

**City of Carson City
Agenda Report**

Date Submitted: March 24, 2015

Agenda Date Requested: April 2, 2015
Time Requested: 15 minutes

To: Carson City Board of Health
From: Health & Human Services Department (Nicki Aaker)

Subject Title: Discussion Only: Present and discuss the progress of the *Community Health Improvement Plan's Community Issue H: Teenage Pregnancy* and *Issue I: Sexually Transmitted Infections* (Valerie Cauhape)

Staff Summary: This is an opportunity to inform the Board of Health about the progress made on the *Community Health Improvement Plan's Community Issue H: Teenage Pregnancy* and *Issue I: Sexually Transmitted Infections*.

Community Health Improvement Plan's Community Issue H: Teenage Pregnancy: As reported in the *Get Healthy Carson City!: A 2020 Health Action Plan: A Community Health Improvement Plan*, "Nevada has one of the highest rates of pregnancy among women age 15-19..." (2012, p. 25). According to the Office of Adolescent Health (n.d.), in 2011, Nevada's teen birth rate among females aged 15 – 19 was 36.1 (births per 1,000 females aged 15-19) compared to the United States' rate of 31.3 (births per 1,000 females aged 15-19). Nevada ranked 16 out of 51 (1 being the highest rate and 51 being the lowest rate).

The objectives of this Community Issue are:

- Provide a community based education program that has been researched and proven to make a significant impact in reducing teenage in Carson City.
- Implement a program to delay onset of sexual activity in adolescents.
- Increase communication and teamwork amongst organizations providing services in the area of teen pregnancy prevention.

(*Get Healthy Carson City!: A 2020 Health Action Plan: A Community Health Improvement Plan*, 2012, p. 23).

Community Health Improvement Plan's Community Issue I: Sexually Transmitted Infections, Issue I: Sexually transmitted infections (STI) are a significant source of health problems in Nevada (*Get Healthy Carson City!: A 2020 Health Action Plan: A Community Health Improvement Plan*). Chlamydia continues to be the most prevalent STI reported in Carson City. In 2014, females represented 72% of all Chlamydia reported. The female population aged 15-19 years represented 16% of all Chlamydia cases and the female population aged 20-24 years represented 35% of all Chlamydia cases (Carson City Health and Human Services). Chlamydia is one STI that can cause irreversible reproductive damage if not treated and is easily treated with antibiotics.

The objectives of this Community Issue are:

- Promote the availability of sexual transmitted disease screening options, especially for adolescents and young adults.

- Expand community-based sexually transmitted disease prevention services specifically targeting identified population sub-groups.
- Promote the implementation of comprehensive sex education programs.
- Reduce the incidence of sexually transmitted diseases in Carson City.
(*Get Healthy Carson City!: A 2020 Health Action Plan: A Community Health Improvement Plan*, 2012, p. 25).

Reference

Office of Adolescent Health. U.S. Department of Health and Human Services. (n.d.). *Nevada adolescent reproductive health facts*. Retrieved March 17, 2015, from <http://www.hhs.gov/ash/oah/adolescent-health-topics/reproductive-health/states/pdfs/nv.pdf>.

Type of Action Requested: (check one)
 Resolution Ordinance
 Formal Action/Motion Other (Specify) Information Only

Does This Action Require A Business Impact Statement: Yes No

Recommended Board Action: Presentation and discussion only

Explanation for Recommended Board Action: N/A

Applicable Statute, Code, Policy, Rule or Regulation: N/A

Fiscal Impact: N/A

Explanation of Impact: N/A

Funding Source: N/A

Alternatives: N/A

Supporting Material: CCHHS Community Health Improvement Plan: Teen Pregnancy and STD Prevention; Focus Group Report and Summary; February 2015

