## Parental/Family Involvement in Title X Family Planning

# Faculty

Elise Turner, CNM Emory University Regional Training Center Atlanta, Georgia

## **Program Objectives**

- Identify at least four different types of families and discuss how these families impact the health/behavior of youth.
- Name three strategies for working with diverse families.
- List at least three characteristics of healthy families.

## **Program Objectives**

- Identify three benefits of and three barriers to family planning involvement.
- Differentiate between the three types of family involvement.
- Identify eight steps for effective family involvement.

# **Title X Philosophy**

- Science based health advice/promotion
- Emphasis on self determination
- Respect for individuals; family involvement
- Promotion of reproductive responsibility
- Family PLANNING not just contraception
- Accessibility to a wide range of FP methods
- Knowledgeable workers!

## Beware!

- If you work in a FP clinic and think your main job is helping people pick a method of contraception- you are missing the boat!
- Get the bigger picture of helping people take control of their lives and make healthy decisions.
- Good information helps make good decisions.

## **Mandatory Notification**

- Healthy communication can't be forced.
- 58% teens had confidential health concerns.
- 25% wouldn't seek help if no privacy.
- Healthcare professionals want privacy.
- Ease teen patients' fears about privacy, but still promote family involvement.

## **Family Involvement**

- Is NOT:
  - -Parental consent.
  - -Parental notification.
- •IS:
  - -Open communication within family.
  - -Families support children in seeking FP services.
  - -Families discussing health and reproduction decisions together.

## Aren't Teens Smart Enough?

- It is not about "smarts".
- Frontal cortex matures by age 25!

-Judgment, decision making, impulse control.

Amygdala more active in teens.

-Instinctive "gut" reactions, emotionalism.

## Family Involvement Is Important

- Teens want parents' input.
- Parents are the MOST influential factor for 45% of teens.
- Teens make healthier choices with parental input.

## Who Competes With Parents?

- 31% Friends
- 7% Religious Leaders
- 6% Teachers/Sex Educators
- 4% Media

## Why Aren't Parents Involved?

- Lack of accurate info.
- No role models.
- Not comfortable discussing "sex".
- Afraid of child's reaction.
- Willing, but too uncertain.
- "He'll ask when he wants to know".
- Too involved in their own lives.

## **Family Types**

- Married, biological parents.
- Single biological parent.
- Other family structures
  - -Mix of bio and non-bio partners.
  - -Raised by relative.
  - -Foster situation.
  - -Emancipated youth.
  - -Abandoned youth.

#### Families

- Not so important WHO the family members are, but HOW they function.
- Clinic staff has to work with WHO the patient's family is or IS NOT.
- If non-salvageable, may have to help find another adult who can mentor.

## Bad Stuff You Can Learn From Your Family

- Stereotypical, limiting roles.
- Violence and coercion.
- Sex is nasty and evil.
- Sex is a way to use and manipulate.
- Sex as gross humor.
- Intimacy has no value.
- You are worthless.

#### What Kids Need to Know?

- Biology of reproduction and disease.
- Respectful relationships.
- Effects of intimacy.
- Avoiding coercion.
- Incorporating family's values.
- Where to go for help and info.
- YOU ARE WORTHY.

#### **Parent Beliefs**

- Risks are more dangerous now.
- Teens don't want input from parents.
- Teens and parents can never talk.
- Chaos and dangerous behavior are normal teen characteristics.
- Teens already know all about sex.

#### Parents Need to Know: STDs

- STDs are more common than thought.
- Many more types of infections: 25!
- STDs can be silent but deadly.
- STDs can be transmitted numerous ways.
- Biologically, young women are more susceptible than adult women.
- Condoms aren't the perfect answer.

## Parents Need to Know: Contraception

- Emergency contraception.
- All the choices.
- Oral contraceptives may not be the best choice for teens due to compliance.
- Many teens are already sexually active before seeking contraception.

