

*Youth engagement was the greatest accomplishment of the Teen Pregnancy Prevention Project*



# Teen Pregnancy Prevention Initiative

A Comprehensive  
and Community Approach  
to Adolescent Health

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*"They teach you how to become confident in yourself, or to cooperate with others, or to help each other to succeed."*

*- Youth Participant*



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**In 2015 Children's Aid began a five-year project to make teen pregnancy prevention in the Bronx, New York, a community-wide effort. Funded by a grant from the U.S. Department of Health and Human Services' Office of Adolescent Health (OAH), Children's Aid built a strategy that:**

- Mobilized the community
- Engaged youth
- Incorporated programs into schools and foster care agencies
- Created safe and supportive environments
- Ensured access to youth friendly health services

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At Children's Aid, we help children in poverty succeed and thrive. We do this by providing comprehensive supports to children, youth, and their families in high-needs New York City neighborhoods where life is too often about survival, not possibility.

We know that helping youth realize their limitless potential means addressing the whole person. We designed the Teen Pregnancy Prevention Project to provide evidence-based and compelling information about sexuality, healthy relationships, and pregnancy prevention methods. We created a holistic program to help young people build self-esteem and decision-making skills and we provided educational assistance and preparation for college and careers.

The Bronx communities of Morrisania, Claremont, and Crotona Park East fall within New York City's Community District 3 (CD3), which is also the poorest Congressional district in the U.S. Eighty-three percent (83%) of our target youth population are born into poverty, and 27% of families have a household income level below \$15,000.<sup>1</sup>

In 2011-2013, as Children's Aid began planning for the project, the pregnancy rate for teens aged 15-19 in this district was 43.1 per 1,000.<sup>2</sup> With 35.2 births per 1,000 adolescent females,<sup>3</sup> it had the third-highest teen birth rate across 59 NYC community districts;<sup>4</sup> and far surpassed the current national average (26.6).<sup>5</sup> Moreover, among teens in foster care, 50% of young

## What lead staff liked best about the Teen Pregnancy Prevention Project:

- Parent testimonials about how helpful the program is for their youth
- Quality of program staff
- Curriculum/activities provided to youth
- Level of support provided to youth
- Connections between youth and staff

women reported having been pregnant at least once by age 19, and almost half of young men aging out of foster care reported they have gotten someone pregnant (versus 19% of their peers).<sup>6</sup>

To create a cohesive framework for this ambitious Teen Pregnancy Prevention Project, Children's Aid incorporated input from the targeted youth, developed a network of community partners, and invited parents to join our advocacy. Our approach was a multi-pronged strategy centered around sexual health education programs provided in schools, community centers, and foster care agencies that, over time, increased knowledge about sexuality and reproduction; increased use of condoms and other methods of contraception among those who are sexually active; facilitated reproductive and other health care; and ultimately reduced rates of teen pregnancy.

<sup>1</sup> Citizens' Committee for Children (CCC) of New York. "Keeping Track of New York City's Children." [www.cccnewyork.org](http://www.cccnewyork.org)

<sup>2</sup> NYC Department of Health and Mental Hygiene, Teen Live Births by Community District of Residence, 3 year average 2011-2013, Morrisania (CD 3).

<sup>3</sup> Ibid.

<sup>4</sup> Citizens' Committee for Children (CCC) of New York. "Keeping Track of New York City's Children." Teen Birth Rate, 2012. [www.cccnewyork.org](http://www.cccnewyork.org)

<sup>5</sup> Hamilton, B.E., Martin, J.A., Osterman, M.J.K., & Curtin, S. C. (2015). Births: Final Data for 2013. Hyattsville, MD: National Center for Health Statistics. Retrieved January 23, 2015, from [http://www.cdc.gov/nchs/data/nvsr/nvsr64/nvsr64\\_01.pdf](http://www.cdc.gov/nchs/data/nvsr/nvsr64/nvsr64_01.pdf)

<sup>6</sup> Ibid.

