



## Models to Promote Sexual Health Practices for Youth and Young Adults

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❖ In preparation for the 2016 open enrollment season, AMCHP and Family Voices are partnering to produce a webinar series about connecting with hard-to-reach populations, solving challenging enrollment situations and engaging youth and young adults. Look out for more information in the coming weeks!

❖ September is Sexual Health Awareness Month! See the National Association of County and City Health Officials' (NACCHO) [article](#) on how local health departments are filling the gaps in sexual health and STI prevention.

### Greetings from the Adolescent and Young Adult Health National Resource Center (AYAH Center)

Your friends and colleagues are pleased to be sharing our monthly newsletters with you. Throughout the year, we will use this newsletter to:

- Provide information about trending topics in adolescent and young adult health and health care
- Share our resources, including resources from the Collaborative Improvement and Innovation Network (CoIIN)
- Keep you up-to-date about upcoming events related to adolescent and young adult health and health care

To subscribe to the newsletter, email Karissa Charles at [kcharles@amchp.org](mailto:kcharles@amchp.org). We welcome your ideas and feedback, and you are free to unsubscribe at any time.

### From the Experts

#### Promoting Healthy Adolescent and Young Adult Sexual and Reproductive Health

Adolescent and young adult (AYA) sexual and reproductive health (SRH) care should be an essential part of AYA well-care. This means not only addressing SRH topics throughout adolescence and young adulthood but also encouraging pre-adolescents to prepare for these issues. As children develop, it is essential to encourage “developmentally appropriate communication about SRH between caregivers and children”.<sup>i</sup> The American Academy of Pediatrics (AAP) Bright Futures guidelines have an entire chapter on “Promoting Healthy Sexual Development and Sexuality”<sup>ii</sup> with specific recommendations for addressing this topic in children and young people from birth to age 21. In addition, new comprehensive sex education curriculums like the *Rights, Respect, Responsibility: A K-12 Sexuality Education Curriculum*<sup>iii</sup> created by Advocates for Youth provide direction for families and teachers in discussing these sometimes challenging topics. Appropriate guidance and education can prepare young people to embark on healthy sexual and romantic relationships in which they can make educated choices and avoid some of the adverse consequences of sexual behaviors.



Physicians and other care providers should periodically inquire about interest in, and preparedness for, sexual relationships and ensure that young people have the tools to keep themselves healthy and well. From discussing respect, consent and



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### News You Can Use

❖ A recent Guttmacher Institute news release states that declines in teen pregnancy risk are entirely driven by improved contraceptive use. [Click here](#) to read more. To see the full journal article with the new analysis, [click here](#).

❖ September 4<sup>th</sup> was World Sexual Health Day! Find sexual health resources throughout the month on American Sexual Health Association's [website](#).

❖ [Game Changer Chicago](#) (GCC) uses participatory education such as games and interactive learning in an attempt to change attitudes, behaviors and cultural norms around sexual reproductive health and other critical issues that impact the well-being of marginalized youth. Read an article about the program [here](#).

communication to discussing ways to prevent sexually transmitted infections and unintended pregnancy, the topic of SRH should be discussed openly and routinely. We know from a variety of research studies that open communication between parents and teens and between partners often leads to safer sex practices.<sup>iv,v,vi,vii</sup> In addition, SRH care should be provided to all AYA regardless of socioeconomic status, race, ethnicity, intellectual or physical ability, gender, sex or geographic location.<sup>viii</sup>

As young people enter sexual relationships, it is important to acknowledge the normalcy of these relationships and also routinely screen for interpersonal violence and directly discuss the types of sexual activity that young people are participating in. Discussion of actual behaviors can help clinicians determine appropriate screening tests and preventative measures. The U.S. Preventive Services Task Force has relevant recommendations for intimate partner violence and STIs.<sup>ix</sup> The CDC provides STI screening and treatment recommendations in their *Sexually Transmitted Disease Treatment Guidelines* which were last updated in 2015.<sup>x</sup> For all young people, barrier method use for protection against STIs should be discussed. For females at risk of pregnancy, last menstrual period and contraceptive use should be addressed on a regular basis; in fact, in 2006 the AAP and the American College of Obstetrics and Gynecology published a joint paper encouraging providers to use menses as a “fifth vital sign” as part of their health supervision.<sup>xi</sup> A Reproductive Life Plan<sup>xii</sup> should be discussed with all in order to clarify whether they might need contraception now or in the future. Should a young person need contraception, tiered contraceptive counseling should be included in visits addressing SRH with an emphasis on both effectiveness of methods and shared decision-making.<sup>xiii</sup>



To learn more about the information presented in this article, contact Erica J. Gibson, MD, Assistant Clinical Professor of Adolescent Medicine, at [Erica.Gibson@uvmhealth.org](mailto:Erica.Gibson@uvmhealth.org).

