

***Bridging the Gaps: Eliminating Disparities  
in Teen Pregnancy and Sexual Health***

***June 4-6, 2014***

***Using Health Education Theory to Guide  
Practice: Eliminating Disparities in Teen  
Pregnancy***

***Jennie Blakney, M.Ed.***

***Annette LaBarbera***

***Amy Smuro***

**Funding for this presentation was made possible under contract #TP1AH000077-03 from the U.S Department of Health, Office of the Secretary for Health, Office of Adolescent Health.**

***The views expressed in written training materials, publications, or presentations by speakers and moderators do not necessarily reflect the official policies of the Department of Health and Human Services; nor does mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government.***

# Goals and Objectives

- By the end of this presentation, participants will be able to understand the connection between **theory and practice in teen pregnancy prevention**.
- By the end of this presentation, participants will be able to describe **at least 3 health education theories** that guide evidence-based teen pregnancy prevention programs.
- By the end of this presentation, participants will be able to explain how **using health education theory** to guide teen pregnancy prevention planning, implementation and sustainability efforts **has an impact on eliminating disparities**.

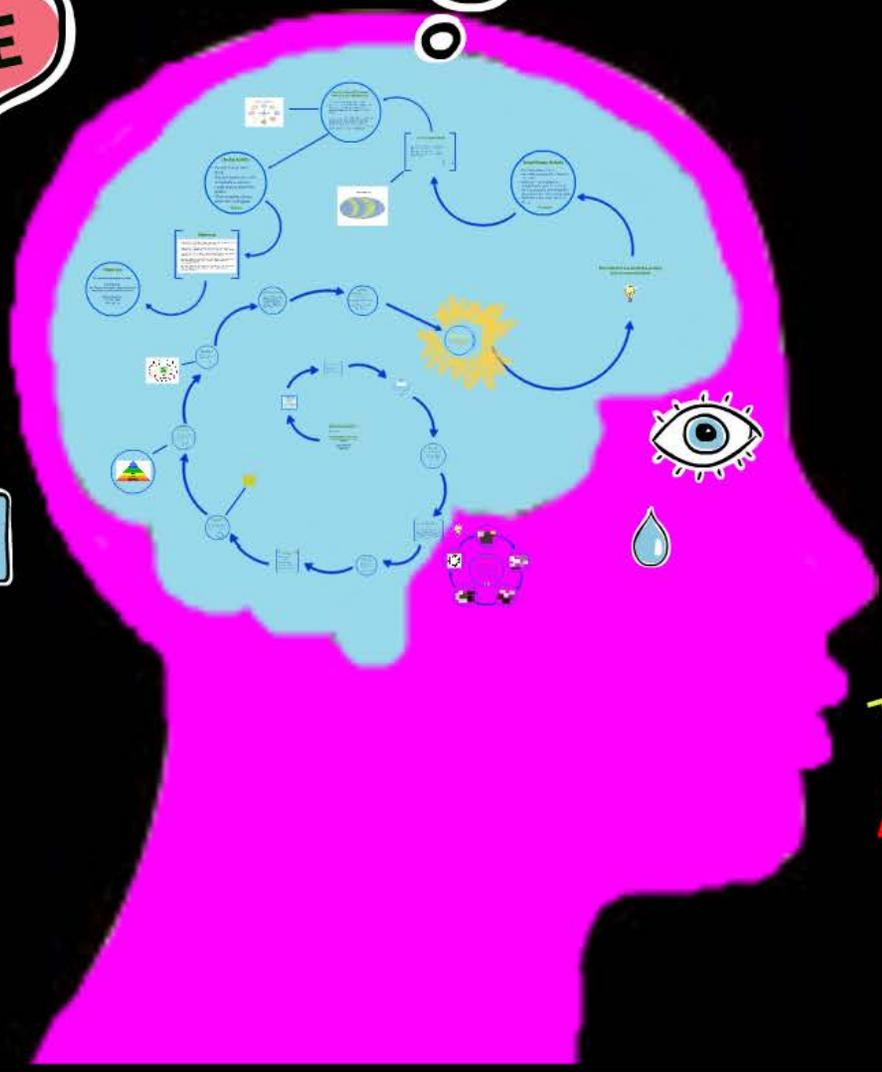
Teen Pregnancy Prevention

