as teachers, guidance counselors, coaches, school nurses, and other support staff, can play a significant role in helping to fill this gap, guiding young people and helping them to make responsible decisions about their futures.

Aware that vulnerable students in particular benefit from a connection with an adult, many schools attempt to link each

student to a school staff member, case manager, or volunteer. Some schools are organized around “family” groups in the homeroom, with the teacher taking the responsibility for checking in with each student every day to make sure everything is going well. For example, school/community partnerships that focus on mental health often bring outside counselors into the school for prevention and treatment. In a few schools, teachers or special outreach workers make home visits when parents need to be involved.

Along these same lines, “student assistance” workers or case managers are another strategy for preventing school dropout, delinquency, and substance abuse.

Communities-in-Schools (formerly Cities-in-Schools) has established hundreds of sites

where social workers are relocated from community agencies into schools. They focus specifically on high-risk youth and give them plenty of individual attention.

Quantum Opportunities, Inc., is an intensive program, originally created as an after-school intervention in five pilot community-based sites. High-risk 9th graders join the program for a four-year intervention that includes daily educational remediation, life skills training, community service, and family involvement. Participants are paid an hourly rate for attendance and the money is banked until graduation to help pay for college or vocational school. This program has been shown to prevent high school dropout, delinquency, and teen childbearing. Replications are now underway in seven cities, and some of them are located in schools in order to

WAYS TO DISPROVE THE WELL-KNOWN AXIOM, “THE OLDER THE STUDENT, THE HARDER IT IS TO INVOLVE PARENTS.”

Some middle and high schools have established good connections with parents by offering them needed services, such as:

- **English as a Second Language classes;**
- **individual guidance on family problems; and**
- **family recreational experiences.**

Other schools have organized workshops that bring together parents with other people’s children. This often makes adult-child communication easier.

link together the classroom and after-school experiences.

A few school-based programs involving outside social workers that focus specifically on teen pregnancy prevention have been identified.

Teen Choice is a pregnancy prevention program operated by Inwood House, a voluntary social service agency in the New York City public schools. Specially trained social workers staff three components: small groups, individual counseling and referral, and classroom dialogues.

The small groups meet once a week for a semester and cover sexuality issues, birth control, values clarification, and peer pressure. The workers are assigned to a school where they have private offices, ensuring confidentiality.

Increasing knowledge and social skills through various types of sexuality education

Young people need the knowledge and skills to make responsible decisions about whether and when to initiate sex, with whom, and under what circumstances. Schools are one of the places where they can receive this information and guidance, supplementing what parents, faith communities, and others teach.

These programs come in many different varieties, and they vary a lot in whether and how contraception is presented:

- Most of these programs address how to delay sexual activity or avoid unwanted sex.
- Some are considered “abstinence-only,” meaning they emphasize abstinence as the 100-percent effective way to avoid pregnancy and STDs, while others are called “abstinence-plus” because they also include discussion of contraception.
- Some, often called “comprehensive” sexuality education programs, teach young people about human sexual development, pregnancy and reproduction, and contraceptives and how they work. They also help teens learn how to refuse

STATE LAWS ON SEXUALITY EDUCATION

- **19 states and DC require schools to provide sexuality education**
- **Of these, 4 states require abstinence education and 10 require abstinence education and information about contraception**
- **34 states and DC require schools to provide STD/HIV/AIDS education**

sex if they are not ready for it and how to negotiate contraceptive use. STD/HIV education programs focus especially on “safer sex” practices.

Many well-regarded programs focus on helping young people learn how to make decisions about their behaviors, and carry out those decisions through experiential education, such as role playing about real-life situations, exposure to media influences, and dealing with peer influences. An emphasis on abstinence has new visibility, however, because of provisions in the 1996 welfare reform law, which allocated \$250 million over five years (fiscal years 1998-2002) to states to develop and to put in place a set of abstinence-only education programs to prevent teen and out-of-wedlock pregnancy and births.

In the past, curricula that focused on family life decisions were quite popular. For example, Advocates for Youth promulgated the **Life Planning Curriculum**, which required students to produce detailed plans about their careers, marriage, family life, and budget.

In recent years, to strengthen the message about the difficulties of early parenthood, some school systems have invested in the purchase of “Baby Think it Over” dolls, which are plastic

replicas of infants. They cry frequently and are, in some ways, as demanding as a young baby. Students are asked to take care of these dolls (or other surrogate babies such as eggs or flour sacks) for short periods of time, to acquaint them with the demands of infant care. No strong evaluation has been conducted of the effectiveness of this approach, although many teachers and students report that such tools (when used as part of a broader curriculum) can help break through adolescent disinterest in the burdens of early parenthood.

In addition to providing classroom curricula, some schools use their resources to support in-service teacher training in sexuality education, though the focus has been primarily on HIV prevention. Among health education teachers, one-third of middle school and senior high school teachers reported training in HIV prevention during the preceding two years, while only 6 percent received training in pregnancy prevention (CDC, 1996).

Only a few school-based programs of any type have been evaluated and have proved that they can influence behaviors, such as the onset of sexual intercourse or contraceptive use. Many programs affect knowledge and attitudes about these issues, but have not been

RESEARCH SHOWS THAT...

more than knowledge is required to effect behavior change

Kirby, 1997

proven to have much impact on actual sexual behavior. However, more recently designed AIDS prevention and pregnancy prevention curricula have seemed to produce better results (Kirby, 1997).

It has become clear from considerable study of prevention programs, not only in regard to teen pregnancy but also substance abuse and violence prevention, that more than knowledge is required to effect behavior change. The most recently developed classroom-based approaches focus more on what is called social skills training—helping teens develop the skills they need to act responsibly in social settings, using the knowledge they have acquired. Most important, they give a clear message about abstinence or avoiding unprotected sex.

Reducing the Risk uses a 16-session curriculum to change high-school students' norms about unprotected sex, as well as to strengthen parent-child communication concerning abstinence and contraception. Experiential components, such as role playing, are featured. Evaluation of Reducing the Risk showed that the program reduced the likelihood that students would become sexually active, although it had less effect on those who

were already sexually experienced (Barth et al., 1992).