### Oregon Case Study: Leveraging Sports Physicals to Improve Adolescent Well-Care—Building a Partnership

Capitalizing on the times young people access primary care services is one opportunity to improve preventive care. Sports physicals are one such opportunity.



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### News You Can Use

❖ September is also National Preparedness Month! Check out Ready.Gov's [campaign](#) to emphasize preparedness among youth, older adults and people with disabilities or other special needs.

### Save the Date

❖ [Call for Proposals: The 2017 AMCHP Annual Conference](#)

**Deadline Oct. 20, 2016  
11:59 p.m. ET**

Submit a proposal for the 2017 Association of Maternal and Child Health Programs (AMCHP) Annual Conference (March 4-7). The theme for the 2017 conference is *Engagement with Intention: Inclusivity, Diversity and Non-Traditional Partnerships*.

❖ [Facing Race, A National Conference](#)

**Nov. 10-12, 2016. Atlanta, Ga.**

Participate in "a unique collaborative space for racial justice movement making, Facing Race is the largest multiracial, inter-generational gathering for organizers, educators, creatives and other leaders."

In Oregon, a sports physical is required by law once every two years for any student in grades seven through 12 prior to participation in extracurricular sports.<sup>xiv</sup> The Oregon School Activities Association (OSAA) is tasked with providing guidance and a "Pre-Participation Examination" form for providers to complete during a sports physical. The form must be approved by the State Board of Education. The intent of a sports physical is to identify any underlying health issue that would disqualify someone from participating in sports that may result in injury or sudden death (such as cardiac issues, concussion, severe allergies or other musculoskeletal issues).

Some health systems and providers across Oregon have the policy of providing a comprehensive well-visit in place of an abbreviated sports physical visit. The student still receives clearance for sports and also benefits from a comprehensive preventive visit. As a part of Oregon's Title V strategies, the Adolescent and School Health Program is exploring options to align and leverage sports physical requirements with receipt of an annual comprehensive well-care visit. Together with internal and external partners who have a stake in improving adolescent well-care, a promising partnership is being built with the Oregon Health Authority, the OSAA and Coordinated Care Organizations (Oregon's version of Accountable Care Organizations).

Early meetings have focused on identifying a common agenda among partners and the role each stakeholder plays. After the first meeting, it was clear that there is a genuine interest in collaborating around the shared goal of keeping students healthy, safe and physically active. Further, there is strong support among partners to create processes and policies that promote prevention. Specific ideas included building on the "Well-Care Visit + Sports Clearance Model" by modifying the Oregon Pre-Participation Examination Form to incorporate the date of the last well-care visit or date of future visit. Another option is to have providers automatically include a sports participation clearance in a well-visit. The intention is to raise awareness of the importance of a well-care visit with families and "nudge" providers away from doing stand-alone sports physicals towards comprehensive well-care visits.

Strategies developed will have to balance the bandwidth of the provider community (which can vary greatly by region) with the training and technical assistance needs for any change in policy to be successful.



For more information regarding this initiative, contact Liz Thorne, Adolescent Health Policy & Assessment Specialist, at [elizabeth.k.thorne@state.or.us](mailto:elizabeth.k.thorne@state.or.us).



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### Save the Date

❖ [Call For Submissions - Conference on Adolescent Health](#)

Deadline Oct. 17, 2016 5:00 p.m. ET

Submit a proposal for the University of Michigan Health System's Adolescent Health Initiative's (UMHS AHI) fourth annual conference on adolescent health. Organizers are accepting submissions from researchers, professionals and/or students to present an oral research session, lead an interactive breakout session or present a poster on clinical care, innovative programming, quality improvement, training and education, or other related topics within adolescent health.