## Teens

- Risk taking is part of normal development.
- Risk taking can be positive!
- Risk taking is often impulsive.
- Not very good at estimating risk.
- Not very good at assessing long term risk.
- Crave belonging to a group.

## Use It To An Advantage!

- Help teens find positive risks to take.
- · Let them fail with safeguards.
- Talk through plans with pros and cons.
- Talk through long term view of plans.
- Hook teens up with healthy groups.
- Have teen identify mentors.

## **Connected Parents**

- What are teen's hopes?
- Who are teen's friends?
- · How does teen spend time?
- · How many meals eaten together?
- How are values shared?
- What are toughest topics to discuss?
- What limits are set?

## Parent Excuses

- I can trust my daughter.
- I don't know how to work the computer.
- The school/church takes care of that.
- My children tell me everything.
- We're too busy to ...
- I can't tell my child not to do XXX because I did it as a youth (or worse, I'm doing it now).

## Parents' Mistakes

- What if mom or dad made a foolish choice as a youth?
- Too ashamed to tell?
- Best option:
  - -Tell what you did.
  - -Tell why it was a bad choice.
  - -Discuss short/long term effects of decision.
  - -Discuss how youth can avoid same mistake.

## Parents' BAD Example

- What if mom or dad is making foolish choices RIGHT NOW?
- Problematic, because teens watch very carefully what parents do.
- Teens don't buy the argument: it is OK once you turn 18, 21, or "my age."
- Find a more wholesome mentor.

## What Doesn't Work...

- Yelling
  - Pretending
    Belittling
- Ordering
- Preaching · Joking
- Scolding · Giving pamphlets
- Vagueness · One hour classes
- Wishing 
  Warning
- Hoping
- Do as I say, not as I do

#### When?

- Role modeling occurs from the beginning!
- General concepts: love, relationships, responsibility, bodies/sex as normal.
- Answer questions as they come.
- Address puberty changes as good initial step.

## WISE Model

- Welcome: available and respectful
- Interest: in daily activities
- Support good goals
- Encourage, Educate, Empower

## Parents, Be Strong...

- Describe limits and explain your reasons.
- Buddy up with like-minded adults.
- Monitor compliance.
- Apply consequences.
- Stay specific.
- No debating or arguing.
- You have to "walk the talk".

#### Abstinence

- Parents are the best influence.
- Emphasize more than biology.
- Emotional affects of intimacy.
- Abstinence as an expectation.
- Abstinence most likely when youth has supported dreams and goals.

#### How? Preteen~

- You are really growing!
- How much have you grown since last year?
- How has your body changed?
- More changes will be happening.
- What do you think will happen?
- Provide factual info.

## **Middle School**

- Sometimes old friendships change during the teen years...
- What are you noticing at school?
- · How have your friends changed?
- How old should a person be to date or have a boyfriend/girlfriend?

#### Middle School

- What do your friends know about sex?
- What do your friends know about STDs?
- How would a person your age feel the next day if they had sex with someone?
- Why would a person want to go out with an older guy/girl?

#### Teens

- What have you heard about condoms?
- Where do kids at school get condoms?
- What kinds of things can happen even if you use condoms?
- What would you tell a friend who thought they had an STD?

## It's Not All Biology

- How do BFs/GFs show respect?
- How do you set and discuss limits?
- What if someone disrespects your limits?
- What is intimacy? What is love? Lust?
- What are non-sexual ways to show affection?
- When is it "right" to have sex?

## **Conversation Starters**

- What would you look for in a wife/husband?
- How would you find out if this is someone you can trust with your future?
- Why do you think the divorce rate is so high?
- How would having sex as a teen affect your later relationships?

# **Avoiding Coercion**

- Predators are looking for victims.
- Predators are where the kids are!
- Predators can be other teens.
- Lessen your chances of being a victim.
- Sexual coercion doesn't always look like "rape" on TV.