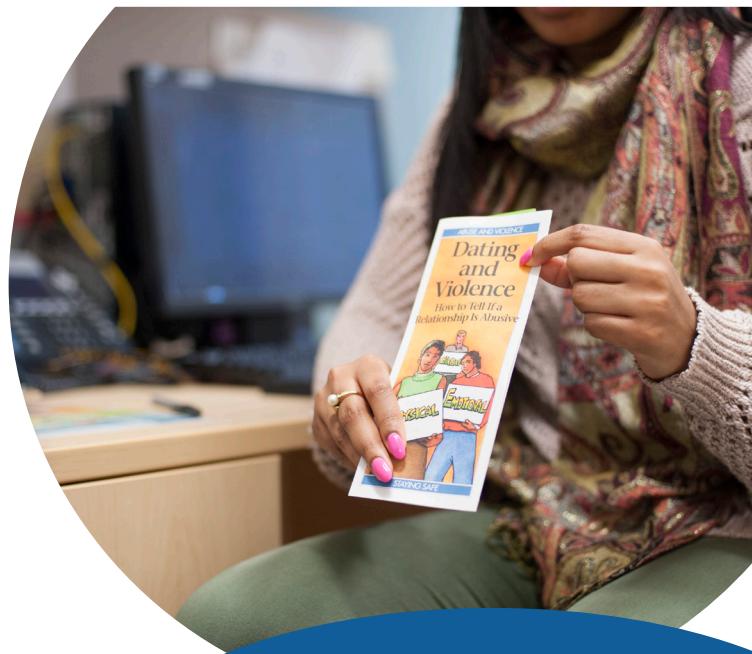
## Mobilizing the Community

The success of the Teen Pregnancy Prevention Project was due to the coordination and dedication of Children's Aid staff, community members, and partners. We were able to provide youth with the information and vision to lead healthy and productive lives by delivering programs that utilize diverse strategies, adapting to input and community trends, and consistently engaging stakeholders.

## Partnerships

Among the people Children's Aid tapped to contribute to the design and implementation of the Project were:

- **Community Organizers** whose core responsibility was to build relationships among students, families, and community leaders.
- **Representatives from foster care agencies** (including Children's Aid's Bronx Family Center) who brought in-depth knowledge of local resources and the target population.
- **Representatives from the health community** who offered access to and expertise on reproductive health services and were poised to influence policy.
- **Community influencers** such as decision-makers, activists, and clergy.
- **Partners** who helped ensure impact in the target community including Bronx Prep Charter Middle & High Schools, Phipps Neighborhoods, Children's Aid's Bronx Health Center, Cardinal McCloskey, Catholic Guardian Services, Graham Windham, Rising Ground (formerly Leake & Watts), South Bronx Rising Together, Planned Parenthood of NYC, Community Health Care Network, BOOM! Health's GoGirl Program, NYC Teen Connection YLT Group, the Sexuality Education Alliance of New York City youth subcommittee, the Bronx Knows Bronx Serving Realness youth group, and the Empire State Poverty Reduction Initiative.
- **Parents and caretakers** who play a powerful role in their children's success.



*"Sometimes I would incorporate the youth and the parent committee [into the education program]... So, it's a lot of togetherness, a lot of healthy relationship bonding, and the parents are really supportive of the young people."*

*- Program Staffer*

All parents and caregivers in the area were invited to attend a multi-week Parent Family Life and Sexuality Education (PFLSE) workshop series designed to help increase their sexual literacy, improve communication skills with family members, and develop a holistic definition of sexuality. The curriculum encourages adults to share their experiences with peers, strengthen ties with their children, and empower themselves to play a crucial role in preventing young people from becoming parents before they are ready.

### What parents liked best about the Project:

- Topics
- Accuracy
- Support from program staff
- Level of support provided to youth
- Seeing all of the involved parents and youth



*"I like the curriculum. I like what they're teaching. I like the instructors. I believe they're really informative and caring. I like the fact that my daughter's 'over the moon' about the program."*

*- Parent*

## Advisory Committees

We engaged adults and, crucially, the youth themselves, in the program design and the ongoing work to reduce teen pregnancy in the community.

### Community Advisory Group (CAG)

All of our community partners were represented on the CAG. In collaboration with the NYC Department of Health and Mental Hygiene, the group helped us design and adapt a program that would resonate with the targeted youth based on their needs and challenges and on community trends.

### Bronx Stakeholders Committee

Parents and members of the Youth Leadership Team were invited to join this committee to understand how teens view their health and rights, and how social issues impact adolescent reproductive health. We want to help parents be a resource for their children, so Children's Aid staff guided a partnership that built rapport, trust, and open communication between youth, their families, and the other community representatives. Young people and adults worked together and learned in the same space.

We provided parents with the same information on minor's rights regarding their primary, reproductive, and mental health care that is available to teens as part of "The Adolescent Rights Project." This information has helped many young people get the services they need because

it provides resources and explains their confidentiality rights. With this information parents can better support their teens' health and reproductive decisions.