AIDS Prevention for

Adolescents in School provides a six-session curriculum for 9th-11th graders that focuses on teaching the correct facts about AIDS; promoting cognitive skills to appraise the risk of transmission; increasing knowledge of prevention resources; and teaching skills to delay intercourse and consistently use condoms. An evaluation found a decrease in high-risk behaviors (Kirby, 1997).

Safer Choices is a multi-component, school-based program designed to reduce pregnancy, STD, and HIV by reducing sexual activity or increasing the use of condoms or other forms of protection. It includes a school council to produce school-wide change, a 20-session curriculum spread over two years (9th and 10th grade), peer and school-wide activities, a parent component, and a community component. It has increased condom use and decreased the frequency of unprotected sex (Kirby, 1997).

Offering reproductive health services and contraception

A fourth approach to reducing teen pregnancy that some schools have chosen is to provide direct access to contraception to prevent early pregnancy and

STDs. Traditionally, schools are not expected to provide reproductive health care to teenagers, and most school systems do not assume formal responsibility for ensuring that sexually active students have access to birth control services. In other schools, sexually active students are referred to local Planned Parenthood facilities, family planning clinics in health facilities, or private physicians. School personnel may refer students to outside health agencies and, in some cases, follow up with the agency to make sure that the student arrived at the facility and received the necessary care. Parental consent, notification, and involvement are important issues to address in this approach.

Family planning services offered by public health clinics, community-based agencies, private physicians, and school-based clinics can provide the necessary counseling, physical examination, prescriptions, and, in particular, follow-up that young people need to ensure adequate protection against pregnancy and STDs.

In recent years, the country has seen a substantial growth in the number of school-based primary health care clinics—only about one-third of which provide contraception. In 1983, only 10 such programs could be identified.

The most recent survey showed that close to 1,200 schools now house school-based clinics, about half in high schools, with a growing number in middle and elementary schools.

Although these clinics exist in only a small percentage of the 85,000 public and 25,000 religious and independent schools in the United States, they currently serve about 2 million students, more than half of whom are probably old enough to be at risk for pregnancy. The clinics typically serve about half of the students in any given school.

These primary care facilities are operated by health centers, hospitals, and other community providers. Most are staffed by nurse practitioners and social workers.

RESEARCH SHOWS...

- **48 percent of 15- to 19-year-olds report having had sexual intercourse**

MANY SCHOOLS ARE RESPONDING...

- **about 1,200 have primary health clinics**
- **some make condoms and medically prescribed contraceptives available**
- **many refer students to clinics and physicians in the community**

Almost all such high-school clinics provide treatment for minor illnesses, offer immunizations, and do comprehensive health assessments and sports physicals. More than three-fourths include mental health counseling services, such as case management and crisis intervention, and many conduct group counseling sessions on specific topics related to drugs, sex, violence, and interpersonal relationships (Dryfoos et al., 1996; Fothergill, 1998; Making the Grade, 1998).

Self Center, a school/community agency program in Baltimore, Maryland, combined sexuality and contraceptive education and individual and group counseling in schools with family planning services in a nearby clinic site. The staff (a social worker and a

nurse practitioner) worked in both places.

The **In Your Face Program**, run by New York's Columbia University Center for Population and Family Health, emphasizes group counseling with Hispanic students who are at high risk of early unprotected sex. Specially trained Hispanic health educators work intensively with students to develop ways to prevent unwanted pregnancies, including abstinence. The educators escort the students to a hospital-based family planning clinic if they are sexually active and want contraception.

The Pinelands Regional High School, in New Jersey, has a state-supported **School-Based Youth Services Program**. A family planning educator from the local Women's Health and Counseling Center teaches 9th and 11th graders as part of the school's comprehensive family life education program. The four-part presentation includes information about methods of birth control and disease prevention and introduces the availability of individual confidential counseling as part of the school program. The family planning counselor who comes to the school is also at the community-based center, so that if students choose to go to the center they meet the same person they know from the school.

FACTS ABOUT HIGH SCHOOL-BASED PRIMARY HEALTH CLINICS

- **85 percent offer pregnancy tests**
- **74 percent offer birth control counseling and gynecological exams**
- **1/3 provide birth control pills or condoms**
- **more than 400 schools allow condoms to be made available in the school building**
- **more than one-half have referral agreements with community family planning clinics**
- **many staff provide sexuality education in the classroom**

*Fothergill, 1998;
Making the Grade, 1998*

Carrying out multiple approaches through school/community partnerships

As seen in the following examples, recognition is growing within schools and community agencies that partnerships that include schools can go even farther to strengthen initiatives to help children and families.

Florida supports **Full Service Schools**, encouraging public agencies—health, mental health, and social services—to relocate and integrate services in school buildings. Some Florida schools have used the money to develop comprehensive family resource centers, while others have opened school-based primary health care centers.

The federal Centers for Disease Control and Prevention has created the **Joint Work Group on School-based Teen Pregnancy Prevention**, which includes representatives from such national organizations as the National School Boards Association, the Council of Chief State School Officers, and the National Education Association. This group is exploring the roles of state and local education and health policymakers, administrators, and school personnel.

The **School/Community Program for Sexual Risk Reduction Among Teens** is a multi-component program piloted in South Carolina. The program has nine components, including:

- teacher training;
- K-12 sexuality education;
- access to health services and contraception;
- collaboration with school administrators;
- use of the media;
- training of peer leaders;
- alternative activities for youth;
- community linkages; and
- programs in religious organizations.

The theory underlying this program is that the greater the number of changes in schools and community, the greater the likelihood of reducing teen pregnancy. The original research, which developed the model, showed lower pregnancy rates in the target area, but the rates returned to high levels after the intervention was over. The Kansas Health Foundation has supported a replication of the program in three Kansas counties.