#### **Predators: What They Do**

- 1 Violate personal space.
- 2 "Social" touching.
- 3 Make inappropriate remarks.
- 4 Gauge responses at each step.
- 5 Inappropriate touching.
- 6 Often offer alcohol/drugs.
- 7 Attempt to isolate and assault.
- 8 Blame the victim.

#### How to Respond to Predators

- Do NOT tolerate inappropriate behavior.
- Be clear with "NO" and "STOP".
- Use assertive body language and tone.
- NEVER be alone with predator.
- Expect blame from predator.
- Alcohol and drug use
- –Increases vulnerability.
- -Decreases ability to respond
- appropriately.

#### **Refusal Skills: Be Nice**

- No (be decisive)
- "I" statement
- Change (conversation, location, people)
- Exit (get away)

## **Community Outreach**

- "Talk to Your Kids" Day
- Presentations to parent groups
- "What's your Teen IQ?"
- Presentations to teens
- "Talk to Your Parents" Day
- "What's your Parent IQ?"

# Conversations are a two way street!

#### Teens~

- You can train your parents to talk to you!
- You can start conversations.
- Be patient with your parents; they are fragile!
- Training parents is not instant.
- Choose to take no offense.
- Make the conversations light and pleasant.

## **Topics for Teens**

- What is the best part of your day?
- What is the hardest part of your day?
- What do you enjoy most about your friends?

## **Topics for Teens**

- What is your favorite way to spend time off?
- What about me makes you happy?
- What are your favorite memories from your teen years?
- Who influenced you the most as a teen?

#### **Topics for Teens**

- When you were a teen...
  - -What did teens worry about?
  - -Did someone you know get pregnant?
  - -What did you think about it?
  - -What did teens know about STDs?
  - -What do you know now that you wish you had known as a teen?

## **Key Opportunities**

- Making appointments.
- Waiting room.
- Walk-ins.
- Parent interview.
- Teen interview.
- Post exam meeting with adult and child.

## **Protecting Privacy**

- Limit access to clinic info.
- Track who handles info.
- Main check in to avoid reason for visit.
- Call waiting patients by number.
- Document IF and HOW patients may be contacted.
- Have discreet containers for supplies.

## **Involve Staff Members**

- Train everyone at basic level.
- Companion has to be welcomed.
- Social workers may be best team member for particular situation.
- Sometimes joint meetings work well.
- Remember that these appointments
  may take longer- you have TWO clients!

## Appointments: When Teens Call

- Clerks need this training too!
- Screen for major concern.
- Explain confidentiality policies.
- Ask who will accompany teen.
- Explain that teen will see staff alone, and companion will only be involved as teen requests.
- Explain advantages to adult companion.

## Advantages to Family Companion

- Transportation.
- Company in waiting room.
- Assurance that it was good to come.
- Help in reviewing options.
- Continued support of decisions.
- Improves family relationships.
- No guilt from sneaking to clinic.
- No fear of discovery.

## Appointments: When Parents Call

- Screen for major concern of parent.
- Explain confidentiality policies.
- Ask what role parent wants to play.
- Explain that teen will see staff alone, and companion will only be involved as teen requests.
- Offer parent opportunity to make appointment for self to discuss concerns.

#### Walk-ins

- Discuss why here? Why now?
- Most walk-in visits benefit from a more in depth follow up visit.
- Plan for family involvement for next visit.
- Offer to talk to parent on phone about visit.
- Give parent info sheet to teen.

## **Pregnancy Testing**

- Extremely important point of contact.
- Sexually active or grossly misinformed.
- Not using contraception appropriately.
- Anxiety creates teachable moment.
- Time invested will have BIG payoff!

## Waiting Room

- Is privacy respected?
- Age/gender/ethnic appropriate brochures?
- Is it welcoming or sterile and cold?
- How can clients interact with staff?
- Take a tour yourself- sit there awhile!
- The TV/VCR Issue...
  -Helpful, entertaining?
  Or TORTURE??

