



USING A HEALTH EQUITY LENS TO IMPROVE ADOLESCENT SEXUAL AND REPRODUCTIVE HEALTH

Crystal Pirtle Tyler, PhD, MPH
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PRESENTATION OBJECTIVES

- Define common terms used in health equity work
- Describe data driven strategies to recruit and engage youth from diverse environments in care and services
 - Many strategies are developed by JSI and CDC with funds from the CDC/OAH Teen Pregnancy Prevention Program
- Provide an opportunity for the group to share strategies and experiences

DEFINING HEALTH DISPARITIES AND HEALTH INEQUITIES

Health Disparity

- A disproportionate difference in health between groups of people.
- By itself, disparity does not address the chain of events that produces it.

Health Inequity

- Differences in population health status and mortality rates that are systemic, patterned, unfair, unjust, and actionable, as opposed to random or caused by those who become ill. -Margaret Whitehead

DEFINING SOCIAL DETERMINANTS OF HEALTH

- Social factors and the physical conditions in the environment that people are born, live, learn, play, and work in
- Cultural, economic, environmental, and social conditions that influence health
- Why some people are healthier than others or why people are not as healthy as they could be, genetics aside

A HEALTH EQUITY LENS

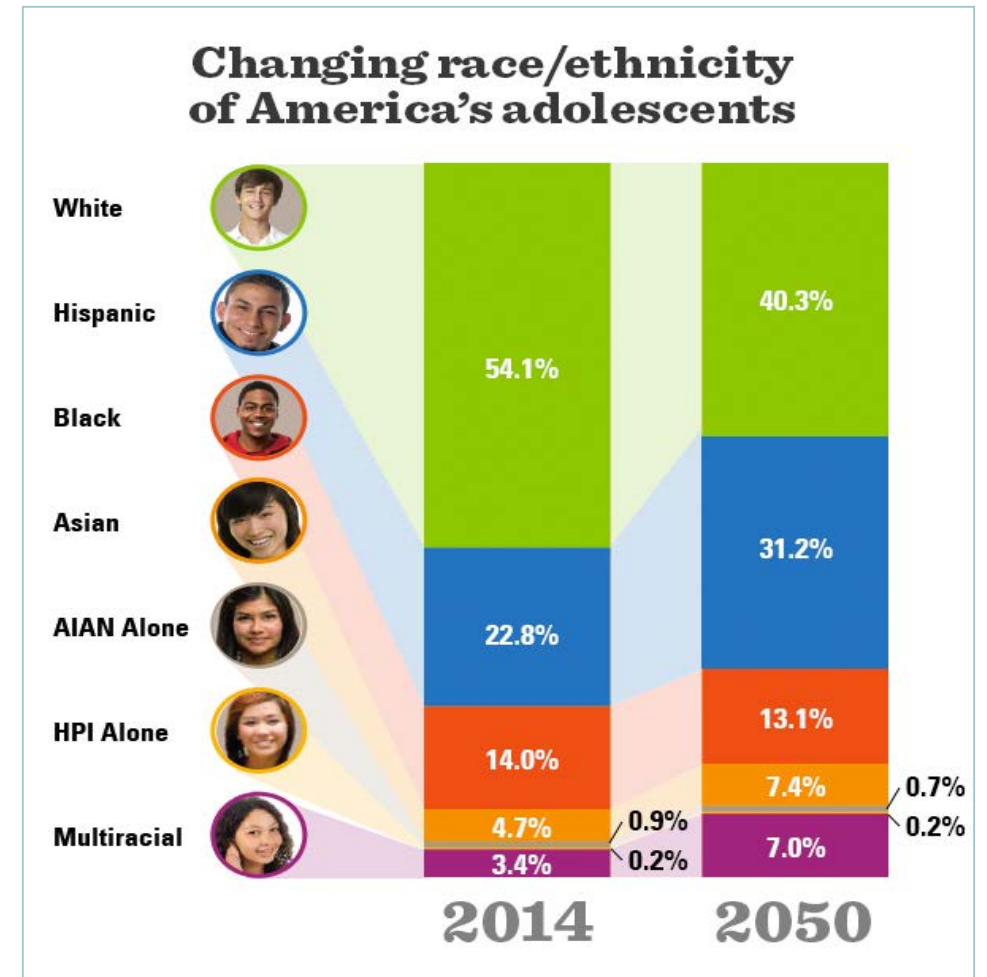
Health equity – a fair, just distribution of the social resources and social opportunities needed to achieve well-being.

Social justice – the absence of unfair, unjust advantage, privilege based on race, class, gender or other forms of difference.

- Seeks out what is unfair in order to reverse or avoid it
- Aspires to apply justice in serving hard-to-reach, marginalized, and diverse youth
- Recognizes the impact of social resources on the care and behavior of hard-to-reach, marginalized, and diverse youth
- Identifies and facilitates social opportunities for hard-to-reach, marginalized, and diverse youth to readily/easily attain well-being.

INCREASING DIVERSITY

- Requires cultural responsiveness to health care needs
- Sharpened attention to disparate health outcomes which are correlated with poverty



CDC/OAH TEEN PREGNANCY PREVENTION COMMUNITY-WIDE INITIATIVE

- Test the effectiveness of innovative, multi-component, community-wide initiatives in reducing rates of teen pregnancy and births in communities with the highest rates
- Focus on African American and Latino youth, and aged 15-19 years
- Five components
 - Community mobilization
 - Stakeholder engagement
 - Evidence-based interventions
 - Clinical reproductive health services
 - Working with diverse communities (JSI)

DATA DRIVEN STRATEGIES CAN BE USED TO...