THE IMPORTANCE OF SCHOOL-COMMUNITY PARTNERSHIPS

"The 'full-service school' as a community-based vehicle for organization and delivery of educational, social, and health services provides an excellent framework for community planning and action to address the health and educational needs of young people who are highly distressed and engaged in serious health-compromising behaviors."

Resnick et al., 1997

The **Hartford Action Plan on Infant Health**, a partnership between the City of Hartford and the Hartford Public Schools, seeks to eliminate births to those younger than 15 and reduce the birth rate among older teens by half. Among its offerings are:

- the *Postponing Sexual Involvement* curriculum to all 5th graders;
- a *Plain Talk* youth/adult community communication program;
- the *Adult Advisors Academy* to train volunteers to work with youth;
- a Males Forum;
- health care interventions; and
- youth activities.

The Plan includes a number of components in its recommended

comprehensive approach to reducing teen pregnancy, only some of which involve the schools. These include:

- annual screening exams for all adolescents and guidance and health education for youth and parents on pregnancy issues;
- a comprehensive set of "teen-friendly" preventive health services, including family planning;
- use of school clinics for reproductive health services or referral, and to ensure follow-up;
- use of satellite clinics where youth congregate (including malls and community centers);
- case management for high-risk youth;
- use of Medicaid managed care for funding health services and case management; and
- efforts to promote an understanding within the community that the vast majority of Hartford students are sexually active and need protection.

The Children's Aid Society in New York City has joined forces with the local community school district in Washington Heights to create four **Community Schools**. These "settlement

houses in schools” include the following features:

- They are open long hours and include family resource centers and primary health, mental health, and dental services.
- At the middle-school level, the clinic focuses on the need for reproductive health care and can refer students for family planning if necessary.
- “Town Meetings” enable small groups of students to discuss dating, violence, and peer and parent relationships.

- An extensive after-school program augments the classroom experience.
- Parents are involved in classrooms, community activities, family counseling, and extended learning programs.

The goal of these community schools is to improve academic outcomes, enhance the safety of the community, and help young people and their families reduce their vulnerability to problems. Preliminary results show promising gains in meeting these goals.

Putting the strategies into action

With these five possible strategies in mind, communities can develop a variety of approaches for preventing teen pregnancy through schools. Doing so is similar in many respects to developing a community-wide initiative. In large measure, careful attention to the details involved in two major phases is important: planning and designing the program and carrying it out.

Planning and designing a program

Several steps specific to an educational environment are involved in planning and designing a

successful pregnancy prevention program that is school-based or, at a minimum, closely tied to schools.

Create an inclusive planning committee that represents the community

All the key players on the planning committee need to be involved from the beginning. These players include:

- parents;
- students;
- school board members;

- the school superintendent;
- the principal;
- teachers;
- school nurses;
- counselors;
- other school employees;
- service providers in the community;
- youth development organizations;
- community members;
- religious leaders;
- business leaders; and
- the media.

An effort should not proceed without the support of the school principal, for he or she is the pri-

mary gatekeeper for the school building and the person who has to take the lead in developing a comprehensive program.

If a school health advisory committee or other decision-making body already exists, a pregnancy prevention effort should build on it, rather than organizing another committee.

Gather data on the need for pregnancy prevention in the school—make the issue personal

It is probably clear how many students are already parents, but it is also important to determine how many are sexually active, pregnant, and expecting to give birth. The local health department has information that may be useful for studying a school community. In addition, compiling information about achievement, attendance, promotion, dropout, and expulsion and suspension rates at the school will help in designing a pregnancy prevention program because academic failure is a key indicator of teen pregnancy risk. Communities may be interested in broad national and state data, but, at the end of the day, it is information on "our own kids" that really moves people.

Other sources of data can be helpful in ascertaining student attitudes and behaviors. For example, many school systems

USEFUL DATA FOR PLANNING AN INTERVENTION

How many students are:

- **parents?**
- **expectant parents (boys as well as girls)?**
- **sexually active?**
- **using contraception?**
- **low achievers?**
- **often absent?**
- **2 or more years older than their classmates?**

Who has recently:

- **dropped out?**
- **been suspended?**
- **been expelled?**

and states now use some form of the Youth Risk Behavior Survey, introduced by the Centers for Disease Control and Prevention in 1990. This survey elicits confidential responses about sex, drugs, violence, suicidal intentions, nutrition, and exercise, and can be adapted locally.

The planning committee may also want to consult national research, which can clarify certain issues and help schools develop a strong case for instituting a pregnancy prevention program. For example, current research shows that sexuality education programs do not stimulate sexual activity, that school-based clinics require parental consent, and that youth programs can be effective at changing behaviors (Kirby, 1997).

Assess the current status of pregnancy prevention in school

The planning committee should make an unbiased assessment of any existing pregnancy prevention efforts. In addition to gathering information on sexuality education programs of various types, it should look at other prevention programs in the school, including drug education, conflict resolution, and after-school activities that have a potential influence on youth development. A careful review means not only making an inventory of the programs, but

also beginning an assessment of whether they are effective in achieving their stated goals.

If the interventions being considered include new or expanded sexuality education or school-based health services of some type, the committee should also:

- review the state and local policies on sex education and reproductive health care in schools; states have many different policies regarding what can or cannot be included in sexuality education and HIV/AIDS prevention programs, and many also regulate the distribution of medical contraception and condoms in school-based clinics;
- determine whether the local school board has regulated the sexuality education curriculum or school-based health care; and
- determine whether the school system supports the kind of in-service training for its teachers that new programs might require.

Learn about alternative programs

This chapter has described a number of types of programs to be considered. To help in this decision, members should be encouraged to visit prevention

efforts in nearby communities. Another source of information is the many videos that are available about innovative programs in operation. This information should help to raise consciousness in the community about the wide array of programs and activities that could be introduced to make the school climate more conducive to responsible student behavior.

When looking at other programs, planning committee members should pay particular attention to how successful relationships between schools and other organizations are structured, where their financing comes from, and who makes decisions about what.

