

2024 ADOLESCENT PREGNANCY  
PREVENTION GRANTEE CONFERENCE



BUILDING BRIGHTER FUTURES  
WITH TODAY'S YOUTH LEADERS

JUNE 25-27 | SAN FRANCISCO, CA



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# Stepping Stones

**Meeting the Relationship and Sexual Health Needs of Systems Involved Youth**

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# Disclaimer

This project was supported by Grant Number TP2AH000093 from the HHS Office of Population Affairs. Contents are solely the responsibility of the authors and do not represent the official views of the Department of Health and Human Services or the Office of Population Affairs.

# Learning Objectives

- Explain common challenges and considerations that contribute to increased risk for teen pregnancy and STI's among systems involved youth
- Explain how OPA and their funded grant recipients are working to fill gaps in programming for systems involved youth using an innovation pipeline.
- Understand common individual and systemic challenges youth-serving professionals and organizations face when working with systems involved youth to prevent teen pregnancy and STI's.
- Identify the person-centered design strategies used to develop Stepping Stones.
- Explain key characteristics of Stepping Stones.

# Agenda

- Juvenile legal system overview
- Need for sexual and relationship health education for systems involved youth
- OPA's role in filling gaps through the Innovation Pipeline
- Challenges in serving systems involved youth
- Need for trauma informed services
- Stepping Stones: A program designed to serve systems involved youth

# Juvenile Legal System Overview

What do we already know?



# Juvenile legal system overview

- Multiple interaction points
- Youth under the age of 18
- Youth are different than adults
- Governed by state law

# Juvenile legal system overview: Offenses

## **Status Offenses**

Involve behaviors that are harmful to the young person because of their age.

(i.e. running away, truancy, curfew, etc.).

## **Delinquency Offenses**

Entails an act that would be a crime under state law or municipal ordinance if committed by an adult.

(i.e. homicide, robbery, assault, rape, etc.).



# Need for sexual and relationship health education for systems involved youth: In their words (audio)

- Lack of previous sexual health education



Speaker 1

- Lack of healthy relationship models



Speaker 2

# Need for sexual and relationship health education for systems involved youth

- Top health concerns:
  - Young men: STIs, violence, mental health, and substance use
  - Young women: pregnancy, STIs, trauma from prior sexual abuse, involvement in sex trafficking, hygiene
- Youth reported a desire to receive sexual health education, especially while incarcerated
- Youth often have personal motivations that conflict with provider recommendations (e.g., drug use, wanting to have a child)