Adolescent Development

Sexual Health



Social Media



Thoughts

Solutions

Ideas

Problems

Feelings

## Who We Are



Central Jersey Family Health Consortium is a private non-profit licensed by the State of NJ Department of Health. Our mission is to improve the health of women of childbearing age, infants, and children in the region through the collaborative efforts of member hospitals, providers, and consumers.

## **Ground Rules**

Listen and participate actively

Be aware of your body language and  
non-verbal messages

Share your experience and expertise

Use "I" statements

# What are Disparities?

Webster's dictionary: The quality or state of being different.

Oxford dictionary: A great difference.

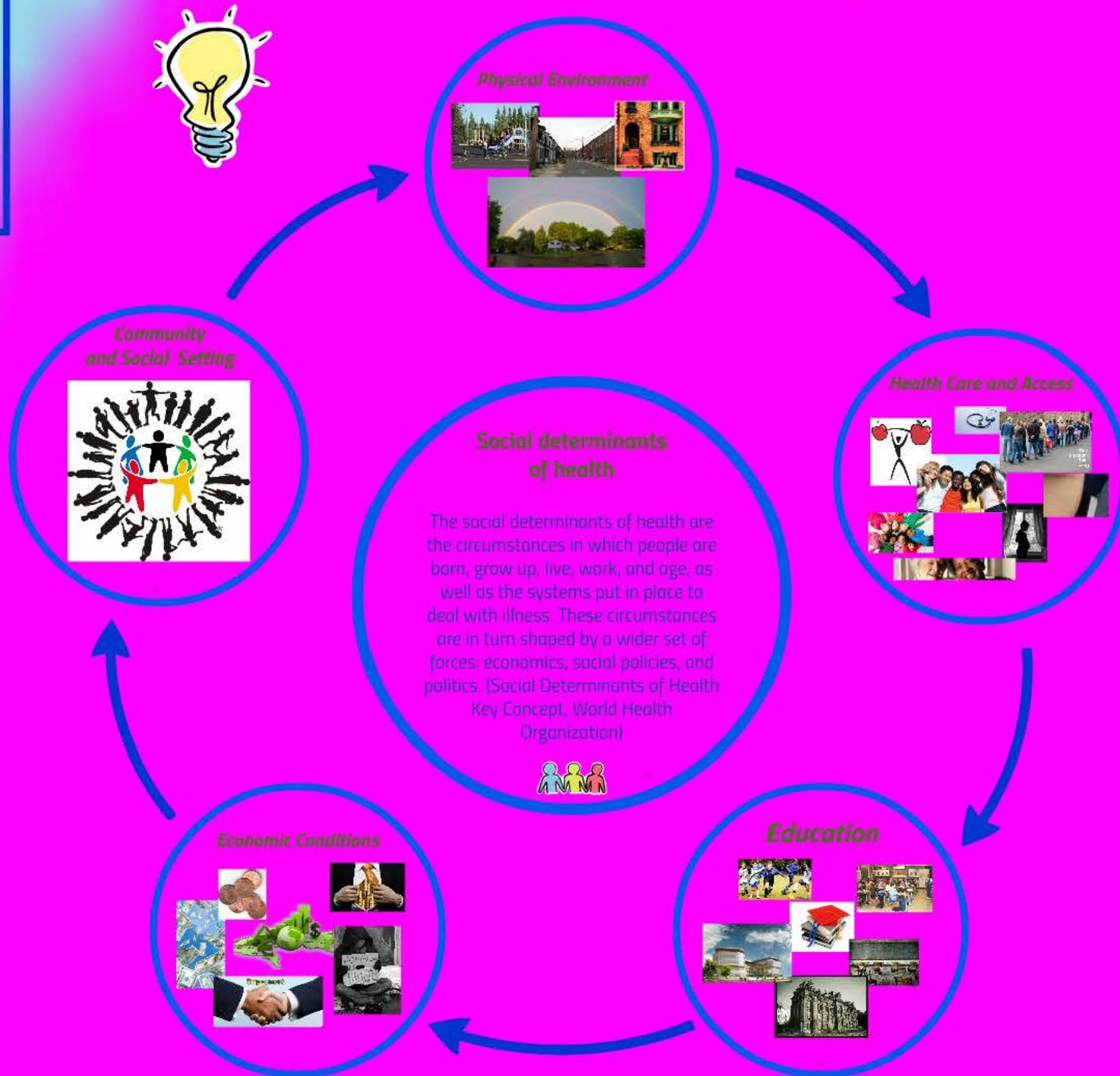
Healthy People 2010: "Although the term "disparities" often is interpreted to mean racial or ethnic disparities, many dimensions of disparity exist in the United States, particularly in health. If a health outcome is seen in a greater or lesser extent between populations, there is disparity. **Race or ethnicity, sex, sexual identity, age, disability, socioeconomic status, and geographic location all contribute to an individual's ability to achieve good health.** It is important to recognize the impact that **social determinants** have on health outcomes of specific populations. Healthy People 2020 strives to improve the health of all groups."

