

AbstinenceNews

NEBRASKA ABSTINENCE EDUCATION PROGRAM

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Teen Pregnancy Prevention – What Works?

Youth may benefit the most from prevention programs with multi-faceted approaches.¹ This is especially appropriate when considering teen pregnancy prevention initiatives. Prevention programs that incorporate a **Positive Youth Development** approach offers multi-faceted prevention while also providing a complementary opportunity and broader context to:



- ❖ Strengthen ties to families and communities,
- ❖ Bolster self-esteem,
- ❖ Smooth transition to adulthood,
- ❖ Ameliorate factors that lead to risk-taking behaviors.²

What is Positive Youth Development?

Positive Youth Development is a relatively modern movement. It is a way to think about youth and how we interact with them. **Positive Youth Development** began in the late 1980s as a result of social science research on the limitations and/or failures of prevention and intervention

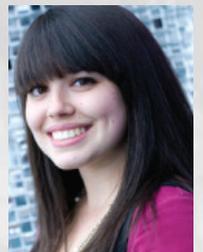


programming for youth. Research led to the discovery of certain “factors” that are determinative to a youth’s development, sense of well-being and ability to thrive. As a result, focus has turned to supporting development rather than “fixing” problems.

Positive Youth Development is:

- ❖ **Holistic** – Addresses the physical, intellectual, emotional, social and spiritual.
- ❖ **Preventive** – Is proactive rather than reactive.
- ❖ **Positive** – The focus is on the development of assets, competencies and the well-being of youth.
- ❖ **Universal** – Can be applied to all cultures across all populations.

Positive Youth Development integrates the domains or “spheres of influence” where teens live their daily lives. In this way, a pregnancy prevention program that takes a **Positive Youth Development** approach would impact families, schools, communities, peer groups and faith or church communities.



For more information on how to incorporate **Positive Youth Development** into your teen pregnancy prevention efforts, contact Linda Henningsen at: Linda.henningsen@nebraska.gov or (402) 471-0538.

Be sure to read the complementary article on **risk and protective factors** in this edition of *Abstinence News*.

^{1,2} Desiderio, Gina, *The Impact of Positive Youth Development Programs on Teen Pregnancy Prevention*, Healthy Teen Network 2009

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Risk and Protective Factors – Know What They Are.

Risk and Protective Factors are integral components within a Positive Youth Development philosophy. Knowledge and understanding of Risk and Protective Factors within your work environment and community is foundational to applying a Positive Youth Development philosophy. Risk and Protective Factors apply to and impact the “spheres of influence” in a teen’s life. Knowing what they are helps to define and target your prevention efforts.

Risk Factor –

– any circumstance that **decreases** a youth’s likelihood of avoiding behaviors that compromise or negate immediate or future health and well-being. Risk factors function in a cumulative fashion: the greater number of factors, the greater chance youth will engage in delinquent or other risk **behaviors**.¹

Examples of risk behavior:

Wearing/not wearing a seat belt (immediate), tobacco use (future).



Protective Factor –

– any circumstance that **increases** a youth’s likelihood of engaging in behaviors that promote immediate or future health and well-being. Protective factors also buffer the harmful effect of risks. Example of a protective factor: Young person feels safe at home, school and in the neighborhood.²

The table on the next page identifies risk factors in the community domain and the impact on teen outcomes and behaviors. The protective factors for this sphere of influence is also listed.

For the risk and protective factors for the remaining spheres of influence or for additional information on this topic, contact Linda Henningsen at: Linda.henningsen@nebraska.gov or (402) 471-0538.



PROTECTIVE FACTORS

Teen Outcomes and Behaviors

RISK FACTORS	Substance Abuse	Delinquency	Teen Pregnancy	School Drop-Out	Violence
Community Domain					
Availability of Drugs	●				
Availability of Firearms		●			●
Community Laws and Norms Favorable Toward Drug Use, Firearms, and Crime	●	●			●
Media Portrayals of Violence					●
Transitions and Mobility	●	●		●	
Low Neighborhood Attachment and Community Disorganization	●	●			●
Extreme Economic Deprivation	●	●	●	●	●

Protective Factors in the Community Domain

- Economically sustainable and stable
- Safe and health-promoting environment
- Positive social norms
- High community expectations
- Neighborhood/social cohesion

For the risk and protective factors for the remaining spheres of influence or for additional information on this topic, contact Linda Henningsen at: Linda.henningsen@nebraska.gov or (402) 471-0538.

^{1,4} From www.findyouthinfo.gov

² Based on original research by Richard F. Catalano and J. David Hawkins, University of Washington



May, 2009 AMCHP Pulse E-Newsletter

Nebraska's Systems for Adolescents



Nebraska Comprehensive Systems for Adolescents: The Next Link in the Life Course Approach

By Linda Henningsen

*Adolescent Health Coordinator, Nebraska Department of
Health and Human Services*

For those of us in and connected to public health, providing for and reaching children and adolescents (and those who care for them) requires unique approaches. Through the development, implementation and impact of the national Early Childhood Comprehensive Systems (ECCS) initiative, Nebraska's ECCS program, "Together for Kids and Families" (TFKF), provided the inspiration and supplied the innovative and unique model needed for effectively addressing the public health opportunities and challenges associated with adolescents. Expanding the comprehensive systems model from the early childhood population to the adolescent population was the logical next step in Nebraska's life course approach to public health programs and services.