Members of the planning committee should be given any available information about evaluation so that they can distinguish between programs that have proven effective and those that show promise. There's a big difference.

Develop a plan

Once the planning committee has gathered the information it needs and decided on potential actions, it can begin to draft a preliminary plan for a school-based intervention to reduce teen pregnancy. The plan should clearly explain each component of the initiative, address how the components fit together, and how they link to other aspects of the school experience. The box below lists a number of key questions that can guide the

Nine key questions to ask when developing a plan

1. What program components should be included?
2. Who should be responsible for providing those components? Who are the potential partners in this endeavor? How will they relate to each other?
3. What elements of existing policies will support the plan and what revisions are needed?
4. What are the expected results? What kind of accountability system is there for monitoring and evaluating the program?
5. What will the program cost? What resources can be shared?
6. Will additional space in the school be required and, if so, how can it be made it available?
7. What staffing is required? What training is necessary?
8. How do the pregnancy prevention components fit in with school improvement and/or school reform plans?
9. Are there some components that should be made available outside of the school?

committee in developing a clear and practical plan.

Present the plan

After all the key players have reviewed the plan, the committee should present it to the community as a working document and ask for their comments, ideas, and suggestions. It may well take time and patience to develop a wide consensus on the plan so that it can be implemented with broad-based support. Describing this school effort as an important part of a solution to a community-wide problem will be essential for gaining broad support. Planning committee members need to remember that the school doesn't have to do it all. Individuals and agencies usually respond well to invitations to participate in school/community partnerships.

Carrying out the program

Even the best plans can falter if certain implementation issues are not addressed properly.

Expect and deal with controversy

Developing a school-based pregnancy prevention program is not an easy task. The subject of sex is fraught with conflict in our society—and when sex gets put into the context of the school, controversy is almost sure to follow.

If the planning committee's members fairly represent the school and community, and they have reached consensus on the main elements of the plan, the task of carrying out the program will be easier than if a non-representative group is in charge. Even so, tensions often exist. Sometimes controversy can be defused through openly sharing information about the problem and the proposed solutions, but whatever the approach to reducing conflict, it often takes time and success is not assured.

Maintain support and financing

Schools hesitate to add programs that require the expenditure of school funds. In general, abstinence or sexuality education is included in the school budget, but most of the other programs described in this chapter, such as after-school programs, are "add-ons," which require funding from non-educational sources. School-based health centers are largely funded by states and through third-party reimbursement systems, such as Medicaid and, more recently, managed

**FOR MORE INFORMATION
ON DEALING WITH
CONTROVERSY...**

**See Chapter 17 (Volume 3),
"Moving Forward in the
Face of Conflict."**

care contracts. The average cost per year for a such a health center is about \$150,000. Family or youth service centers can be established for about \$75,000 if they concentrate primarily on counseling and referral to community agencies.

Ensure quality

If a school chooses to use a pre-packaged curriculum as part of its teen pregnancy prevention initiative, it must be careful to implement it faithfully in the classroom and ensure that teachers are thoroughly familiar with the content and teaching components. The curriculum may have proven effective when the program developer supervised the teachers directly, but if teachers only have a manual or video to turn to for instruction, the results may be less successful. Teacher training is critical to the success of classroom-based prevention programs.

If the chosen intervention includes abstinence or sexuality education of some type, it is sometimes possible to get local community agencies (such as local health departments, colleges, or other youth-serving groups) to help out in the classroom. Mobilizing such outside help has the added advantage of liberating those teachers on staff who would rather not teach sexuality or abstinence education.

Build partnerships

A powerful consensus is emerging around the country that only through combining the forces of families, schools, and communities can we ensure that all children will grow into responsible adults. Clearly, schools cannot (and should not) take the full responsibility for preventing teen pregnancy and sexually transmitted diseases.

Partnerships between schools and community agencies can produce innovative and integrated programs. But it is essential that areas of contention be recognized and resolved. For example, turf issues, such as the position of the school nurse when an outside clinic comes into a school, should be clarified and resolved through careful negotiation of contractual relationships, specifically identifying who does what.

Encourage parental involvement

Parents must know what is going on in the school with their children's education and development. Many of the efforts described here require parental consent for participation. But consent is not the only role for parents. Often parents need help communicating with their children, especially about tough issues like sexuality. Programs that invite parents into the school for workshops and lectures have

met with limited success, but they are not the only possibility for outreach:

- Home visits by trained case managers can produce open communication between the school, the parents, and the students.
- Encouraging parents to volunteer in the school as classroom aides or to organize after-school programs in literacy, computers, or aerobics are effective ways to bring other adults into the school setting.

Conclusion

Schools are a vital part of any community and a logical place to reach teens with pregnancy prevention programs. An increasing number of schools, in conjunction with their communities, are recognizing that they can have an important impact

Ensure coverage during non-school hours

If the complete package of prevention programs takes place in a school, it means that the doors of the school must be open for extended hours (including vacations and summer) and that residents other than students might participate in these school-based events. Schools need to plan for this. Provisions for staffing and security also must be made, and transportation schedules may have to be adjusted so that students can stay after school for enrichment programs and tutoring.

on this problem. The diversity of potential programs makes it likely that a community will find activities that are consistent with its own values and that meet the needs of its schools and its children.