- address the needs of diverse populations;
- identify, reach, and serve **hard-to-reach, marginalized, and diverse youth** with programs and services;
- engage and recruit a **diverse group of community partners who are not typically engaged** in the to collaborate on programs and services;
- provide evidence-based programs that meet the needs of **youth from diverse communities** and retain youth in those programs;
- ensure that **providers and their staff** have the necessary skills and knowledge to provide culturally and linguistically appropriate programs and services;
- engage and educate a diverse group of **community stakeholders** on the root causes of health inequities how social determinants of health are linked to disparate health outcomes

GOAL

To enhance the effectiveness of your current work and impact as you serve **hard-to-reach, marginalized, or vulnerable youth** with programs and services

- African American, Native American and Latino youth
- youth in foster care
- youth in the juvenile justice system
- GLTBQ youth
- pregnant and parenting teens
- Others

COMMUNITY MOBILIZATION

- Empowers individuals and groups to take action to facilitate change
- Mobilizing the sectors of the community where youth live, learn, work, and play is an important part of advancing health equity
- Brings together youth, parents, schools, community and faith-based organizations, housing and recreation, businesses, community members, policy makers, and opinion leaders to identify and understand and address underlying issues

COMMUNITY MOBILIZATION

- The basic elements of community mobilization rest on
 - understanding community needs and resources,
 - leveraging these resources,
 - disseminating information,
 - generating support,
 - fostering cooperation across public and private sectors in the community

STAKEHOLDER ENGAGEMENT

- Addressing the range of needs for diverse and marginalized youth requires collaboration among youth-serving agencies, other social services and educational institutions, policy makers, community leaders, and youth
- To support informed decision making, key community stakeholder groups should be knowledgeable about health issues in their community.
- Education should involve community stakeholders and reflect local knowledge and a community's readiness for change, not just "expert" knowledge regarding the best way to create change.

STAKEHOLDER ENGAGEMENT

- Data and resources on particular health issue should be included in community information dissemination efforts (e.g., town hall meetings, community summits, presentations to local PTA, educational materials)
- Strategies can assist you and your partners in a process of identifying, educating, and engaging all subgroups affected
- Strategies provide opportunities for community partners of various ethnic and racial groups and with differences in perspectives and experiences (e.g., age, gender) to participate in a process of informed decision making

EVIDENCE-BASED INTERVENTIONS

- Evidence-based interventions (EBIs) have been evaluated for specific behavioral outcomes, in specific locations (urban or rural settings), with particular ethnic/racial group(s), and within a specific age range
- When selecting and implementing an intervention for another setting or with a different group of young people than the population for which the intervention was developed, the EBI may need to be adapted to fit the target population (e.g., culturally appropriate)
- While an EBI must be implemented with fidelity, facilitators should also assess the context for the EBI participants, and determine whether additional community resources or mechanisms for appropriate linkages and referrals are in place

EVIDENCE-BASED INTERVENTIONS

- Sex education can give youth the skills and knowledge they need to refuse sex or to practice safer sexual behaviors, while youth development programs may provide them with the motivation and confidence needed to use those skills
- Positive youth development programs help youth strengthen relationships and skills, embed them in positive networks of supportive adults, and help them develop a more positive view of their future by providing academic, economic, and volunteer opportunities.
- Positive youth development programs target a different, but complementary, set of mediating variables than those targeted by many sexuality education programs

CONTRACEPTIVE AND REPRODUCTIVE HEALTH SERVICES

- Adolescence represents a key window of opportunity for promoting life-long health behaviors, building health self-efficacy, and enhancing capacity to make healthy decisions.
- Increasing access to high quality, comprehensive, confidential, and culturally competent reproductive health services is an essential component in the efforts to improve the health and well-being of youth.
- Adaptations could vary from changing an activity (e.g., a role-play scenario) to incorporating language throughout the curricula that is inclusive to your particular target population/community (i.e., incorporating language that is inclusive of LGBTQ youth in activities and information shared).

FACILITATED DISCUSSION INSTRUCTIONS

- We will have four small group discussions that focus on each of the strategies
- Small groups will review and discuss their section then report out to the larger group.

DISCUSSION QUESTIONS

- In all that you read for your section, what stands out for you as novel for your work?
- What stands out as particularly relevant?
- Were there any surprises?
- Can you think of other strategies that are missing?
- As you see yourself trying to apply these ideas, what challenges do you envision experiencing?
- What would you need to overcome these challenges?
- Who has the power to see that those needs are met?
- What can you do to influence those with power?

SUMMARY

- Health inequities are health differences or disparities that are systematic, unfair, and avoidable.
- Social determinants of health are important to consider.
- It is important to locate prevention within its cultural context.
- Individual-, peer-, family-, community-, school-, and policy-level factors jointly influence health outcomes
- Access to high quality services is critical but not sufficient for eliminating health disparities.
- Targeted efforts that target multiple levels and that are culturally and linguistically appropriate are also necessary.



QUESTIONS?

Crystal Pirtle Tyler
Program Director
Center for Child and Family Health
Michigan Public Health Institute
ctyler@mphi.org
517-324-7393