

# Strength in Action: Supporting Our Nation's Most Vulnerable Youth Podcast Series

## **Episode: Youth Development Matters**

[John Bollenbacher:] Welcome to Strength in Action: Supporting Our Nation's Most Vulnerable Youth, a podcast series by the Family Youth Services Bureau within the U.S. Department of Health & Human Services. This series is produced by FYSB's Adolescent Pregnancy Prevention Program, as part of The Exchange. I'm John Bollenbacher, a producer for The Exchange. Here in the podcast we talk with people implementing programs that prevent teen pregnancy and help prepare teens for adulthood. While overall teen birth rates are decreasing, we're not done yet. Teen births remain high among vulnerable youth. Today we're joined by Abby Hunt, and Abby, can you tell us a little about yourself and your work?

[Abby Hunt:] My name is Abby Hunt, and I'm an Executive Director at Health Care Education and Training. We're based in Indianapolis and have another office in Madison, Wisconsin. Our mission is to improve reproductive and sexual health. For FYSB, we have two awards. One is Competitive PREP, and so, in Indiana, you know, no state agencies applied for PREP originally, and so it became competitive in 2012, so any agencies outside of the state could apply, and we did so and were awarded, and with Competitive PREP we are implementing, primarily, two evidence-based pregnancy prevention programs: the Teen Outreach Program, and Be Proud, Be Responsible, with youth who are incarcerated and court-involved, youth who are in foster care or transitioning, and GLBTQ youth.

[John Bollenbacher:] So it seems like you are definitely focused on some of the most vulnerable youth out there. Can you talk a little about what it's like working with that population, and maybe, what are some of the challenges that you experience?

[Abby Hunt:] Sure. So, of course we wanted to focus on populations where teen pregnancy is high, and also in these populations, many of the teens are already parents, or have either caused a pregnancy or become pregnant, whatever their parental status is. Of course, if they're incarcerated, they're not currently parenting, but many of those youth have said that they have been pregnant or caused a pregnancy. And so we wanted to make sure we're hitting youth that were at high risk.

[John Bollenbacher:] So what are some of the unique challenges of working with those populations?

[Abby Hunt:] Specifically, with foster care youth, one of the challenges is always recruiting and retaining, because we're implementing the programs at community based sites, so we subaward to community based agencies that work with foster care youth, and so, they're bringing youth together to community based sites. And so, when you have youth that are more transitional, like many youth in foster care, it's often a challenge—there's a lot of communication involved with the facilitators, between the facilitators and the foster parents or guardians and the youth, to get them together at the community based site once a week. So, to do that, the sub awardees they also work with the case managers at the Department of Child Services. We work with, and they work with, the higher-level administrative staff at the Department of Child Services to keep the knowledge of the program out there, and to keep people referring to the agencies. So, recruitment and retaining is often a challenge.

You know, we've had groups that they are so motivated to come they—we had a group at one of our subawardees that was, you know, got together and took the bus together, so, you know, it just varies, but that is definitely always a challenge. With youth who are incarcerated, it's not hard to get them there, because they're there. With the Teen Outreach Program there is a service learning component, and so the one thing I hear a lot about is, a lot of work had to be done in the first year or two to adapt service learning projects for youth who are incarcerated. We've had really good luck with having a lot of really good access and support in Department of Corrections, and Department of Child Services. So, getting the youth and keeping them.

[John Bollenbacher:] So, that brings to mind the question that other people might appreciate out there, and that's how do you foster a really positive relationship with correctional facilities?

[Abby Hunt:] Our approach has been, first of all, find the people who are already working with them. So, we had both a community based partner and a person at [unintelligible] School of Medicine who were already doing programs and doing research with Department of Corrections, so finding those relationships, and then just asking for people to connect to, because most people are willing to do that. And so we've had a lot of luck with like, "Who do you know?" "Who should we talk to?" And then making those connections that way.

