

Talking with Teens about Sex and Pregnancy: An Effective Training Model for Youth-Serving Professionals

Findings from The California Wellness Foundation
Teen Pregnancy Prevention Initiative

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In 1995, The California Wellness Foundation's board approved a 10-year, \$60-million grantmaking program called the Teen Pregnancy Prevention Initiative (TPPI). The goal of the Initiative is to decrease the incidence of teen pregnancies by increasing the proportion of teens who delay the initiation of sexual activity and/or effectively use contraception.

The Foundation made grants within four interrelated grantmaking components: the Research Program, the Public Education and Policy Advocacy Program, the Community Grants Program, and the Professional Development and Leadership Recognition Program.

The Professional Development Program is designed to improve and increase training opportunities for youth-serving professionals and paraprofessionals in California on issues related to:

- Healthy adolescent sexuality
- Teen pregnancy prevention
- Sexually transmitted disease prevention.

As the grantee for the Professional Development Program, the California Family Health Council, Inc., (CFHC) has developed and implemented a training program that is:

- In high demand.
- Reaching a diverse range of participants.
- Geared toward increasing communication skills — how to talk with teens, rather than what to say.
- Receiving high participant satisfaction ratings.
- Showing significant improvements in participants' knowledge, attitudes, and behaviors related to the program's key topics 6 months after the training.

CFHC's positive experiences with this training program could be helpful to others who seek to increase the capacity of youth-serving organizations through short-duration training programs.

Key features of the CFHC training program — *Reducing Teen Pregnancy: Helping Teens Make Healthy Decisions* — include:

- A thorough needs assessment
- Input from an expert advisory panel
- A skills-focused curriculum
- Broad outreach
- Tailoring training
- Evaluation of impacts to support program improvement.

Needs Assessment

A thorough needs assessment by a Community-Based Assistance Team involved professionals in youth-serving organizations, youth, and experts on adolescent sexuality. Team members surveyed these groups in each of 10 regions in the state and used the results to shape the program design and curriculum to meet participants' needs.

Input from an Expert Advisory Panel

The program design also benefited from the active involvement of experts in teen sexuality and reproductive health, who advised on training concepts and strategies. The full curriculum addresses:

- Adult responsibility in teen pregnancy
- Risk and resiliency in youth
- Youth development and sexual development
- Talking with youth
- Contraception
- Sexually transmitted diseases
- Abstinence.

A Skills-Focused Curriculum

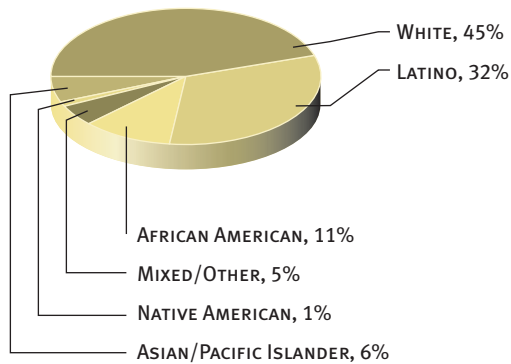
When asked to say what they learned during training, “communication and counseling skills” was the most frequent response, named more than twice as often as others.

The needs assessment revealed that the highest training priority was to learn skills for communicating and working effectively with teens. In response, CFHC shifted from designing a content-heavy, instructor-driven training approach geared toward large groups to a skill-building emphasis and a participatory, interactive delivery model appropriate for that focus.

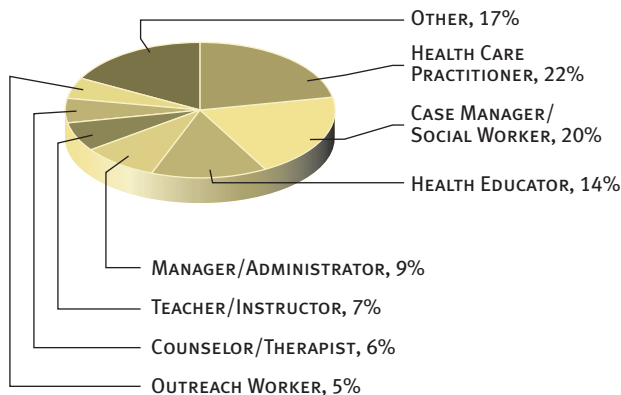
This shift was affirmed when questionnaires completed by participants at the beginning of their training showed that their knowledge regarding adolescent sexuality and teen pregnancy prevention already was high; they answered 82% of questionnaire items related to their knowledge correctly before receiving any training. Further, the skills emphasis is clear to participants, and new skills are what they “take away” from their training experience.