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Programs mentioned in this chapter

Children's Aid Technical Assistance Center for Community Schools

Rosa Agosta
The Children's Aid Society
c/o IS 248 4600 Broadway
New York, NY 10040
(212) 569-2880

Countee Cullen Community Center

Geoffrey Canada
Rheedlen Center
2770 Broadway
New York, NY 10005
(212) 866-0700

Hartford Action Plan on Infant Health

Laura Stone
30 Arbor Street
Hartford, CT 06106
(860) 236-2872

In Your Face Program

Lorraine Ticzki
Columbia University Center for Population and Family Health
School of Public Health
60 Haven Ave.
New York, NY 10032
(212) 305-5240

Other useful resources

Coalition for Community Schools

Martin Blank
Institute for Educational Leadership
1001 Connecticut Ave., NW, Suite 310
Washington, DC 20036
(202) 822-8405

National Institute for Out of School Time

Michelle Seligson
Wellesley College Center for
Research on Women
106 Center St.
Wellesley, MA 02481-8203
(781) 283-2424

21st Century Community Learning Centers

U.S. Department of Education
555 New Jersey Ave., NW
Washington, DC 20208-5644
(202) 219-2088

Youth Development Institute

Michele Cahill
Fund for The City of New York
121 Sixth Ave.
New York, NY 10013
(212) 678-3369

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Involving Health Care Professionals in Teen Pregnancy Prevention

by Janet Chapin

T H I S C H A P T E R

Describes the important role that health care professionals and organizations play in preventing teen pregnancy;

Explains how health care professionals contribute to pregnancy prevention efforts in their traditional caregiving role;

Shows how health care professionals can get involved in community-wide teen pregnancy prevention activities; and

Provides references and resources for further information.

THE
NATIONAL
CAMPAIGN TO
PREVENT TEEN PREGNANCY

Key Ideas in this Chapter

Health care professionals and health care organizations can be major assets in a community's efforts to prevent teen pregnancy.

A wide range of health care professionals can contribute, including obstetricians-gynecologists, pediatricians, family physicians, nurses, nurse practitioners, certified nurse-midwives, and physician's assistants.

Professional medical organizations are good sources of educational materials for use by practitioners, parents, adolescents, and pregnancy prevention programs. Under some circumstances, they can also provide direct advice and assistance.

Working successfully with teens involves creating a teen-friendly medical office environment, ensuring confidentiality, and providing teen-specific services.

Involving Health Care Professionals in Teen Pregnancy Prevention

Health care professionals play a critical role

Health care professionals and health care organizations and institutions can be major assets in a community's efforts to prevent teen pregnancy. While health care professionals primarily provide services and education to teens and parents in offices, clinics, schools, hospitals, and other health care facilities, they also can be significant participants in prevention activities and coalitions that are based in a community.

Because of the respect typically accorded them, physicians or nurses can be great allies in educating and influencing other professionals and in serving as visible spokespersons. Many

professional associations encourage their members to participate in teen pregnancy prevention efforts and have developed materials to assist them in doing so.

Health care organizations and institutions—such as hospitals, clinics, health maintenance organizations (HMOs), and other managed care or insurance organizations—also can play a role in a community's efforts to prevent teen pregnancy. Besides offering specific programs or services for their patients or members, they typically distribute educational materials that can include a focus on preventing teen pregnancy.

Which health care professionals should be involved?

A community can recruit from the full range of health care professions, though two types of physicians will likely come to mind first:

- obstetricians-gynecologists, who provide health care to adult and adolescent women; and
- pediatricians, who provide care for children and adolescents.

These two groups of doctors have long been involved in the issue of teen pregnancy prevention. A third group, family physicians, are also often willing to participate in community activities, especially when the emphasis is on prevention and education within families.

Other health care professionals who have had training in health education, family planning, or caring for pregnant teens also may be interested in efforts to reduce adolescent pregnancy. They include:

- licensed, registered nurses, who have 2-4 years basic nursing education and provide

patient education in all health care settings;

- licensed, registered nurse practitioners, who have advanced education and provide a wide range of primary care services, including reproductive care;
- certified nurse-midwives, who have education in midwifery and nursing and offer reproductive health, pregnancy, childbirth, and newborn care; and
- physician's assistants, who are educated to provide medical care under the direction and supervision of physicians.

Where to find health care professionals

- To find physicians who might be interested in helping community efforts to prevent teen pregnancy, contact the local medical society or the local affiliate of the American College of Obstetricians and Gynecologists or the American Academy of Pediatrics (see the resources section for more information on these and other organizations).
- To find nurses, contact the local affiliate of the American Nurses Association, the American College of Nurse Midwives, or the Association of Women's Health, Obstetric, and Neonatal Nurses.
- Contact hospital departments of obstetrics and gynecology, pediatrics, nursing, and adolescent medicine. If there is a teaching hospital in the community, contact the residency programs in these specialties.
- Contact the local health department, women's health center, or community health center.
- Ask local foundations which health care professionals are known to be active on this issue.
- Speak directly with obstetrician-gynecologists, pediatricians, or other physicians to see whether they or someone they know would be interested in working on teen pregnancy prevention activities in the community.

Pregnancy prevention in the practice setting

Health care providers do a lot of one-on-one work to prevent teen pregnancy in their practices. In the course of regular check-ups, illness visits, and referrals, pediatricians, obstetrician-gynecologists, family physicians, nurse practitioners, certified nurse midwives, physician's assistants, and nurses can help parents and adolescents address questions of physical and sexual growth and development, abstinence, sexual activity, contraception, and protection against sexually transmitted infections. This assistance can occur in two main ways.

Helping parents talk to their children about sexuality issues

Almost all parents would like help in talking about sex with their children. Health care professionals can provide good, medically accurate information to parents and kids, and they can do so with a sense of authority. By offering information within the context of regular health services, they can make issues seem less threatening for both parents and children or teens. They can also encourage parents not only to explain the "facts of life" but also to communicate about relationships and values. A recent poster campaign suggested, for

example, that parents "teach their kids about sex, love, and what the difference is."

Regular visits also provide a good opportunity for parents to raise any issues or concerns with the provider. These conversations should occur when their children are young, before a crisis situation might develop, and should continue into adolescence.

Professional medical organizations have developed materials that an individual parent or adolescent can read or that can be distributed to parent or adolescent groups, such as:

- *Sex Education: A Bibliography of Educational Materials for Children, Adolescents, and Their Families*, a pamphlet distributed by the **American Academy of Pediatrics (AAP)**.
- *Teaching Your Children About Sexuality*, a booklet developed by the **American College of Obstetricians and Gynecologists (ACOG)**.
- pamphlets just for teens, also developed by **ACOG**.
- *Points for Parents*, fact sheets about growth and development

that will help parents understand the changes their child is going through, produced by the **American Medical Association (AMA)**.