Supported by the data mini grant funds awarded by AMCHP and using Nebraska's ECCS model, the Adolescent Health Program within the Nebraska Department of Health and Human Services, Lifespan Health Services Unit launched the "Comprehensive Systems for Adolescents" (CSA) initiative. In March 2009 a stakeholders group was convened for the initiative kick-off meeting.

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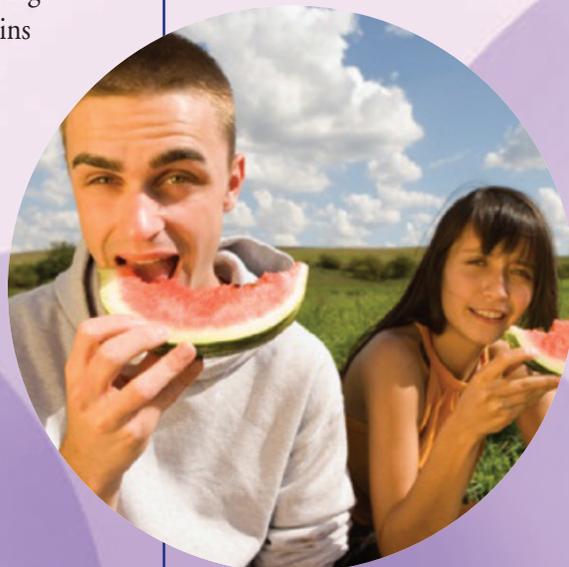
The gathering was facilitated by Kristin Teipel from Minnesota's Konopka Institute with 25 people representing government agencies, family organizations and other entities from across the state in attendance. Work began on identifying a profile of optimal adolescent development and well-being as well as identifying components or "domains" that would ideally represent a "comprehensive" system for adolescents. These domains were based on the profile created and the national ECCS model. We were honored to have Sharron Corle, Associate Director for Adolescent Health at AMCHP here to observe and help with the day.



Ongoing and continued refinement of the domains is currently in progress, and a "S.W.A.T." team is being organized for the task of completing a simple analysis of each domain using the "SWOT" (Strength, Weaknesses, Opportunities and Threats) format. The products of the analysis will provide the information needed to develop logic models that drive our future work. While the "launch" was successful, additional components of the initiative now need development. Members of the stakeholders group are being recruited for a "ground crew" that will be charged with developing the CSA initiative's organizational fundamentals including mission, vision, core functions and guiding principles. Using the products of the adolescent profile and domains created and identified during the stakeholders meeting, goals/outcomes will be identified as

well. These outcomes will lay the ground work for the next steps of the CSA initiative which includes identifying indicators and data gathering and management.

Nebraska's CSA initiative is a work in progress. The ongoing recruitment of state-level and local programs, youth representatives and other organizations as initiative partners as well as further refinement of the initiative components demonstrates the commitment, dedication and passion of all those contributing to the health, development and well-being of Nebraska children and adolescents. We would like to thank AMCHP for providing the support and to Kristin Teipel of the Konopka Institute for the guidance and expertise in the successful launch of Nebraska's "Comprehensive Systems for Adolescents" initiative.



Helpful Resources



 From: **Nutrition and Action for Health E-News #5, Nebraska DHHS**

2008 Behavioral Risk Factor Surveillance System (BRFSS) Data and Online Tables Now Available. The BRFSS is the largest telephone-based surveillance system in the world and provides flexible, timely, and ongoing data collection that allows for state-to-state and state-to-nation comparisons. State-specific data including racial-and-ethnic specific data provide a sound basis for developing and evaluating public health programs.



For more information, visit:
<http://apps.nccd.cdc.gov/brfss/index.asp> and
www.cdc.gov/brfss/technical_infodata/surveydata/2008.htm

 From: **Healthy Teen Network NEW** Issue in Brief: Youth Development & Teen Pregnancy, STI, and HIV Prevention

In promoting healthy adolescent sexual development, effective teen pregnancy prevention and/or support for pregnant and parenting teens, it is critical that our focus expand beyond basic reproductive health issues. This report highlights the role of



Youth Development in the prevention of teen pregnancy, STIs, and HIV. For the issue brief in .pdf format go to:
<http://healthyteennetwork.org>

*Abstinence
Save Sex
Until Marriage*



From: **Child Trends**

New Study Examines Trends in Teen Reproductive Health
A new Child Trends study finds that changes in family and relationship characteristics among American teens have been associated with positive trends in reproductive health since the early 1990s. Despite these positive trends, however, the recent increase in the U.S. teen birth rate shows the continued importance of improving reproductive health behaviors among teens. The study, "Trends in Sexual Experience, Contraceptive Use, and Teenage Childbearing: 1992-2002," is published in the May issue of the Journal of Adolescent Health.

— and —

Tools for Improving Outcomes for Children and Youth go to <http://www.childtrends.org> and click on "What Works" to find Links to life-course interventions, promising programs and fact sheets



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