Broad Outreach to Diverse Groups

Participants' Race/Ethnicity



Participants' Primary Occupation



CFHC recognized that to have an impact on teens' decisions regarding sexual activity and contraception, the Professional Development Program would need to reach staff from a broad range of youth-serving organizations who represent the diversity of the teens in the state. A widely disseminated brochure announcing the training program was the primary outreach mechanism.

More than 1,750 participants took part in CFHC trainings in 2002 and 2003, far surpassing the goal of reaching 1,200 youth-serving professionals and paraprofessionals. Participants:

- Were primarily female (87%).
- Ranged in age from 15 to 76, with an average age of 37.
- Represented all racial/ethnic groups (see chart).
- Came from 52 of California's 58 counties.
- Had worked in their professional field an average of 9 years.
- Came from a wide array of youth-serving organizations, including health services providers, public health departments, community-based youth organizations (e.g., Boys and Girls Clubs), school districts, foster care agencies and homes, parks and recreation departments, and others.
- Filled a variety of roles in their organizations (see chart).

More than 19,750 people were reached with training brochures in 2003, a 50% increase over the previous year.

Training Tailored to Specific Audiences

Given the diverse set of professionals drawn to the training, CFHC recognized that a “one size fits all” program was unlikely to meet all participants’ needs. In addition to a comprehensive full-day training program that attracts participants from multiple agencies, CFHC offers training tailored to the needs of specific organizations.

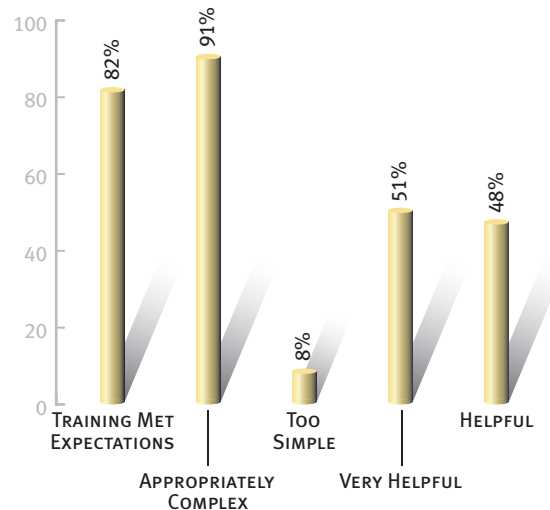
- 28 full-day trainings have been conducted.
- 48 tailored trainings have been provided, with demand increasing from 2002 (20) to 2003 (28).

Evaluation Supports Program Improvement

All components of TPPI have been evaluated from their beginning to strengthen the programs and inform The California Wellness Foundation of the impacts of its grant-making efforts. Evaluation of the Professional Development Program involved participants’ ratings of the training experience and a comparison of participants’ knowledge, attitudes, and behaviors before training with reports taken 6 months later. Evaluation findings show:

- High participant satisfaction (see chart).