And then, these systems, we've worked with adolescent pregnancy prevention in especially foster care for eight years now, in varying levels. Our experience has been that these systems are very open to high-quality programs, because they know the kids need them, they know that's an area where their staff may or may not have expertise, or comfort, so we've also then moved into doing staff-level training for the facilities, so I think that's the next step for us, where we ourselves, since we work with adults and providers, and then, our partners, are working to make sure that we're training the next level.

[John Bollenbacher:] So the other question that comes to mind is, working with foster care populations—as you said, they're really transient and it's hard to get in touch with them—do you have any special strategies or procedures in trying to keep those youth engaged?

[Abby Hunt:] Yes, so Health Care Education and Training, our agency, HCT is what I'll refer to it now, we communicate with the administrative level of both the grantees, and then DCS and (Department of Child Services), and Department of Corrections. Our grantees do a lot of just one-on-one communication. A lot of the kids, once they're involved, it's the incentive, and then the group, and then the topic that keeps them coming, you know?

[John Bollenbacher:] So, do your subgrantees have to set aside extra time to have these kind of one-on-one interactions?

[Abby Hunt:] Yeah. We have been really successful taking the, kind of, this approach of, we generally try to do larger subawards with fewer grantees. That then allows, I think, all of our grantees have at least one FTE on the project, so, providing enough financial support to our subawardees so that they can really make a full program out of it. So we're asking them, like, at least one FTE completely dedicated to having enough time to do a few sessions a week, plus all the planning, plus the recruitment and retaining. So that's one strategy we've employed—just to make sure they have enough money.

[John Bollenbacher:] So in the beginning you mentioned two different types of programs that you folks are running, and can you talk a little bit about why you maybe picked those programs and how they are uniquely suited for your population?

[Abby Hunt:] Sure. So the Teen Outreach Program, Wyman's Teen Outreach Program, is a youth development program that has really strong indicators for reducing teen pregnancy. It also has a service learning component, so one of our agencies that work with foster youth was saying "we really want to do TOP" (which is Teen Outreach Program), "we really want to do TOP, we really feel like our kids need all this stuff." Yes, they need *How to Use a Condom*. Yes, they need *What Contraception Should I Choose?* Yes, they need *Talking Skills*. But they also need, like, *How to Set Goals*, *How to Have Strong Relationships with People*—not just romantic, but all kinds of relationships. So, we chose this youth development approach specifically with these youth that have more risk factors, have different experiences, to give them as much as we could, within the context.

I also love, love the service learning component. I think it's very unique and it gives kids that often are the recipient of all these things, or in trouble, or whatever, like, a chance to determine what *they* want to do to help other people, because it's youth-driven, the project is, and really be effective and being the person giving back, you know. And they really enjoy that piece of it. So we picked it both based on the youth, and then what we identified as the best fit. You know? Youth development approach—you can't really be mad at that, right? I mean, it has the contraception, it has everything in it, but it's a youth development approach. So it fits really nicely in multiple systems. And then, Be Proud, Be Responsible, is a more standard, like, sex ed curricula, and we know it's an evidence-based program. We wanted to have that option. So if we only have eight sessions, we can deliver a program to youth that will be meaningful and has, you know, based on evidence. And then for Competitive Abstinence, we are working with young middle-school kids, primarily Hispanic and Latino in Indianapolis, implementing Making A Difference, which is an evidence-based program. And it's really focused on younger kids who have not yet initiated having sex, just trying to delay sexual initiation until they're a little bit older.

[John Bollenbacher:] So you mentioned that you have a service component involved in your programs, and I think a lot of people, when they think of teenage pregnancy prevention, they're not thinking about incorporating a service component. Can you talk a little bit about why you think that's important, and maybe what extra value that adds for the youth who are in your programs?

