Achieving Adolescent Reproductive Health Equity: From Root Causes of Teen Pregnancy to Fair Outcomes

Supporting National Efforts to Reduce Disparities in Teen Pregnancy

Wednesday July 20th, 2011

Presenters: JSI Project Team
At the end of this Webinar participants will be able to:

1. Explain **why** addressing the social determinants of health is a necessary approach to reduce inequities in teen pregnancy

2. Identify **what** framework to utilize to integrate addressing the social determinants of teen pregnancy
Better-educated consumers who take an active role in managing their health

- Informed policy and programmatic decisions for cost and quality improvements
- Improved access to health care services
- Faster adoption of evidence-based interventions
- Enhanced public/private-sector collaborations that improve public health
- More efficient organizations and systems
Our Team

- **JSI team:**
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  - Jennifer Grant, Project Assistant

- **Project Consultants:**
  - Héctor Sánchez-Flores (NCN/NLFFI)
  - Sayra Pinto (Matriz Coaching and Consulting)
Project Background

CDC Overall Project Purpose:

• “To demonstrate the effectiveness of innovative, multi-component, community-wide initiatives in reducing rates of teen pregnancy and births”*

• Target Population: Youth aged 15-19 who are at highest risk for teen pregnancy in communities with a focus on reaching African American and Latino/Hispanic youth

*http://www.cdc.gov/TeenPregnancy/PreventTeenPreg.htm
Teen Pregnancy and Health Disparities: The What
FIGURE 1. Teen Birth Rate (Per 1,000 Girls Age 15-19) 1988-2008, by Race/Ethnicity

Teen Pregnancy Rates are Higher in More Unequal US States

**Goal:** To build the capacity of Part A Grantees to identify and address the social determinants that impact teen pregnancy among African-American, Latino, foster care, out of school youth and youth in at-risk situations, at the individual, community, policy and overall relational environment levels.
What are the Social Determinants?

Social conditions in which people are born, live, work and age are the single most important determinant of one’s health status.


Why treat people...

...if we send them back to what made them sick?
Social Determinants: The Why
Why the Social Determinants? Rationale

Social Epidemiology
- tracks the distribution of disease and pinpoints relevant risk factors, revealing how social problems are intrinsically linked to the health of populations.

Social Medicine
- systematically examines and seeks to understand how health, disease and social conditions are interrelated.

Medical Sociology
- examines the relationship between social factors and health, health and the health care system.

Medical Anthropology
- draws upon social, cultural, biological, and linguistic anthropology to better understand those factors which influence health and well being, the experience and distribution of illness, the prevention and treatment of sickness, healing processes....
Why the Social Determinants? Policy
Social Determinants and Teen Pregnancy
Why the Social Determinants?

Rationale: Research

• “Sociocultural determinants of teenage childbearing among Latinas in California” (Dehlendorf et. Al, 2010)

• “Adolescent Pregnancy Desire and Pregnancy Incidence” (Sipsma et. Al, 2011)

• “The protective value of social capital against teen pregnancy: a state level analysis” (Crosby, 2006)
Teen Pregnancy

Interventions

Individual Thinking

Individual Behavior

Family
Religion/spirituality

Socio-economic
and political
content
Culture

Race/ethnicity
Socio-economic status

Life Conditions
Education
Findings: What impacts teen pregnancy?

- Poverty
- High-drop out rates
- Lack of education
- Unemployment
- Gang activity
- Sexual Abuse/Incest
- Deep-seated Racism
- Capitalism

- Industrialism
- Lack of self-esteem/emotional support
- Lack of things to do/opportunities
- Lack of access to healthcare and to basic needs
- Lack of transportation
JSI’s Framework for Addressing the Social Determinants of Health
Root Cause Analysis

Teen Sexual and Reproductive Health Inequity

Sexual Behavioral Determinants
- Contraceptive Use
- Abstinence
- Multiple Partners

Intermediary Behavioral Determinants
- Lack of Hope
- Inadequate access to contraceptives and sexual and reproductive health education
- Employment/Poverty
- Organizational and provider cultural ineffectiveness
- Discrimination and subsequent disenfranchisement

Structural Social Determinants
- Social Policies that reinforce inequity
- Lack of representative governance
- Inflexible and unfair macroeconomic policies
- Inflexible and xenophobic societal values
JSI Socioecological Model

GTO Framework

Decreased Occurrences of Teen Pregnancies and Teen Births

Structural Social Determinants

Intermediary Behavioral Determinants

Educating Stakeholders

Access to Clinical Services

Community Mobilization

Sexual Behavioral Determinant

Evidence-Based Programs
Supplemental GTO Model

Community

Supplemental GTO

GTO
Supplemental GTO Steps

Pre-GTO
1. Build Dialogue
2. Build Awareness
3. Build Engagement
4. Build Shared Language

During GTO
1. Needs/Resources
2. Goals & Outcomes
3. Best Practices
4. Fit
5. Capacity
6. Plan
7. Process Evaluation
8. Outcome Evaluation

Post-GTO
9. CQI
10. Sustainability
 Maintain Dialogue
 Maintain Awareness
 Maintain Engagement
 Maintain Shared Language
 Maintain Prog. That Works
## Practical Applications

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<tr>
<th>Key Component</th>
<th>Strategies</th>
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<tr>
<td>Component 1: Community Mobilization and Sustainability</td>
<td>• Identifying &amp; involving community stakeholders (including teens) in program planning who are typically not engaged</td>
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<td>• Use of “promotoras” in engaging communities</td>
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<td>Component 2: Evidence-Based Programs</td>
<td>• Integrating cultural competency in the PSBA-GTO process</td>
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<td>• Identifying local community characteristics (e.g., literacy levels, preferred communication channels)</td>
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<td>• Ensure culturally competent adaptation of evidence-based programs</td>
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<td>Key Component</td>
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| Component 3: Access to Clinical Services           | • Retaining diverse program staff  
• Working with low-literacy populations  
• Knowing reproductive/sexual health nuances of population served  
• Engaging males in reproductive health |
| Component 4: Educating Stakeholders                | • Engaging non-traditional community stakeholders in decision-making and policy change |
Technical Support and Resources

- Grantee-specific TA & Training Plan
- E-newsletter
- Website
Sample Institute Discussion topics
Sept. 20th-23rd

• Addressing underlying factors for teen pregnancy such as poverty, discrimination and isolation
• Explaining how local and national demographic trends shape the need for culturally competent services
• Describing pertinent national and state regulations and policies regarding culturally and linguistically appropriate health care and services
• Describing how culture affects health-seeking behaviors and decision-making
• Identifying factors affecting access to services for diverse populations
• Tackling social determinants within the GTO process
Questions?
1. What social determinants do you think impact teen pregnancy in your community?

2. Why do you think it is important to examine root causes of teen pregnancy in your community?

3. Examples of planned/proposed activities in four components that promote health equity/address social determinants.
Action Steps: Preparing for September Institute

1. Given what you have learned from the webinar, which natural partners (by component area) should you be connecting with more?

2. How do you envision a process for conducting a root cause analysis in your community?

3. What are some practical next steps you think are important to integrate this work across the four key components?