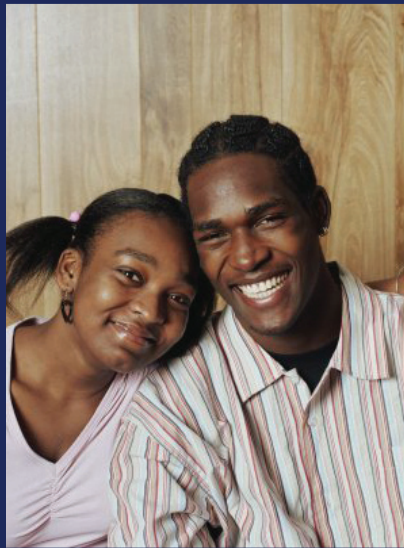


Preventing



Teen Pregnancy *in* Northeast Florida

A plan for community action



Northeast Florida Teen Pregnancy Task Force

Executive Summary

The Northeast Florida Teen Pregnancy Task Force completed a year-long process to identify strategies and community partners to address the high rate of teenage pregnancy, birth and repeat teen pregnancies in the region.

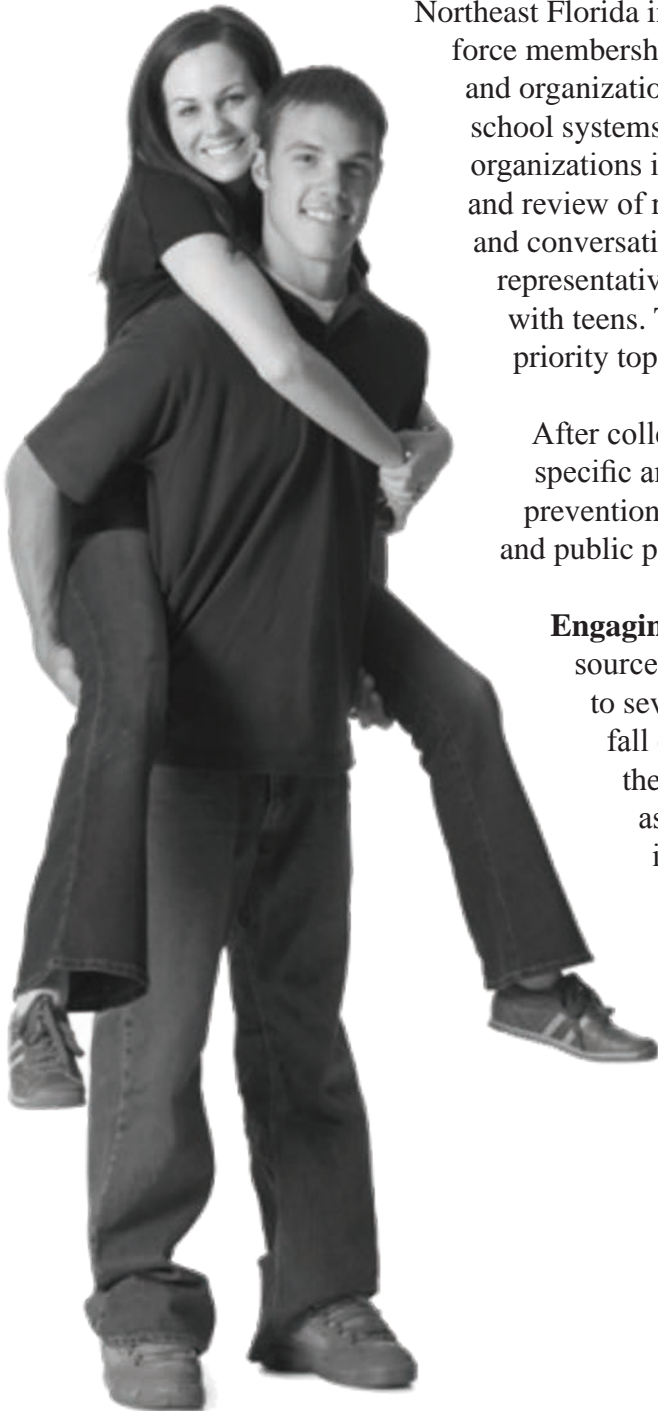
Despite declines in the teen birth rate over the last 20 years, teen pregnancy still remains a problem. Teens in the region give birth at a higher rate than those statewide and nationwide. Teenage mothers and their babies are consistently linked with poor health and socioeconomic outcomes. Nearly one out of five teenagers in Northeast Florida who has a baby will become pregnant again before leaving her teens. Additional births multiply the difficulties experienced by teen mothers. Pregnant and parenting teens are a priority population for receipt of Healthy Start and Healthy Families services — particularly for the purpose of preventing second pregnancies.

Northeast Florida includes Baker, Clay, Duval, Nassau and St. Johns counties. Task force membership included Coalition volunteers; representatives from agencies and organizations that serve adolescents; adolescent health care providers; school systems; youth-serving organizations; teens and other interested organizations in the five-county area. Its year-long work included collection and review of relevant literature and studies on teen pregnancy, briefings and conversations with a variety of health service providers, school district representatives, organizations that serve teens and, conducting focus groups with teens. The results of the focus groups provided guidance about the priority topics that were on the Task Force's agenda.

After collecting information, the Task Force decided to focus on five specific areas: engaging parents, community-based teen pregnancy prevention, access to adolescent health services, repeat teen pregnancies and public policy changes.

Engaging Parents: Family plays a big role in teens' lives — it is a source of information and an influence on their behavior, according to seven "Listening Tours" conducted throughout the region in the fall of 2010. Strategies to engage parents include: holding "Train the Trainer" workshops on successful parenting curricula, such as the Duval County Cooperative Extension's "Teening Up"; incorporating a parent component into existing organizations; holding "Listening Tours" for caretakers to identify their issues and concerns regarding discussing teen sexual health and teen pregnancy prevention with youth and then educating caretakers on how to talk to teens about a variety of topics; and using media to create a video (for CDs, YouTube).

Community-based Teen Pregnancy Prevention: Most teens are not getting information about sex from reliable sources, but instead from the media, friends, the internet, family and only a little bit from school health classes, according to responses from teen "Listening Tours" held





in the fall of 2010. Sex education in school mostly focuses on abstinence, does not provide much information on birth control or STIs and doesn't address the emotional aspect. Strategies to strengthen community-based teen pregnancy prevention include: implementing comprehensive sex education curricula in Jacksonville Housing Authority apartment complexes and through Girls Incorporated; and utilizing faith-based comprehensive curricula.

Improving Access to Adolescent Health Care: Research has shown that teens are more likely to use, and do better in, clinics that offer a comprehensive, interdisciplinary model of physical, behavioral, and reproductive health care that is explicitly designed to welcome adolescents and respond to their particular needs. Strategies to improve access include: having a teens-only clinic in each county and exploring the prospects of a teen text health line, a mobile health unit and teen peer health education program.

Repeat Teen Pregnancies: Seventeen percent of teen births in Northeast Florida in 2010 were to mothers who have had a previous pregnancy. Cultural norms and an inability to visualize other life options contribute to repeat pregnancies among teens according to national studies. Results from listening tours within the Duval County Public Schools with teens who experienced multiple pregnancies and births also showed pregnancies occurred because the teens did not have access to birth control, did not use birth control because they believe it doesn't work or used birth control but still became pregnant. Strategies to prevent repeat pregnancies include: community referrals for teens into Healthy Start, where they will be considered a special high-risk group that would receive a home-based mentoring program and other evidence-based programs like Nurse Family Partnership; and implementing a pregnant teen support group at Shands Jacksonville, similar to the CenteringPregnancy model.

Public Policy Changes: At the Task Force's March 2011 meeting, representatives from several area school districts reported that they must follow the state statute that mandates abstinence-only education as the expected standard in health education. They identified the influence of strong proponents of abstinence-only education and conservative culture of the community, in addition to opt-in forms that are required for classes, as barriers to comprehensive education. Strategies around public policy changes that will improve access to comprehensive sex education in schools include: joining the statewide Healthy Teen Florida network and implementing local-level advocacy efforts; and piloting comprehensive sex education for school teen pregnancy/parenting program participants.

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Introduction

Despite declines in the teen birth rate over the last 20 years, teen pregnancy remains a problem throughout the country. Rates are still among the highest in the industrialized world. One in ten new mothers is a teen. Black, Hispanic and other non-white teens are disproportionately affected — they are 2 to 3 times more likely to give birth than white teens. This has a staggering affect on the nation; it costs U.S. taxpayers more than \$9 billion each year¹.

The issue and implications of teen pregnancy are the same in Florida and the Northeast Florida region of Baker, Clay, Duval, Nassau and St. Johns counties. At least half of the teenage population in the state is engaging in sexual intercourse according to the 2011 Youth Risk Behavior Survey. According to the survey results, 43.9 percent of females are sexually active and 7.3 percent of both males and females have had sex before age 13. Locally, teens also have high rates of sexually transmitted infections:

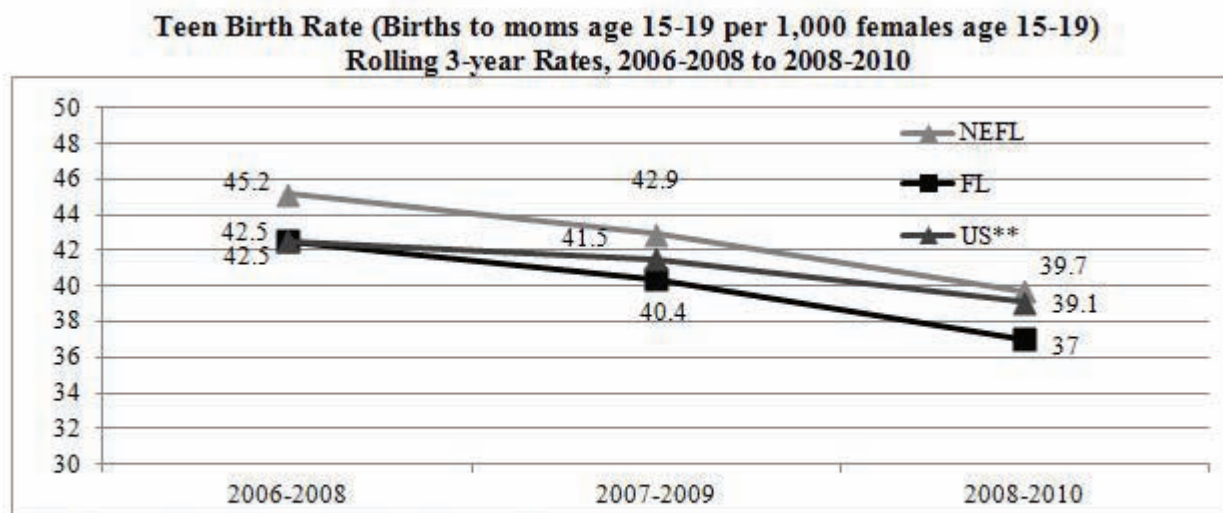
Bacterial STIs, Females Age 15-19, 3-year Rolling Rates				
	Gonorrhea		Chlamydia	
	2007-2009	2008-2010	2007-2009	2008-2010
NEFL	1090.8	898.4	3641.8	4102.6
State	727.1	697.3	2745.7	3335.6

Source: Florida CHARTS, 2007-2010

The State of Teen Pregnancies and Births

Birth Rates

The state and nation calculate the teen birth rate as the rate of births to moms in their teens per 1,000 females. The regional teen birth rate dropped in 2010 to 36.5 births to teens age 15-19 per 1000 females age 15-19 from 39.2 in 2009. Teens in the region give birth at a higher rate than those statewide and nationwide. For county-specific rates, see Appendix 1.



**U.S. Rates are for single year only: 2007, 2008 and 2009

Source: Florida CHARTS, 2006-2010

U.S. Rates: CDC, 2007-2009

¹ Vital Stats: Preventing Teen Pregnancy in the US (April 2011), Centers for Disease Control and Prevention.

Pregnancy Rates

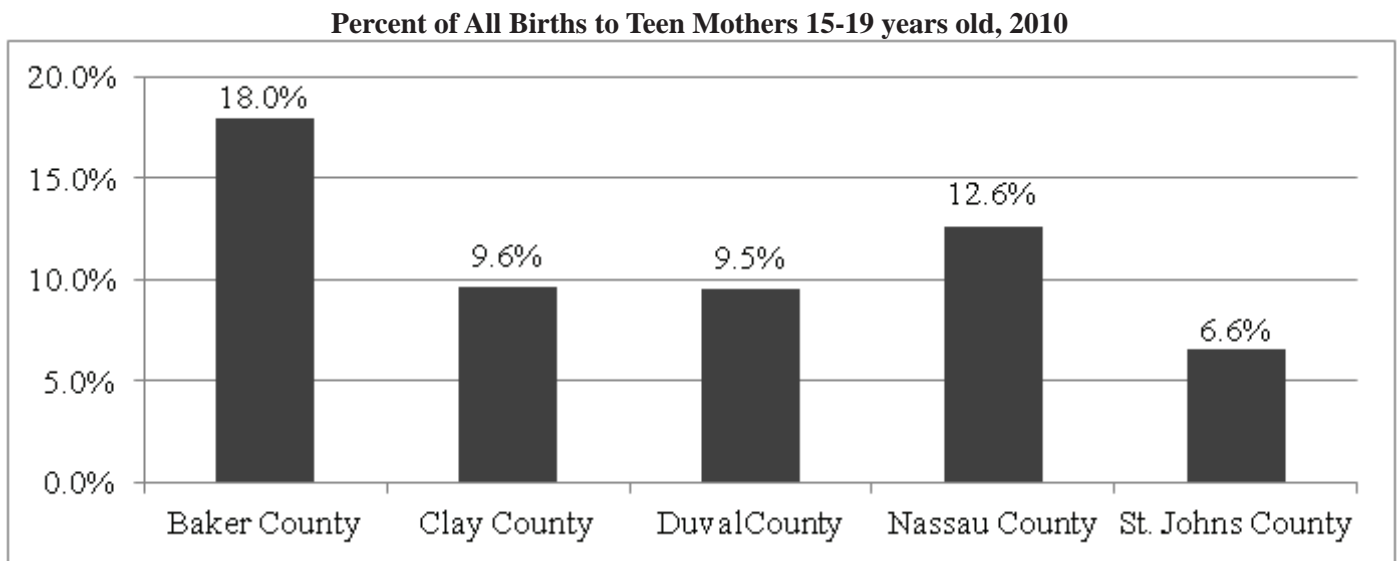
The birth rate does not, however, reflect the actual number of teens that become pregnant. The Guttmacher Institute tracks and reports abortion trends for the country and states. Nationally, the percent of teen pregnancies ending in abortion is 32 percent². The abortion rate has decreased since a high in 1986 but has remained relatively steady since 2000. The rates for black and Hispanic teens are significantly higher than those for white teens.