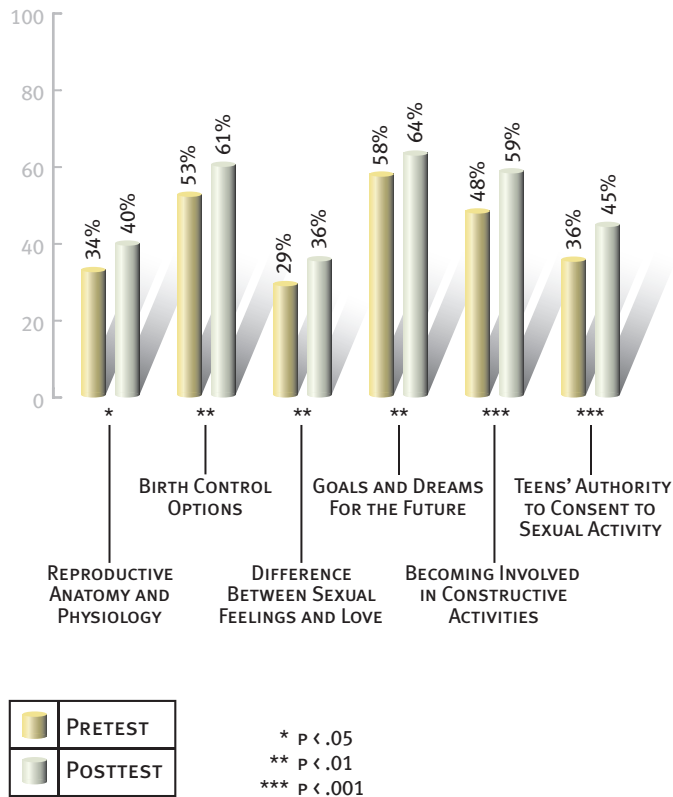
Participants’ Views of Training



More than 8 in 10 participants indicated that the training program met their expectations and that the level of the training was appropriate. Virtually all found the training materials “helpful” or “very helpful.” The effectiveness of the trainers was rated 4.7 on a 5-point scale, with 5 being “very effective.”

Communication with Teens

Talked “often” or “very often” about:



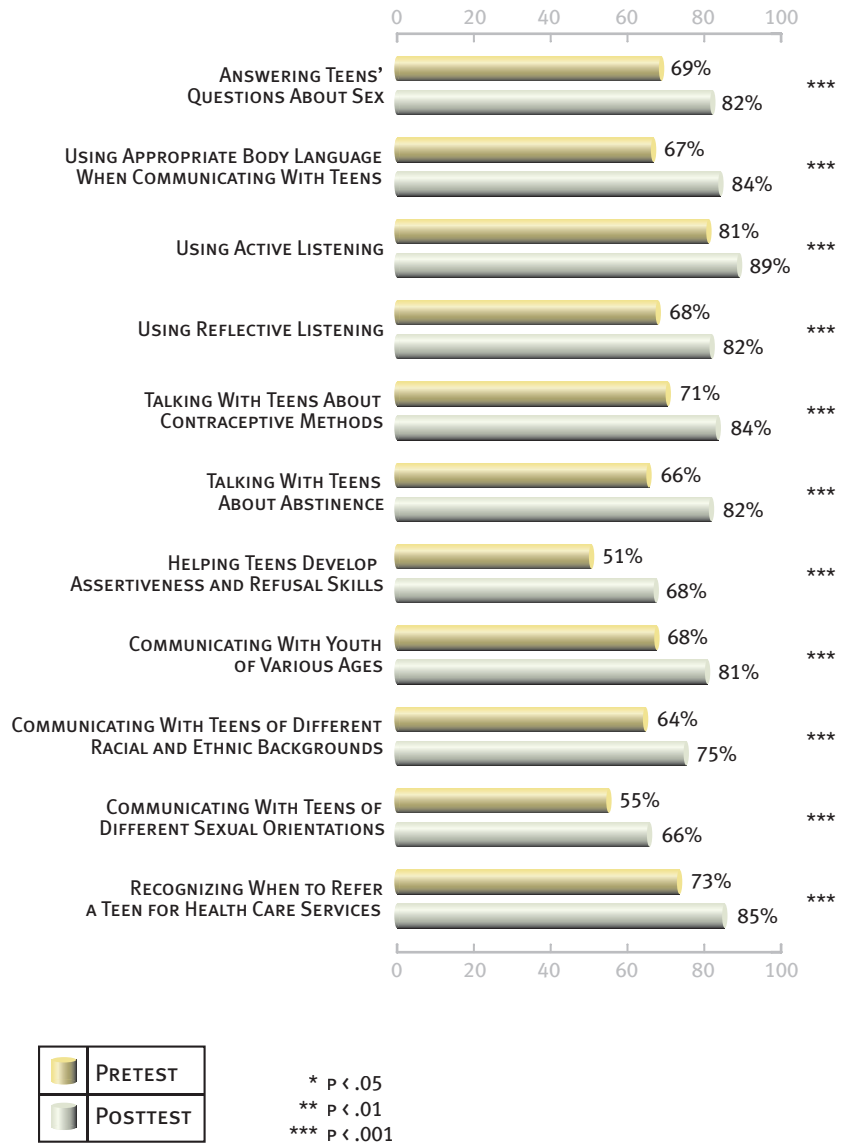
- After training, more participants reported talking “often” or “very often” to teens on a number of topics, such as reproductive anatomy and physiology, birth control options, the differences between sexual feelings and love, goals and dreams for the future, becoming involved in constructive activities, and teens’ authority to consent to sexual activity.

