

A Work in Progress:
Building a State Plan for Teen Pregnancy
Prevention and Parenting

MOAPPP

Minnesota Organization on Adolescent Pregnancy, Prevention and Parenting
Centers for Disease Control and Prevention Grant

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Why Create a State or Local Plan?

- Reflect state or local values, culture and issues
- Collaborative process
- Involve and employ key stakeholders
- Provide base for advocacy, education and public awareness
- Science-based focus maintains political neutrality



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Minnesota State Plan to Prevent Teen Pregnancy

- State Plan Task Force to address disparities
- *A Work in Progress: Minnesota's Plan for Teen Pregnancy Prevention and Teen Parenting*
- Centers for Disease Control and Prevention Grant
 - ◆ MOAPPP
 - ◆ University of Minnesota National Teen Pregnancy Prevention Research Center (PRC)



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Seven Components for Building a State Plan

1. Assess readiness to develop a plan.
2. Identify key stakeholders, partners and informants.
3. Clarify vision, goals and objectives.
4. Gather research and data.
5. Prepare and employ a marketing strategy.
6. Implement the plan.
7. Evaluate the plan.

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Seven Components for Building a State Plan

1. Assess readiness to develop a plan.
 - Is there interest to coordinate efforts?
 - Is there a burning issue in your state/ community?
 - Are people ready to invest time and skills to develop a plan?



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Seven Components for Building a State Plan

2. Identify key stakeholders, partners and informants.

- Stakeholders representing key issues
- Past and present partners
- Informants: policy makers, foundation program officers, community leaders, teens and parents



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Seven Components for Building a State Plan

3. Clarify vision, goals and objectives.

- Employ a facilitator
- Conduct listening sessions
- Prepare for intense periods and time to process
- Provide opportunities for feedback
- Set a time limit on this phase
- Create goals and objectives that are action-oriented



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Seven Components for Building a State Plan

4. Gather research and data.

- Use data to inform development of the goals and recommendations
- Promote credibility with research and science-based strategies
- Incorporate local language and programming
- Utilize local research: Add Health Survey (Blum and Resnick) and Konopka Youth Development theories



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Seven Components for Building a State Plan

5. Prepare and employ a marketing strategy.

- Employ marketing professional
- Identify target audiences and create targeted materials
- Create a brand and product design
- Frame readable and intriguing messages



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Targeted piece

partners in education

Use the State Plan

Prevention programs are designed and selected for many reasons: compatibility with religious traditions, available resources, community standards, as well as the personal values and beliefs of the leaders in charge. While these are important considerations, effective teen pregnancy prevention programs must be developed, implemented and prioritized based on scientifically proven evidence.

The goal of "A Work in Progress" is to focus our collective efforts to prevent teen pregnancy on strategies that are proven to be effective. These three approaches are to:

1. Implement with fidelity an existing program that has been proven to work with similar populations.
See Page 7, Teen Outreach Program
2. Select or design a program that incorporates the key characteristics of programs that have been effective with similar populations.
See Page 13, Program Checklist
3. Design new programs that strategically address the behaviors to be changed, the risk factors associated with these behaviors and the activities that will change them.
See Pages 7 - 10, Risk and Protective Factors

What Can You do to Reduce Teen Pregnancy?

1. Evaluate and support teen pregnancy prevention programs based on evidence of their success and/or their use of proven strategies.
2. Hear constituents – 7 in 10 Minnesota adults believe that sexuality education should include abstinence and contraception.
3. Address health disparities by funding programs that target disadvantaged populations.
4. Fund health clinic programs that improve access to counseling, contraception and health promotion. Studies have indicated that when clinics provide educational materials, discuss the adolescent patient's sexual and condom or contraceptive behavior, clinics can increase condom or contraceptive use.
5. Support service learning and youth development programs, particularly those that occupy after-school hours when teens are particularly prone to risk behaviors.

Take Action

Visit the State Plan web site and join the community of individuals dedicated to reducing teen pregnancy.

www.mnstateplan.org

What Is At Stake?

