Encouraging Family Participation in Adolescent Decision Making

September 2016
NOTES
This presentation is supported with grant funds from the Office of Population Affairs of the U.S. Department of Health and Human Services.

The information presented does not necessarily represent the views of the Office of Population Affairs, the U.S. Department of Health and Human Services or the National Training Centers (for family planning) member organizations.
The Purpose

The purpose of this presentation is that participants will be better informed of expected compliance with the requirement that is part of Title X statutory language as well as the legislative mandate regarding seeking family planning services that encourages family participation in adolescent decision making.

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A copy of the Program Requirements for Title X Funded Family Planning Projects can be found on the OPA website
Visit - www.hhs.gov/opa/program-quitelines/program-requirements

A copy of the legislative mandate language can be found on the OPA website.
Quality Family Planning Services
Recommendations
Also known as the “QFP”
Clinic administrators and clinic staff should align their policies, procedures and practices with the QFP in providing quality family planning services to ensure the encouragement of family participation in the decision of minors to seek family planning services.


NOTES
Clinic administrators and clinic staff should align their policies, procedures and practices with Providing Quality Family Planning Services: Recommendations of CDC and the U.S. Office of Population Affairs (QFP) to ensure the encouragement of family participation in the decision of minors to seek family planning services.

A pdf of the QFP is available on the CDC website
and the MMWR update, March 11, 2016
http://www.cdc.gov/volumes/65/wr/mm6509a3.htm
Target Audience

This presentation is intended for administrative, clinical and all other staff that provide family planning services.

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Objectives

1. Discuss the Title X requirement to provide counseling that encourages family participation in the decision of minors to seek family planning services.

2. Describe available professional resources on how to promote communication strategies between an adolescent and parent or guardian.

NOTES
Our objectives are that by the end of this presentation, participants will be able to:

- Discuss the Title X requirement to provide counseling that encourages family participation in the decision of minors to seek family planning services.

and

2. Describe available professional resources on how to promote communication strategies between an adolescent and parent or guardian.
Overview

• Why family participation is important
• Research
• Title X Statute
• Legislative Mandate
• Communication
• Youth friendly services
• Strategies
• Resources
• References

NOTES

This presentation will briefly review:

• Why family participation in adolescent decision making is important.
• Research that supports the importance of communication between an adolescent and his or her parent or guardian about sexuality, healthy relationships and sexual and reproductive decision making.
• The Title X Statute requires Title X funded organizations to provide counseling that encourages family participation in the decision of minors to seek family planning services.
• Legislative Mandate requirements related to Title X funded organizations providing family planning services to teens.
• Communication and educational resources available for professionals and parents or guardians to build effective communication skills when talking with teens about these important issues.
• Resources that provide information about delivering youth friendly clinical and educational services.
• Resources that outline strategies and approaches in working with teens for parents, healthcare providers and communities.
• Training resources for staff
• References
Why Family Participation Is Important

Sexual development is a normal part of the teen years. Parents have a strong impact on whether a teenager makes healthy decisions for himself or herself.

To prevent unintended pregnancy, providers should give comprehensive information to adolescents about how to prevent pregnancy.

75% of pregnancies among 15-19 year olds were unintended. In a given year, approximately 20% of adolescent births represent repeat births.

Gavin, et al. QFP. MMWR 2014
Hamilton B. Births: 2010

NOTES
Let’s begin with why family participation in the decision of minors to seek family planning services is important.

We know that sexual development is a normal part of teen years. We also know that parents have a strong impact on whether a teenager makes healthy decisions for himself or herself.

To prevent unintended pregnancy, providers should give comprehensive information to adolescents about how to prevent pregnancy.

75% of pregnancies among 15-19 year olds were unintended. In a given year, approximately 20% of adolescent births represent repeat births. *(QFP page 13, reference 88)*

Gavin, *et al.* QFP. MMWR 2014
Hamilton B. Births: 2010

Research

Research shows that adolescents who talk with parents about topics related to dating, healthy relationships, and pregnancy and STD prevention are more likely to:

• Begin to have sex at a later age.
• Use condoms or other birth control more often if they do have sex.
• Have better communication with romantic partners.
• Have sex less often

Health providers and educators should encourage and promote communication between an adolescent and his or her parent(s) or guardians(s).