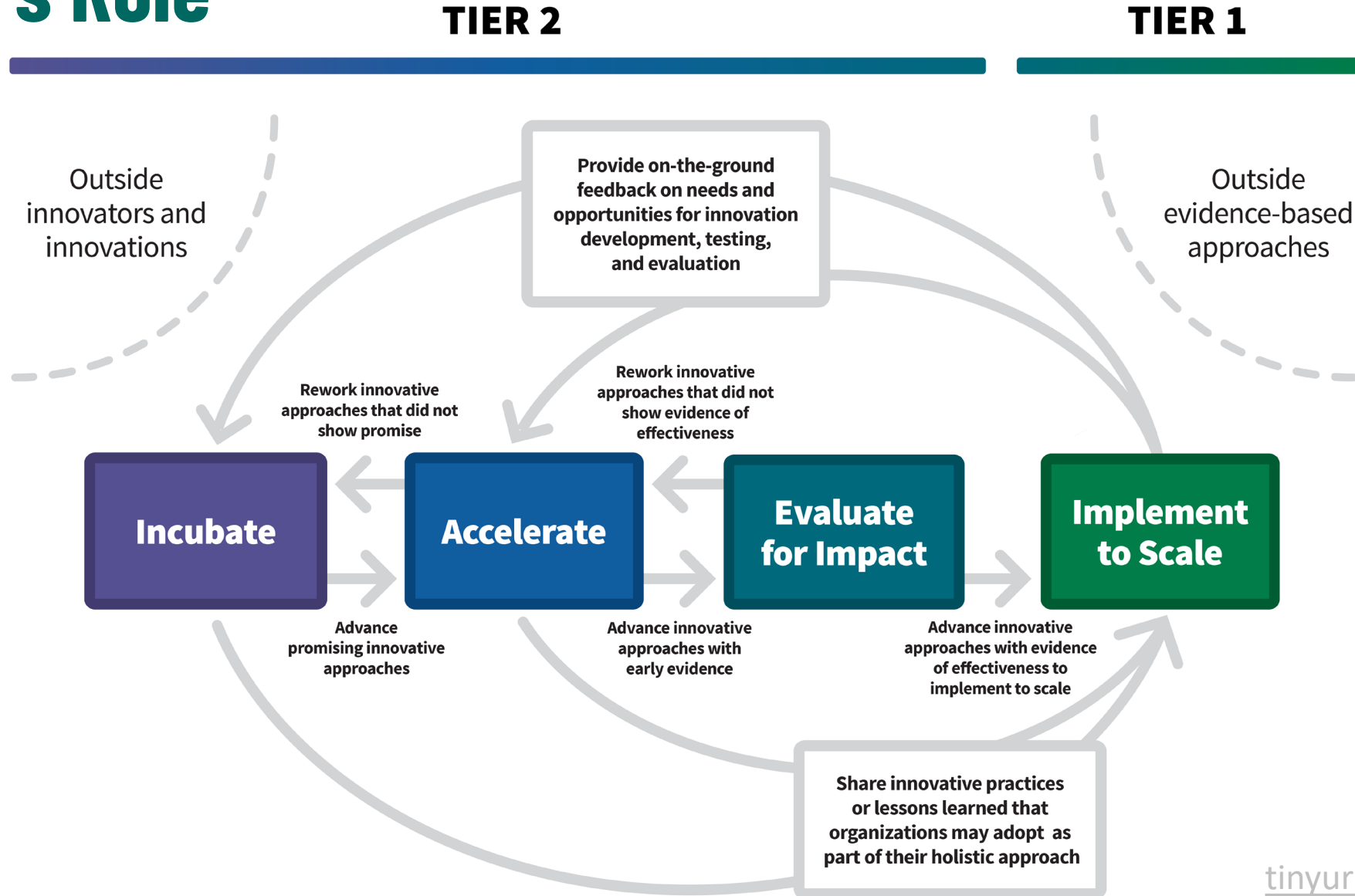
# Need for sexual and relationship health education for systems involved youth

- Systems involved young people are less likely to receive school based sexual health education
- Systems involved young people report a lack of adult support and positive role models for forming healthy romantic relationships
- Existing sexual health promotion programs are not designed with the needs of systems involved youth in mind
  - Higher levels of trauma
  - Higher rates of sexual activity
  - Lower levels of health literacy

# Need for sexual and relationship health education for systems involved youth

- When compared to adolescents on average, youth in the legal system:
  - Are more likely to be sexually active
  - Have a younger age of sexual initiation
  - Use protection less often when they engage in sexual activities
  - Have higher levels of STIs
- Girls in the justice system report a high prevalence of dating violence victimization.

# OPA's Role





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# Common Challenges

**At your table, discuss common challenges to providing sexual health care and education for systems involved youth.**

# Challenges: Sexual health care access

- Lack of access to care & insurance
- Diversion programs lack services compared to residential facilities
- Contraceptive counseling

# Challenges: Multiple risks

- Certain groups of youth are at disproportionate risk of poor sexual health outcomes even before they enter the legal system
  - Youth of color
  - LGBTQ youth
  - Victims of prostitution, child pornography, and sex trafficking
  - Youth involved in child welfare (foster care)
  - Young parents



# Challenges: Youth serving professionals

- Youth may only be involved with systems for a short time
- Lack of trust between youth and providers in the legal system
- Lack of quality programs
- Lack of training
- Multiple priority concerns
- Systems that don't foster autonomy of youth

# Trauma informed design

- 70-90% of youth offenders have experienced one or more types of trauma:
  - physical violence
  - sexual abuse
  - witnessing violence
  - exposure to school or the community violence
- Legal systems originally designed to be punitive rather than rehabilitative
- Programs need to combat the effects of existing trauma (and not create new trauma) so that youth can integrate new learning and behaviors

# Stepping Stones: Our aspirations for a new program

- Easy and brief to implement
- Effective in improving outcomes
- Feels supportive and empowering to young people