Estimates by Guttmacher for Florida indicate that births represent about 55 percent of all pregnancies to teens age 15-19, with miscarriages and abortions comprising the remainder. Based on these estimates, the pregnancy rate in Northeast Florida in 2010 was 66.5 pregnancies per 1,000 females age 15-19 years old. Florida does not require that abortion providers include age when reporting abortions, so any state figures are based on the number of abortions among all women in the state and the proportion of abortions obtained by women of the same age nationally.

Health & Socioeconomic Outcomes

Teenage mothers and their babies are consistently linked with poor health and socioeconomic outcomes. Babies born to teenage mothers are more likely to be born premature³ and have low birth weight⁴. These mothers are least likely of all maternal age groups to receive prenatal care and are at a higher risk for pregnancy complications⁵, less likely to graduate high school and more likely to live in poverty⁶.

Teenagers age 15 to 19 years old that gave birth represented 9.5 percent of Northeast Florida births in 2010, down from 9.9 in 2009. There were significant differences between the counties in the region:



Source: Florida CHARTS, 2010

Despite only representing 9.5 percent of births in Northeast Florida, teens accounted for a higher proportion of poor health outcomes. In 2010, mothers age 19 and under were more likely than their older counterparts to experience fetal and infant deaths.

² Kost K, Henshaw S and Carlin L, *U.S. Teenage Pregnancies, Births and Abortions: National and State Trends and Trends by Race and Ethnicity*, 2010, <<http://www.guttmacher.org/pubs/USTPtrends.pdf>>.

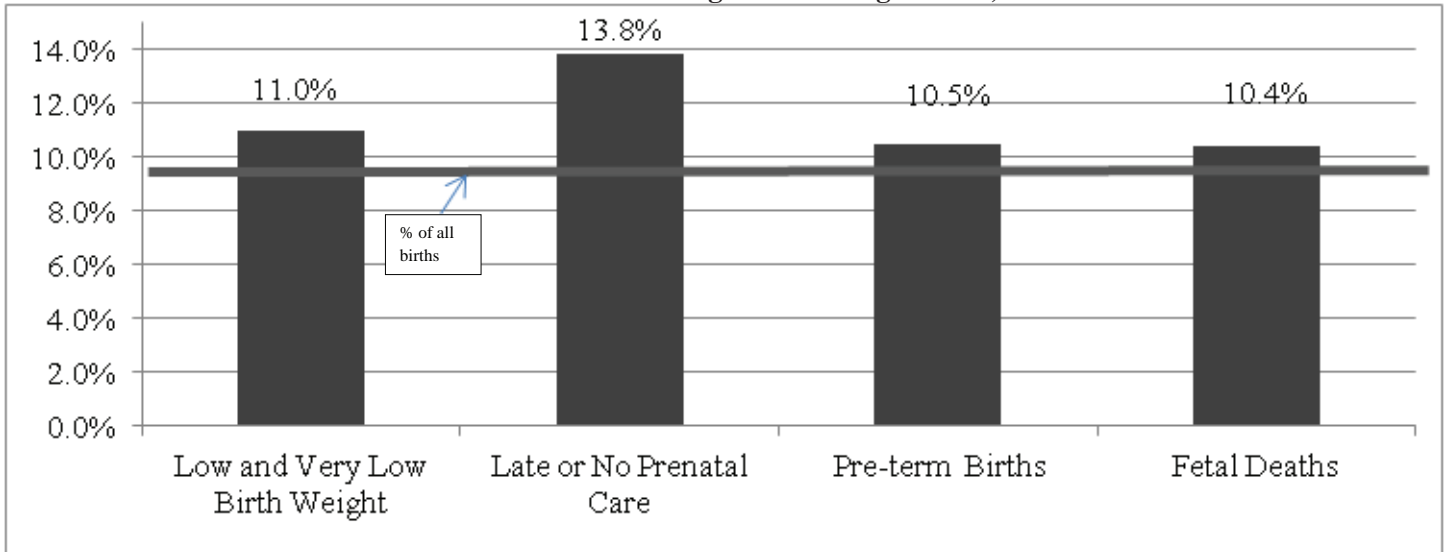
³ *National Center for Health Statistics, final natality data.*

⁴ Martin, J.A., et al. *Births: Final Data for 2006. National Vital Statistics Reports, volume 57, number 7, January 7, 2009.*

⁵ *Especially for Teens: Having a Baby. Patient Education Pamphlet* (August 2007) American College of Obstetricians and Gynecologists (ACOG)

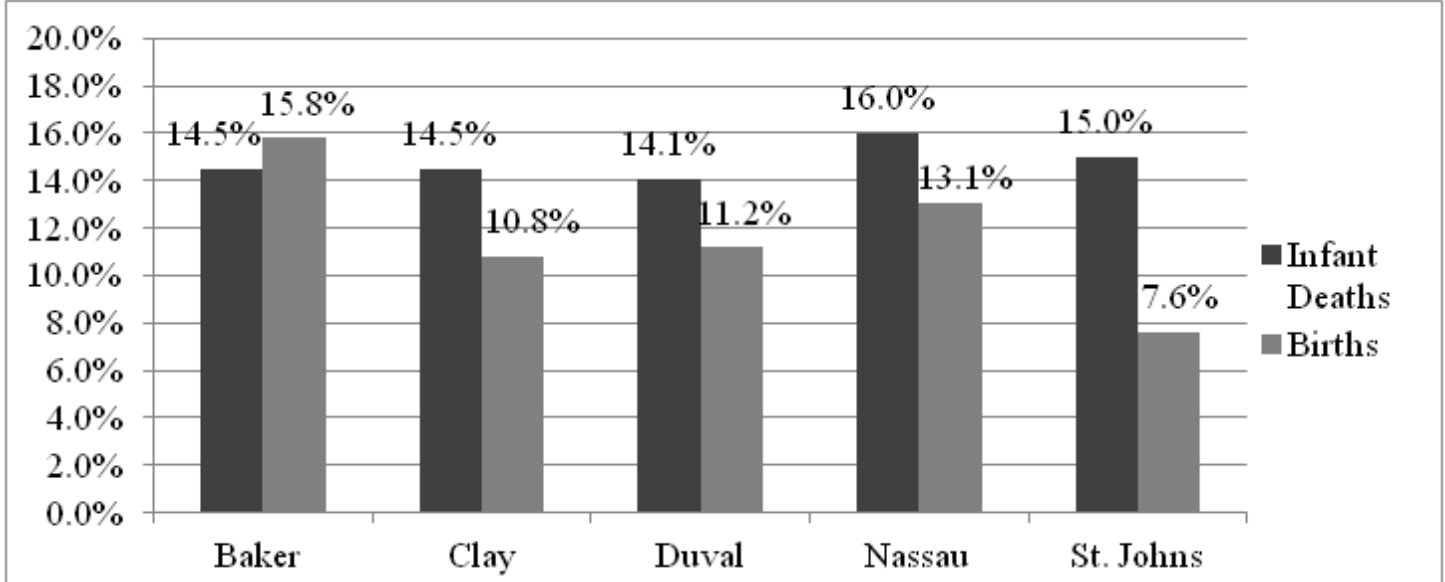
⁶ *Why It Matters* National Campaign to Prevent Teen and Unplanned Pregnancy.

Birth Outcomes for Teenage Mothers Ages 15-19, 2010



Source: Florida CHARTS, 2010

Percent of Births and Total Infant Deaths to Teen Mothers by County, 2005-2009



Source: Northeast Florida FIMR 2009

Repeat Teen Birth Rate

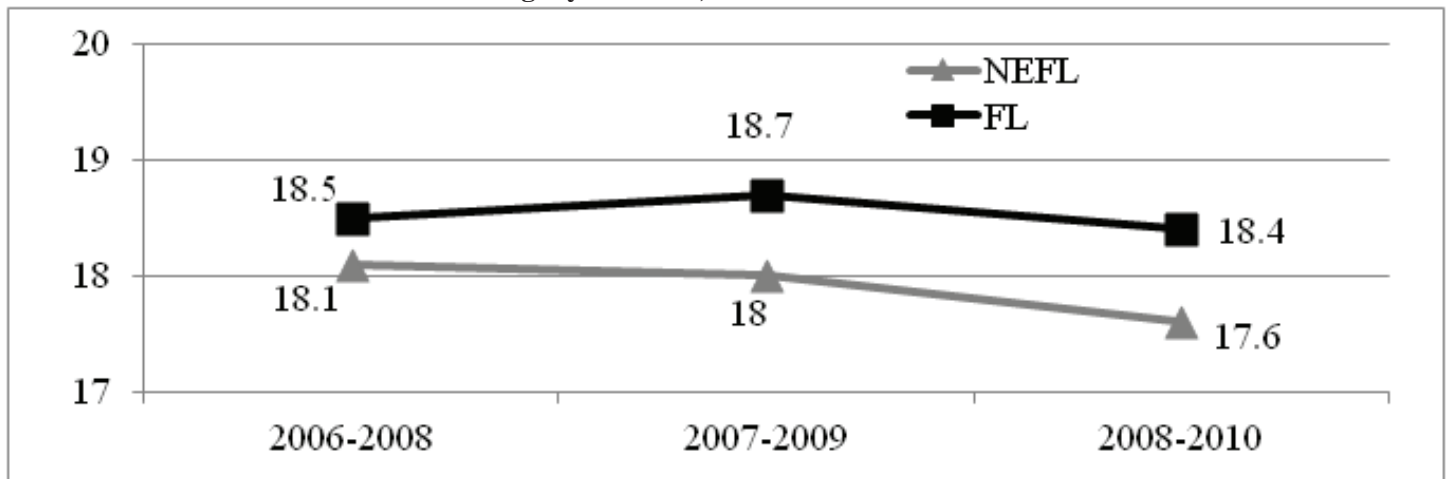
Nearly one out of five teenagers in Northeast Florida who has a baby will become pregnant again before leaving her teens. Additional births multiply the difficulties experienced by teen mothers⁷. More than 17 percent of teen births in Northeast Florida in 2010 were to mothers who have had a previous pregnancy.

Teen mothers who have additional births, and their children, have particularly adverse consequences related to education, economic self-sufficiency and medical problems –because they initiate prenatal care later for a second child and delay it even later when they are expecting a third⁸.

⁷ Schelar, E., Franzetta, K., & Manlove, J. (2007). Repeat Teen Childbearing: Differences Across States and by Race and Ethnicity (Issue Brief No. 2007-23). Washington, DC: Child Trends.

⁸ National Campaign to Prevent Teen Pregnancy, *Another Chance*, May 2004.

Repeat Teen Birth Rate (Percent of births to moms age 15-19 who had a previous birth)
Rolling 3-year Rates, 2006-2008 to 2008-2010



Source: Florida CHARTS, 2006-2010

Healthy Start and Healthy Families Services

Pregnant and parenting teens are a priority population for receipt of Healthy Start and Healthy Families services. Healthy Start aims to improve birth outcomes and promote healthy child development by providing care coordination, education and related risk reduction services to at-risk women and their families. Healthy Families offers intensive education and support to families at-risk of abuse and neglect. Participants for both programs are identified through the Healthy Start prenatal screen which is administered to pregnant women at their doctor or clinic visit. A goal of both programs is to reduce repeat pregnancies.

Over the last three years, there has been an average of 550 babies born annually to mothers age 15-19 in the five-county region. Healthy Start and Healthy Families provided intensive care coordination to an average of pregnant 344 teens <18 years old annually during this period (about 63 percent of teen births). Services available in the region through Healthy Families have been cut significantly over the last three years; the HFF program was eliminated in 2010/11 in Baker and Nassau Counties.

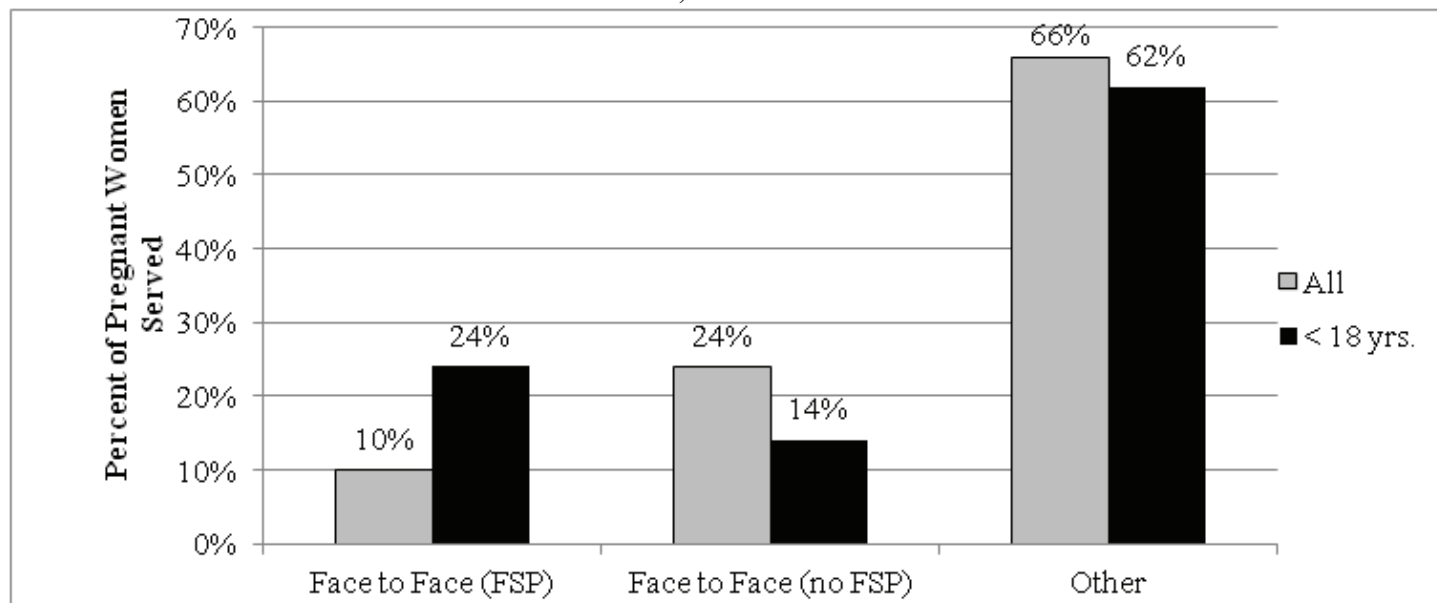
Teens (<18 yrs.) Receiving Intensive (Face to Face) Healthy Start and Healthy Families Services
Northeast Florida, FY 2008/09 – FY 2010/11 Annual Average

	Births	Healthy Start	Healthy Families	Percent of Teen Births Served
Baker	18	19	1	113.0%
Clay	64	35	3	59.4%
Duval	397	190	39	57.9%
Nassau	20	25	2	136.7%
St. Johns	49	21	8	57.8%
NEFL	548	290	54	62.7%

Source: Healthy Start Prenatal Executive Summary Reports, prepared by request by FDOH; Healthy Families Florida.

Teens <18 years old represent seven percent of all pregnant women served by Healthy Start over the last three years in Northeast Florida.

