

# Encouraging Family Participation in Adolescent Decision Making

*September 2016*



# Acknowledgement



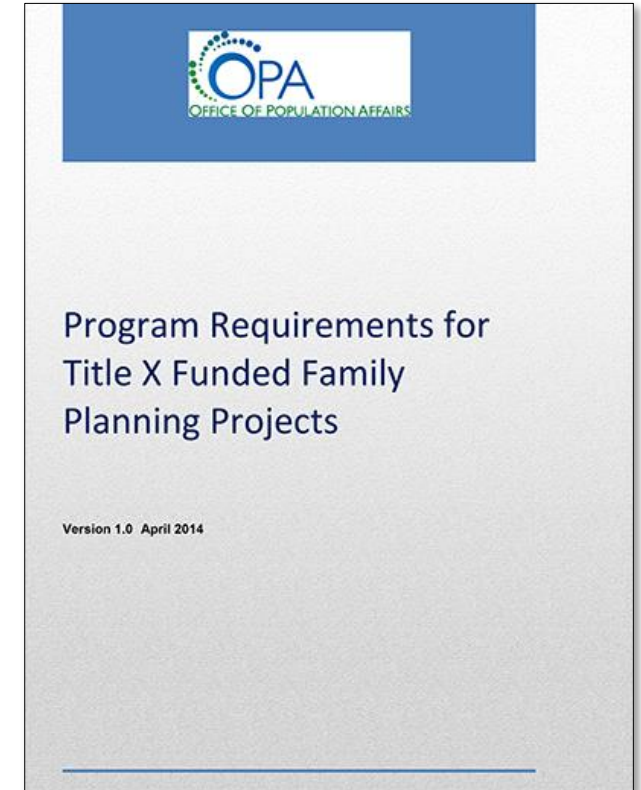
This presentation is supported with grant funds from the Office of Population Affairs of the U.S. Department of Health and Human Services.

The information presented does not necessarily represent the views of OPA, HHS, or FPNTC 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.



# 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

Gavin, L., Moskosky, S., Carter, M., et al. Providing Quality Family Planning Services: Recommendations of CDC and the U. S. Office of Population Affairs. MMWR Recomm Rep. 2014; 63: 1-54




Centers for Disease Control and Prevention  
**MMWR** Morbidity and Mortality Weekly Report  
Recommendations and Reports / Vol. 63 / No. 4 April 25, 2014

**Providing Quality Family Planning Services**  
Recommendations of CDC and the U.S. Office of Population Affairs

A collage of three photographs. The top-left photo shows a man, a woman, and a baby. The top-right photo shows a woman looking upwards against a blue sky. The bottom photo shows a man smiling.

Continuing Education Examination available at <http://www.cdc.gov/mmwr/cme/conted.html>.



U.S. Department of Health and Human Services  
Centers for Disease Control and Prevention

# Target Audience

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



# 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.



# Overview

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

[www.cdc.gov.Parent](http://www.cdc.gov.Parent) and Guardian Resources 2014

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

N.Engl J Med 2016

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).



# 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.**”



# 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



# 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



# Communication – Clinic Staff Role

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



# Quality Counseling

## Quality Family Planning Services Recommendations (the “QFP”)



Gavin, L., Moskosky, S., Carter, M., et al. Providing Quality Family Planning Services: Recommendations of CDC and the U. S. Office of Population Affairs. MMWR Recomm Rep. 2014; 63: 1-54; Appendix C.

### Principles for Providing Quality Counseling

Counseling is a process that enables your client to make and follow through on decisions. Education is an integral component of the counseling process that helps clients make informed decisions. Providing quality counseling is an essential component of client-centered care.

Your client is the primary focus when providing counseling related to reproductive and sexual health decision making about preventing or achieving pregnancy and supporting healthy behaviors. Using **client-centered** skills, you tailor the interactive counseling and educational encounter to meet the unique and culturally appropriate needs of your client.

#### PRINCIPLE 1:

##### Establish and maintain rapport with the client

- ▶ Create a welcoming environment—greet the client warmly, show your care. Listen to and engage your client by asking open-ended questions that can build a climate of safety and trust that will encourage questions at every stage of the client encounter.



#### PRINCIPLE 2:

##### Assess the client's needs and personalize discussions accordingly

- ▶ Tailor your questions and conversation so that your client's clinical needs, personal life considerations and psychological concerns are integrated into important education and decision-making discussion.

#### PRINCIPLE 3:

##### Work with the client interactively to establish a plan

- ▶ Address your client's personal goals by interactively exploring decision-making and readiness for behavior change if needed. Help establish a plan that will lead to healthy outcomes.



#### PRINCIPLE 4:

##### Provide information that can be understood and retained by the client

- ▶ Provide an opportunity for your client to learn medically accurate information that is balanced, nonjudgmental and in accordance with your client's plan at this time in her or his life.

#### PRINCIPLE 5:

##### Confirm client understanding

- ▶ Use an interactive teach-back process to give your client an opportunity to say—in his or her own words—the important information shared during the encounter. The goal of using a teach-back approach is to clarify any client misunderstandings to ensure your client's success in their reproductive health choices.



Source: Providing Quality Family Planning Services: Recommendations of CDC and the U. S. Office of Population Affairs, 2014, Appendix C.

 **Family Planning**  
National Training Centers  
[www.fpncc.org](http://www.fpncc.org)

FPNCC is supported by 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 OPA, HHS, or FPNCC member organizations.

March 2015

# 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



# 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](http://www.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



# 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](http://www.fpntc.org)



# 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



# Mandatory Reporting

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



# 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](http://www.fpntc.org)



# Strategies!

To explore various strategies and approaches for:

- Adolescents
- Parents
- Healthcare Providers
- Communities



[www.hhs.gov/ash/oah/adolescent-health-topics/](http://www.hhs.gov/ash/oah/adolescent-health-topics/)

# Questions?



# 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





# 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

<http://www.cdc.gov/teenpregnancy/health-care-providers/teen-friendly-health-visit.htm>

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

The Office of Adolescent Health, U.S. Department of Health and Human Services.  
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>



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## Questions ?

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