# Stepping Stones: Theories of change

## *Motivational interviewing (MI)*

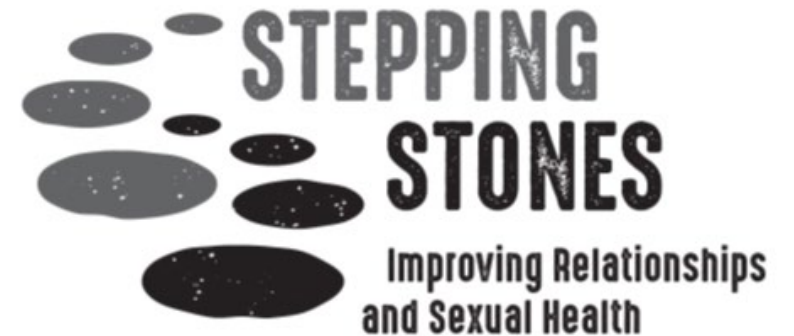
- Heavily researched approach to individual behavior change
- Goal-oriented method of communication designed to strengthen a person's motivation and commitment to make positive health changes

## *Social network theory (SNT)*

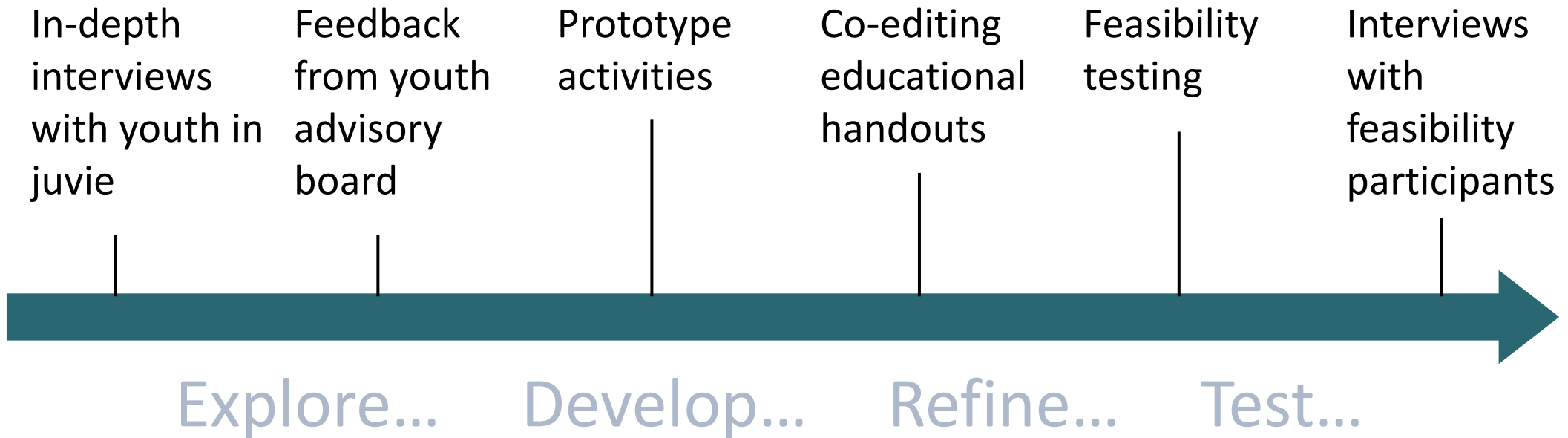
- A collection of theories that involve using or altering social networks to influence health behaviors

# Stepping Stones: Program Overview

- Four 1-on-1 health education sessions using MI and SNT
- Young person works with an adult guide in these sessions
- Participants select from a menu of skills and knowledge
  - related to sexual health and relationships
- Session outline
  - All sessions – Health education on relationships and sexual health
  - Session 1 – Choosing a goal and identifying personal values
  - Session 2 – Creating a social network map
  - Session 3 – Working on a plan to achieve the goal
  - Session 4 – Revising the plan