**Healthy Start Services Provided to Participants <18 years
Northeast Florida, FY 2008/09 – FY 2010/11**



Source: Healthy Start Prenatal Executive Summary Reports prepared by request by FDOH.

Compared to all pregnant women served by Healthy Start during this period, teens were more likely to receive the most intensive level of services (face to face with a family support plan). Twenty-four percent of teens enrolled prenatally in Healthy Start received this level of service compared to 10 percent of all women. Thirty-eight percent of teens receiving Healthy Start services prenatally received face to face education and support compared to 34 percent of all women. Teens received 7.3 encounters on the average, compared to 5.5 encounters for all prenatal participants. State reports indicate Healthy Start providers in the region made extra efforts to contact and engage teens referred to the program.

Data on subsequent pregnancies to teens served by these programs is not available for Healthy Start. Healthy Families Florida reports less than 7 percent of teens served in Northeast Florida had a subsequent pregnancy.



Task Force Process

Purpose

The Northeast Florida Healthy Start Coalition convened the Northeast Florida Teen Pregnancy Task Force in October 2010 to address the high rate of teenage pregnancy and births in Northeast Florida and determine effective methods of prevention, particularly around repeat teen births.

Membership

Task force membership includes Coalition volunteers; representatives from agencies and organizations that serve adolescents; adolescent health care providers; school systems; youth-serving organizations; teens and other interested organizations.

Task Force Members

Joy Burgess, **Co-Chair**, *Chamberlain College of Nursing/NEFHSC Board of Directors*

Sandra Cook, **Co-Chair**, *Women's Giving Alliance*

Patricia Jo Beaty, *Northeast Florida Healthy Start Coalition Member*

Ana Bernal Martinez, *Shands Jacksonville – Healthy Start*

Mary Bishop, *The Bridge of Northeast Florida*

Thomas Bryant III, DCHD – *Institute for Public Health Informatics and Research*

Tanya Collins Watts, *Duval County Public Schools*

Marcheta Crews, *Baker County Public Schools*

Keisha Dawkins, *St. Johns County Health Department*

Jeannie Gallina, *The Way Clinic*

Elaine Mathews, *St. Johns County Health Department — Healthy Start*

Peter Racine, *Jaguars Foundation*

Nancy Robinson, *Duval County Health Department*

Dr. Pauline Rolle, *Duval County Health Department*

Brandi Williamson, *JobCorps*

Ad Hoc/Resource Members

Meredith Chartrand Frisch, *The Chartrand Foundation*

Staci Fox, *Planned Parenthood of North Florida*

Loreli Rogers, *NCHD—Healthy Start/Nassau County Teen Pregnancy Task Force*

Stephanie Reese, *Apel Health Services*

Mary Jane McRae, *Clay County Health Department*

Juanita Forman, *Girls, Incorporated*

Sue Murphy, *Baker County Health Department — Healthy Start*

Raymond Randolph, *St. Johns County Public Schools*

Katy Axtell, *Shower of Hope*

Katrina Singletary, *Shower of Hope Chamberlain College of Nursing Students Healthy Start Coalition AmeriCorps Members*





Overview of Process and Activities

The Task Force's work plan included the following primary activities:

- Review regional and county-specific experiences and needs.
- Identify and explore how to adopt or adapt strategies based on evidence-based programs implemented locally, statewide and nationally.
- Identify ways to increase the effectiveness of existing Healthy Start, school and community-based services.
- Determine additional services required to address gaps in support, education and services to address the issues of teen pregnancy.

The year-long work included collection and review of relevant literature and studies on teen pregnancy and briefings and conversations with a variety of health-service providers, school district representatives, organizations that serve teens and conducting focus groups with teens. The results of several regional focus groups provided guidance about the priority topics that were on the Task Force's agenda.

Teen Listening Tours

One of the first steps of the Task Force was to schedule regional listening tours to have a conversation with teens about teen pregnancy, sex education and adolescent behavior. The results were used to determine whether teens in the region were on par with teens nationwide and also shape local approaches to reduce teen pregnancy. AmeriCorps members and UNF nursing students received training on focus groups and facilitated the "tours." A wide variety of teens participated in the tours: rural; urban; different races & ethnicities: White, Black, Hispanic; male and female; ages 13-19, middle school and high school students; and pregnant teens, teen mothers and teen mothers experiencing repeat pregnancies.

- Lighthouse Christian School — 12 girls (15-18 years old)
- AMIKids — 15 boys (ages 14-18 years old)
- Baker County YMCA — 7 teenagers (5 boys / 2 girls)
- YouthLink — 14 teenagers (6 boys / 8 girls)
- Hollybrook Homes — 7 teenagers (4 boys / 3 girls)
- Philip Randolph — Two Listening Tours (7 girls in group 1 and 5 girls in group 2)

The participating teens were asked questions regarding who they think they can talk to about sex; what kind of sex education they have received from their parents, schools, doctors or elsewhere; what they know about birth control and where and how easily it can be accessed; and more.

Despite the variety in backgrounds of the teens that participated, the same themes were prevalent for each listening tour. The teens reported feeling peer pressure, as sex has become the norm for many adolescents. They indicated they want to talk to their parents about sex but the lines of communication are not usually open. Many

teens are also very influenced by family in terms of their paths in life — particularly daughters of teen mothers who tend to repeat the cycle. Teens said they would prefer a holistic approach to sex education, including more information on birth control — especially since they indicated it does not work and don't always know how to use it properly. Schools provide very limited sex education, which is almost always abstinence-based. They would also like to receive sex education from different sources — particularly young adults they can relate to or their peers.

The general takeaway from the listening tours was that there is a huge gap between knowledge and behavior. Teens often know what they need to do to prevent pregnancy, but no one is talking to them, educating/guiding them, or holding them accountable. They are having unprotected sex, when they do use contraception it is used incorrectly and there is a lack of connection between baby and a lifelong commitment.

As a result of the “Listening Tours,” the Task Force opted to take a multi-faceted approach. Sex education, parenting and community involvement in the issues are all areas the Task Force attempted to improve, based on the shortcomings in these areas that the teens reported.

For the full Teen Listening Tour results, see Appendix B.

Data Collection

The following were the major data collection activities of the Task Force:

- Reviewed significant studies on teen sexual behaviors and pregnancy — particularly those with an emphasis on prevention. A bibliography of that research is included within this report.
- Participated in a webinar with the Centers for Disease Control and Prevention (CDC) about national teen pregnancy trends and effective programs.
- Compiled an inventory (See Appendix C) of local programs which address: sexual factors (sex education), nonsexual factors (youth development) and a combination of factors.

Briefings and Conversations

Guest speakers and presentations were scheduled for most task force meetings. These briefings enabled the task force to learn more about programs available in the region, as well as discuss gaps in services with local experts. Guest presentations included:

Community Organizations

- Learned about parenting programs and curricula used in the community. The Duval County Cooperative Extension described its “Teening Up” parent curriculum.
- The Way Clinic, located in Clay County, described its services to provide affordable health care for the Hispanic migrant population and others who are uninsured. Those services include OB clinics which are staffed by volunteer midwives.
- The following organizations participated in a “best practices” panel regarding programs that are



designed to prevent teen pregnancy. The organizations were:

- » Girl Scouts of Gateway Council, “Get Real!” Mentoring
- » Nassau County Health Department Teen Clinic
- » Apel Health Services — YouthLink Mentoring
- » Duval County Health Department/Magnolia Project Teen Inspirations Clinic

Schools

- Representatives of three school districts in the five-county area outlined the policies and practices regarding sex education and provided perspectives on the issues facing teens. The school districts and their representatives were:
 - » Duval County Schools: Gloria Lockley, Director of Support Services; Cheryl Hall, Curricula
 - » Nassau County Schools: Andreu Powell, Coordinator of Prevention and Intervention Services
 - » St. Johns County Schools: Raymond Randolph, Teen Parent, Homeless, and Full Service School programs

Comprehensive Sex Education Public Policies and Practices

- Participated in a conference call with Sally Swanson, Community Programs Manager at the Adolescent Pregnancy Prevention Campaign of North Carolina. Ms. Swanson discussed the efforts behind the passage of the Healthy Youth Act of 2009, a state statute mandating comprehensive sex education in schools.
- Heard a presentation from the Florida Healthy Teens campaign. Florida Healthy Teens is a statewide advocacy campaign that seeks to bring comprehensive sex education to Florida schools. It is a broad-based coalition of more than 80 organizations from numerous sectors, including education, public health and the faith-based community. Several counties have successfully implemented sex education as a result of the work of the campaign.
- Learned about abstinence education currently provided in the schools by Project SOS from Michell Long.

Based on the results of the Teen Listening Tour and other information gathering activities, the task force identified five themes as a framework for development of its action plan: engaging parents, community-based teen pregnancy prevention, access to adolescent health services, reducing repeat teen pregnancy and public policy changes.



Theme: Engaging Parents

Need

Family plays a big role in teens' lives — it is a source of information and an influence on their behavior, according to seven “Listening Tours” conducted throughout the region in the fall of 2010. Listening tour participants reported that they want to be able to ask their parents about sex, but it's uncomfortable and parents don't always know how to talk to their kids about it or handle the fact that their children are sexually active. In addition, daughters of teen mothers are more likely to become teen parents themselves,⁹ repeating a cycle.

Communication challenges faced by parents are borne out in a recent national survey,¹⁰ “Let's Talk: Are Parents Tackling Crucial Conversations About Sex?” The national poll found that while 82 percent of parents reported talking to their children about topics related to sex and sexuality, when questions about specific topics were asked, the percentages were much less. A smaller proportion felt comfortable talking about more complex topics such as how to say no to sex (74 percent) and whether or not to use a condom or other forms of birth control (60 percent). The listening tour results showed that locally, parents were not having meaningful conversations with their teens about sex.

Regional Scan

There are several programs in Northeast Florida that work to improve the communication skills of the parents of adolescents. “Teening Up,” offered by the Duval County Cooperative Extension targets parents with teens between the ages of 9 and 16 years old and serves as a prevention tool rather than an intervention. The curriculum has six sessions that each last between an hour and an hour and a half. The curriculum teaches parents about the normal development of young and middle adolescent children and teaches skills to avoid more serious problems. The sessions include: the teen brain; transitions to adolescence; positive discipline; talking with teens about dating, sex, drugs and alcohol; understanding teen anger (and managing yours); and empowering teens to build assets. Teening Up also includes three activities per session to engage parents and practice skills, reflection and empathy-building and asset assessments. This program is under-utilized and could be expanded in the counties outside Duval.

Other programs that potentially address this need in Northeast Florida include:

- United Way of Northeast Florida – Parenting Courses: Series of 7 parenting classes
- Jacksonville Network for Strengthening Families: 7 Habits of Successful Families: interactive course that allows families to set goals and strengthen skills
- Children's Home Society: Parenting classes for parents of children ages 0-2, 2-12, teens, or of attention deficit disorder children

Online resources for parents are also available through the Jacksonville Jaguar Foundation's Straight Talk initiative (www.straighttalk.jacksonville.com/parents.shtml).

Evidence-Based Interventions

See *Teening Up* above.

⁹ Hoffman, SD (2006). *By the Numbers: The Public Costs of Teen Childbearing*. The National Campaign to Prevent Teen Pregnancy: Washington, DC

¹⁰ NYU Silver Center for Social Work. “Let's Talk: Are Parents Tackling Crucial Conversations About Sex?” survey results released October, 2011.

Ten Tips for Parents, compiled by the National Campaign to Prevent Teen and Unplanned Pregnancy, offers easy-to-use, common sense lessons based on research. They are designed to help parents help teens delay sexual activity, as well as encourage those who are having sex to use contraception carefully.

16 and Pregnant Discussion Guides: This hit MTV show is available on video with discussion guides that can be used by parents to talk with their teens about sex and teen pregnancy (<http://www.stayteen.org/16-and-pregnant>).

The Center for Latino Adolescent and Family Health at the NYU Silver School of Social Work has developed *Families Talking Together*, a family-based program designed to support effective parent-adolescent communication among African-American and Latino families. It is available free of charge (<http://www.clafh.org/resources-for-parents/avoiding-adolescent-problem-behaviors/>). FTT is a clinic-based education program (see Theme: Improving Access to Adolescent Health Care).

Sex, Etc. is part of the Teen-to-Teen Sexuality Education Project developed by Answer, a national organization based at Rutgers University that is dedicated to providing and promoting comprehensive sexuality education to young people and the adults in their lives. Its website (www.sexetc.org) provides access to an online magazine, discussion groups, videos, mobile apps and resources for health professionals and parents.

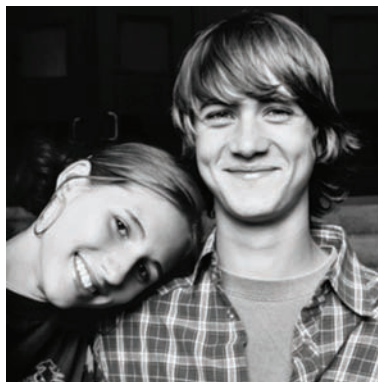
Implementation Strategies

1. Provide “Train the Trainer” workshop for the “Teening Up” parenting curriculum through the Duval County Cooperative Extension to community-based organizations and others working with teens and their families, including Healthy Start case managers.
2. Incorporate parent component into existing organizations, agencies and groups, such as faith-based organizations and worship centers, parent advisory groups and the Jaguars Foundation Straight Talk television program.
3. Hold “Listening Tours” for parents, grandparents and caretakers to identify their issues and concerns regarding discussing teen sexual health and teen pregnancy prevention with youth.
4. Educate parents, grandparents and caretakers on how to talk to teens about a variety of topics, including safety, relationships, teen pregnancy prevention, etc.
 - a. Use media to create a video (for CDs, YouTube)
 - b. Target large employers to do education to reach parents/grandparents/caregivers.

Potential Partners for Implementation

- Duval County Cooperative Extension
- Faith-based community
- Community non-profits serving teens and their families
- Large employers
- Parent Teacher Associations, parent advisory groups
- Jacksonville Jaguars Foundation (Straight Talk program)
- The Bridge of Northeast Florida
- Clear Channel advertising
- Girl Scouts/Boy Scouts
- Comcast





Theme: Community-based Teen Pregnancy Prevention

Need

Almost half of all teen students statewide reported having sexual intercourse, according to the 2010 Youth Risk Behavior Survey. According to the survey results, 43.9 percent of females are sexually active and 7.3 percent of both males and females have had sex before age 13.

Despite this, most teens are not getting information about sex from reliable sources, but instead from the media, friends, the internet, family and only a little bit from school health classes, according to responses from teen “Listening Tours” held in the fall of 2010. Sex education in school mostly focuses on abstinence, does not provide much information on birth control or sexually transmitted infections (STIs) and doesn’t address the emotional aspect. Many teens believe birth control does not work and are not taught safe sex practices.