Conversations related to becoming involved in constructive activities and teens’ authority to consent to sexual activity had the largest increases (11 and 9 percentage points, respectively).

- Six months after training, more participants reported feeling “competent” or “fully competent” to use effective communication techniques when talking with teens outside of their own families (see chart).
- More than 80% reported feeling “competent” or “fully competent” in most of the communication behaviors explored in the evaluation. Using active listening skills and recognizing when to refer teens for health care services had the highest scores (89% and 85%).
- Lower scores are noted for respondents’ competence in dealing with diversity issues. Two-thirds reported feeling “competent” or “fully competent” communicating with teens of diverse sexual orientations and three-fourths expressed competence communicating with teens of different racial/ethnic backgrounds.

Perceived Competence

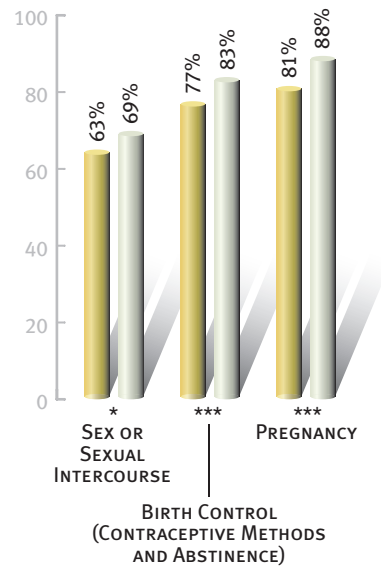
Feeling “competent” or “fully competent”



More than 15-percentage-point increases in feeling “competent” or “fully competent” were seen for three topics: using appropriate body language when communicating with teens, talking with teens about abstinence, and helping teens develop assertiveness and refusal skills.

Comfort Level Talking with Teens

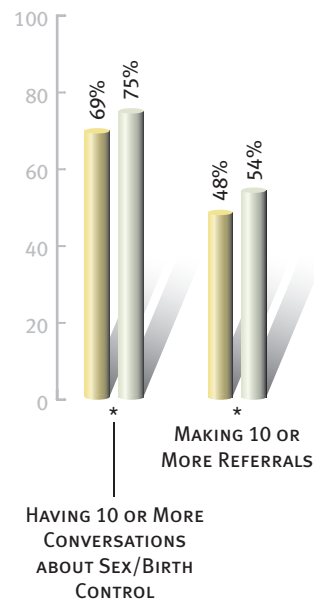
Feeling “comfortable” or “very comfortable” talking about:



- After training, more participants reported being “comfortable” or “very comfortable” talking with teens outside their families about sex, birth control, and pregnancy (see chart).

Behaviors Related to Teens

Reported in the past 6 months:



- After training, participants reported having more conversations with teens about birth control and making more referrals of teens to health care services (see chart).

	PRETEST
	POSTTEST

* P < .05
 ** P < .01
 *** P < .001

- There was a significant increase in the percentage correctly answering questions related to adolescent sexuality for three of eight questions posed as part of the evaluation.

These findings suggest that the skills-driven emphasis of the training program funded through the Professional Development Program of The California Wellness Foundation’s Teen Pregnancy Prevention Initiative — emphasizing how to talk with teens, rather than what to say — is an effective approach to increasing the knowledge, attitudes, and, importantly, the behaviors of youth-serving professionals and paraprofessionals to encourage the healthy sexuality of the teens they serve.

The Teen Pregnancy Prevention Initiative is funded by a grant from The California Wellness Foundation (TCWF). Created in 1992 as an independent, private foundation, TCWF's mission is to improve the health of the people of California by making grants for health promotion, wellness education and disease prevention programs.

The evaluation of the Teen Pregnancy Prevention Initiative is a joint project of Philliber Research Associates; SRI International—Center for Education and Human Services; and the University of California, San Francisco—Institute for Health Policy Studies.

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