## What are Disparities?

A difference in the quality or state of being different.

A difference.

Although the term "disparities" often is used to refer to racial or ethnic disparities, many dimensions of health disparities exist in the United States, particularly in health care. Health disparities can occur to a greater or lesser extent between populations, communities, or individuals based on ethnicity, sex, sexual identity, age, socioeconomic status, and geographic location all of which affect an individual's ability to achieve good health. It is the impact that **social determinants** have on health that is the focus of Healthy People 2020. Healthy People 2020 strives to "eliminate health disparities among all groups."



## Social determinants of health

The social determinants of health are the circumstances in which people are born, grow up, live, work, and age, as well as the systems put in place to deal with illness. These circumstances are in turn shaped by a wider set of forces: economics, social policies, and politics. (Social Determinants of Health Key Concept, World Health Organization)



# *Physical Environment*



# Health Care and Access



# *Education*



# *Economic Conditions*



Employment

# *Community and Social Setting*



## **Why Use Theory?**

- identify targets for behavior change
- identify methods for accomplishing behavior change
- identify measurable outcomes inform evaluation
- strengthen planning, implementing and sustaining programs

# **Health Education Theories We Will Explore Today...**

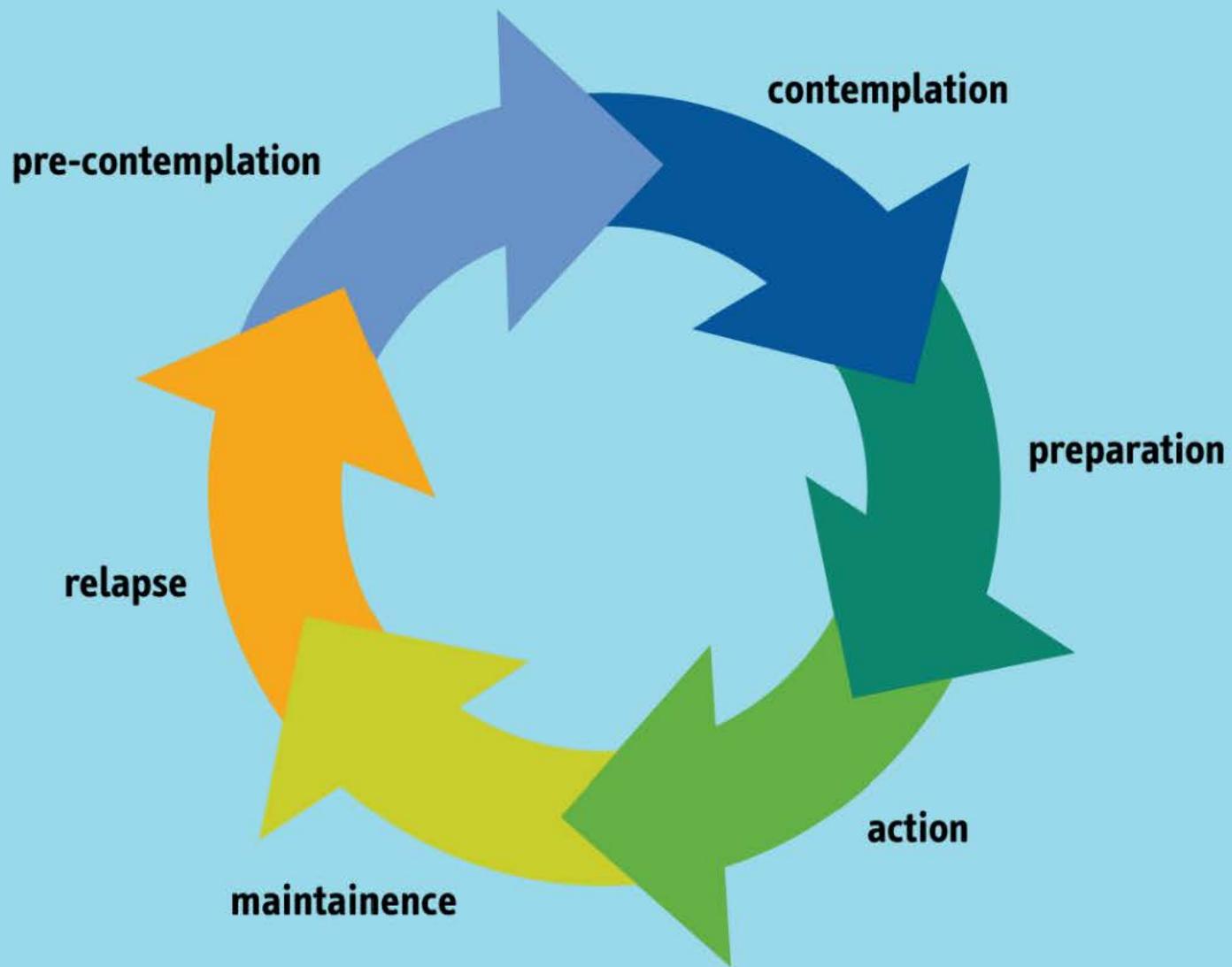
- **Transtheoretical Model**
- **Social Ecological Model**
- **Maslow's Hierarchy of Needs**
- **Tuckman's Stages of Group Development**
- **and to consider: Community-Based Participatory Research Approaches**

# Transtheoretical Model

Theory of behavior change developed by James O Prochaska, that assesses an individual's readiness to act on a new healthier behavior and provides strategies to guide the individual through stages including preparation, action and maintenance.

## Theory in Practice

The TOP Approach considers youth developmental needs, as well as theory. TOP Strategies include trust-building activities, service learning, and event planning to create social cohesion. All this is completed prior to introduction of sensitive subjects including sexuality.