Helping teen patients

Working with teens successfully in any health care setting involves creating an environment in which teens feel welcome and secure and in which they know their needs and interests are important to those providing the

services. Three elements are essential to this environment:

Teen-friendly offices. Health professionals who serve teens should design their offices in ways to make teens more comfortable, indicating to teens that the practice is interested in them and willing to discuss hard issues in a non-judgmental fashion. Some practices have a specific staff member designated to talk to teens and facilitate their care.

An example of materials developed to help parents talk with their children

This chart, adapted from the American College of Obstetricians and Gynecologists' booklet, *Teaching Your Children About Sexuality*, can help parents know what to talk about with their children and when to do it.

What Your Child Should Know

By age 5, children should:

- know correct terms for all sexual body parts
- understand the concept of gender: "boy" and "girl"
- know they have a right to say "no" to unwanted touch
- know where babies come from
- feel free to ask adults they trust about sexuality

By age 10, children should:

- understand the facts about reproduction in humans and animals
- know how male and female bodies grow and differ
- know that different sexual orientations exist
- understand basic facts about AIDS

By age 12, children should:

- understand that human sexuality is a normal part of life
- know that sexual feelings are normal
- know what changes to expect in their bodies, including menstruation and "wet dreams"
- understand that sex gives pleasure and is also the way to make a baby
- know about methods of birth control
- be aware of sexual abuse and other forms of sexual exploitation, and know how to respond to such dangers
- know how sexually transmissible diseases are transmitted, prevented, and treated

Reprinted with permission from *Teaching Your Children About Sexuality*, the American College of Obstetricians and Gynecologists (1996).

KEYS TO SUCCESS IN WORKING WITH TEEN PATIENTS

- **create a teen-friendly office**
- **ensure confidentiality**
- **provide teen-specific services**

A teen-friendly medical practice has a number of characteristics. It:

- schedules appointments quickly upon request;
- hires friendly, culturally-competent staff;
- has office hours that are convenient for teens;
- provides frequent follow-up visits;
- provides adequate time for the teen and health care provider to talk;
- provides confidential services, as appropriate;
- has a designated staff person whom teens can call if they have further questions;
- provides or refers for counseling services for such issues as violence, abuse, and sexual abuse;
- offers low-cost or free services; and
- welcomes teens' partners, as appropriate.

Some offices use a written, "teen friendly" reproductive health history questionnaire to start a conversation about sexual issues. This allows a teen to disclose information and ask questions about sexual issues as well as other issues that might be of

concern to her or him. For many teens, checking off or writing down questions and concerns is less embarrassing or threatening than doing so verbally. Seeing a sensitive subject on a questionnaire also tells the teen that the health care professional thinks this subject is important and normal.

Confidentiality: The issue of confidentiality for health care services to teens is complicated. Simply stated, there are some health care services that teens can get on their own. These vary from state to state but may include treatment for substance abuse, sexually transmitted infections, pregnancy, contraception, and other reproductive health services. Many teens say that they will not try to get needed health services if they think the health care provider will tell their parents what they are saying or doing. On the other hand, parents, who worry about their children, want to know what they're doing, particularly on an issue as important as sex—and, if their teenager is having a problem, want to help.

While health care providers have some legal obligations regarding confidentiality, most

FOR HELP IN ADDRESSING CONFIDENTIALITY ISSUES

See the policies and materials
developed by:

- the American College of Obstetricians and Gynecologists
- the American Academy of Pediatrics
- the American Academy of Family Physicians
- the Society for Adolescent Medicine

want to establish a relationship with teens that will encourage discussion of risky behavior or problems. At the same time, they want to establish a relationship with the parents that is helpful and supportive. As one physician recently described it:

"When I explain the teen's right to confidentiality, I emphasize to the mother that we're not trying to exclude her from her daughter's life or from concerns about her daughter's health. At the same time, I explain to both the mother and daughter that I feel it is important for the daughter to have a relationship with me on a confidential basis.... Something else I do...is offer the mothers the opportunity to speak with me confidentially. That not only allows the mother to feel more included in the process, but also allows me to get a lot of valuable information" (Hillard, 1997).

Teen-specific services. In some communities, hospitals, clinics, health departments, and

physicians' offices have developed health care services just for teens. These programs often use other teens to help with education and to make their peers more comfortable. Here are a few examples:

Valley Community Clinic, in North Hollywood, California, operates a Teen Clinic that provides low-cost or free reproductive health services to teenagers. It hires and trains teen staff members to create a supportive environment for other teens. The clinic serves an ethnically and racially mixed population of males and females, pregnant and parenting adolescents, and parents of adolescents from urban and suburban neighborhoods. It also provides services in schools and juvenile detention facilities.

The **Gateway Family Health Center**, in Nashua, New Hampshire, operates the Teen-to-Teen Clinic, a walk-in clinic for teens only, one afternoon and one evening each week in a rural/suburban area. In the waiting area for the teen clinic, which is separate from the main clinic's waiting area, refreshments and computer games are available. Adolescents have been trained as peer educators and are available to talk about abstinence, sexuality, and birth control, often in conjunction with the other staff.

As part of its comprehensive adolescent pregnancy prevention program, New York's

Children's Aid Society provides health and medical services on site once weekly with the cooperation of the Mount Sinai Adolescent Health Center. Each

adolescent in the Children's Aid Society program receives a complete physical exam, including a gynecologic exam for females, health education and counseling services, medical follow-up care, and urgent care services.

Involving health care professionals in community pregnancy prevention activities

Programs can help health care professionals assist a community's efforts to prevent teen pregnancy by asking them to expand their role beyond traditional caregiving. For example, programs can ask providers to make presentations to groups of adults or teens on the subjects of adolescent growth and development, sexuality, birth control, and other subjects. Schools, churches, or other community organizations can invite health care professionals to speak to groups of parents about teen sexuality in ways that will help parents examine the difficult issues regarding their own values and their children. They also can speak to teens as part of organized educational programs. The checklist on the next page contains suggestions for programs to help speakers prepare.