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• Have better communication with romantic partners.
• Have sex less often

Health providers and educators - all staff who provide family planning services - should encourage and promote communication between an adolescent and his or her parent(s) or guardians(s).
Title X Statute Sec. 1001

“The Secretary is authorized to make grants to and enter into contracts with public or nonprofit private entities to assist in the establishment and operation of voluntary family planning projects which shall offer a broad range of acceptable and effective family planning methods and services (including natural family planning methods, infertility services, and services for adolescents). To the extent practicable, entities which receive grants or contracts under this subsection shall encourage family participation in projects assisted under this subsection.”

NOTES
In addition to the research, as a recipient of Title X funds, an agency and its staff must comply with the Title X Statute Section 1001(a).

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[The bold text refers to this part of the legislative mandate.]
Legislative Mandate

“None of the funds appropriated in this Act may be made available to any entity under Title X of the Public Health Service Act unless the applicant for the award certifies to the Secretary of Health and Human Services that it encourages family participation in the decision of minors to seek family planning services and that it provides counseling to minors on how to resist attempts to coerce minors into engaging in sexual activities.”

Title X Program Requirements, Section 9.12

NOTES

As a recipient of Title X funds, an agency and its staff must comply with the legislative mandates that are a part of the Title X statutory language. (Title X Program Requirements, Section 9.12, www.hhs.gov/opa/program-requirements)

This legislative mandate states:

“None of the funds appropriated in this Act may be made available to any entity under Title X of the Public Health Service Act unless the applicant for the award certifies to the Secretary of Health and Human Services that it encourages family participation in the decision of minors to seek family planning services and that it provides counseling to minors on how to resist attempts to coerce minors into engaging in sexual activities.”

[The bold text refers to this part of the legislative mandate.]
Legislative Mandate, continued

“None of the funds appropriated in this Act may be made available to any entity under Title X of the Public Health Service Act unless the applicant for the award certifies to the Secretary of Health and Human Services that it encourages family participation in the decision of minors to seek family planning services and that it provides counseling to minors on how to resist attempts to coerce minors into engaging in sexual activities.”

Title X Program Requirements, Section 9.12

NOTES

For many years, the Title X Program Requirements have stated that as a recipient of Title X funds projects must have in place policies and procedures that address legislative mandates.

This presentation will primarily focus on the phrase “encourages family participation in the decision of minors to seek family planning services...”

This legislative mandate also states “… provides counseling to minors on how to resist attempts to coerce minors into engaging in sexual activities.” This counseling to minors requirement is addressed in an online course titled Counseling Adolescents About Sexual Coercion and Abuse.

See the Staff Training slide at the end of this presentation for more information on training resources related to counseling adolescents about how to resist sexual coercion.
Adolescents who come to the service site alone should be encouraged to talk to their parents or guardians.

Providers should encourage and promote communication between the adolescent and his or her parent(s) or guardian(s) about sexual and reproductive health.

When both parent or guardian and the teen have agreed, joint discussions can address family values and expectations about dating, relationships, and sexual behavior.

Gavin, et al. QFP. MMWR 2014

NOTES

When an adolescent visits a family planning clinic alone this visit provides an opportunity for staff to ask the teen about any conversations they have had, or would like to have, with her or his parent or guardian.

Providers should encourage and promote communication between the adolescent and his or her parent(s) or guardian(s) about sexual and reproductive health. *(QFP page 13, references 71-86)*

When both parent or guardian and teen have agreed, joint discussions can address family values and expectations about dating, relationships, and sexual behavior.
NOTES
For clinic staff who counseling clients - the QFP states “Counseling is a process that enables your client to make and follow through on decisions.” [pdf of this printed material – www.fpntc.org]

The 5 Principles for Providing Quality Counseling are relevant when working with all clients, including teens.

The Quality Principles include:
• Establish and maintain rapport with the client
• Assess the client’s needs and personalize discussions accordingly
• Work with the client interactively to establish a plan
• Provide information that can be understood and retained by the client
• Confirm client understanding

Communication – Educational Materials

Educational materials and programs can be provided to parents or guardians that help them talk about sex and share their values with their child.

The CDC and the Office of Adolescent Health (OAH) provide excellent and up-to-date educational materials for professionals to help talk with teens and parents.

These materials are easily available online for parents or guardians to access on their own.

Gavin, et al. QFP: MMWR 2014

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Educational materials and programs can be provided to parents or guardians that help them talk about sex and share their values with their child (QFP page 13, references 72, 87).

The Centers for Disease Control and Prevention and the Office of Adolescent Health provide excellent and up-to-date educational materials for professionals to help talk with teens and parents.

These materials are easily available online for parents or guardians to access on their own.