**Transtheoretical Model of Change**  
Prochaska & DiClemente

## **Theory in Practice**

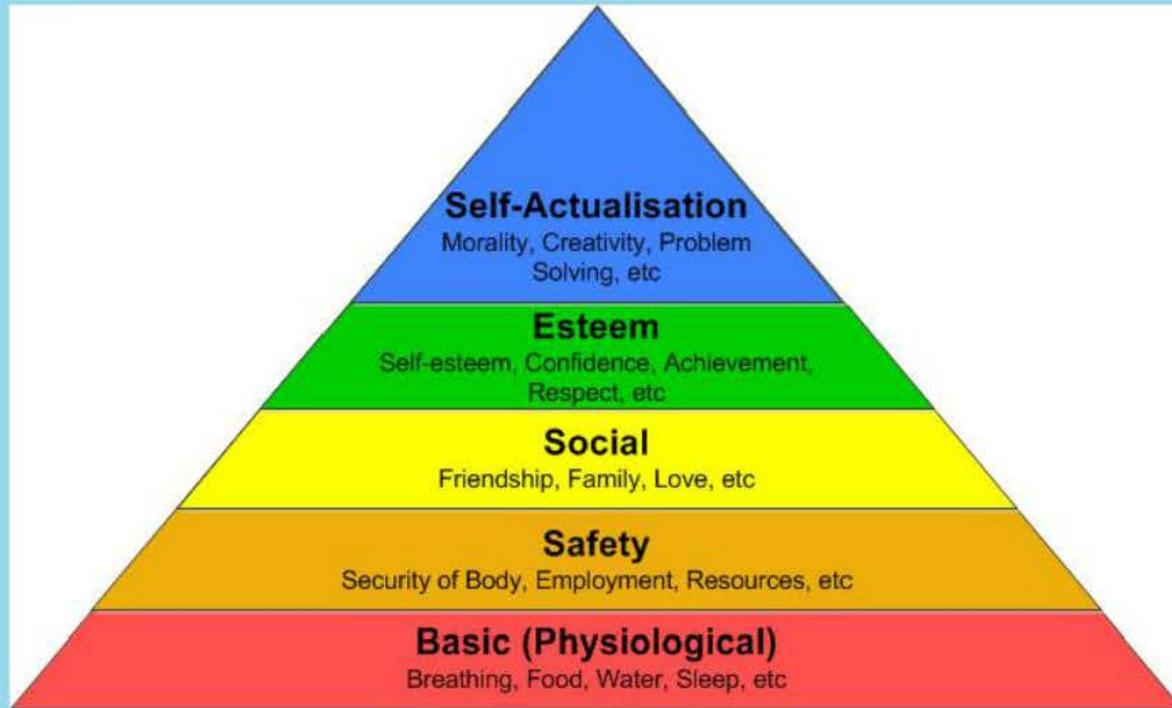
The TOP Approach considers youth developmental needs, as well as theory. TOP Strategies include trust-building activities, service learning, and event planning to create social cohesion. All this is completed prior to introduction of sensitive subjects including sexuality.

# Maslow's Hierarchy of Needs

Theory of human behavior that suggests five interdependent levels of basic human needs/ motivators; each level must be satisfied in a strict sequence starting with the most basic needs and progressing to reaching one's full potential.

## Theory in Practice

Sex ed doesn't happen in a bubble. Our teens deal with a range of social issues and injustices in their lives. This can range from the suicide of a fellow teen to coming out to their peers. Curricula work best when they are flexible and adaptable.



## **Theory in Practice**

Sex ed doesn't happen in a bubble. Our teens deal with a range of social issues and injustices in their lives. This can range from the suicide of a fellow teen to coming out to their peers. Curricula work best when they are flexible and adaptable.

# Tuckman's Stages of Group Development

Theory of group development which outlines phases necessary for acclimation, growth, planning, problem solving and delivering results.

## Theory in Practice

With TOP, we have found that it's good to always have a plan, even though it will inevitably change. There is an important balance between planning and flexibility, especially when youth are not always self-selecting to be involved in your programming.



## **Theory in Practice**

With TOP, we have found that it's good to always have a plan, even though it will inevitably change. There is an important balance between planning and flexibility, especially when youth are not always self-selecting to be involved in your programming.

## What We've Learned

- Sex ed doesn't happen in a bubble
- Acknowledge differences/disparities
- Flexibility can come in a variety of areas, including **what lessons are taught, what approaches are used, and what elements are present in your programming** - don't teach OVER the culture, recognize it.