Prepared By: Nicki Aaker, MSN, MPH, RN

Reviewed By: N. Aaker Date: 3/24/15
 (Department Head)
Nicholas Miranda Date: 3/24/15
 (City Manager)
Joseph L. White Date: 3/24/15
 (District Attorney)
Michelle Abshire Date: 3/24/15
 (Finance Director)

Board Action Taken:

Motion: _____

1) _____

2) _____

Aye/Nay

(Vote Recorded By)



Carson City Health and Human Services

Community Health Improvement Plan: Teen Pregnancy and STD Prevention

Focus Group Report and Summary

February 2015

Introduction:

The purpose of the focus group project was to collect information regarding attitudes about sexual health education from different groups of our community. There was a parent focus group, a teen focus group, debriefing hogwash, and a one-on-one teen interview (the latter was unplanned). The topics discussed ranged from what information they are comfortable receiving to what tools would help make the topic of sexual health more comfortable to discuss in the household. The focus groups took place on a Saturday morning and early afternoon (December 6, 2014) in the Carson City Community Center and were facilitated by the following project team members:

- **Veronica Galas:** Manager, Clinical Services, Carson City Health and Human Services
- **Valerie Cahape:** Public Health Program Specialist, Carson City Health and Human Services
- **Leah Thompson:** Adolescent Health Coordinator, Nevada Department of Public and Behavioral Health
- **Sarah Demuth:** Abstinence Education Coordinator, Nevada Department of Public and Behavioral Health
- **Alessandra Garcia:** Clerical Hourly staff, Carson City Health and Human Services

Major takeaway points from parent group:

- Parents feel that teens don't understand the risks associated with STDs and pregnancy.
- Teens are getting the education, but parents feel that they are not applying it to their lives.
- Parents perceive that teens are emotionally unprepared for sex.
- Parents would like their children to be receiving information on the risks of sexual behaviors, healthy dating procedures, sexual abuse, and where to get help.
- Populations such as LGBTQ and Transgender persons should be discussed in sexual health education.
- Sex ed classes should not focus solely on girls; boys should be given equal sexual health education.
- Condom demonstrations should be utilized.
- Children should be receiving sexual health and maturation education as early as elementary school, around the average age of the onset of puberty.

- Parents feel comfortable talking to their kids about sexual health issues, but would like access to more up-to-date information such as statistics and would like more parent workshops.

Major takeaway points from teen group/one-on-one:

- Teens don't feel comfortable talking with parents about sexual health.
- Teens receive their sex education from health class and internet.
- Teens feel that they already know enough information about sex.
- Teens don't give much thought to STDs, but are aware of their existence.
- Teens don't feel that they are influenced by social media and feel like they can discern between inaccurate and accurate information.
- Teens feel that pregnancy would negatively affect their lives.
- Teens are uncertain as to where or how to access contraceptives.

Major takeaway points from debriefing session:

- Future teen focus groups need to be in very small groups (3-4 people) facilitated by younger and/or "trusted" adults; preferably participants would be within similar social groups.
- Offering the focus groups within the school setting might lead to a larger participant pool, so long as they are implemented outside of scheduled lunch breaks.

Summary:

Parents are looking for new outlets to provide information on sexual health and wellness to their children and are willing to continue coming to future focus groups. They would also like their children to have access to sex education in elementary school, about the time that they hit puberty. Conversely, teenagers do not feel like they can discuss sex with their parents and felt awkward discussing the topic in the focus group. It was suggested by teen participants that for future focus groups the teens are broken up into small groups where they know the people they are interacting with and that the facilitator is a young adult that can be trusted. The teens believed that focus groups and sex education should be made available on school campuses so that the teens do not have to go out of their way to access services. In the debriefing session it was discussed that teens be placed into small groups for next focus group, that questions should be reworded for better answers, and that younger facilitators be used so the teens felt comfortable talking about the topic. Since the young adult focus group was cancelled due to lack of participation, other formats to reach this population were discussed. It was suggested that the young adult group have a new location and offer new incentives for more participation (such as Safe Sex Kits).