[Abby Hunt:] What we've heard from our partners is that it's empowering for them. You know, they have decided what they want to do, and I mean, you know, it feels good to give back. I mean, it's like a good kind of feeling, too, that you've done something for someone else, and you have this good feeling about it, and it's something meaningful, so they're getting these positive messages back. I love it, I also personally was involved in AmeriCorps, and so I just have been with large groups of people and see what that opportunity to do service can—I feel like it can change your life.

[John Bollenbacher:] So it's really interesting, and I wonder if you can talk about why you think the feeling that the youth get helps prevent the teen pregnancy. I know there might not be science behind it, but even anecdotally, what do you think it is about that component that helps prevent teen pregnancy?

[Abby Hunt:] That's a good question. I mean, I think—this is anecdotally—Teen Outreach Program, for example, has some evidence that supports, even if you take out the specific sections on contraception,

for example, that's it's still has some impact on teen pregnancy. But there's no good data behind it. You know, so my anecdotal thought, and a lot of people probably echo, is anything that gives youth a way to look outside their current situation, and to provide some sort of hope for the future. Because it's "easy," and I say that in quotations, because it's not, but it's easy to decide not to get pregnant, and if you're really motivated, you can find a condom, if you're really motivated. For many youth, you know, if "I don't want to, I really, *really* don't want to get pregnant," is more motivating to make all those other things happen. And so, we like to think it's, like, broadening horizons, looking outside, hope for the future, you know. And I think about, like, I see things today, like, oh, that will say, "oh, I will never get pregnant, never have a baby as a teen, because I have X, X, and X I want to do. But if you don't have that, then it's less motivating to avoid it.

[John Bollenbacher:] Yeah, so part of the new media campaign coming up is to try to get people to incorporate more adult preparation skills with their traditional teen pregnancy prevention work, and it seems like that's what you're doing. Can you talk a little bit about why your programs decided to incorporate these other learning opportunities for youth?

[Abby Hunt:] I think we decided to do the youth development approach because that's what our grantees that work with the kids directly were saying, like, "we want this, our kids, a lot of our case workers will get them contraception if they need it, will drive them there if they ask for it, like, if they want it, we will get it for them." But it's getting them to want it, especially when you're with kids that, you know, one of the things we hear about youth in foster care often, and not just youth in foster care, but a lot of youth, they think they *want* to be pregnant, you know. So we chose these programs just to kind of give them everything we could within this context. Like, if we're going to be able to work with these youth, let's give them as many skills in a program that we can, you know, because we can.

[John Bollenbacher:] And that speaks to more holistic approach towards people and youth.

[Abby Hunt:] Yeah. Yes, we know that most people have sex by the time they're 19, and that's normal. So, yes, we want you to have contraception, absolutely. We want kids to be able to be in healthy relationships, to have sex or not, and to not get pregnant. You know?

[John Bollenbacher:] Right.

[Abby Hunt:] If they don't want to have sex, then we want them to have the skills to be able to make that happen within their relationship. "Think about it. Make the right decision for yourself. Think about what you can have in the future." And give some outside view of what can be outside of their current situation.

[John Bollenbacher:] So there is kind of a disconnect, right? I mean, when we look at teen pregnancy rates, they're historically low; they've gone down since 2007. But with the populations you're working with, they're still much higher, so can you talk a little bit about, maybe, that disconnect with what the public is seeing as far as statistics of teen pregnancy, and the realities of working with the populations you work with?

[Abby Hunt:] I think that it's probably partially just when people see that statistic they just think about teens, like, they don't separate in their mind into these subpopulations. The teens in these populations are often overlooked. They especially don't think about GLBTQ teens being pregnant, but, you know, we also find that, like, that has given us access to these populations, because there's not as much attention

given to them politically, often, which is unfortunate. But we've had a lot, from years ago we've had a lot less mess at the top working with youth in corrections and youth who are in foster care.

[John Bollenbacher:] And so, what do you think is the danger of ignoring those most vulnerable populations?