Teens want honest, open conversations about sex; to learn about STIs and the emotions that accompany sex; information about birth control; small classes; and teachers who are young and to whom they can relate. Teens also want mentors they can talk about to about topics like sex — someone that is not judgmental and can give them accurate information.

There are significant barriers, including state statute, that prevent the provision of comprehensive sex education through local school systems. Implementation of community-based education programs through organizations and groups that serve youth offers an alternative approach for meeting this need.

A second component of pregnancy prevention is non-sexual youth development that focuses on the whole individual rather than specific types of behavior. Many teens are only living the life they know and do not see opportunities in life outside of pregnancy.

Regional Scan

The two main sources of comprehensive sex education in the community are Planned Parenthood and organizations funded by the Jacksonville Jaguars Foundation. Planned Parenthood provides both clinical and community services, including educational services for all audiences. The health educators provide classes, workshops, tables of information at health fairs and special events. The Jaguars Foundation funds comprehensive programs within Girls Incorporated, the Bridge of Northeast Florida (Straight Talk) and the PACE Center for Girls (Time to be a Girl). The Foundation also funds effective abstinence-based programs at Apol Health Services (Project Youthlink, a mentoring program, and other HIV/AIDS prevention programs)

The Florida Department of Education released the *Florida’s Sexual Health Education Community Outreach Tool Kit* in August, 2011 to assist communities in developing programs to address teen pregnancy and STIs.



Numerous local branches of nationwide programs provide youth development services, including the 4-H program, the Boy Scouts and Big Brothers Big Sisters. Programs like the Girl Scouts of Gateway Council – Get Real! Mentoring program provides a combination of youth development and sex education services. For more programs, see Appendix C.

Evidence-based Programs

Teen Health Project/4Me: The Teen Health Project is a community-level intervention that helps adolescents develop skills to enact change, and provides continued modeling, peer norm and social reinforcement for maintaining the prevention of HIV risk behavior and pregnancy. Adolescents first attend workshops that focus on HIV/STI education, pregnancy prevention and skills training on avoiding unwanted sex, sexual negotiation, and condom use, with themes of personal pride and self-respect. A Teen Health Project Leadership Council is then established to encourage attendance, reinforce abstinence and condom use, plan HIV prevention activities to maintain risk reduction, set norms supporting abstinence and condom use and gain support from adults to promote activities. In addition, parents of adolescent enrollees are offered a workshop that focuses on HIV/AIDS and pregnancy prevention information and approaches to discussing issues related to abstinence and safe sex/condom use with their children.



Our Whole Lives is a series of sexuality education programs offered by the United Church of Christ for six age groups: grades K-1, grades 4-6, grades 7-9, grades 10-12, Young Adults and Adults. The resources are written by professional sexuality educators and provide accurate information for parents, teachers and pastors to be used in the affirming and supportive setting of churches. The program is based on the Guidelines for Comprehensive Sexuality Education produced by the National Guidelines Task Force, a group of leading health, education and sexuality professionals assembled by the Sexuality Information and Education Council of the United States (SIECUS). There is a companion Parent Guide for the curriculum and resource book, *Sexuality and Our Faith* for each grade level. The program is currently being evaluated to determine its long-term impact. *Our Whole Lives* is one of several faith-based comprehensive sex education curricula identified by the Faith Resource Center of the National Campaign to Prevent Teen and Unplanned Pregnancies (<http://www.thenationalcampaign.org/religion/default.aspx>)



Implementation Strategies

1. Implement 4Me comprehensive sex education curriculum in Jacksonville Housing Authority apartment complexes.
2. Utilize faith-based comprehensive curricula, such as Our Whole Lives, in several targeted churches.
3. Implement comprehensive sex education programming to Northeast Florida counties through community-based organizations, like Girls Inc. Programming will be available to churches, schools, etc.

Potential Partners for Implementation

- Northeast Florida Healthy Start Coalition
- Planned Parenthood of North Florida
- Jacksonville House Authority
- Private apartment complexes
- Jacksonville Jaguars Foundation
- Churches – Health Ministries
- Schools
- Nursing/Health Professional Student interns
- Healthy Baker
- Girls Incorporated



Theme: Improving Access to Adolescent Health Care

Need

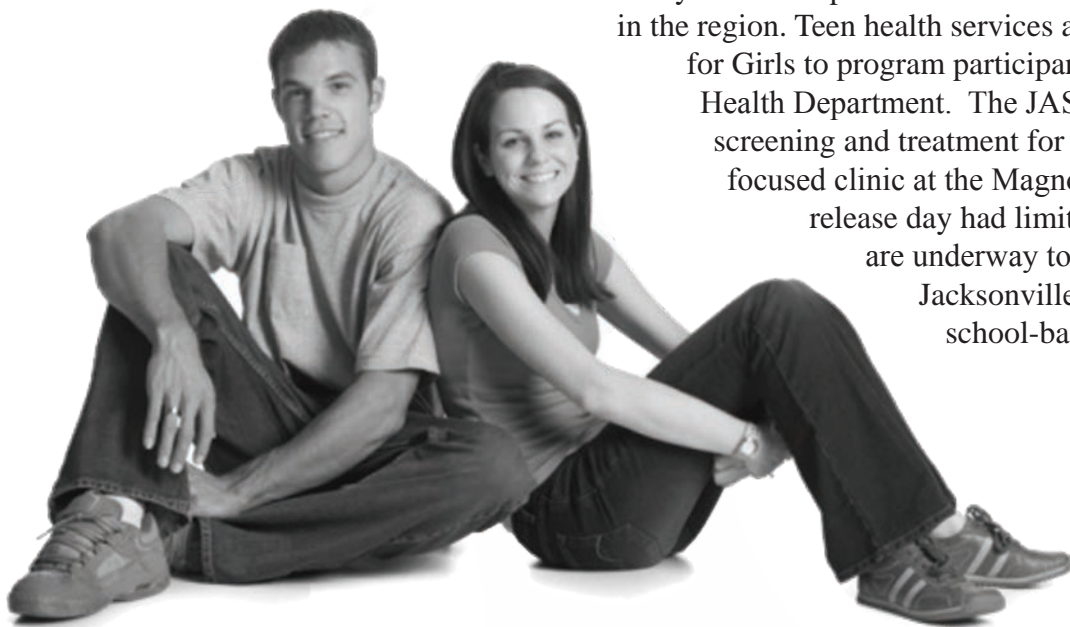
According to the National Alliance to Advance Adolescent Health, teens face serious, unaddressed health risks with lifelong consequences.¹¹ More than 70 percent of adolescent morbidity and mortality is associated with such behaviors as unsafe sex, violence, substance use, tobacco use, poor nutritional habits, inadequate physical activity and injuries. Rates of sexually transmitted infections (STIs) and unintended pregnancies among teens remain high, particularly among minority youth. Yet, despite these risks, adolescents tend to slip through the cracks of the health care delivery system. Gaps in adolescent health care are related to lack of access and appropriateness of services available in most communities.

Teens 12-18 years old are less likely to be insured than their younger counterparts. One-fifth of visits by teens to the ER in the Northeast Florida region from 2007-2009 were self-pay. Even within the current teen population on Florida KidCare, only 55.8 percent of adolescents 12 years and older had a comprehensive well-care visit over a year period.¹² Fear of disclosure may further discourage teens from seeking particular services, such as birth control, pregnancy testing and STI screening and treatment. Lack of transportation is also a barrier, especially in the more rural counties that lack public transportation.

Research has shown that teens are more likely to use, and do better in, clinics that offer a comprehensive, interdisciplinary model of physical, behavioral, and reproductive health care that is explicitly designed to welcome adolescents and respond to their particular needs.¹³

Regional Scan

Health services specifically designed for teens are limited in Northeast Florida. The Nassau County Health Department offers one of the few teen health clinics in the region. Teen health services are available at PACE Center for Girls to program participants through the Duval County Health Department. The JASMYN clinic also offers STI screening and treatment for teens. Efforts to establish a teen-focused clinic at the Magnolia Project on the schools' early release day had limited success; alternative efforts are underway to pilot this model at the West Jacksonville Health Center. There are no school-based health clinics in the region.



¹¹ Sandmaier, M., Bell, A., Fox, H. et al (2007). Under One Roof: Primary Care Models that Work for Adolescents. The National Alliance to Advance Adolescent Health Report No. 7. Accessed online at <http://www.thenationalalliance.org/jan07/Report1.pdf>.

¹² Institute for Child Health Policy, September 2010 "Quality of Care: Health and Dental Plan Performance Measures, Health Plan Contract Year 2008-2009, Prepared for the Florida Healthy Kids Corporation."

¹³ Sandmaier, M. et al. op cit.



Best Practices

Mount Sinai Adolescent Health Center (NY), *Wake Teen Medical Services (NC)* and the *Erie Teen Health Center (Chicago)* offer best practice models of adolescent health care, according to the National Alliance. These clinics share the following characteristics: a comprehensive range of services under a single roof, many of which can be accessed in a

single visit; a team approach to care; sensitive staff who enjoy and care about youth; a “teen friendly” environment; and a focus on positive youth development.

Teen Xpress is a mobile health unit that provides free medical and mental health care for at-risk youth in select locations throughout Orange County, Florida. A team of specialized healthcare professionals provide help to uninsured and at-risk adolescents who might otherwise go without treatment. The van provides care at schools and community sites. It is restricted from providing contraception services on school grounds, however.

Families Talking Together is a clinic-based intervention to reduce sexual risk taking among Latino and African American adolescents. It was delivered in a primary healthcare clinic and was coordinated through social workers when physicians saw adolescents for their annual physical examinations.

Implementation Strategies

1. Develop at least one Adolescent Health clinic in each county. The ideal location for the clinics would be a designated site where teens are comfortable, familiar and are present for other activities. Reestablish the Bridge of Northeast Florida as the teen health clinic for Duval County.
2. Explore opportunities to develop a mobile Teen Clinic. The mobile clinic would be housed in large appropriately equipped vans that would offer multiple services for teens (dental, STI counseling and screening, contraception, etc.). The vans would travel to schools and community sites in multiple counties.
3. Implement a peer health education training program, where teens and young adults are equipped to be community resources for correct information and referrals for STI/HIV screenings and family planning information. Use the Duval County Health Department’s Peer Health Advocates program model. Support and replicate the DCHD model in other counties.
4. Create an online or text advice and health information resource as part of a multi-county effort. Teens would text questions to a specific number and receive either scripted answers to specific questions or directions to online resources and/or healthcare services. Trained and qualified staff would respond. Model after Alachua County Health Department’s text health initiative.

5. Incorporate adolescent health needs, specifically HIV/STI/Family Planning into community health events
 - a. Back to school events
 - b. Teen health summits

Potential Partners for Implementation

- Job Corps
- JASMYN
- Area health departments and Federally Qualified Health Centers
- Wolfson Children's Hospital
- The Way Clinic
- The Wildflower Clinic
- Barnabus Center
- Volunteers in Medicine
- The Bridge of Northeast Florida
- Apel Health Services



Theme: Repeat Teen Pregnancies

Need

Nearly one out of five teenagers in Northeast Florida who has a baby will become pregnant again before leaving her teens. Additional births multiply the difficulties experienced by teen mothers¹⁴. Seventeen percent of teen births in Northeast Florida in 2010 were to mothers who have had a previous pregnancy.

Results from listening tours within the Duval County Public Schools with teens who experienced multiple pregnancies and births showed pregnancies occurred because the teens did not have access to birth control, did not use birth control because they believe it doesn't work or used birth control but still became pregnant.

Regional Scan

Pregnant teens are priority for receipt of Healthy Start and Healthy Families services. Over the last three years, an average of 290 teens received face-to-face case management and related services from Healthy Start in Northeast Florida. Fifty-four teens were served by Healthy Families during the same period. Healthy Start does not offer a specific intervention tailored for teen participants aimed at preventing subsequent pregnancies.

Each of the school systems in the five-county area provides special educational programs to encourage pregnant and parenting teens to complete their high school education. None of these programs, however, offer services such as family planning or comprehensive sex education to reduce subsequent pregnancies among participants.

Evidence-based Practices

Computer-Assisted Motivational Interviewing: This intervention was developed for African American pregnant teen girls ages 12-18 and is delivered using laptop computers in the teens' home or in a community-based setting. The teen answers several questions about her current sexual relationships, contraceptive and condom use intentions, and current contraceptive behaviors. An algorithm assesses the answers and predicts the teen's risk level, allowing the counselor to tailor the 20-minute session. The intervention sessions are initiated six weeks postpartum and continued quarterly through 24 weeks postpartum.

Home-Based Mentoring for First-Time Adolescent Mothers: This home-based program was developed for urban, low-income, African-American, first-time adolescent mothers and aimed to reduce rapid repeat births. The program is a 19-lesson home-based intervention that includes two introductory lessons along with 17 additional lessons that blend themes of adolescent development and parenting.

Nurse Family Partnership: NFP is an intensive home visitation program that targets first-time mothers, with priority given to teen moms living in high-risk communities. The model uses specially trained nurses to provide a curriculum- and individual-driven intervention that promotes healthy child development. NFP has documented impacts on repeat births and short inter-pregnancy intervals. Prenatal home visits will occur once a week for the first four weeks, then every other week until the baby is born. Postpartum visits



¹⁴ Schelar, E., Franzetta, K., & Manlove, J. (2007). Repeat Teen Childbearing: Differences Across States and by Race and Ethnicity (Issue Brief No. 2007-23). Washington, DC: Child Trends

occur weekly for the first six weeks and then every other week until the baby is 21 months old. From 21-24 months, home visits will occur monthly. Nurse home visitors have caseload caps of 25 participants. NFP is one of seven evidence-based models eligible for funding in Florida with federal home visiting dollars.

Implementation Strategies

1. Prioritize referrals of pregnant teens to Healthy Start programs from community programs that encounter teens.
2. Have all teens referred to Healthy Start services identified as a special high-risk group, allowing the programs to make a special effort to find, contact and enroll them. As part of their high-risk status, teens will remain in services for a full year to facilitate access to postpartum contraception. Submit this recommendation to the Department of Health for inclusion in the Healthy Start standards and guidelines.
3. Implement a home-based mentoring program for pregnant mothers. Utilize educated single mothers that are a racial and ethnic match to the teen mothers to serve as mentors. Use the Home-Based Mentoring for First-Time Adolescent Mothers program.
4. Pilot the integration of evidence-based programs aimed at preventing repeat teen pregnancies into current Healthy Start case management, in conjunction with the home-based mentoring program and Nurse Family Partnership.
5. Implement a group for pregnant teens at Shands Jacksonville. The program will be similar to the CenteringPregnancy model and include support and education for participants.
6. Healthy Families will prioritize teen services within the local programs.