Money

Families started with a teen birth account for 53% of all welfare expenditures - \$13.3 million each month in 2001.

Workforce

70% of teen mothers drop out of high school; studies show that not completing high school results in a greater likelihood of welfare dependence.

Future

The children of teen parents face enormous health risks: low birth weight, infant mortality, as well as cognitive and emotional delays.

What Works?

Research has shown that three different types of programs can be effective in reducing teen pregnancy.

Sexually Focused Programs

Sex education programs covering both pregnancy and STDs/HIV are proven to reduce sexual risk taking.

Service Learning Programs

Contrasting sexuality and HIV education curricula, research shows that service learning programs actually reduce teen pregnancy, at last during the academic year in which students participate. These are intensive programs that lasted many months with many hours of structured time for the teenagers.

Combination Programs (Sexuality and Service Learning)

A fusion of sexuality education and service learning has been proven to be the most effective approach of all.

building a Minnesota State Plan for Teen Pregnancy Prevention and Parenting

Scientific Evidence?

A set of criteria describing the characteristics a study must have in order for its results to be regarded as scientifically valid.

- Appropriate and valid experimental or quasi-experimental design using intervention and comparison groups as well as baseline and follow-up data.
- Post intervention data must have been collected for a minimum number of months after the intervention (the minimum number varies based on the design and behavioral outcomes to be evaluated)
- A sample size of at least 100 and must have measured actual behavior as opposed to attitudes or intentions
- Employed proper statistical analysis

evidence-based strategies prevent teen pregnancy
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■ home ■ research ■ recommendations ■ take action
■ resources ■ community partners ■ site index



Why a State Plan?

In the summer of 2000, a Task Force of state agency, community-based organizations, University staff and youth workers determined the need for a cohesive action plan to prevent teen pregnancy.

The purpose of the action plan is to guide all Minnesotan's efforts to prevent teen pregnancy in a comprehensive, culturally responsible way and to increase opportunities in teen's lives so they can reach adulthood pregnancy-free.

The plan's recommended intervention strategies focus on addressing the disparities in pregnancy rates between youth of color and white teens, as well as the issues that face teen parents and their children.

The work of the [Task Force](#) continues to ensure progress on the State Plan.

Minnesota Statistics

- Each day in Minnesota in 2000, 21 teens between 10 and 19 years of age became pregnant.
- The combined 1998-2000 pregnancy rate for girls 15-19 in Minnesota was 43 pregnancies per 1,000 girls – one of the lowest overall pregnancy rates in the nation.
- Between 1990 and 2000, the pregnancy rate for 15-17 year old girls in Minnesota declined 35%, from 34 to 22 pregnancies per 1000 15-17 year old girls.
- In 2000, the rate of pregnancy among African American girls age 15-19 in Minnesota was 162 per 1,000 girls – ranking Minnesota one of the highest in the nation. The rate for Latino girls in Minnesota was 123 per 1000; for American

what can we do?

- [Download the plan](#)

take
action
now!

download
the plan

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Seven Components for Building a State Plan

6. Implement the plan.

- Funding: CDC Grant
- Partner collaboration: State Plan Task Force
- Communities: State Plan Community
- Take action!



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Seven Components for Building a State Plan

7. Evaluate the plan.

- Conduct assessment
- Plan revisions
- Survey professionals



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Minnesota State Plan to Prevent Teen Pregnancy

“The State Plan was distributed to staff members working on the Youth Risk Behavior Initiative in every local public health agency in Minnesota. It has been a helpful resource for guiding local agencies toward effective strategies to reduce teen pregnancy and promote healthy adolescent development.”

-MN Department of Health Coordinator

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Minnesota State Plan to Prevent Teen Pregnancy

"I like the way the State Plan brings research and action together."

"It addresses the spectrum of what youth need to avoid pregnancy, making it useful for different types of professionals: public health nurses, planners, administrators, educators and social workers."

-County Adolescent Health Coordinator

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evidence-based

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