### Parent Peer Education Program

In a program similar to the Children's Aid Peer Education program, parent advocates promoted and advocated for adolescent reproductive health among their peers in their community. The parent advocates identified opportunities where teen reproductive health education and resources could be provided. They connected parents to resources and encouraged them to become allies for their teens.

### Parents/Guardians Outreach contributed to the success of the Teen Pregnancy Prevention Project:

- Created a media campaign about teen sexual consent
- Planned and hosted community events
- Partnered with the Youth Leadership Team on events such as the Youth Summit
- Built awareness through outreach in stores, churches, and schools



### Youth Leaders were crucial to educating their peers

- "Love Shouldn't Hurt" annual intimate partner violence prevention event
- Teen pregnancy prevention annual event
- Text messaging campaign to answer teens' questions

## Engaging Youth

From the beginning of the Teen Pregnancy Prevention Project, we included Bronx young people in decision-making and gave them opportunities for authentic participation because we knew their input would be crucial to its success.

We grew our existing Youth Leadership Team (YLT), and participants contributed their ideas, thoughts, and attitudes about reproductive health, positive youth development activities, community engagement, parent/guardian involvement; and the best strategies for outreach, recruitment, and retention. They also reviewed the curriculum to make it inclusive to all youth.

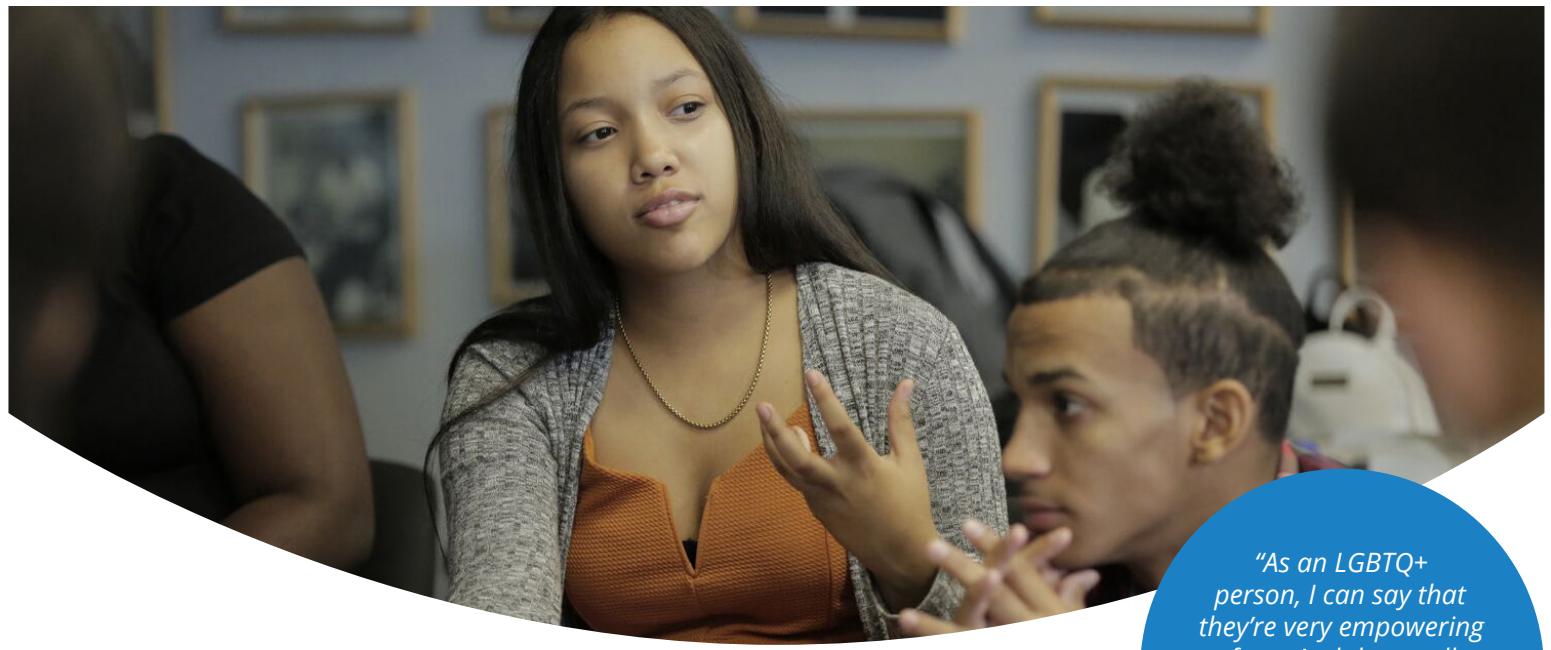
Young people who had involvement with foster care agencies helped us identify and mobilize their hard-to-reach peers. They shaped how the education program would be successful by giving feedback on the content, best days to offer programming, incentives, and promotion. Also, they co-facilitated programming with staff from agency partners.