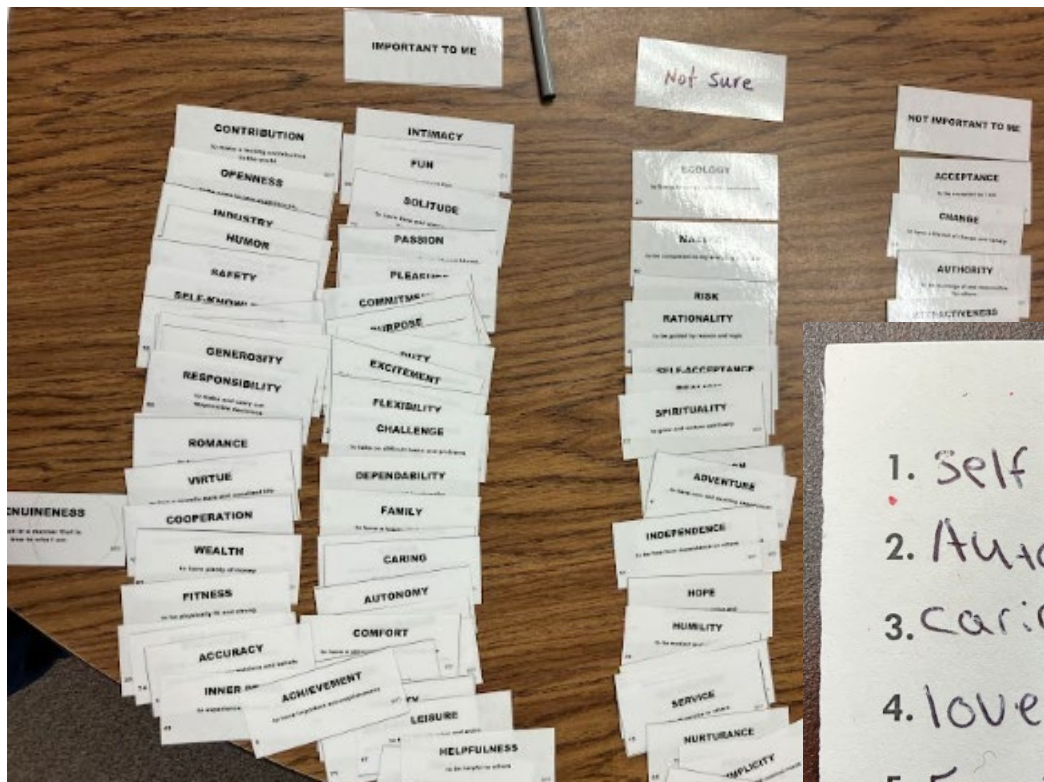
# Youth engagement in Stepping Stones development