Potential Partners for Implementation

- Northeast Florida Healthy Start Coalition
- Healthy Start
- Healthy Families
- Local universities and colleges
- Public schools (guidance counselors)
- Teen pregnancy programs
- Shower of Hope
- WIC programs
- Planned Parenthood of Northeast Florida
- Local health departments
- The Way Clinic
- Shands Jacksonville
- AmeriCorps/North Florida Health Corps



Theme: Public Policy Changes

Need

Florida law states that in order for high school students to graduate, they must receive one-half credit in “life management skills” in either ninth or tenth grade. The course must include instruction in the prevention of HIV/AIDS and sexually transmitted infections (STIs), family life, the benefits of sexual abstinence and the consequences of teen pregnancy. It also states that these “descriptions for comprehensive health education shall not interfere with the local determination of appropriate curriculum which reflects local values and concerns.”

School boards may decide to allow additional instruction regarding HIV/AIDS. Such instruction may include information about “means used to control the spread of acquired immune deficiency syndrome.” All instruction and course material must:

1. teach abstinence from sexual activity outside of marriage as the expected standard for all school-age students while teaching the benefits of monogamous heterosexual marriage;
2. emphasize that abstinence from sexual activity is a certain way to avoid out-of-wedlock pregnancy, sexually transmitted infections, including acquired immune deficiency syndrome (AIDS), and other associated health problems;
3. teach that each student has the power to control personal behavior and encourage students to base actions on reasoning, self-esteem and respect for others; and
4. provide instruction and material that is appropriate for the grade and age of the student.

Florida standards, titled Sunshine State Standards for Health and Physical Fitness, do not mention instruction in HIV/AIDS, STIs or sexuality education. Parents or guardians may remove their children from any or all of sexuality education and/or STI/HIV education classes (See Florida Statute, Title XLVIII, Chapter 1003, Section 42, 43, and 46).

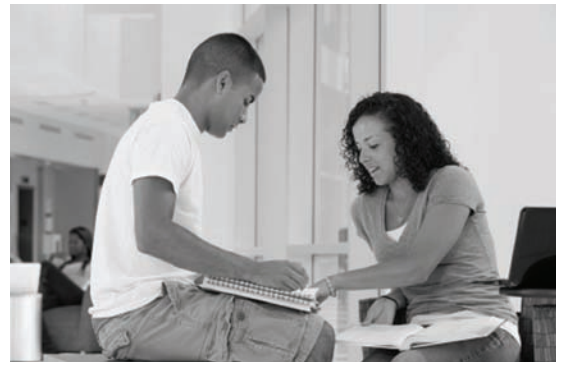
At the Task Force’s March meeting, representatives from several area school districts reported that they must follow the state statute that mandates abstinence-only education as the expected standard in health education. They identified the influence of strong proponents of abstinence-only education and conservative culture of the community, in addition to opt-in forms that are required for classes, as barriers to comprehensive education.

In addition to the barriers to providing sex education, the districts reported that many students do not attend elective classes like health because they are behind in grade level and have to take remedial classes. The Duval County schools parenting teacher reported that some of her students — all of which are either pregnant or have had children — often do not understand how pregnancy happens or why they get periods.

Regional Scan

In 2008, then State Senator Peter Deutch (D- Palm Beach) introduced the Florida Healthy Teens Act. It would have required public schools or third-party organizations receiving state funding to conduct comprehensive, medically-accurate, factual and age-appropriate sexual health programs. Programs





would have been required to emphasize the value of abstinence while not ignoring those adolescents who have had sexual intercourse; to encourage family communication about sexuality; and to be appropriate for students of all races, genders, religions and sexual orientations. The Florida Healthy Teen Act was supported by a broad-based statewide advocacy coalition (The Healthy Teens Campaign). The bill garnered bipartisan support from 34 lawmakers but died in the House.

In response to recommendations included in the 2008 JCCI Infant Mortality Study, State Representative Mia Jones (D-Jacksonville) co-sponsored (HB1503) legislation requiring one-half credit in health education as a prerequisite for graduation during the 2009 legislative session. State Representative Keith Fitzgerald (D-Sarasota) filed the aforementioned Florida Healthy Teens Act (HB265) during the same session. Like similar bills introduced in 2008, both bills died during the committee process.

Best Practices

The Adolescent Pregnancy Prevention Campaign of North Carolina successfully advocated for the Healthy Youth Act of 2009, a North Carolina state statute mandating comprehensive sex education in schools. A coalition of organizations was formed to attempt to pass the law under the umbrella name “Healthy Youth,” which was intended to give the group a cohesive brand. They developed a work plan, timeline and an endorsement letter that they sent to numerous state, county and local organizations. The Healthy Youth coalition utilized an active teen youth council that had over 100 face-to-face meetings with legislators and helped mail thousands of postcards to lawmakers.

The Healthy Teens Campaign was organized in Florida in 2008 as part of initial efforts to address state laws on abstinence-only health education. The Campaign is a broad-based coalition made up of more than 80 groups representing education, public health and faith-based organizations that seek to improve the health and safety of Florida teens through comprehensive sex education. The Campaign supports The Healthy Teens Act, which will require that Florida public schools receiving state funding provide comprehensive, medically-accurate and age-appropriate factual information when teaching about sexually transmitted infections, including HIV/AIDS, family planning or pregnancy.

Implementation Strategies

1. Join Florida Healthy Teens Campaign in their efforts to increase access to comprehensive sex education in schools as an option and implement local-level advocacy efforts.
 - a. Conduct an in-depth review of current county policies
 - b. Research counties that have affected change in sex education policy
 - c. Create coalition of community members in each county to implement campaign
 - d. Tap community-based sex educators to leverage their experiences in teaching comprehensive sex education (particularly their work in getting parents on board)
 - e. Create a proposal for local polling on impactful messages and messengers for campaign to change sex education policies

- f. Conduct polling to test messages regarding comprehensive sex education
 - g. Provide teacher training so that there is comfort and competence in implementing new curricula.
2. Work with A. Philip Randolph and other school-based programs serving pregnant and parenting teens to support teens to stay in school and prevent drop outs by providing complete wraparound services.
 3. Reframe teen pregnancy as an issue that affects school performance and drop out rates and work to engage organizations in addressing teen pregnancy as part of their strategies for improving school success.

Potential Partners for Implementation

- Healthy Teens Florida
- Advocates for Youth
- Women's Giving Alliance
- Jacksonville Public Education Fund
- Save Duval Schools
- ICARE



Action Plan: Summary of Themes, Strategies and Partnerships

Theme	Program Strategies	Potential Partnerships
Engaging Parents	<ul style="list-style-type: none"> • Provide “Train the Trainer” workshop for the “Teening Up” parenting curriculum through the Duval County Cooperative Extension to community-based organizations and others working with teens and their families, including Healthy Start case managers. • Incorporate parent component into existing organizations, agencies and groups, such as faith-based organizations and worship centers, parent advisory groups and the Jaguars Foundation Straight Talk television program. • Hold “Listening Tours” for parents, grandparents and caretakers to identify their issues and concerns regarding discussing teen sexual health and teen pregnancy prevention with youth. • Educate parents, grandparents and caretakers on how to talk to teens about a variety of topics, including safety, relationships, teen pregnancy prevention, etc. <ul style="list-style-type: none"> » Use media to create a video (for CDs, YouTube) » Target large employers to do education to reach parents/grandparents/caregivers. » Reach parents/grandparents/caregivers. 	<ul style="list-style-type: none"> • Duval County Cooperative Extension • Faith-based community • Community non-profits serving teens and their families • Large employers • Parent Teacher Associations, parent advisory groups • Jacksonville Jaguars Foundation (Straight Talk program) • The Bridge of Northeast Florida • Clear Channel advertising • Girl Scouts/Boy Scouts • Comcast
Community-based Teen Pregnancy Prevention	<ul style="list-style-type: none"> • Implement 4Me comprehensive sex education curriculum in Jacksonville Housing Authority apartment complexes. • Utilize faith-based comprehensive curriculums, such as Our Whole Lives, in several targeted churches. • Implement comprehensive sex education programming to Northeast Florida counties through community-based organizations, like Girls Inc. Programming will be available to churches, schools, etc. 	<ul style="list-style-type: none"> • Northeast Florida Healthy Start Coalition • Planned Parenthood of North Florida • Jacksonville House Authority • Private apartment complexes • Jacksonville Jaguars Foundation • Churches – Health Ministries • Schools • Nursing/Health Professional Student interns • Healthy Baker • Girls Incorporated

Theme	Program Strategies	Potential Partnerships
Improving Access to Adolescent Health Services	<ul style="list-style-type: none"> • Develop at least one Adolescent Health clinic in each county. The ideal location for the clinics would be a designated site where teens are comfortable, familiar and are present for other activities. Reestablish the Bridge of Northeast Florida as the teen health clinic for Duval County. • Explore opportunities to develop a mobile Teen Clinic. The mobile clinic would be housed in large appropriately equipped vans that would offer multiple services for teens (dental, STI counseling and screening, contraception, etc.). The vans would travel to schools and community sites in multiple counties. • Implement a peer health education training program, where teens and young adults are equipped to be community resources for correct information and referrals for STI/HIV screenings and family planning information. Use the Duval County Health Department's Peer Health Advocates program model. Support and replicate the DCHD model in other counties. • Create an online or text advice and health information resource as part of a multi-county effort. Teens would text questions to a specific number and receive either scripted answers to specific questions or directions to online resources and/or healthcare services. Trained and qualified staff would respond. • Model after Alachua County Health Department's text health initiative. • Incorporate adolescent health needs, specifically HIV/STI/Family Planning into community health events <ul style="list-style-type: none"> » Back to school events » Teen health summits 	<ul style="list-style-type: none"> • Job Corps • JASMYN • Area health departments and Federally Qualified Health Centers • Wolfson Children's Hospital • The Way Clinic • The Wildflower Clinic • Barnabus Center • Volunteers in Medicine • The Bridge of Northeast Florida • Apel Health Services

Theme	Program Strategies	Potential Partnerships
Repeat Teen Pregnancies	<ul style="list-style-type: none"> • Prioritize referrals of pregnant teens to Healthy Start programs from community programs that encounter teens. • Have all teens referred to Healthy Start services identified as a special high-risk group, allowing the programs to make a special effort to find, contact and enroll them. As part of their high-risk status, teens will remain in services for a full year to facilitate access to postpartum contraception. Submit this recommendation to the Department of Health for inclusion in the Healthy Start standards and guidelines. • Implement a home-based mentoring program for pregnant mothers. Utilize educated single mothers that are a racial and ethnic match to the teen mothers to serve as mentors. Use the Home-Based Mentoring for First-Time Adolescent Mothers program. • Pilot the integration of evidence-based programs aimed at preventing repeat teen pregnancies into current Healthy Start case management, in conjunction with the home-based mentoring program and Nurse Family Partnership. • Implement a group for pregnant teens at Shands Jacksonville. The program will be similar to the CenteringPregnancy model and include support and education for participants. • Healthy Families will prioritize teen services within the local programs. 	<ul style="list-style-type: none"> • Northeast Florida Healthy Start Coalition • Healthy Start • Healthy Families • Local universities and colleges • Public schools (guidance counselors) • Teen pregnancy programs • Shower of Hope • WIC programs • Planned Parenthood of Northeast Florida • Local health departments • The Way Clinic • Shands Jacksonville • AmeriCorps/North Florida Health Corps

Theme	Program Strategies	Potential Partnerships
Public Policy	<ul style="list-style-type: none"> • Join Florida Healthy Teens Campaign in their efforts to increase access to comprehensive sex education in schools as an option and implement local-level advocacy efforts. <ul style="list-style-type: none"> » Conduct an in-depth review of current county policies » Research counties that have affected change in sex education policy » Create coalition of community members in each county to implement campaign » Tap community-based sex educators to leverage their experiences in teaching comprehensive sex education (particularly their work in getting parents on board) » Create a proposal for local polling on impactful messages and messengers for campaign to change sex education policies » Conduct polling to test messages regarding comprehensive sex education » Provide teacher training so that there is comfort and competence in implementing new curricula. • Work with A. Philip Randolph and other school-based programs serving pregnant and parenting teens to support teens to stay in school and prevent drop outs by providing complete wraparound services. • Reframe teen pregnancy as an issue that affects school performance and drop out rates and work to engage organizations in addressing teen pregnancy as part of their strategies for improving school success. 	<ul style="list-style-type: none"> • Healthy Teens Florida • Advocates for Youth • Women’s Giving Alliance • Jacksonville Public Education Fund • Save Duval Schools • ICARE

Implementation Plan

The Task Force chose priority strategies from each theme to begin implementing immediately.

Goal	Strategies and Tactics	Timeline	Agency(ies) Responsible	Status
Provide “Train the Trainer” workshop for the “Teening Up” parenting curriculum through the Duval County Cooperative Extension to community-based organizations and others working with teens and their families, including Healthy Start case managers.	Organize “Train the Trainer” for Healthy Start providers	2012	Northeast Florida Healthy Start Coalition Local health departments Duval County Cooperative Extension	
Incorporate parent component into existing organizations, agencies and groups, such as faith-based organizations and worship centers, parent advisory groups and the Jaguars Foundation Straight Talk television program.	Secure additional funding to implement parent component	2012	Jaguars Foundation Faith-based organizations	
Hold “Listening Tours” for parents, grandparents and caretakers to identify their issues and concerns regarding discussing teen sexual health and teen pregnancy prevention with youth.	Secured grant from UNF’s US Group to hold parent “Listening Tour” in Nassau County.	December 2011	Northeast Florida Healthy Start Coalition Nassau County Health Department	
Implement 4Me comprehensive sex education curriculum in Jacksonville Housing Authority apartment complexes.	Secured grant through the Ounce of Prevention and established relationship with Jacksonville Housing Authority to implement program utilizing AmeriCorps member and nursing students from UNF and Chamberlain College of Nursing to conduct	2011-2012	Northeast Florida Healthy Start Coalition Jacksonville Housing Authority AmeriCorps/North Florida Health Corps members Nursing/Health Professional Student interns	

Goal	Strategies and Tactics	Timeline	Agency(ies) Responsible	Status
Utilize faith-based comprehensive curriculums, such as Our Whole Lives, in several targeted churches.	Target specific churches through Baker County and St. Johns Infant Mortality Task Forces Purchasing curriculum through UNF'S US Group grant.	Ongoing	Northeast Florida Healthy Start Coalition Partner Agencies – St. Johns & Baker County Infant Mortality Task Forces	
Implement a peer health education training program, where teens and young adults are equipped to be community resources for correct information and referrals for STI/HIV screenings and family planning information. Use the Duval County Health Department's Peer Health Advocates program model. Support and replicate the DCHD model in other counties.	Duval County Health Department is implementing a Peer Health Advocates training program where teens and young adults are being equipped to be community resources for correct information and referral for HIV/STI screening and FP information. This is modeled on a successful adolescent peer advocates initiative in New York City.	Ongoing	Duval County Health Department	
Create an online or text advice and health information resource as part of a multi-county effort. Teens could text questions to a specific number and receive either scripted answers to specific questions or directions to online resources and/or healthcare services. Trained and qualified staff would respond. Model after Alachua County Health Department's text health initiative.	Secure funding for text/online health initiative. Collaborate with similar local programs at Apalachee Health Services and the Jaguars Foundation/Straight Talk	Ongoing	County Health Departments Jaguars Foundation Apalachee Health Services	
Have all teens referred to Healthy Start services identified as a special high-risk group, allowing the programs to make a special effort to find, contact and enroll them. As part of their high-risk status, teens will remain in services for a full year to facilitate access to postpartum contraception. Submit this recommendation to the Department of Health for inclusion in the Healthy Start standards and guidelines.	The Healthy Start Coalition's Public Health Committee (comprised of the Coalition and Healthy Start providers) will develop guidelines for care coordination of pregnant teens.	2012	Northeast Florida Healthy Start Coalition Healthy Start Local Health Departments Shands Jacksonville	