The young people told us teens in our pregnancy prevention programs would also want educational and employment opportunities, events where they could network with other youth, and help planning a successful future. As a result, we offered workshops on college preparation, resume building, time management, personal finance, and more. We also offered participants the opportunity to become Peer Educators, which included a stipend.

Our Youth Leadership Team worked with other YLT groups from Bronx-based community organizations on an annual Youth Summit, which brought peers, community stakeholders, and elected officials together to address adolescent health.

*"It gets the kids thinking and interacting and engaging with one another. A lot of our young people don't trust people at all. But when they get into a room, it's just like a big family."*

*- Program Staffer*



## Creating Safe and Inclusive Environments

The Teen Pregnancy Prevention Project included language and safety nets for all young people. All program materials were medically accurate, age appropriate, culturally and linguistically sensitive, and inclusive of LGBTQ+ youth.

School-based programs were safe and supportive environments that actively looked for youth with unresolved or current trauma and then approached them and their behavior through that lens to provide a better educational experience.

Both Peer and Parent Educators were informed on issues that can be stigmatizing and contribute to isolation of young people. They were charged with countering those attitudes as part of their outreach.

### What youth liked best about the programs:

- Open communication between staff and youth
- Information
- Caring nature of the program staff
- Information on jobs and internship opportunities
- College preparation

*"As an LGBTQ+ person, I can say that they're very empowering of me. And they really help me make myself more proud of who I am."*

*- Youth Participant*

### LGBTQ+ Youth

Every staff member who worked with young people had LGBTQ+ training and a separate training on working with transgender and gender non-conforming youth.

### Spanish-Speaking Youth

Children's Aid made it a goal to extend the Teen Pregnancy Prevention Project to young people in the South Bronx who speak only Spanish. We translated our materials, recruited bilingual health educators from our staff, and collaborated with our partner agencies to integrate their Spanish-speaking youth into the project. Understanding that Spanish speakers come from a variety of countries and backgrounds, we worked with young people to be culturally sensitive about health and sex education.

### Youth Living with Trauma

We understand that some behaviors (such as: hypervigilance, dissociation, or pre-emptive aggression) create negative relationships with adults, but that they are actually coping strategies.

For young people living through trauma, social workers assigned to them stayed with them throughout the program and beyond. A consistent presence over years is essential to establishing a foundation of trust.

# Implementing Programs

## Two Evidence-Based Programs

Children's Aid worked with Bronx Preparatory Charter Middle and High schools, Phipps Neighborhoods, and five Bronx-based foster care agencies, including our own, to implement two proven teen pregnancy prevention programs; CAS-Carrera and Making Proud Choices! (MPC!). The goals and objectives shared by these programs include:

- 1) Increased knowledge about sexuality and reproduction
- 2) Consistent use of condoms and other methods of contraception among those who are sexually active
- 3) Improved medical care

## CAS-Carrera Program

Guided by a philosophy that sees youth as "at promise" instead of "at risk," this program was developed in 1984 by Dr. Michael A. Carrera and Children's Aid (then the Children's Aid Society - CAS). CAS-Carrera is designed for young people in underserved communities, characterized by higher-than-average rates of poverty, unemployment, teen pregnancy, and high school dropout. It takes a holistic approach to empower youth and helps them develop personal goals and the desire for a productive future, in addition to developing their sexual literacy and educating them about the consequences of sexual activity.

## The Making Proud Choices! Program

Youth in foster care are arguably the most underserved and most difficult to reach young people. Most of them have experienced trauma, including neglect and abuse, that impacts their psychosocial and sexual development and increases the likelihood that they will engage in behaviors that place them at risk of early pregnancy and STIs.

MPC! An Adaptation for Youth in Out-of-Home Care is designed to empower adolescents in foster care with knowledge. Its goal is to help them build the self-respect that will encourage them to protect themselves against unintended pregnancies and STIs. We offered MPC!, the only curriculum approved for this population, in five

Bronx-based foster care agencies including our own. These partners brought a host of trauma-informed skills and experience working with youth in foster care, which guided the training and implementation of the program.