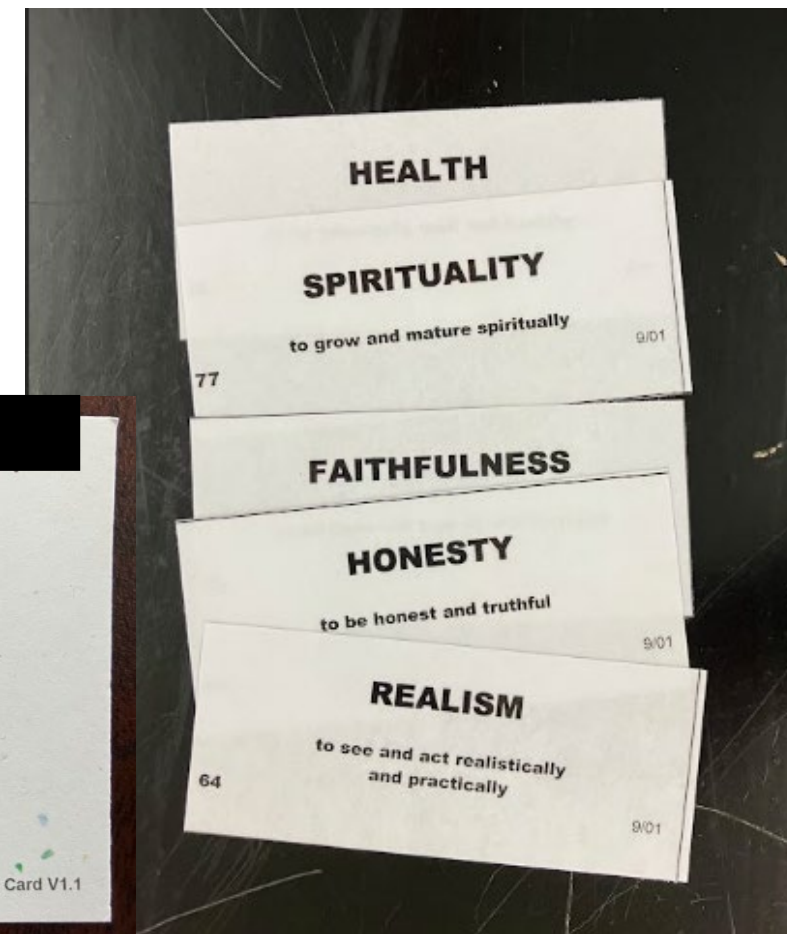
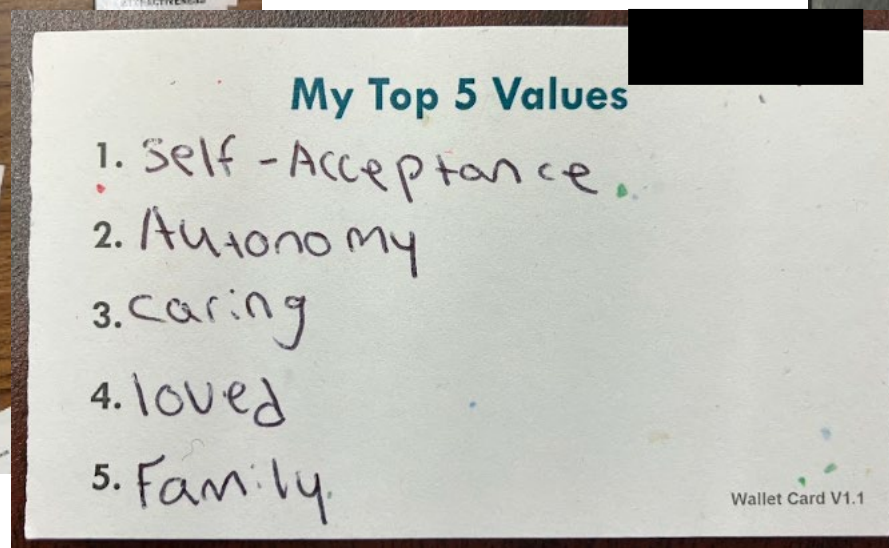
# Stepping Stones: Health education in each session

- Topics covered: Participants choose what to learn, including birth control, condoms, STI testing and treatment, sexual and reproductive health care access, communication skills, healthy relationship skills
- Elicit-provide-elicited (ask-ask-tell-ask)
  - **ASK-ASK:** Adult guide asks for permission to give information, what they want to know, what they already know...
  - **TELL:** Adult guide gives information briefly and in plain language. If they have permission to give ideas, they give 2-3 concrete suggestions and end with an open-ended option.
  - **ASK:** Adult guide asks about their thoughts, feelings, or understanding about the information you gave.