# Outcomes

## **Decreased Teen Births:**

- 4.6% reduction in Asbury Park NJ
- 3.5% reduction in Pinelands Region
- 2.7% reduction in Keansburg
- 1.1% reduction in Lakewood

## **Decreased Disparity in Teen Births for African American Teens:**

- 10.1% reduction in Asbury
- 3.5% reduction in Keansburg

## **Decreased Disparity in Teen Births for Hispanic Teens:**

- 5% reduction in Neptune
- 4.8% reduction in Pinelands Region
- 3.5% reduction in Keansburg
- 1.2% reduction in Asbury

This data was obtained via NJ Electronic Birth Certificate System for births occurring in 2012

# **Group Brainstorm**

**What disparities do you see  
in your own work?**

**Now that we have our brains working  
let's do some activities!**



## ***Small Group Activity***

- Break into groups of 4-6
- You will be provided with a Theory to work with
- Pick one of the disparities we identified in the Brainstorm activity
- Work as a group to identify how the theory can help eliminate the disparity
- When time is up, we will share and discuss

**15 minutes**

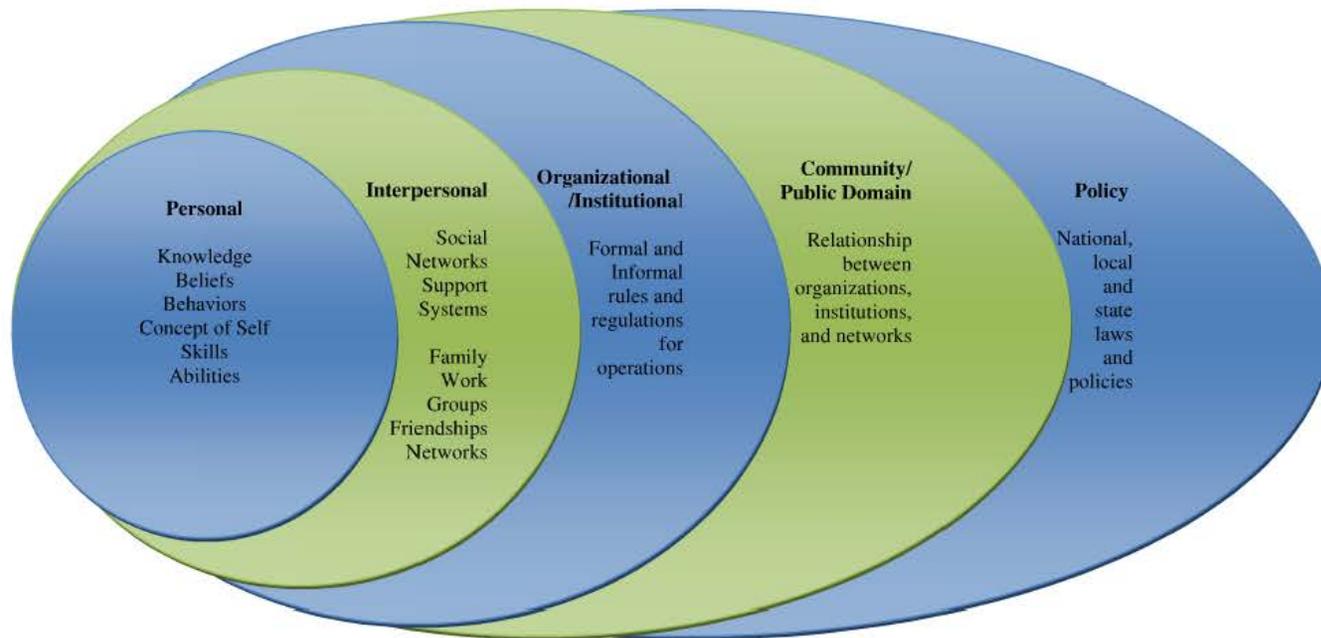
# Social Ecological Model

Learning as a cognitive process that takes place in a social context and can occur purely through observation or direct instruction, even in the absence of direct reinforcement.

## Theory in Practice

Each of our sites has its own culture and its students their own ways of being. Adapting within your limits can make or break a program. TOP has these elements woven into the curriculum.