The goal of MPC! is increased knowledge of pregnancy prevention and STIs; belief in the value of safer sex, including abstinence; improved ability to negotiate abstinence/safer-sex practices; increased ability to use condoms correctly; stronger intention to use condoms during sex; lower incidence of HIV/STI and sexual risk-taking; and taking pride in choosing responsible sexual behaviors.

### CAS-Carrera Model

1. **Education:** Individual Academic academic plans and expert help for each participant
2. **Employment/Job Club:** Exposure to the "world of work" and money management
3. **Family Life and Sexuality Education:** Age-appropriate, medically accurate sexuality education taught by trained professionals
4. **Self-Expression:** Music, dance, writing and drama workshops led by professionals
5. **Lifetime Individual Sports:** Fitness program emphasizing sports such as swimming and squash that can build self-discipline and can be enjoyed throughout life
6. **Full Medical and Dental Care:** In partnership with local providers
7. **Mental Health Services:** Discussion groups, individual counseling, case management, and crisis intervention as needed

### Based on cognitive-behavioral theories, MPC! is built on four major components:

1. Goals, dreams, and adolescent sexuality
2. Knowledge, covering information about the etiology, transmission and prevention of STIs, HIV, and teen pregnancy
3. Beliefs and attitudes
4. Skills and self-efficacy



*"My mark of a solid workshop is if they're asking questions. That means they're engaged by what we're teaching. And I can't say that there's ever been a session where there hasn't been a question or any kind of engagement from the [students]. So, I definitely see it being positive for them."*

*- Program Staffer*

## Short-Term Results

More than 900 youth were served in each year of the Teen Pregnancy Prevention Project (except the last, when the COVID-19 pandemic reduced in-person programs). Overall average session ratings (from observation data) were favorable.

## Family Life and Sexuality Education (FLSE) Scores

	CAS-Carrera afterschool program		CAS-Carrera in-school program		MPC! program	
	% correct before	% correct after	% correct before	% correct after	% correct before	% correct after
<b>Average FLSE knowledge scores in 2016-17</b>	34%	49%	40%	47%	60%	70%
<b>% who improved their scores in year 2016-17</b>	70%		65%		51%	
<b>Average FLSE knowledge scores in 2017-18</b>	38%	51%			60%	70%
<b>% who improved their scores in 2017-18</b>	67%				59%	
<b>Average FLSE knowledge scores in 2018-19</b>					62%	62%
<b>% who improved their scores in 2018-19</b>					29%	
<b>Average FLSE knowledge scores in 2019-20</b>					59%	66%
<b>% who improved their scores in 2019-20</b>					55%	



*I like being a community school where we're actually able to build relationships with the youth and families and teachers and administrators. So, if something is coming up for our 6th graders, [we can] put our heads together. What can we do for our 6th graders to tackle this issue?*

- Program Staffer

## Knowledge

Data gathered from nearly 600 participating young people showed gains in family life and sexuality knowledge over time.

Most of the participants felt the programs enhanced knowledge about life options; helped them with social and emotional maturity; and improved their decision-making, time management, and stress-management skills.

## Support

Most youth said they would talk to program staff for guidance if they had difficult decisions to make.

Many parents said their teens got much more than they had hoped for, including improved socialization skills, increased independence, and coaching on teamwork and leadership.

Participants also noted help with academics, preparing college essays, scholarship opportunities, employment opportunities, and getting glasses.

## Referrals

MPCI and CAS-Carrera program staff made roughly 300 referrals annually for reproductive health services, primary care, mental health, and/or vocational or educational services. The majority of those referrals involved reproductive health and/or vocational services. (The primary referral reason the last year of the project was for mental health support, as a result of pandemic-induced traumas.)



*"I like how the door is always open. You can always go in, and someone will be there offering to help you. And they'll be like, "Oh do you need anything?" They just ... they're so eager to help you out"*

*– Youth Participant*

## Analysis and Adaption

Children's Aid is committed to actively evaluating and improving our programs and adapting to both internal and external factors that impact our work.

To assess the progress of the Teen Pregnancy Prevention Project, Children's Aid staff assessed the extent of community mobilization, youth engagement, the implementation of the two education programs, and the prevalence of safe and supportive environments and youth friendly health care resources.

Children's Aid staff conducted an implementation evaluation of these programs by looking at performance measurement data, program quality and fidelity, program environments, and experiential data from participants at all levels of the program.