❖ [2017 National Sexual Health Conference](#)

July 6-8, 2017. Denver, Colo.

Attend the 2017 National Sexual Health Conference where the varied disciplines of education, advocacy, clinical care and others come together to share information, efforts and best practices around sexual health across the lifespan.

### Latest Resources from AYAH Center

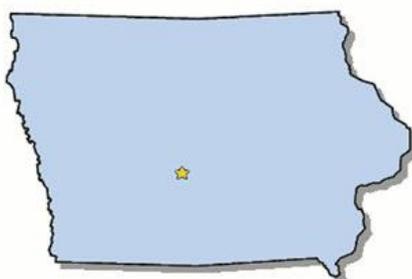


#### Check out AYAH Center's Resources on Promoting Sexual Health Practices for Youth and Young Adults!

- [A Call to Action: Developing and Strengthening New Strategies to Promote Adolescent Sexual Health](#) (NAHIC) reviews recent research literature, including recent findings in neuro-developmental science and innovative programmatic efforts to identify six promising strategies that address the challenge of adolescent pregnancy in new ways.
- [Confidential Risk Assessment for Adolescent Sexual Health Services](#) (NNSAHC/SAHRC) sponsored by the Department of Health and Human Services in collaboration with Michigan State University, this webinar highlights different adolescent patient cases focused on effective practices in screening and counseling for sexually transmitted infections.
- [A Guide to Evidence-Based Programs for Adolescent Health: Programs, Tools and More](#) (NAHIC) presents evidence-based programs and resources on a host of AYA health topics, including sexual health, based on the [Healthy People 2020](#) Focus Areas for Adolescent and Young Adult Health.
- [Understanding Adolescence](#) (SAHRC) is series of four YouTube videos with an overview of adolescent development for Public Health and other youth-serving professionals.

### CoIIN Corner

#### Stay Informed with Our State-by-State CoIIN Updates!



#### Iowa

The Iowa team helped convene a series of focus groups to gain a better understanding of awareness and perceived value of the Adolescent Well-Visit (AWV) for youth and caregivers. Four focus groups (two for youth and two for adults) yielded several key



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### Save the Date

❖ [Who's Leading the Leading Health Indicators? Reproductive and Sexual Health](#)

**Sept. 22, 2016, 12:00 p.m.-1:00 p.m. ET. Webinar**  
Join Healthy People 2020 to learn how one community organization is working to improve reproductive health through identifying women's preferences and experiences around contraception and engaging in activities designed to develop, evaluate and disseminate innovative family planning interventions.

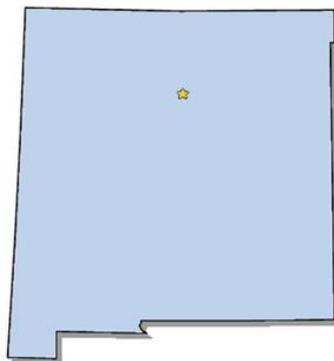
❖ [National Improvement Partnership Network \(NIPN\) Annual Meeting](#)

**Nov. 14-15, 2016. Nashville, Tenn.**  
Attend the NIPN Annual Meeting to actively engage with real-world, hands-on training and tools in program development and sustainability, including focused content on conducting quality improvement activities in primary care settings.

findings. Common themes among both groups were that visits with health care providers were mainly for the purpose of specific reasons (e.g. acute conditions), and neither group generally prioritized well-visits if they perceived themselves as being healthy. The full scope of these focus group findings provide critical insight on how Title V staff and partners can play a role in reshaping messaging on the value of the AWW, so more youth are empowered to seek preventive services on an annual basis.

### Mississippi

The Mississippi CoIIN team is planning a stakeholder meeting that will take place in October 2016. The goal is to raise awareness of its quality improvement work with the Lanier SBHC (operated by the University of Mississippi Medical Center – School of Nursing) and explore new opportunities to engage a wider range of health care partners in this work.