## Social Ecological Model



# Theory in Practice

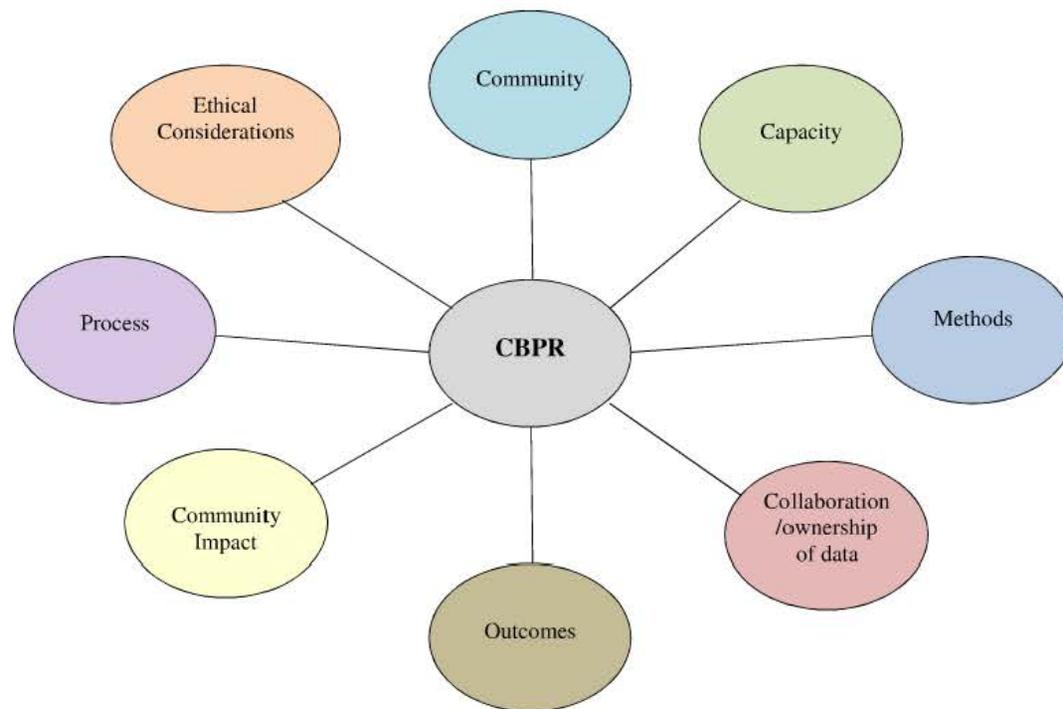
Each of our sites has its own culture and its students their own ways of being. Adapting within your limits can make or break a program. TOP has these elements woven into the curriculum.

## **Community-Based Participatory Action Research and Approaches**

As a research method, participatory action research is a technique that involves those being researched in the research process, with the desired outcome of creating some form of social change.

In the case of youth programs, this model might be used to consider how youth can inform what educational approaches work best through research, as well as how curriculum can be tailored based on their experiences and knowledge.

## Community Based Participatory Research



## Closing Activity

- Go back to your small group
- Use your handout to work individually selecting a model and completing the activity
- When complete, discuss within the small group

**15 min**

# References

Arches, J. (2013). "Social Action, Service Learning, and Youth Development." *Journal of Community Engagement and Higher Education*, 5(1).

Cassidy, K. (2007). "Tuckman Revisited: Proposing a New Model of Group Development for Practitioners." *Journal of Experiential Education*, 29(3), 413-417.

McKee, N. (2008). "Sex Education in a Fractured World: Towards a Social-Ecological Approach." *The Brown Journal of World Affairs*, XIV(2), 216-225.

Naar-King, S., Wright, K., Parsons, J. T., Frey, M., Templin, T., & S. Ondersma. (2006). "Transtheoretical Model and Condom Use in HIV-Positive Youth." *Health Psychology*, 25(5), 648-652.

Naar-King, S., Wright, K., Parsons, J. T., Frey, M., Templin, T., & S. Ondersma. (2006). "Transtheoretical Model and Substance Use in HIV-Positive Youth." *AIDS Care*, 18(7), 839-845.

# Thank you

**For more information please contact:**

**Jennie Blakney  
Teen Pregnancy Prevention Program Manager  
Central Jersey Family Health Consortium**

**[jblakney@cjfhc.org](mailto:jblakney@cjfhc.org)  
732-363-5400  
[www.cjfhc.org](http://www.cjfhc.org)**