Goal	Strategies and Tactics	Timeline	Agency(ies) Responsible	Status
Pilot the integration of evidence-based programs aimed at preventing repeat teen pregnancies into current Healthy Start case management, in conjunction with the home-based mentoring program and Nurse Family Partnership.	The Healthy Start Coalition received funding from the state (through the federal Affordable Care Act) to implement the Nurse Family Partnership within Healthy Start. One of the target populations that will receive intensive case management services under the grant will be pregnant teens.	2011-2014	Northeast Florida Healthy Start Coalition Shands Jacksonville Duval County Health Department	
Join Florida Healthy Teens Campaign in their efforts to increase access to comprehensive sex education in schools as an option and implement local-level advocacy efforts.	Identify one or two school districts in which to implement a comprehensive sexuality education curriculum.	Ongoing		

Additional Areas of Study

The Task Force focused its efforts on strategies to prevent initial and repeat teen pregnancies. During the year-long process of gathering data, information and developing strategies, the Task Force membership discovered areas of concern that warrant further study and resources:

- **The Latino population.** Northeast Florida has a growing Latino population. The population is also disproportionately affected by teen pregnancy. The state birth rate for Hispanic teens ages 15-19 was 42.2 in 2008-2010, compared to 31.2 for white teens. Despite having a diverse group of teens, there was not a large representation of Hispanic youth at the Teen Listening Tours. During the April 2011 meeting of the Task Force, representatives from the Way Free Clinic presented about their free clinic where 48 percent of the clients, including those that seek care within the OB clinic, are Hispanic. Many of the issues that lead to initial and repeat teen pregnancies within the Hispanic population differ from those that face other racial and ethnic segments of the population.
- **Faith-based organizations and leadership.** One of the goals of the Task Force was to engage the faith-based community in the process. However the Task Force was unable to secure a faith-based leader or organization during the short time period. Engaging the faith community in teen pregnancy prevention is key, according to the National Campaign to Prevent Teen and Unplanned Pregnancy, because religious faith and a strong moral sense play important roles in protecting young people from too-early sexual activity, teen pregnancy and other risky behaviors.

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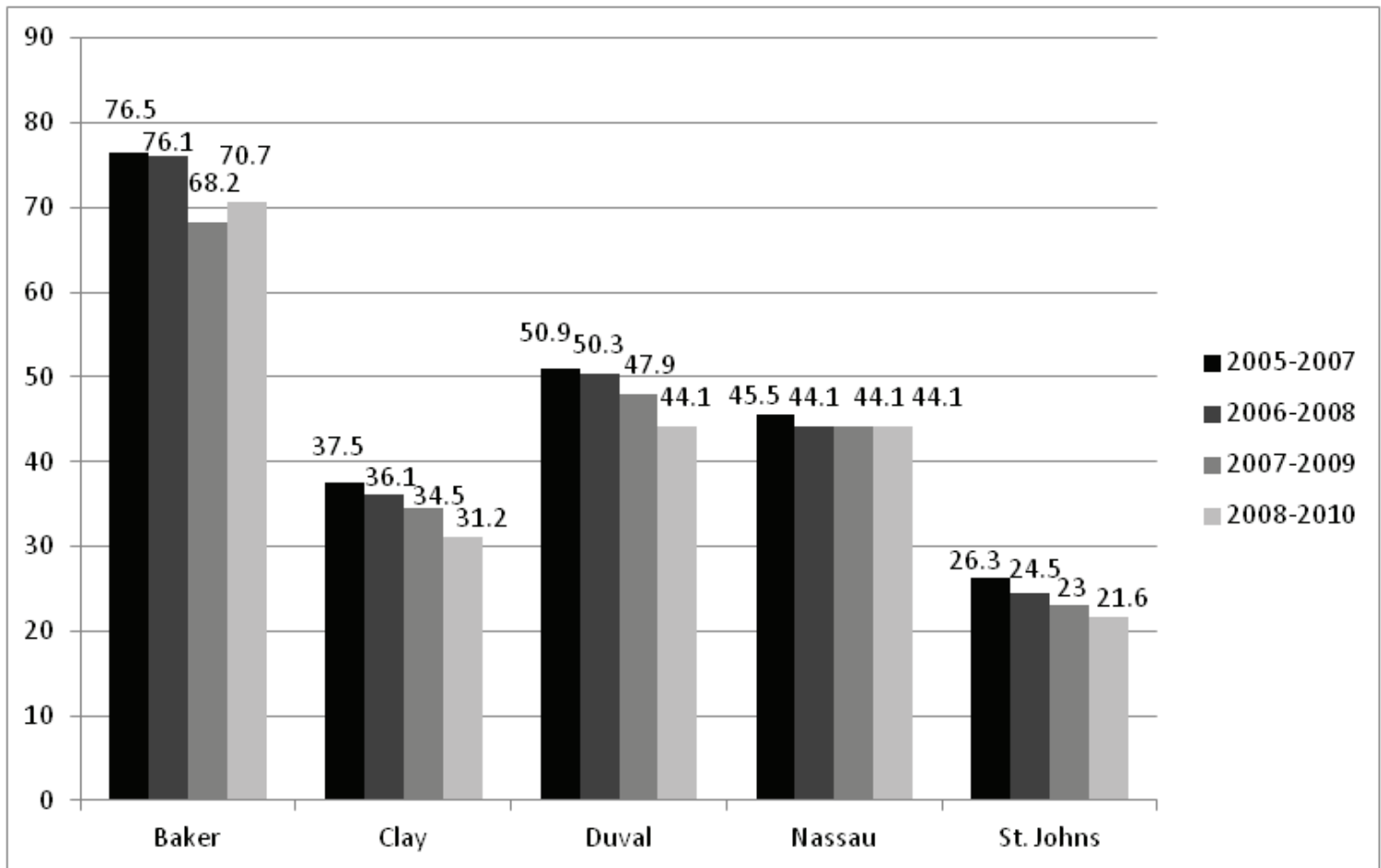
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Why It Matters. National Campaign to Prevent Teen and Unplanned Pregnancy.

Appendix A

Teen Birth Rate (Births to moms age 15-19 per 1,000 females age 15-19) by County
Rolling 3-year Rates, 2005-2007 to 2008-2010



Source: Florida CHARTS, 2005-2010

Appendix B

Teen Listening Tours



NORTHEAST FLORIDA TEEN PREGNANCY TASK FORCE

Engaging Teens in the Issue

- A priority of the Task Force is to hear the voice of teens and engage them throughout the entire task force process
- First step was to schedule regional listening tours to have a conversation with teens about teen pregnancy, sex education and adolescent behavior
- AmeriCorps members and UNF nursing students received training on focus groups and facilitated the “tours”
- Heard from a wide variety of teens:
 - Rural
 - Urban
 - Different Races & Ethnicities: White, Black, Hispanic
 - Male & Female
 - Ages 13-19, middle school and high school
 - Pregnant teens, teen mothers, repeat teen pregnancies

Listening Tours

- Lighthouse Christian School
 - 12 girls (15-18 years old)
- AMIKids
 - 15 boys (ages 14-18 years old)
- Baker County YMCA
 - 7 teenagers (5 boys / 2 girls)
- YouthLink
 - 14 teenagers (6 boys / 8 girls)
- Hollybrook Homes
 - 7 teenagers (4 boys / 3 girls)
- A. Philip Randolph
 - 2 Listening Tours – (7 girls in group 1 and 5 girls in group 2)



Focus Groups 1-5

THE FIRST FIVE FOCUS GROUPS WERE
COMPRISED OF MALE AND FEMALE HIGH
SCHOOL AND MIDDLE SCHOOL TEENS FROM
NORTHEAST FLORIDA.

What influences teens to have sex or have babies?



Common themes identified:

- Peer Pressure
- Family
- Self-Esteem
- Education

Peer Pressure

- Teens say sex is very prevalent in their lives:
 - Media
 - Rap & other music videos
 - Teens know their family members (brothers, sisters, cousins) are having sex.
 - Constantly hearing about sex creates a curiosity
- Many teens feel egged on or pushed into having sex:
 - By their friends
 - From older siblings or cousins
- Teens do it because they think it's cool and they want to brag – some may even lie about having sex just to be cool
- Many do it just to feel popular – “Everyone else is doing it” mentality

Self-Esteem

- Teens are aware of more than just the physical aspects of sex.
- **Emotion:**
 - Sex is emotionally overwhelming – can create attachment, etc.
 - Many teens can feel sad or used when they are dumped after having sex.
- **Trust:**
 - If their partner was pregnant, male teens would immediately ask for a DNA test (influence from their mother or aunt).
 - In relationships: girls feel that having another baby will ensure the father of her child stays in the relationship.
- **Confidence:**
 - Girls may dress sexy to get attention.
 - Teen girls dress sexy because they think their body is all they have.

Family

- Family is a big part of teens' lives — it is a source of information and an influence on their behavior
- **Having the talk:** teens want to be able to ask their parents about sex, but it's uncomfortable and parents don't always know how to talk to their kids about it or handle the fact that their children are sexually active
- **Continuing the cycle:** If teens are raised by young parents, many of the teens think it's normal and can't see past that – they become young parents themselves.

Family

- **Family dynamics:**
 - Many boys think the girls are responsible for raising a child because their moms did it for their family.
 - 75/25: Males said three quarters of the responsibility falls on the mother of the child
 - Many girls start having sex at a young age because they come from a broken family and they use sex to get away from that.
 - Some of the clothes teen girls wear may not be considered "inappropriate" depending on her family values.
 - Many very young kids (3+ years old) learn about sex from their cousins – just learning through absorption.

Education



- **Where are teens getting their information about sex from?**
 - Media
 - Friends
 - Internet
 - Family
 - A little bit in school health class (mainly anatomy and hygiene).

Education

- **Sex education in school:**
 - Stresses abstinence, but not everyone is abstinent
 - Cannot stop teens from having sex – instead they need all of the details (good and bad)
 - **Holistic approach**
 - Very limited education on birth control and STI prevention.
 - **Many believe birth control doesn't work.**
 - Want to know more about the emotions relating to sex.
 - Want teens to feel comfortable enough to ask questions, not scare them away

Focus Groups 6-7

FOCUS GROUPS 6 AND 7 WERE COMPRISED OF CURRENTLY OR PREVIOUSLY PREGNANT FEMALE HIGH SCHOOL AND MIDDLE SCHOOL TEENS IN NORTHEAST FLORIDA.

Listening Tour

- A. Philip Randolph Academy
- Session 1
 - 5 high school girls (1 girl with 2 children), 2 middle school
- Session 2
 - 5 high school girls (1 girl pregnant with 2nd child)

Common Themes Identified

- Influenced by many sources
 - Family
 - Media
 - Friends
- Need to revamp sex education
 - Mentoring
 - Discussion of contraceptives
 - Experiences mimicking real life
- Lack of confidence in contraceptives
 - Teen with 2 children became pregnant with both kids while on the pill
 - Education needed on how to properly take birth control

Breadth of Influences

- Repeating cycle--girls born to young mothers becoming young mothers themselves
- Lack of guidance from parents
- Media often glamorizes teen pregnancy
 - 16 and Pregnant; Bristol Palin and Jamie Lynn Spears
- Many girls said they got information from their peers

Revamping Sex Education

- All in favor of some type of mentoring program
- Characteristics of an ideal mentor:
 - Young (in twenties or thirties, but no older)
 - Have had similar experiences
 - Female
 - Trust very important (no judgment)
- Would like to see girls have pseudo-pregnancy experiences
 - Pregnancy suit/belly
 - Take home dolls

Revamping Sex Education

- Girls noted that doctors and parents did not discuss contraception until *after* they were pregnant
- Only abstinence taught in schools

Lack of Confidence in Contraceptives

- "No good"
- Girls get pregnant even when on birth control
- Hard to remember to take pill daily
- Condoms break and don't protect against pregnancy or STIs
- IUDs can get stuck, are dangerous
- Patch could fall off
- Female condoms are complicated and "nasty"
- Pill makes girls fat, nauseated
- Birth control also guy's responsibility

Pregnant Teen/Teen Mom Questions

THE FOLLOWING FOUR QUESTIONS WERE ASKED TO ONLY FOCUS GROUPS 6 AND 7.

Questions 1 and 2

- 1. Nearly one out of five teenagers in Northeast Florida who has a baby will become pregnant again before leaving her teens. Why do you think this is happening?
 - Girls continue same risky behavior...sex without protection
 - "Not always the girl's fault"
- 2. What places do you know of that provide pregnancy services?
 - Healthy Start, WIC, Magnolia Project, Women's Health Center, Shands clinic

Questions 3 and 4

- 3. Is there any service you would like to see available for pregnant women/teens?
 - Girls suggested some type of resource guide developed by school
 - "There's so much out there"
- 4. Who do you think teens can talk to about sex and pregnancy?
 - Parents, doctors, teachers, friends
 - Parents' reactions and experiences important though
 - Ultimately dependent on individual's choices and outlook
 - "Parents need to be there. If they're willing to be there and teach you, you'll have more courage to say no."

Now that we know what teens think...

What can we do?

Provide better sex education

- What kind of sex education do teens want and need?
 - Abstinence-only education is NOT working – need to be realistic!
 - ✦ Teens want the truth.
 - ✦ Open and honest conversations about sex (good and bad) instead of demonizing it.
 - ✦ "Sex education is sugarcoated and boring."
 - Need to include the emotions in sex education (attachment, guilt, anger, etc.)
 - Education needs to include STD information.
 - ✦ Learn best through visuals – photos of STDs gets their attention better

Provide better sex education, cont'd.

- What kind of sex education do teens want and need?

Continued

 - Much more information on birth control.
 - ✦ Most popular prevention methods: condoms, IUD, the pill, and tubes tied (in teens)
 - ✦ General mistrust of birth control – it doesn't work!
 - ✦ Teach how to use properly and dispel myths
 - Holistic, consistent and age-appropriate sex education.
 - ✦ "Start early, do it yearly and go through college."
 - ✦ Sex education is needed earlier because kids are hearing about it much earlier.
 - ✦ Girls suggested starting in middle school.
 - Mentorship programs needed.
 - ✦ Would want a mentor or someone who is "open-minded, outgoing, someone they could trust and not make you feel bad."