Please see the RESOURCES section at the end of this presentation.
Teen Friendly Services

Services for adolescents should be provided in a "youth friendly" manner, which means that they are
✓ accessible,
✓ equitable,
✓ acceptable,
✓ appropriate,
✓ comprehensive,
✓ effective, and
✓ efficient for youth

Gavin, et al. QFP. MMWR 2014
www.cdc.gov

NOTES

Services for adolescents should be provided in a “youth friendly” manner, which means that they are accessible, equitable, acceptable, appropriate, comprehensive, effective, and efficient for youth as recommended by the World Health Organization. (QFP page 13, reference 34)

The Centers for Disease Control and Prevention has a graphic example of a “teen-friendly” reproductive health visit for a sexually active female and one for a male not yet having sex.

Centers for Disease Control and Prevention
Teen friendly clinic environment (link to cdc.gov)
Confidentiality

Confidentiality is critical for teens and can greatly influence their willingness to access and use services.

As a result, many professional medical associations have emphasized the importance of providing confidential services to adolescents.

Gavin, et al. QFP. MMWR 2014
ACOG, May 2014

NOTES
Confidentiality is critical for teens and can greatly influence their willingness to access and use services. (QFP page 13, references 60-67)

As a result, many professional medical associations have emphasized the importance of providing confidential services to adolescents. (QFP page 13, references 68-70)

ACOG, Committee Opinion, Number 598, May 2014, Committee on Adolescent Health Care
Explaining Confidentiality

Explain to the adolescent that all information is confidential, meaning kept private, unless a person discloses possible harm to themselves or others. In that case you would have to report it to the appropriate authorities.

You must know your State laws and the required reporting process for your agency and your role.

Refer to the training resources – www.fpntc.org

NOTES
It is important to explain to the adolescent that when visiting a family planning clinic all information is confidential, meaning information is kept private, unless a person discloses possible harm to themselves or others. In that case you would have to report it to the appropriate authorities.

You must know your State laws and the required reporting process is for your agency and your role.

See the pdf - Mandated Child Abuse Reporting Law Guide
http://fpntc.org/training-and-resources/mandated-child-abuse-reporting-law-developing-and-implementing-policies-and
Legislative Mandate

“Notwithstanding any other provisions of law, no provider of services under Title X of the Public Health Services Act Shall be exempt from any State law requiring notification or the reporting of child abuse, child molestation, sexual abuse, rape, or incest.”

Title X Program Requirements, Section 9.12

NOTES
Again, as a recipient of Title X funds, an agency and its staff must comply with the legislative mandates that are a part of the Title X statutory language.

This legislative mandate states:
“Notwithstanding any other provisions of law, no provider of services under Title X of the Public Health Services Act Shall be exempt from any State law requiring notification or the reporting of child abuse, child molestation, sexual abuse, rape, or incest.”
Providers of family planning services should offer confidential services to adolescents and also observe all relevant state laws and any legal obligations. Each state has mandatory laws or legal notification requirements such as reporting of child abuse, child molestation, sexual abuse, rape, or incest, as well as human trafficking.

Gavin, et al. QFP. MMWR 2014

NOTES

Providers of family planning services should offer confidential services to adolescents and also observe all relevant state laws and any legal obligations.

Each state has mandatory laws or legal notification requirements such as reporting of child abuse, child molestation, sexual abuse, rape, or incest, as well as human trafficking. (*QFP* page 13, references 58, 59)

See next slide for training resources.
Mandatory Reporting – Policies and Training Guide

The Mandated Child Abuse Reporting Law: Developing and Implementing Policies and Training guide was developed to assist you in developing or revising your clinic reporting policies and staff training procedures. Specific guidance on individual state law are not covered because state laws vary across the country.

Who Should Use this Guide
This document is for those persons in charge of developing and updating child abuse reporting policy, training and resources for clinicians at Title X service sites.

Visit www.fpntc.org

NOTES
The Mandated Child Abuse Reporting Law: Developing and Implementing Policies and Training guide was developed to assist you in developing or revising your clinic reporting policies and staff training procedures. You will learn where to find state child abuse reporting laws and elements to look for in those laws that will help clinic staff understand their reporting obligation. Practical suggestions on implementing these legal obligations are included. Note that specific guidance on individual state law will NOT be covered because state laws vary across the country.

Who Should Use this Guide
This document is for those persons in charge of developing and updating child abuse reporting policy, training and resources for clinicians at Title X service sites. They may include administrators, managers and select providers involved in policy development and/or training development.