Programs can also ask providers to:

- advise community coalitions, school boards, and other groups that are developing and carrying out teen pregnancy initiatives to ensure that information is medically and scientifically sound,
- evaluate educational or media materials for community

WAYS HEALTH CARE PROFESSIONALS CAN PARTICIPATE IN COMMUNITY ACTIVITIES

- **make presentations**
- **advise community coalitions**
- **help develop and evaluate materials**
- **serve on boards and committees**
- **serve as spokespersons**

Checklist for health professional speakers

When asking a health care professional to make a presentation, programs can help by:

Describing the program's expectations for this presentation

1. What are the objectives?
2. What should this speaker accomplish?
3. Why has this speaker been invited?
4. Why is the event being held at this time? Is there a crisis?
5. Is the speaker being asked to speak as an individual, as a professional representative, or as a representative of a specific group? How will he or she be identified on the program?

Describing the anticipated audience

1. What is the approximate number in attendance?
2. What are their ages, interests, social status (married, single, one or both sexes)?
3. What are their educational and professional backgrounds?
4. What are the values of the audience (homogeneous, heterogeneous, conservative, radical)?
5. What does "sex education" or "family life education" mean to this audience?
6. Will there be media coverage—print press, radio, TV?

Explaining the meeting format

1. Will the presenter give a speech or be a part of a roundtable or panel discussion?
2. Will there be a question-and-answer period following the presentation?
3. What is the size and type of the room? (Audiences may be more comfortable asking intimate questions in a living room atmosphere than in a formal lecture hall.)
4. Are there other speakers? Who are they? What are their topics? What is likely to be their point of view? In what order are they speaking?
5. Is this a single talk or part of series?
6. If it is part of a series, how were the previous presentations received? Will the audience be hostile or receptive from the previous presentations? What subjects will follow this speaker?

Adapted from ACOG's Family Life Education: A Checklist for Getting Involved

programs, or advise groups as they develop their own materials to ensure that information is accurate and up-to-date:

- serve as board and committee members for community coalitions and help with fundraising; and
- carry the teen pregnancy prevention message to the community as a spokesperson.

This last role—spokesperson—can be particularly helpful in reaching health professional organizations, such as medical societies, state chapters of the American Academy of Pediatrics, state sections of the American College of Obstetricians and Gynecologists, or nursing organizations.

In some communities, health care professionals have developed

teen pregnancy prevention programs of their own. For example:

The ACOG Pennsylvania section has developed the **PROGRESS Program**—Pennsylvania Residents in Ob-Gyn Reaching out to Educate StudentS—which trains obstetrics-gynecology residents to educate high school students in ways to avoid unwanted sexual experiences, pregnancy, and sexually transmitted diseases. This ACOG section works with local school boards to arrange for residents to visit local high schools to present their program.

ACOG also has developed a comprehensive resource kit for health care professionals, *Adolescent Sexuality: A Presentation Resource Kit*, which contains slides, outlines for presentations, sample community and adolescent educational materials, and background articles.

Involving health care organizations and institutions in community pregnancy prevention activities

Health care organizations and institutions, such as hospitals, clinics, managed care and insurance companies, and health maintenance organizations, can also assist local efforts to

prevent teen pregnancy. For example, they can:

- offer individuals to serve as advisors and board or committee members;

- provide personnel and financial resources for projects and programs;
- coordinate needed adolescent health services as part of a comprehensive program; and
- organize a specific service or prevention program for their adolescent patient population.

CASE IN POINT

Medical West Associates

This Blue Cross and Blue Shield HMO organized an adolescent pregnancy program among five health centers in western Massachusetts. They created a multidisciplinary team that included providers, nurses, and reception staff from the departments of pediatrics, obstetrics and gynecology, nursing, and mental health. By gathering data on the numbers of teen pregnancies within the plan for the baseline year and examining the services that were currently offered, the team found that the health plan:

- often saw teens for illness visits but did not ask them about sexual activity;
 - rarely provided contraceptive counseling;
 - had no clear policy about timing well-adolescent visits;
 - had the receptionist give all adolescent pregnancy tests results by telephone and scheduled no follow-up visits; and
 - provided no routine postpartum discussion of birth control and did not track postpartum visits for teens.
- To fix these problems, the team made several changes. It:
- developed a pediatric department policy requiring that adolescents have annual checkups;
 - changed the adolescent medical record so that the following issues had to be tracked: sexual activity, risk screening, contraceptive counseling, and referrals for pelvic exams for females;
 - developed an adolescent reproductive health questionnaire for all teen exams;
 - created a policy to immediately refer for counseling any patient identified as high risk;
 - trained volunteer providers and nurses to be contraception counselors;
 - created an obstetric department policy to determine postpartum birth control choices at the 28th week of pregnancy and to provide birth control to the adolescent before her departure from the hospital;
 - provided all adolescents who requested pregnancy tests with appointments with a provider skilled in options and contraceptive counseling; and
 - began tracking and following up all canceled adolescent postpartum visits.

Conclusion

There are many different ways in which individuals and the community can use the knowledge, skills, and resources of health care professionals, institutions,

and organizations. Rather than being unapproachable, health care professionals are ready and willing to help—but they might need an invitation to get involved.

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Hillard, P. (1997). Preserving confidentiality in adolescent gynecology. *Contemporary Adolescent Gynecology*, 2(3), 4-5.

Programs mentioned in this chapter

Children's Aid Society

350 E. 88th St.
New York, NY 10128
(212) 949-4379

Medical West Associates

Blue Cross and Blue Shield
444 Montgomery St.
Chicopee, MA 01020
(413) 594-3111

Teen-to-Teen Clinic

Gateway Family Health Center,
Reproductive Health
268 Main St.
Nashua, NH 03060
(603) 883-1626

Valley Community Clinic

5648 Vineland Ave.
North Hollywood, CA 91601
(818) 763-1718



Other useful resources

Many health professional organizations can provide speakers and materials for teen pregnancy prevention programs. Most national organizations have state or local chapters. By contacting the parent organization, programs can locate local resources for their projects.