## Waiting Wands?

- Audio Wands that museums use.
- Private, client controlled.
- Great for non readers.
- Recording with info for all new patients.
- Topical recordings on health subjects.
- Language choices for your population.
- Kiddie versions.

#### When Parent Accompanies

- Welcome parent, praise teen.
- Explain clinic policies and procedures.
- Talk directly to teen.
- Seat teen in primary position.
- Explain confidentiality and teen control.
- Ask about concerns jointly.

#### When Parent Accompanies

- Parent leaves, and then interview teen.
- Parent participates as teen chooses.
- Explain to teen that you can give clinic reasons if teen is too shy or is afraid to confront parent.
- Counsel teen privately, then ask what to share with parent.

## **Joint Exit Session**

- · Reveal only what teen chooses!
- General overview of visit.
- Assurances of health and well being.
- Discussion of abnormal findings.
- Care Plan.
- Follow up recommendations.

## When Teen Chooses Privacy

- Review general clinic procedures.
- Answer generic questions.
- Counsel regarding parenting issues.
- Calls by parent:
  - -Do not indicate if a teen is or is not a patient.
  - -Do not indicate when teen may be coming to clinic! "You might want to stop by next Wednesday at 9 am!"

# Unpleasant Family • Teen forced to come by parent.

- "Virgin Checks"
- Parent insists on being present at all times.
- You witness abusive talk or behavior.
- Parent takes over conversations.
- Parent is giving incorrect info.
- Parent wants to manage contraception.

## When Family **Involvement Fails**

- Parents throw a fit when they learn that teen can receive confidential care.
- Family member is abusive.
- Parents are facilitating statutory rape.
- Parents are uncaring and terrible role models.
- Teen is deceptive to clinic staff.

#### When You Have to Report

- Post signs that explain what must be reported under the laws of your state.
- · Do you know your state's laws?
- Know other agencies' roles ahead of time!
- Let Protective Services know you want to stay involved as appropriate.
- Explain process to parents and teen.

#### **Toxic Families**

- Be confident in your role and limitations.
- Be aware of personal safety issues.
- Keep your boss informed!
- Have security procedures in place at clinic.
- Does your clinic have a "panic" button"?
- If you have concerns, local PD can help.

## Salvaging Situations

- Safety first!
- · Have lists of reputable mentoring programs.
- · Have an informational meeting with mentor programs.
- Have teen identify possible mentor.
- Explain again how confidentiality works.
- Teens like websites and hotlines.

## Giving Bad News to Teens

- Discuss all information with teen first.
- · Point out that parent is likely to find out by another means.
- · Discuss pros and cons of family involvement.
- Offer to call parent with teen, or meet with teen and family.
- Review your state's laws about decisions teens can make.
- · Role play with teen breaking the news.

## **Giving Bad News to Parents**

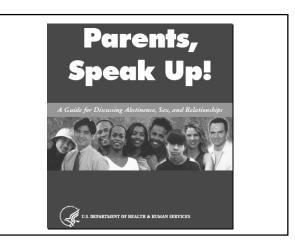
- At teen's request only!
- Introduce yourself and your clinic.
- Emphasize that teen is trying to be responsible and had concerns.
- Dispel worst concerns, relieve worst fears.
- Describe situation in simple terms.
- Ask what you can do at this point.
- Give your name and phone for follow up contact.

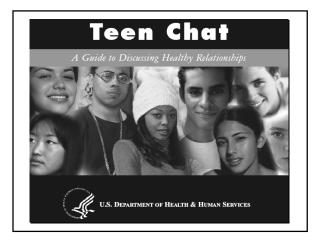
#### www.4parents.gov

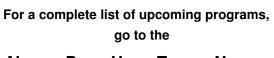
- Abstinence, development, and health
- Parenting
- Mental health
- Risky behaviors
- Ask the expert
- Topic glossary

#### www.4parents.gov

- Talk to your teen
- Talk topics
- Talk tips
- Conversation starters
- The facts







Alabama Public Health Training Network web site at

#### www.adph.org/alphtn