Mandated Child Abuse Reporting Law Guide
http://fpntc.org/training-and-resources/mandated-child-abuse-reporting-law-developing-and-implementing-policies-and

Archived webinar
Mandated Child Abuse Reporting Law: Developing and Implementing Policies and Training
http://fpntc.org/training-and-resources/webinar-recording-mandated-child-abuse-reporting-law-developing-and
NOTES
Efforts are currently under way to explore strategies to reduce teen childbearing and its associated negative outcomes for parents, children, and society.

http://www.hhs.gov/ash/oah/adolescent-health-topics/reproductive-health/teen-pregnancy/tips-for-parents.html

NOTE: This slide can be adapted to include the relevant clinic services and the local community resources available.
Explore various strategies, approaches and resources for:
• Adolescents
• Parents
• Healthcare Providers
• Communities
NOTES
Possible discussion questions to discuss with staff:

- Who can you talk to about your professional role in encouraging and promoting communication between your teen clients and his or her parent or guardian?
- What resources are available for you in your professional development?
- What educational services or referrals are available for parents or guardians that support teen-parent/guardian communication about sexual and reproductive health decision making?
- What community services are available for teens, parents and/or guardians that support family involvement?
- What do you need to know about your mandatory reporting laws and procedures?
Staff Training

Program Requirements for Title X Funded Family Planning Projects – April 2014
Section 8.6 – Staff Training and Project Technical Assistance

Routine training should be provided on:

• Federal and State requirements for reporting or notification of child abuse, child molestation, sexual abuse, rape or incest, and human trafficking

• Involving family members in the decision of minors to seek family planning services

• Counseling minors on how to resist being coerced into sexual activities

Visit [www.fpntc.org](http://www.fpntc.org) for trainings on above topics

NOTES
An online orientation course on the Title X Program Requirements and training on the legislative mandates is available on Family Planning National Training Centers website (www.fpntc.org)

Program Requirements for Title X Funded Family Planning Projects – April 2014
Section 8.6 – Staff Training and Project Technical Assistance - States:
Routine training should be provided on:

• Federal and State requirements for reporting or notification of child abuse, child molestation, sexual abuse, rape or incest, and human trafficking

• Involving family members in the decision of minors to seek family planning services

• Counseling minors on how to resist being coerced into sexual activities

Other issues that are identified as terms or conditions on your agency’s Title X Notice of Grant Award.

Visit the FPNTC website (link) for trainings on topics 1 through 3 above.

Other related resources
Counseling Adolescents About Sexual Coercion and Abuse
INDEPENDENT STUDY – reviewed and updated 1/2016 – available for CNE until 2/2018

Mandated Child Abuse Reporting Law: Developing and Implementing Policies and Training
ARCHIVED WEBINAR
MANDATED CHILD ABUSE REPORTING LAW GUIDE
http://fpntc.org/training-and-resources/webinar-recording-mandated-child-abuse-reporting-law-developing-and
Resources for Professionals and Parents

Centers for Disease Control and Prevention
Parent and Guardian Resources
http://www.cdc.gov/teenpregnancy/parent-guardian-resources/index.htm

Centers for Disease Control and Prevention
Teen friendly clinic environment

The Office of Adolescent Health, U.S. Department of Health and Human Services
Tips to help parents talk to adolescents
http://www.hhs.gov/ash/oah/resources-and-publications/info/parents

The Office of Adolescent Health, U.S. Department of Health and Human Services
Talking with Teens – Conversation Tools
http://www.hhs.gov/ash/oah/resources-and-publications/info/parents/conversation-tools/#
Resources, continued
Strategies & Approaches (Updated May 13, 2016)
http://www.hhs.gov/ash/oah/adolescent-health-topics/reproductive-health/teen-pregnancy/tips-for-parents.html

ACOG, Committee Opinion, Number 598, May 2014, Committee on Adolescent Health Care
http://www.acog.org/Resources-And-Publications/Committee-Opinions/Committee-on-Adolescent-Health-Care/The-Initial-Reproductive-Health-Visit

Strategies & Approaches (Updated May 13, 2016)
http://www.hhs.gov/ash/oah/adolescent-health-topics/reproductive-health/teen-pregnancy/tips-for-parents.html

ACOG, Committee Opinion, Number 598, May 2014, Committee on Adolescent Health Care
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References


References, continued


**References, continued**


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NOTES
For other family planning training resources visit the Family Planning National Training Centers website. www.fpntc.org
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