## Adapting to Policy Challenges

Despite overwhelming evidence that teen pregnancy prevention programs (TPP) work (the birth rate among teens has decreased by nearly 50% between 2007 and 2015 and 67% from the 1990s with help from TPP programs) in Year 3, funding for the Teen Pregnancy Prevention Project – and all TPP projects – was terminated by the U.S. Department of Health and Human Services. The impact on this project was significant.

The 26 Children's Aid staff who supported students within the CAS-Carrera program left or were laid off due to uncertainty and funding shortfall. The Phipps after-school program was discontinued, and two of the foster care sites ceased to offer the MPC! program.

Children's Aid joined other affected programs in mounting a legal process, which resulted in the restoration of the funding in fall 2018. We quickly hired a limited crew of new CAS-Carrera staff to provide the program on an as-needed basis at Bronx Prep Charter. Staff from MPC! were also able to continue their work.

## Adapting to COVID-19

The pandemic had a tremendous impact on program implementation in the final year of the project. Bronx Prep was one of the first public schools in New York City to close. For the remainder of the school year, push-in programming to classrooms was suspended, and staff pivoted to focus on support to families, connecting them to needed resources, like food, housing, and health care. Additionally, staff provided mental health support to students and families remotely and referred those who needed further interventions to Children's Aid Bronx Health Center's mental health providers.

Recruitment for MPC! was an even greater challenge, as many young people in foster care were displaced, and lacked access to technology and/or safe spaces to attend workshops sessions. However, we continued to provide MPC! programming at three of the five agencies.

### Youth reported learning a great deal about:

- Sexuality
- Managing emotions
- Patient rights
- Anatomy
- Birth Control
- Avoiding pregnancy
- Community resources

## Sustainability

This was an ambitious project. At the outset, Children's Aid recognized implementation would present challenges, and that working with our entire partnership team would help us to overcome them, improve the outcomes, and give us valuable information to bring the program to scale.

We were most successful training staff, identifying partners, and delivering the programs. Our challenges included participant engagement and maintaining partnerships over the five-year period.

There are reasons to be optimistic about the sustainability of the Children's Aid Teen Pregnancy Prevention Project:

- MPC! is now integrated into foster care agencies in the South Bronx. Twenty-four staff members were trained with the tools and skills to continue this program. Partner-agency leadership remains committed to the program.
- Thanks to our parent/guardian's dedication and commitment, we now have a team of youth affirming adults in our communities who are ready and willing to advocate for adolescent reproductive health.
- The Bronx Stakeholder Committee members showed that community members are deeply invested in the mission to reduce adolescent pregnancy.
- Children's Aid developed more than 15 new partnerships during the Teen Pregnancy Project.
- Numerous trainings over the past five years increased professional development for both new and returning staff on topics including supervision; classroom management; puberty and contraception; sexuality and gender; trauma; and reporting.
- We remained resourceful even in the face of grant cancellation, partnering internally with the Children's Aid health team and externally with organizations to ensure that students were receiving comprehensive support.
- The project was presented at more than 30 community events.

## Conclusion

For more than 160 years, Children's Aid has been knocking down the barriers young people face in fulfilling their potential. We are a professional powerhouse of solutions for young people, and we know that pregnancy prevention is one of the most important ways to help them become leaders of their own lives.

As we plan for future iterations of the Teen Pregnancy Prevention Project, we know that community engagement, consistency of staff and partners, and the input and leadership of youth and parent/guardians are crucial to success. We understand the need to engage youth at younger ages, to provide appropriate incentives for participation, and to recruit younger facilitators who can better relate to youth.

Participants suggest a bit more fun in the activities, greater presence in the schools, more outreach in the community, field trips related to colleges and employment, and information about community service opportunities. Parents/guardians suggest better information-sharing in the community to build awareness.

The Bronx community wants their youth to succeed. The dedication is there. At Children's Aid, we have the knowledge and expertise to lead a project as ambitious as teen pregnancy prevention in the South Bronx. Our young people deserve the opportunity to dream.

We are grateful for the participation and thoughtful input of the youth and parents of the Bronx Community. Without their involvement, this initiative would have never had its success.

We are indebted to our partners for their continued support: Bronx Prep Charter Middle & High Schools, Phipps Neighborhoods, Children's Aid's Bronx Health Services, Cardinal McCloskey, Catholic Guardian Services, Graham Windham, Rising Ground (formerly Leake & Watts), Planned Parenthood of NYC, and Community Health Care Network.



**Children's Aid**

Every step of the way

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