The American College of Obstetricians and Gynecologists
Department of Adolescent Health
Care

P.O. Box 96920
Washington, DC 20090-6920
(202) 638-5577
www.acog.org
Adolhlth@acog.org

The American Academy of Pediatrics

P.O. Box 927
Elk Grove Village, IL 60007-1098
(847) 228-5005
Fax: (847) 228-5097
www.aap.org

The American Academy of Family Physicians

8880 Ward Parkway
Kansas City, MO 64114
(816) 333-9700
www.aafp.org
fp@aafp.org

The American Medical Association

Department of Adolescent Health
515 N. State St.
Chicago, IL 60611
(312) 464-5000
www.ama.org

The American Nurses Association

600 Maryland Ave., SW
Suite 100 West
Washington, DC 20024-2571
(800) 274-4ANA
(202) 554-4444
www.ana.org

The American College of Nurse-Midwives

818 Connecticut Ave., NW, Suite 900
Washington, DC 20006
(202) 728-9860
Fax: (202) 728-9897
www.acnm.org
info@acnm.org

The National Association of Nurse Practitioners in Reproductive Health

503 Capitol Court, Suite 300
Washington, DC 20002
(202) 543-9693
www.nanprh.org

The National Medical Association

1012 12th St., NW
Washington, DC 20004
(202) 347-1895
www.nmanet.org

The Society for Adolescent Medicine

1916 NW Copper Oaks Circle
Blue Springs, MO 64015
(816) 224-8009
www3.uche.edu/~sam

The Association of Reproductive Health Professionals

2401 Pennsylvania Ave., NW,
Suite 350
Washington, DC 20037-1718
(202) 466-3825
Fax: (202) 466-3826
www.arhp.org

**The American Hospital
Association**

One North Franklin
Chicago, IL 60606
(312) 422-3000
Fax: (312) 422-4796
www.aha.org

American Hospital Association members include individual hospitals, other health care organizations, and individuals in the health care field.

**The American Medical Women's
Association**

801 N. Fairfax St., Suite 400
Alexandria, VA 22314
(703) 838-0500
Fax: (703) 549-3864
www.amwa-doc.org
info@amwa-doc.org

The American Medical Women's Association is an organization of over 10,000 women physicians and medical students and other members of the medical profession and the public who support women's health issues.

**The Association of Women's
Health, Obstetric, and Neonatal
Nurses**

2000 L St., NW, Suite 740
Washington, DC 20036
(800) 673-8499
Fax: (202) 728-0575
www.awhonn.org

**The American Association of
Health Plans**

1129 20th St., NW, Suite 600
Washington, DC 20036-3421
(202) 778-3200
www.aahp.org

The American Association of Health Plans represents more than 1,000 health maintenance organizations, preferred provider organizations, and other managed care entities.

Contributors—Volume 2

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Janet Chapin, R.N., M.P.H., is the Director of the Division of Women's Health Issues at the American College of Obstetricians and Gynecologists (ACOG). Before coming to ACOG in 1986, she initiated and operated a community-based high blood pressure control program at a rural community health center and managed the primary care program of the West Virginia Department of Health. At ACOG, she is responsible for work on adolescent health care, access to health care for underserved women, and other women's health issues.

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Joy G. Dryfoos is an independent researcher from Hastings-on-Hudson, New York. Her work on comprehensive programs for high-risk adolescents has been supported by the Carnegie Corporation since 1985. Dryfoos is the author of many articles and books, including *Safe Passage: Making it Through Adolescence in A Risky Society* (Oxford, 1998). Her current project focuses on full service community schools.

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Lisa Hoeschele has been working with the ZAP (Zero Adolescent

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Tom Klaus

Tom Klaus is President of Legacy Resource Group in Carlisle, Iowa. For more than 25 years, he has been involved in professional youth work as a consultant, speaker, minister, program developer, and administrator. Klaus is a member of the Board of Directors for the National Organization on Adolescent Pregnancy, Parenting, and Prevention and is one of the creators of the nationally-recognized IT TAKES TWO adolescent pregnancy prevention programs.

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Karen Troccoli, M.P.H., has worked on maternal and child health issues for more than a decade. Currently a project director at the American College of

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Tamara Kreinin, M.H.S.A., has worked extensively in health care and human services for over twenty years. Kreinin holds a master's degree in Health Services Administration from the University of Michigan. She is currently the Director of State and Local Affairs at the National Campaign to Prevent Teen Pregnancy. Kreinin started and served as Executive Director of The New Orleans Council For Young Children. She is a spokesperson and resource for the press on issues of importance to children and families. Kreinin lectures and conducts workshops frequently on a variety of topics.

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Susan M. Kuhn is a Washington-based consultant who helps nonprofit organizations launch new activities and products. A 20-year veteran of the nonprofit and philanthropy fields, she has started

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Anne Brown Rodgers has been a writer and editor for more than twenty years, working on publications for technical as well as lay audiences. Her primary focus is on health-related issues, and she has covered a broad range of topics, including women's health, prenatal care, HIV/AIDS, cancer, rural health care delivery, nutrition, and managed care. Since 1992, she has run her own writing and editorial services business.

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John Hutchins is Senior Editor for the National Campaign to Prevent Teen Pregnancy. He has worked for the past twelve years as a writer, editor, policy analyst, and public relations professional for health care associations and public policy organizations in Washington, DC. Hutchins is the author of *Coming Together for Children and Families: How Cabinet-Level Collaboration is Changing State Policymaking* (Family Impact Seminar, 1998) and co-editor of *Charting a Course for the Future of Women's and Perinatal Health* (Johns Hopkins University, 1999).

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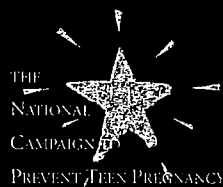
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