Provide better sex education, cont'd.



• What kind of sex education do teens want and need?

Continued

- Sex ed. needs to be taught in small classes by someone teens can relate to and trust.
 - ✦ “Someone in their 20’s and has had sex before – not someone who is a virgin.”
- ✦ Abstinence for kids 11 and younger
- ✦ Honest education for those 12 and older: risks, protection, lifestyle consequences
- ✦ Have women who had baby in teens talk to students



Educate and Engage Parents

• What can parents do to be more engaged?

- Educate parents to make them feel more comfortable talking to their kids.
 - ✦ Parents should be “open with kids and talk about the issues”.
 - ✦ Parents need to learn how to make the topics less awkward.
- Encourage adults to talk to adults about teens’ sexual maturity and wellbeing
 - ✦ Physicians communicating with parents
 - ✦ Teachers communicating with parents
- Break the cycle: Teens need to see their OWN potential
 - ✦ Boost self-esteem for teens.
 - ✦ Teens only know what they see, they don’t have role models.
 - ✦ Teens need to recognize that they need to be emotionally and financially ready before they have children.

Teen Mindset

- Girls that are pregnant or have had a baby reported:
 - That they were exhausted
 - Life is more complicated
 - Life is harder because they have more to take care of
 - Money is very tight
- Know they could get pregnant but either didn't use protection or said they did and it didn't work

What we learned!

- There is a huge gap between knowledge and behavior.
 - Teens know what they need to do to prevent pregnancy, but no one is talking to them, educating/guiding them, or holding them accountable.
 - ✦ Teens getting pregnant on the pill – not taking it every day like they are supposed to.
 - ✦ Unprotected sex
 - ✦ Lack of connection between baby and a lifelong commitment
 - Teens are not actively preventing pregnancy (taking pill correctly, not using condoms regularly, going out to find birth control).
 - Teens need reliable information

Questions??



Appendix C

SEXUAL Focused on sexual risk and protective factors; sex education

Organization	Population	Counties	Date Established?	Mission/Purpose	Main Programs	Evidenced-Based? Evaluated?	People Served/ Yr.	Clinical Services?	Free Services?	Abstinence-Based or Comprehensive	Contact
Baker County Public Schools	1. Middle school teen males and females 2. Teen mothers	Baker			1. School-based, abstinence-based adolescent health programs 2. School-based Teen Mother Program					Abstinence-based	392 South Blvd. E. Macclenny, FL 32063 904-259-6551
Clay County Public Schools	1. Teen males and females 2. Teen mothers	Clay			1. School-based HIV/AIDS awareness (abstinence-based classes for all 7 th grade students) 2. School-based Teen Mother Program					Abstinence-based	23 South Green St. Green Cove Springs, FL 32043 907-272-8100
Duval County Public Schools	1. Teen males and females 2. Teen mothers	Duval			1. School-based, abstinence-based adolescent health programs 2. School-based teen parenting program					Abstinence-based	1701 Prudential Dr. Jacksonville, FL 32207 904-390-2000 904-390-2091
Nassau County Public Schools	1. Teen males and females 2. Teen mothers and fathers	Nassau			1. School-based, abstinence-based adolescent health programs 2. School-based Teen Mother Program					Abstinence-based	1201 Atlantic Ave. Fernandina Beach, FL 32034 904-491-9900
St. Johns County Public Schools	1. Teen males and females 2. Teen mothers	St. Johns			1. School-based, abstinence-based adolescent health programs 2. School-based Teen Parent Program					Abstinence-based	40 Orange St. St. Augustine, FL 32084 904-547-7500
Girls Incorporated	Girls 6+, mom/daughter; At risk girls between 5-18; don't directly serve family but support as needed; predominately African-Americans but diverse group	All in NE FL; most served is Duval	National 180 Os Local 1970	Inspire girls to be strong, smart, and bold; encourage girls to be self sufficient, responsible, and productive members of society	Community-based comprehensive sex education; mother (female caregiver)/child retreats and workshops; outreach: Pregnancy Prevention (most requested), Economic Literacy, Media Literacy, Friendly Persuasion (substance abuse prevention program); Literacy Program for ages 5-8	Yes—nationally researched and evaluated; data tracked nationally and locally; use pre and post tests for programs	3000-3500	No	All free; summer camp has small fee though	Everything is choice-based ; very comprehensive	1627 Rogero Rd. Jacksonville, FL 904-731-9933
St. Paul Community Empowerment Center, In./ Project T.A.G (Teen Abstinence Group)		Duval			Faith-based, abstinence-based program						3738 Winton Dr. Jacksonville, FL 32208 904-768-7112 x117
Planned Parenthood of North Florida	Services for men, women and teens; general population tends to be older teens and young adults; as a fee-for-service clinic, patients tend to be un- or under-insured	Alachua Baker Bay Bradford Clay Columbia, Duval Escambia Flagler Gadsden Holmes Jefferson Leon Levy Marion Nassau Okaloosa Putnam Santa Rosa St. Johns Suwannee Volusia Wakulla Walton and Washington	Since 1965	...to provide comprehensive reproductive and complementary health care services in settings which preserve and protect the essential privacy and rights of each individual	Community-based comprehensive sex education services	Comply with SIECUS; licensed by FL health dpt.	Approx. 7000	annual exams, colposcopy, STI screening and treatment, pregnancy testing, midlife health, and birth control can see patients 14 and older open M-F	Sliding-scale fee; HIV testing is free	Comprehensive (provide info on BC to clients 14 and older)	3850 Beach Blvd. Jacksonville, FL 32207 904-399-2800
A.W.A.R.E. Healthy Mothers Healthy Babies Coalition of North Florida	All races; middle and high school teens	Duval right now; have been in St. Johns before	Late 1990s	Improve health and safety of mothers, babies, and families through education and collaborative partnerships of public and private organizations	School-based, abstinence-based education Outside of A.W.A.R.E.: Childbirth classes, B.A.B.I.E.S. (breastfeeding initiative)	Yes (Healthy Start funds childbirth classes); also have students do an evaluation/survey pre and post	1200+	No	Free	Abstinence-based	644 Cesery Blvd. Ste. 320 Jacksonville, FL 32211 904-854-7100

Apel Health Services, Abssinia Missionary Baptist Church: Youthlink Mentoring	13-24; have both youth-gearred programs and adult-gearred programs; mostly minority clients	Duval	Since 1999		Faith-based, abstinence-based youth mentoring and empowerment program; offer case management thru mentoring program Youthlink is ages 13-24	Yes	500-1000 (including teens and adults)	No	All free	Comprehensive; cover many topics	5353 Soutel Dr., Jacksonville, FL 32211 904-768-1561 x100
Healthy Start	Pregnant teens, teens with newborns up to age 1, pregnant women of any income	Baker Clay, Duval, Nassau, St. Johns	Since 1991	leads a cooperative community effort to reduce infant mortality & improve the health of children, childbearing women & their families in Northeast Florida	Community-based case management	Most programs		No	All free	Provide variety of services, including helping find providers to dispense form of birth control	CHDs, CHS, Shands 644 Cesery Blvd. Ste. 210 Jacksonville, FL 32211 904-723-5422
Healthy Families	Pregnant teens, teens with children Variety of parents eligible: single parents, those who negatively verbalize baby, inadequate housing/income, less than high school diploma or GED, late prenatal care, raised by unstable caregiver, depression, less than 18 years old	Clay Duval St. Johns	Since 1998	provide a statewide system of voluntary, community-based home visitation services that strengthen families, promote positive parent-child relationships and optimize the health and development of children	Community-based case management Voluntary home visitation program that is proven to prevent child abuse and neglect and other poor childhood outcomes by promoting positive parent-child relationships and child health and development. Families are also linked to a medical provider and other family support services they need during their participation	Annual evaluations	650 families	N/A	Free	N/A	CHS, JCC, Putnam CHD
Magnolia Project/DCHD Teen Clinic	Teens in zip codes 32202, 32204, 32206, 32208, and 32209, predominately African-American clients	Duval			Community-based teen clinic						5300 N. Pearl St. Jacksonville, FL 32208 904-353-2130
Nassau County Health Dpt. Teen Clinic (Fernandina Beach Clinic)	Teens	Nassau			Community-based teen clinic						1620 Nectarine St. Fernandina Beach 32034 904-548-1860
West Jacksonville Family Healthy Center—Male Family Planning	Teen Males	Duval			Community-based clinic						120 King St. Jacksonville, FL 904-253-2785
The Way Free Clinic—Teen Clinic	Teens on Medicaid; both sexes; uninsured and under 200% of federal poverty level; serve everyone! Including newborns and pediatric cases	Clay	Since 2007	Improve access to healthcare and services for uninsured and indigent men, women, and children of Clay County	Community-based clinic Mammogram screenings; OB/GYN and pediatrics; well baby checks	Informally	2400 (patient visits)	General medicine 1 st and 3 rd weekends (Sat. and Sun.) OB is Thursdays; prenatal and vision clinics by appointment only	All are free; patients buy all medicines ...prescribe from \$4 list; request donation from patients though does not affect ability to be seen	Abstinence; Provide info on natural family planning; refer to Clay county if interested in other forms of BC	479 Houston St. Green Cove Springs, FL 32043 904-531-9504
AmeriCorps Get REAL! Mentoring Girl Scouts of Gateway Council	All females middle school-aged	Duval	Since 2002	Treating at risk girls with care and compassion	Abstinence-based youth program Mentoring	Yes	400	No	All free	Abstinence-based	1000 Shearer St. Jacksonville, FL 32055 904-388-4653 x1149 cthomas@girlscouts-gateway.org
JASMYN Clinic	Ages 13-23 LGBT people and their straight allies	Mainly Duval and Clay County, but see people from all over	JASMYN since 1995/6 D-Up since 2009 Street Smart since 2010	Create safe space for LGBT youth and their straight allies	Clinic, Street Smart, D-up (defend yourself); support and info groups; focus on HIV prevention and education	Yes, funding from CDC	300+	Free health clinic with STD and HIV testing and counseling 2 Thursdays a month from 4-7:45pm	All free	Comprehensive; “sex positive” organization	923 Peninsular Place Jacksonville, FL 32204 904-389-3857
River Region	Have programs geared for kids and teens, elementary through 18	Duval Clay Nassau Baker St. Johns	Since 1979	Improve the quality of life for individuals and families of NE FL affected by substance abuse, mental illness, homelessness, HIV/AIDS and other communicable illness through outreach, prevention, intervention, treatment and housing services	Strengthening Families (youth 10-14 and parents; foster communication skills), Kid Power (helps elementary aged kids with reading and math), Training of Teens (for identifying substance abuse and mental health issues and providing intervention), Youth Explosion (annual risk-reduction intervention conference for youth 9-18)	Yes; CARF accreditation		River Region has an AIDS Outreach Unit (counseling, testing, support), pregnancy testing	Free		Admin. Offices: 2055 Reyko Rd. Jacksonville, FL 32207 904-899-6300 X4100

NON-SEXUAL

Focused on the whole individual rather than specific types of behavior; youth development

Episcopal Children's Services	Children birth-5; all denominations, cultural, and socio-economic backgrounds Referral services for parents	Duval, Clay, Nassau, Baker, Bradford, Union, Putnam and St. Johns	Since 1966	Creating opportunity for all our children to achieve their full potential	Early childhood development Early Learning Centers, Voluntary Pre-K (for 4 year olds), Child Care Resource and Referral services for parents, Head Start/Early Head Start (birth-3)		390 Head Start kids	N/A	All free	N/A	8443 Baymeadows Rd. Ste. 1 Jacksonville, FL 32256 904-726-1500
Early Learning Coalition of Duval	Serve all and everyone in Duval ; only program with limitations is the School Readiness Child Care Assistance (determined by income)	Duval	Since 2001	"...create a coordinated and integrated system for school readiness services to better prepare children for entry into kindergarten with an emphasis on literacy skills for children who may be at risk for future school failure. The Coalition recognizes parents as their children's first teachers, and seeks to assist parents by providing opportunities to enhance their children's chances for educational success by participating in quality school readiness programs that can better prepare children for school."	Early childhood development Child care resource and referral information for families in need of child care assistance, School Readiness, Voluntary Pre-Kindergarten, and Quality Early Learning Improvement for child care providers	Yes	Approx. 18,000-20,000 families	No	All free	N/A	8301 Cypress Plaza Dr. Ste. 201 Jacksonville, FL 32256 904-208-2044 x7
Jacksonville Urban League—Head Start	Birth-5 (have Early Head Start programs now); multiracial; serve families and adults through referrals	Duval	Since 1996 at the Jacksonville Urban League	Connect families with providers that can help them elevate themselves to a higher level; improve quality of life and help dreams come true	Early childhood development Early Head Start (birth-3 rd birthday); Head Start (3-5)	Evaluated by gov; federal review	2200-2400 kids	No	Free	N/A	903 W. Union St. Jacksonville, FL 904-721-9788
Duval County Extension Services	Parents families of all income levels, genders, and ethnicities; have programs for younger families and older families, and those in the middle; most programs offered are for parents and other adults, although have a few intergenerational programs	Duval	Local since 1914	"...to improve the quality of life in Jacksonville by providing residents with the knowledge they need to make informed decisions leading to greater economic security, environmental care, and civic leadership."	Parenting programs education offered focuses on agriculture, family and consumer sciences, and 4-H youth development; Family and Consumer Sciences offers health and nutrition, resource and financial management, and family life education, including parenting, child care training, relationship and family strengthening programs; 4-H youth development offers community clubs, school enrichment, and summer day camps and residential camps; agriculture offers programs pertaining to homeowner and commercial horticulture, small farms, and forestry	programs are based on current research, support by the Land-Grant university system involves pilots and/or may be program development supported by grants	26,083 by agents 111,246 by volunteers	No	Most are free; if not, the cost is very small	Abstinence-based	1010 N. McDuff Ave. Jacksonville, FL 904-387-8850
Communities in Schools Jacksonville: Take Stock in Children; Achievers for Life	Middle and high school students: 7 th -12 th grade students, no family services; 6 th -8 th grade students, services for families called "wrap- around services" (involves a family advocate)	Duval	Since 2001 or prior; since 2007	Provide students with mentors and college scholarships; provide at-risk students with a mentor, student advocate, and family advocate, with the goal of children completing 6 th grade successfully	Mentorship (Take Stock in Children/Achievers for Life) Take Stock in Children; Achievers for Life	Yes	450 students; recruit 450 new 6 th graders each year and program currently serves 737 students	No	Free	N/A	3100 University Blvd. S. Ste. 300 Jacksonville, FL 32216 904-338-9096
Big Brothers, Big Sisters of Northeast Florida	Youth ages 5-18; at-risk youth (live in single parent or guardian home, live at or below poverty level, and/or have parental figure incarcerated);serve mostly blacks; provide referrals to families as needed	Duval Nassau Clay Putnam Volusia Flagler	Since 1914	Help youth reach potential through professionally supported one-to-one mentoring relationships with measurable impact	Youth development, mentoring School-based and community-based models for the mentorship program	Yes	Between 1500 and 1550 in 2010	No	Free	N/A	3100 University Blvd. S. Ste. 120 Jacksonville, FL 32216 904-727-9797

