OAH/CDC Teenage Pregnancy Prevention: Integrating Services, Programs, and Strategies Through Community Wide Initiatives

Teens’ perceptions of pregnancy, sex, and contraceptives

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◆ Goals & Components of the Communitywide Initiative to Prevent Teen Pregnancy

◆ Summary of results from surveys/focus groups with teens by grantees in four states
   - Georgia, North Carolina, South Carolina, Texas

◆ Highlights of how grantees are responding to survey/focus group information
   - Some of these actions are in response to data gathered from other community members
Program Goals

Reduce rates of pregnancies and births to youth in the target community

Increase youth access to evidence-based and/or evidence-informed programs

Increase youth access to community-based clinical services
Community Wide Initiative Key Components

- **Community is mobilized**, TPP initiative sustained
- Youth are able to access and use youth-friendly, culturally competent clinical services
- Stakeholders are informed about, supportive of TPP efforts
- Diverse communities, priority populations are effectively reached
- Evidenced-based programs educate, motivate youth
Program Model

5 National Organizations

Provide training and technical assistance to funded organizations

8 State & Community-based Organizations, 1 Title X

Plan, lead, implement & evaluate community wide initiative.

15+ Local Organizations

Plan, implement programs and practices, and evaluate
Aim
To inform planning, implementation, and evaluation of communitywide initiatives

What
Assessment of
• knowledge, attitudes, and behaviors related to teen pregnancy, contraception, comprehensive sex education
• barriers to clinical services
• parent-teen communication
• teen’s experiences with social determinants related to teen pregnancy

Who
Teens, parents, community leaders, faith communities, clinical partners, businesses
<table>
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<tr>
<th>Grantee</th>
<th>Method</th>
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<th>Demographics</th>
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| Georgia       | Door-to-door survey, Richmond County        | 426 | Ages 15-19 years  
45% male, 55% female  
81% African American, 12% White, 2% Hispanic  
65% in school  
11% alternative education |
| South Carolina| Door-to-door survey (administered by youth) | 797 | Horry County  
Ages 15-19 years  
60% male, 40% female  
50% White, 41% Black, 14% Hispanic |
|               |                                             |     | Spartanburg  
Ages 15-19 years  
55% male, 45% female  
15% White, 82% Black, 5% Hispanic |
| North Carolina| 7 focus groups, Gaston County              | 52  | Ages 13-19 years  
42% male, 58% female  
44% African American, 25% Hispanic, 19% Caucasian |
| Texas         | 8 focus groups, South Bexar County          | 69  | Grades 9-12  
51% male, 49% female  
Race, ethnicity not collected (target community 90% Hispanic) |
Across the communities:

- Teen pregnancy is a serious problem
- Becoming a teen parent would disrupt immediate and long-term life goals
- It is important to delay sex – post-high school, until marriage, etc.
- Pregnancy should not happen until done with school, have job
- Contraception should be used with every sexual intercourse to avoid pregnancy
Actual & Perceived Norms to Change

Across the communities:

- Peers do not use contraception every time they have sex (actual and perceived)
- Clinical services are not youth-friendly – confidentiality, parental consent, judgment
- Double standards for sexually active males vs. females
- Pressure from boys not to use condoms
- Condoms, birth control not worth the trouble
Many teens had not heard of birth control methods besides condoms & pill

Misperceptions about LARCs, concerns about side effects of various methods

Need to know where youth-friendly services (besides Planned Parenthood) can be found, especially concerned about
- lack of confidentiality
- parental consent/notification
- embarrassment, being judged
- transportation

Would use Internet to find services
What actions are grantees taking?
Supporting positive norms
Addressing actual & perceived norms

Georgia

Social marketing campaign
  Community needs assessment surveys to inform
  Parent-teen communication important element

Strengthen clinic, pharmacy partnerships with youth-serving organizations (YSO)
South Carolina
Focus groups on fatalism around contraception
  “It matters if you use birth control so a pregnancy is prevented”: 50%
Social norm-changing activities: focus on African American, Latino teens

“Not Right Now: Put pregnancy on pause” campaign
Packaging messages for Teens, parents, decision-makers
Communication points
  Most teens do NOT want to get pregnant.
  Many teens think waiting until marriage to have sex is the RIGHT choice.
  The time to make decisions that impact your future is NOW.
North Carolina

Recommendations for clinical partners
- Youth concerns about confidentiality and privacy
- Contraceptive counseling, including LARC information
- Inform males about all contraceptives

Tracking of reproductive health services
Materials to programs to strengthen contraceptive curricula
Educating stakeholders
Addressing Actual & perceived norms to increase clinic access, improve contraception

Texas
Focus groups on barriers to clinic access
Meet & greet with clinical partners and school personnel

Juvenile Justice
Focus groups with youth on parole/in detention: clinic access, social norms around teen pregnancy & sex education in justice settings
Exploring with judge, youth and parents reproductive health visit as condition of parole

Transportation barrier to clinic access
Mapping bus routes near clinics
Possibility of transportation partner
Limitations
Different approaches, questions asked in each state
Demographics not collected the same way or in all states

Strengths
Diversity of communities, priority youth
Qualitative and quantitative data
New, needed information directly from the youth