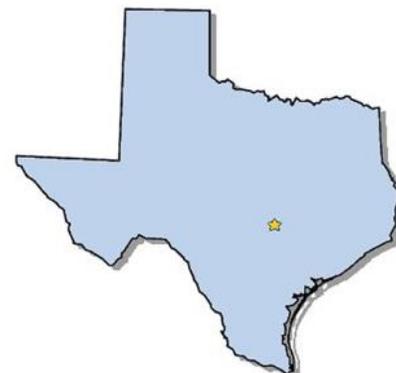


### New Mexico

Despite the loss of its youth-leadership partner organization and project lead (Yolanda Cordova), the New Mexico CoIIN team is making progress on national strategy measures. Partners at the NM Primary Care Association are quantifying the number of well-visits in participating FQHCs and a chart review examining the “quality” of well-visits (using Bright Futures standards) is underway.

### Texas

Texas continues to look at clinic screening processes – how to cover all the necessary components of a quality well-visit while making the process manageable for clinics. Building on the clinic self-assessment tool, all three sites are adapting the Youth Tour tool. One possible idea is to provide this resource to youth on the local council as well as to patients so they can perform “mystery shopping” feedback anonymously. The Texas





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### Save the Date

❖ [Healthy Teen Network 2016 Conference: Roles, Relationships, & Relevance in the Changing Landscape of Adolescent Health](#)  
Nov 14-16, 2016. Las Vegas, Nev.

Attend the Healthy Teen Network's 2016 conference to learn more about the changing landscape of adolescent sexual and reproductive health in the midst of politics, economics, demographics and more.

❖ [Sports Medicine for the Primary Care Physician & Fall Update in Family Medicine](#)  
Oct. 19—21, 2016. Ann Arbor, Mich.

\*Sponsorship opportunities available  
Join the Department of Family Medicine at the University of Michigan, in partnership with the Adolescent Health Initiative, to learn about a wide variety of topics addressing common diagnoses in primary care and participate in "Ask the Expert" breakout sessions to address your clinical conundrums in pediatric urgent care, cardiology and integrative medicine.

COIIN members provided feedback on the AYAH Resource toolkit as well. All three clinics met face-to-face (which was very beneficial) to receive training from national experts.



### Vermont

Vermont COIIN team faculty advisors and representatives from the Youth Health Advisory Council (YHAC) conducted their environmental assessments of the five demonstration sites. The walk-throughs included evaluation of the waiting area and clinic spaces and interviews of clinic staff. Each practice will receive a summary report from the YHAC with recommendations for action steps to make its practice more adolescent and young adult friendly. Practices were very welcoming to the YHAC representatives and open to feedback.

### From the MCH Community



### Check Out these Studies, Tools, State Examples, and More on Sexual Health!

- [Contraception Journal](#) is the official journal of the Association of Reproductive Health Professionals (ARHP). The journal stays abreast on groundbreaking research and features editorials highlighting current news in sexual and reproductive health.
- [The Young Women's Project \(YWP\) Peer Health and Sexuality Education \(PHASE\) program](#) is a DC-based initiative that works in partnership with the DC Department of Health to improve DC teens' reproductive health and reduce unplanned pregnancy through education and peer mentoring.
- [ASTHO's Long Acting Reversible Contraception \(LARC\) Learning Community](#) identified eight domains based on experiences, successes and challenges thus far that can be explored to increase access to LARC immediately postpartum.