Big Brothers, Big Sisters of St. Johns County	youth ages 5-18	Mostly St. Johns	Since 1979	Strengthen community by assisting communities and families impacted by substance abuse and related co-occurring disorders	Youth development, mentoring Big Brothers, Big Sisters, Counseling, Prevention program (goes into community)	Yes		No	Sliding scale fee; some free		1400 Old Dixie Hwy St. Augustine, FL 32084 904-829-2273
Worksource--- Summer Youth Program	Teens and young adults 16-21 ----- All races; ages 14-20	Baker Clay Duval Putnam Nassau St. Johns	Occurred for 2 years; part of stimulus	Allow young people the opportunity to work and increase employability skills	Career development Youth employment *Now have programs for youth in BCSD, NCSD, FSCJ in Duval, First Coast Technical College in St. Johns, and have Foster Care Grant with Family Support Services in Duval; teens can also use computers for job searches, resumes, etc. at one-stops, which are in all 6 counties and open from 8-5pm	Evaluations done on-site with providers, and program was monitored by state of FL	1800 youth in the 2 yrs.	No	Free	N/A	1845 Town Center Blvd. Ste. 250 Fleming Island, FL 32003 904-356-5627
Univ. of North Florida—Women and Girls Health Initiative	Raise money to support professorship for research related to women's and girls' health	N/A	N/A	N/A	Women and girls health initiative ----- N/A	N/A	N/A	N/A	N/A	N/A	
Epic Community Services											
Girl Scouts of Gateway Council	girls ages 5-17 (K-12)	Duval Clay Alachua NassauFL agler Baker Bradford Union Columbi a Putnam St. Johns Dixie Levy Gilchrist Suwannee and Hamilton	Since 1912 Passages since 2005 Get Real mentoring since 2009 Female Details since 2010	Girl Scouting builds girls of courage, confidence, and character who make the world a better place.	Youth development Traditional troops, groups, Passages (for girls entering middle school), Get Real (a mentoring program for middle-school girls), and Female Details (a program for 6 th -12 th grade girls)	Yes	12,000 girls	No	Not free, but financial assistance is available	N/A	1000 Shearer Ave. Jacksonville, FL 32205 904-388-4653
Boy Scouts North Florida Council	Ages 6 and up to adulthood	Entire NE FL	Since approx. 1981		Youth development University of Scouting, Trails of Eagle Conference, Order of the Arrow Fellowship, Pinewood Derby, River Quest 2011; Trainer's Edge	Yes	17000 scouts 6000 volunteers	N/A	Small cost involved, but scholarship opportunities available		521 S. Edgewood Ave. Jacksonville, FL 904-388-0591
Take Stock in Children **see previous entry **					Youth development, mentorship						Baker: 149 SE College Place, Lake City FL 32025, 386-754-4201 Clay: FC YMCA, 3322 Moody Ave., Orange Park FL 32065, 904-644-0072 Nassau: FSCJ Betty P. Cook Nassau Center, 76346 William Burgess Blvd., Yulee FL 32097, 904-548-4464 St. Johns: SJC Education Foundation, 40 Orange St., St. Augustine, FL 32084, 904-547-7560
Empowered Parents/I Help Parents	Parents of strong-willed or out-of-control adolescent kids (ages 7-17)	North FL	Since 1998	to empower parents to raise respectful and productive children in order to strengthen our community, country and the world	Parent education 10-16 week parent training program; teaches prevention, identification, and intervention strategies for poor school attendance/performance, alcohol and drugs, gangs, runaways, and violence Camp Consequence is for kids where the experience what is like to be in prison and other places they could end up	No	100,000+ families nationwide	N/A	Parent class is \$150 per person Camp Consequence is \$100	N/A	P.O. Box 60722 Jacksonville, FL 32236 904-838-9689 Meeting <u>Locations</u> : Hillcrest Baptist on Collins Rd. Mandarin United Methodist on San Jose Blvd. Evangel Temple on Ramona Blvd.

Child Guidance Center	Private, not-for-profit organization serving the needs of children, adolescents, and their families in northern FL	North FL	Since about 1953	Improving lives by providing behavioral health solutions	Outpatient services: Behavioral Health Assessment, Individual, Group and Family Therapy, Community Family Services: Therapy is provided in home and school settings, Medical Services: provides psychiatric (medical) management of clients served by each program, Case Management, Rapid Response Team: intervenes during critical and emotionally taxing periods in children's lives, during which the children present a danger to themselves and/or to others with the intent to avoid a Baker Act, Supervised Visitation Services, Fetal Alcohol Spectrum Disorder Services; behavioral health services provided through full service schools			Individual, group, and family therapy; ongoing psychiatric management of clients	Sliding scale Accepts: Medicaid, Medipass, Ped-I-Care, TriCare, TANF First Coast Advantage, Magellan, United Behavioral Health, Sunshine Health, and Children's Medical Services *if no referral, program is \$100	N/A	<u>Southside</u> 5776 St. Augustine Rd. Jacksonville 32207 904-448-4700 <u>Westside</u> 4595 Lexington Ave. Jacksonville 32210 904-783-2579 <u>Northside</u> 1110 Edgewood Ave. W. Jacksonville 32208 904-924-1550 <u>Arlington/Beaches</u> 1100 Cesery Blvd. Ste. 11 Jacksonville 32211 904-745-3070 <u>Baker County</u> 92 W. Lowder St. Macclenny, FL 32063 904-259-1137
Exchange Club Family Center	For parents of children with at least 1 child 12 years or younger and considered at-risk for abuse	Duval		help parents learn to provide safe, healthy and nurturing home environments in which their children may thrive	Parent Aide Program: in-home visitation program to increase parenting skills; curriculum focuses on appropriate expectations, empathy, disciplining, self-awareness, empowerment, and independence	Is a "Promising Practice" www.takethenextstep.org	150 referrals in 2010	N/A	All free	N/A	3119 Spring Glen Rd. Ste. 111 Jacksonville 32207 904-306-9318
United Way of NE FL	For parents of children 0-8 years, parents who self identify a need for a parenting course, or court-ordered parents	NE FL	United Way since 1924	To unite people and resources in building a stronger and healthier community	Series of 7 parenting classes	Yes	3000 families a year	N/A	Free	N/A	1301 Riverplace Blvd. Jacksonville 32207 904-390-3225
Koinonia Dynamis Inc.	***only open to a closed population at this time***	Closed population			12-week parenting class to be given on-site or at mobile locations in the community; classes address role of parent, role of child, and role of family in home and community			N/A		N/A	1734 Hiram St. Jacksonville 32209 904-354-6005
Jacksonville Network for Strengthening Families	For all parents and potential parents	All of Jacksonville	JCC since 1994	family strengthening approach is a framework for serving children and families that is rooted in the following principles: family is the most fundamental factor influencing the lives and outcomes of children; and families are strong when they are supported by safe and thriving neighborhoods	7 Habits of Successful Families: interactive course that allows families to set goals and strengthen skills	Yes	Over 4000 families served directly	N/A	Free	N/A	1095 A. Philip Randolph Blvd. Jacksonville 32220 904-630-6481
NCI's Families and Children Intervention Program	For at-risk families and the health zone 1 area (zip codes 02, 04, 06, 08, 09, and 54)	Mostly health zone 1	Since about 1975	help families, youth, adolescents and adults become better managers of their lives by creating a lifestyle behavior change which will modulate responsible, self-supporting, self-sufficient caring citizens	Designed to help families and their kids become better managers of their lives and households via individual counseling, protective support group environment, parental support, job readiness, and training on establishing and maintain a life free of dysfunction, co-dependent, and destructive relationships	Yes	500+ families	N/A	Free	N/A	4990 Avenue B. Mailing: PO Box 12319 Jacksonville, FL 32209 904-302-5141
Children's Home Society of FL	Offers programs for parents of children ages 0-2, 2-12, teens, or of attention deficit disorder children		Since 1995	give children, and families a vision and a chance to improve their lives by becoming a vital part of their community	Parenting classes for parents of children ages 0-2, 2-12, teens, or of attention deficit disorder children			N/A	Free to CHS clients \$50 per person otherwise	N/A	3027 San Diego Rd. Jacksonville 32207 904-493-7744

Creating Healthy Families, Inc.	For new parents or parents desiring to improve their parenting skills							N/A	Free	N/A	PO Box 440131 Jacksonville 32222 904-778-2507
Florida Cooperative Extension Services, 4-H	Youth grades K-12 offers membership without regard to race, color, national origin, religion, gender, disability, or handicap	Baker Clay Duval Nassau St. Johns	Since 1914	creates supportive environments for diverse youth and adults to reach their fullest potential	Community-based youth development 4-H club is a group of five or more guided by one or more adult volunteer leaders; a club can be <i>any</i> size; work together on community service activities			N/A	Dues vary by club, but cost is minimal if it exists at all	N/A	3103 McCarty Hall B, PO Box 110225, Gainesville FL, 352-846-0996

Combination Factors

Focused on both sex education and youth development

PACE Center for Girls	Girls 12-18; all races provides a non-residential delinquency prevention program targeting the unique needs of females 12 to 18 who are identified as dependent, truant, runaway, delinquent, or in need of academic skills	Duval, Clay, Nassau, St. Johns	Since 1985 Spirited Girls! Since 1995	PACE provides girls and young women an opportunity for a better future through education, counseling, training and advocacy.	Initial and Ongoing Assessment; Individual Counseling (develop a care plan with individualized goals); Academics: Each center has a cooperative agreement with local school board to provide daily academic instruction with remedial services, individual instruction and specialized education plans; Gender Specific Life Management Skills Enhancement (SPIRITED GIRLS!) program designed specifically for the needs of each girl; Parental Involvement: Staff maintains regular contact with parents via home visits, office sessions, and telephone; parent groups are provided; Community Volunteer Service (monthly) Career Readiness: job skills assessment and curriculum to build school-to-work readiness; assistance with finding, applying and interviewing for jobs; Transitional Services: 3 years of follow-up	Yes	200 in the day program 300 in transition follow-up services	Counseling but no actual psychologist...can refer out; some family counseling Health clinic for girls 12-18 open Monday, Tuesday, Wednesday	All free	Both! Clinic on campus that dispenses birth control Time To Be A Girl (TTBG) is a curriculum developed to provide a holistic experience and education to girls focusing on sexually transmitted infection (STI) and HIV prevention and pregnancy prevention. Our primary goal is to equip girls with knowledge so they are empowered to make healthy, positive changes enabling them to avoid pregnancy and remain free of sexually transmitted infections and HIV.	2933 University Blvd. N. Jacksonville, FL 32211 904-448-8002
Alpha-Omega Miracle Home	Homeless or soon-to-be homeless single mothers 17+ and older, their kids, and the disenfranchised elderly	St. Johns	Since 1999		Faith-based residential home						1835 US 1 South St. Augustine, FL 32084 904-823-8588 info@aomh.org
St. Gerard Campus	Pregnant teens, unwed mothers	From anywhere	Since 1981	Serve any pregnant mother no matter color, creed, or age in need of a healthy birth and after	Faith-based maternity home and Christian high school Outreach that provides baby clothes and adult clothes, food, diapers, formula, and counseling; pregnancy tests and sonograms; High school interfaith with college prep; licensed day care (up to 22 babies of the students); residential license program for teens under 18 can live there until graduation; adoption program with seminars	Yes; evaluated by licensure people from state for residence; also for daycare; also for school; credentials renewed every year	15,000	Yes; sonograms, pregnancy testing, and counseling for women of all ages; 2 mental health counselors; birthing classes Maternity home and high school for pregnant teens; clinic for women of all ages; pregnant women 13-41; infants newborn-1yr. ; do a lot of referring	All free	Abstinence-based	1405 US 1 South St. Augustine, FL 32084 904-829-5516 Toll Free: 800-833-6073 Emergency: 904-797-9437 Stgerardcampus611@bellsouth.net

Project SOS	Middle school and high school teens 7 th grade to senior year; parents	Clay Baker Duval St. Johns, some in GA	Since 1993	Strengthen families by empowering parents and educating teens to make healthy life choices	Abstinence-based sex education, youth development Life Skills courses in middle and high school teaching: true friendship, boundaries, refusal skills, STDs, drugs, alcohol, depression, abuse, goals and dreams; Healthy Relationship Office for adults and families (17 and older)	Yes	20,000 students	No	Free	Abstinence-focused; “give the reality though”	6850 Belfort Oaks Place Jacksonville, FL 904-279-0870 info@projectsos.com
Baker County YMCA Teen Center	**No longer exists. Don't have any programs geared to teens right now due to lack of grant money.				Community-based, abstinence-based education, youth development						9575 C.R. 127 Sanderson, FL 904-259-0898
Boys and Girls Club of Northeast Florida	Children 6-18; family programs include parenting workshops, finance workshops, etc. (differs from club to club)	Nassau, Duval, and St. Johns	Since 1962	Inspire and enable all young people, especially from disadvantaged backgrounds, to realize full potential as productive and caring citizens	Youth development, “Smart Moves” abstinence-based sex education leadership clubs, sports clubs, education clubs (tutoring), career programs, graduation goal programs	Yes	3500-4000	N/A	No; members have fee of \$25/yr.	N/A	1300 Riverplace Blvd. Ste. 310 Jacksonville, FL 32207 904-396-4435
Jacksonville Jaguars Foundation—Straight Talk Program	Middle and high school-aged teens	Duval Nassau Baker Clay St. Johns	Began airing in 1995	designed to reduce the incidence of teen pregnancy and the spread of AIDS and other sexuality transmitted infections	Programmatic grants for comprehensive sexual health/youth development programs; annual TV show: “Teens & Sex...The Real Truth”; year-round website resource information at straighttalk.jacksonville.com			N/A	Free	N/A	One EverBank Field Dr. Jacksonville, FL 32202 904-633-KIDS (5437) Racinep@jaguars.nfl.com
The Bridge of Northeast Florida—Straight Talk	Teens 10-17	Duval	Since 1982	To promote the development of healthy, productive, self-sufficient youth and families by providing comprehensive educational, social and health programs to those in need. The services of the organization have been conscientiously developed to serve the children and youth of Jacksonville's most overburdened families.	Community-based, comprehensive sex education Straight Talk is an age appropriate comprehensive sexuality education program for youth ages 10 -17, provided through a partnership with The Jaguars Foundation. The aim of the program is to reduce the incidences of teen pregnancy and sexually transmitted infections (STIs) in our community	Yes		N/A	Free	encourage abstinence as the first and best choice for youth but also recognizes that some adolescents are going to be sexually active and these children need protection and prevention education	904-354-7799 x169 forthekids@bridgejaxkids.com 1824 Pearl St. Jacksonville, FL 32206