[Abby Hunt:] Well, I think the sad thing about it is that these are all our kids, I mean, they're all kids in our communities, right? They're all kids that you hope when they grow up to be adults that you're going to have a good interaction with. Like, they're all kids that have their own hopes and goals. Often they're kids that really traumatic things have happened to, and that's not their faults, you know, so I think the sad part about not considering these kids is just that they're getting left out. They had experience that many kids have not had. They generally want to be successful adults, it's not like they're, "I want to fail." They want to be successful adults. We've heard from our partners that, our subawardees, that often the boys who are incarcerated, is that they already have caused a pregnancy, and they don't know how to be a parent. They *want* to know that.

[John Bollenbacher:] And a lot of times the youth in that population haven't really seen good examples, right?

[Abby Hunt:] Right. They've had trauma. One of the things that's worked really well with youth in foster care is, we have often a clinical person that's one of the facilitators, because these things come up, like, they come up when you're talking about sex ed, like, trauma comes up. Even in some of the survey questions, just thinking about a question like "Have you ever had sex?" Well, for a lot of us that have not experienced trauma, we're like "Yes" or "No," you know, but for a youth who has maybe not had sex consensually, it's a whole different question, and just by asking it, that begs the question to the youth. So just that these kids are part of our society, they're going to be our neighbors, our co-workers, or people that we interact with, so, you know, we just want to help make sure they have everything they need.

[John Bollenbacher:] And, I think that's a really important point. Can you talk a little bit more about incorporating social workers in the work that you're doing?

[Abby Hunt:] So, one of the things that we wrote in our role as the training and grants management person, is that we make sure that either by us providing the training, by co-providing the training from different grantees, or by supporting our grantees to get outside training, they have all the training and education they need in terms of working with youth who have experienced trauma. So that's one of the levels. So that's always considered within the plan. But then, we realized early on how effective it was. Just by chance, one of our facilitators was a LCSW, so a License Clinical Social Worker, and we found out how important that was, because, so you have a group of, say, 10 youth who are in foster care, you can imagine that all of them have experienced trauma, because they're in foster care, ok? So they're been removed from their situation. Maybe 7 or 8 of them have experienced significant trauma, you know, whether it was abuse, or neglect, or whatever, witnessing violence, I mean, especially, and then youth who are incarcerated witnessing violence, like all those things we know cause trauma. So we found early on that having a clinical or a really experienced with the population person as a co-facilitator allows them, when those things naturally come up in the group, there's someone who is clinical who can effectively address it within the group.

[John Bollenbacher:] And, so, last question, you know, we're kind of in this constant state of shrinking budgets, and if you pair that with, superficially, you look at statistics and teenage pregnancy at a historic low, it's probably easy for people on the outside to say, "well, we solved the problem, let's just start defunding this kind of work," but big picture for you, why do you think it's so important to keep doing this kind of work, especially with these populations?

[Abby Hunt:] Well, I think it's a clear place to intervene in terms of poverty, I think that reproductive and sexual health is something that all people should understand and have access to what you need. We know that the more information you give youth about sexuality and relationships and everything, they do not interpret that as a pass to go crazy and start doing whatever they want. I think it's a human rights, social justice issue to give every person all the information they need to make the right decisions for themselves about their sexual health and about their relationships, so that's the biggest picture for me.

[John Bollenbacher:] Abby, thanks so much for taking the time to talk to us and sharing some of your experiences.

Thank you for tuning in. As you heard, our work isn't done, and it will take more leaders like Abby Hunt to prep teens for the future. Be encouraged, and get connected, at The Exchange. Go to [teenpregnancy.acf.hhs.gov](https://teenpregnancy.acf.hhs.gov).

This podcast series is produced by the Family and Youth Services Bureau within the U.S. Department of Health & Human Services. FYSB is committed to a future in which all our nation's youth and individuals and families can live healthy, productive, and violence-free lives.