## 1. Sort the values cards



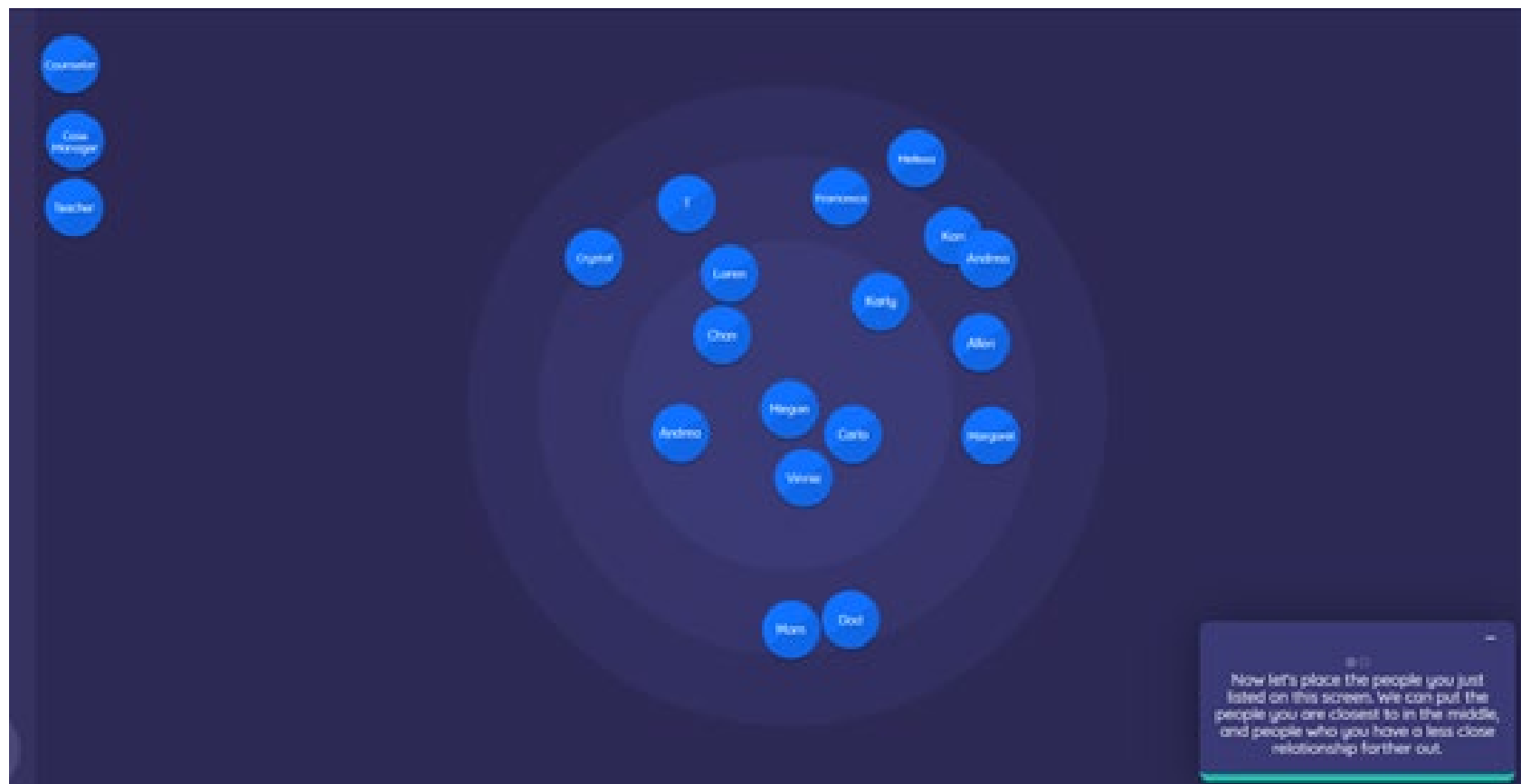
## 2. Identify most cherished values



## 3. Write top 5 values on wallet card



Adult guide: “Now let’s place the people you just listed on the screen. We can put the people you are closest to in the middle, and the people you are less close to farther out.”



**STEPPING STONES** Improving Relationships and Sexual Health

**Planning Worksheet**

Name: [REDACTED] Date: 7-19-22

People who could support me as I work on my goal:  
[REDACTED]

Actions I will take:

1. Force myself, telling myself
2. care about my health
3. Scare
4. plan it out
5. Ask them to get tested too on Wed.

Challenges I may face, and ideas for handling them:

1. Lazy
2. Too busy
3. ~~Scare~~ Fear

Information or skills I still need:

Remind myself  
finding time

## RL's first plan to get an STI test during teen walk-in hours (see left)

- Ask friends to get tested with him
- "Force himself"
- Muscle through it

## RL's revised plans (in the next sessions) were increasingly effective, built on what he learned, and added new skills and information

- Ask adult guide for reminder text
- Tell friends "I really need to get tested"
- Get help making an appointment instead of walking in

“I learned about how to be safer. I learned to talk about things I didn’t want to talk about. I learned about whatever I wanted to learn about at that time, which made it easier to learn.”

“[The adult guide] never judged me. They helped me get through the uncomfortable stuff, stuff about anger and about sex.”

“I learned who is there to support me and what are the most valuable things I need in life (values). The handout about how to be non-confrontational really helped.”

“Like I learned the other day that the most common symptom of an STD is no symptom at all. I didn’t know that at all. I learned from [the adult guide] – that’s a good thing to learn.”

# Summary

- Young people end up in the legal system because of racism, poverty, and trauma – factors that already placed them at risk for poor sexual health outcomes.
- Involvement in the system places them at additional risk.
- Interventions to improve sexual health outcomes need to be relevant and respectful and need to meet young people where they are at.
- Young people are eager to receive support that is nonjudgmental and client-centered.

# Questions?