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- [\*\*SHIFT NC\*\*](#), Sexual Health Initiatives For Teens, is a statewide nonprofit that spearheads initiatives to improve adolescent and young adult sexual health. Its programs focus on increasing awareness, disseminating data, improving policy and much more.
- [\*\*The Office of Adolescent Health's \(OAH\) Teen Pregnancy Prevention Program \(TPP\)\*\*](#) is a national program that funds organizations working to prevent teen pregnancy across the United States. Check out the project work of the 2015-2019 grantees using OAH's interactive map.
- [\*\*Young Women United\*\*](#) informs MCH efforts to transform sexual health practices for adolescents and young adults by "organizing and building policy efforts at the intersections of people's identities and lived experiences." In its recent report, [\*\*Dismantling Teen Pregnancy Prevention\*\*](#), it highlights myths related to teen pregnancy and teen pregnancy prevention.
- [\*\*Rights, Respect, Responsibility\*\*](#) is a free K-12 curriculum developed by Advocates for Youth that fully meets the National Sexuality Education Standards. The curriculum seeks to address both the functional knowledge related to sexuality and the specific skills necessary to adopt healthy behaviors.
- [\*\*Bedsider for Providers\*\*](#) is an online birth control and pregnancy prevention website for young adults (18-29). It was developed by The National Campaign to Prevent Teen and Unplanned Pregnancy, with design expertise and guidance from IDEO. There is a companion website for providers that includes clinical and practice-focused resources, ideas and strategies for working with young adults.
- [\*\*Successful Teen Pregnancy Prevention: Connecting Clinical Care and Community Interventions\*\*](#) is a recorded webinar that featured Title X-funded family planning providers sharing lessons learned about how to provide high quality clinical services to teens. Providers also described ways that clinical providers and community-based organizations that provide behavioral interventions can work together to reach and effectively serve teens in their communities.
- [\*\*Youth Friendly Clinic Makeover\*\*](#) is a project the Colorado Department of Public Health and Environment (CDPHE) conducted in partnership with two Title X Family Planning Clinics. The goal was to increase the number of youth up to age 25 accessing services and improve their overall experience receiving sexual health services and information, as well as help clinic staff better understand the unique needs and wishes of their patients.

### Upcoming Newsletter Issue



Stay tuned for our upcoming issue!

***Improving Health Care Awareness: Models that Engage and Empower Youth and Families***



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<sup>i</sup> Burke et al. Sexual and Reproductive Health Care: A Position Paper of the Society for Adolescent Health and Medicine. *Journal of Adolescent Health* 2014; 54; 491-496.

<sup>ii</sup> Hagan, Shaw, Duncan. Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents. Elk Grove Village, IL: American Academy of Pediatrics; 2008. 169-176.

<sup>iii</sup> Advocates for Youth. Rights, Respect, Responsibility: A K-12 Sexuality Education Curriculum. Available at: <http://www.advocatesforyouth.org/3rs-curriculum>. 2016. Accessed August 22, 2016.

<sup>iv</sup> Martino, S., Elliott, M., Corona, R., Kanouse, D., and M. Schuster. Beyond the 'Big Talk': The Roles of Breadth and Repetition in Parent-Adolescent Communication about Sexual Topics. *Pediatrics* 2008; 121(3):612–618.

<sup>v</sup> Whitaker, D., Miller, K., May, D., and Levin, M. Teenage Partners' Communication about Sexual Risk and Condom Use: Importance of Parent-Teenager Communication. *Family Planning Perspectives* 1999; 31(3): 117–121.

<sup>vi</sup> Stone N, Ingham N. Factors Affecting British Teenagers' Contraceptive Use at First Intercourse: The Importance of Partner Communication. *Perspectives on Sexual and Reproductive Health*, 2002; 34 (4):191–197.

<sup>vii</sup> Widman, L., D.P. Welsh, J.K. McNulty and K.C. Little. Sexual Communication and Contraceptive Use in Adolescent Dating Couples. *Journal of Adolescent Health*. 2006; 39:893–899.

<sup>viii</sup> Burke et al. Sexual and Reproductive Health Care: A Position Paper of the Society for Adolescent Health and Medicine. *Journal of Adolescent Health* 2014; 54; 491-496.

<sup>ix</sup> U.S. Preventive Services Task Force: <http://www.uspreventiveservicestaskforce.org/>; For Intimate partner violence recommendations, click [here](#); for STI recommendations, click [here](#).

<sup>x</sup> Centers for Disease Control and Prevention. Sexually Transmitted Diseases Treatment Guidelines, 2015. Available at: <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr6403a1.htm>. 2015. Accessed August 22, 2016.

<sup>xi</sup> Diaz, Laufer, Breech et al. Menstruation in Girls and Adolescents: Using the Menstrual Cycle as a Vital Sign. *Pediatrics* 2006; 118; 2245-2250.

<sup>xii</sup> Centers for Disease Control and Prevention. Reproductive Life Plan Tools for Health Professionals. <http://www.cdc.gov/preconception/RLPtool.html>. Accessed August 23, 2016.

<sup>xiii</sup> Committee opinion no. 539: Adolescent and long acting reversible contraception: Implants and intrauterine devices. *Obstetrics & Gynecology* 2012; 120: 983-988.

<sup>xiv</sup> ORS 336.479