THE UNIVERSITY OF MINNESOTA SCHOOL OF NURSING

ADOLESCENT NURSING

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THE WHITE HOUSE CONFERENCE ON TEENAGERS:
RAISING RESPONSIBLE AND RESOURCEFUL TEENS
CAMPAIGN TO REFOCUS NATIONAL ATTENTION ON RESILIENCY GAINS GROUND AT THE WHITE HOUSE

“Adolescents are not a tribe apart because they left us, as most people assume. We left them. This generation of kids has spent more time on their own than any other in recent history.”

Partricia Hersch
(quoted Newsweek, May 2000)

On May 2nd, 2000, First Lady Hillary Clinton convened a conference with the support of President Bill Clinton aimed at addressing some of the issues facing adolescents in today’s society. Entitled, “The White House Conference on Teenagers: Raising Resourceful and Responsible Teens,” the conference gathered together a wide spectrum of youth service providers from around the country. Linda H. Bearinger, Ph.D., RN, FAAN, Director of the Center for Adolescent Nursing and three additional University of Minnesota faculty members, Robert Blum, M.D., Ph.D., William Doherty, Ph.D., and Michael Resnick, Ph.D., participated in this one-day gathering. Its specific goal was to address the concerns of parents about the unprecedented challenges facing today’s teenagers and to provide effective strategies that teenagers and their parents can use to navigate safely through the difficulties they may encounter during these pivotal years.

Particularly notable about this conference was that it was first White House conference on teens ever held.

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DEVELOPING EFFECTIVE PREGNANCY PREVENTION STRATEGIES AT THE COMMUNITY LEVEL

In November 1999, Center for Adolescent Nursing faculty member, Renee Sieving Ph.D., RNC assumed responsibilities as Deputy Director of the University of Minnesota’s National Teen Pregnancy Prevention Research Center (PRC). Through training, research, and the dissemination of best practices related to teen pregnancy prevention and youth development, the National Teen Pregnancy PRC strives to enhance community involvement in services for youth. As Deputy Director, Sieving works with Center Director Michael

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Congratulations to Carolyn on this new doctoral program in nursing this fall. She will enter the public health nursing who focused on health occupations, especially nursing! This creates an excellent opportunity to indirectly have an impact on the health of youth but also, directly promoting indirecty promotes health interests are: vulnerable youth, at-risk teens, homeless youth, teen prostitution, and GLBT youth needs. Scott would like apply his Master's training working in a county Public Health Department and/or teaching for an undergraduate program.

Scott Harpin currently works at St. Joseph’s Home for Children in South Minneapolis. He hopes to finish the dual degree route with an MPH in MCH. Public health interests are: vulnerable youth, at-risk teens, homeless youth, teen prostitution, and GLBT youth needs. Scott would like apply his Master's training working in a county Public Health Department and/or teaching for an undergraduate program.

Lara Magee graduated from the University of Minnesota nursing program with a BSN and is continuing her education in our Master’s program. Before earning her nursing degree, she was a sign language interpreter for 12 years working with public health nurses and social workers. As a graduate student in public health nursing, she plans to work in the area of adolescent health, specifically with sexually abused and pregnant adolescents.

Rachel Olson comes to us from Hennepin County Medical Center in Cardiovascular Research. She currently works at Abbott Northwestern Hospital in child-adolescent inpatient behavioral health and goes to school full time. Her interest is adolescent health promotion and she is excited to be back in school.

Amy Smith worked with young, high-risk clientele in diverse community settings as a Women’s Health Nurse Practitioner for 10 years. Her background includes work as clinic staff in service coordination, community outreach and education, and as clinical faculty at UCSF. Her current research includes interventions and protective factors. The population she works with are adolescents who are unidentified as “high risk” because they don’t fit the profile yet are highly stressed and isolated.

D. Lyann Yates currently works as a Nursing Supervisor in the telephone triage department at Park Nicollet Clinic as well as working part-time at The Bridge for Runaway Youth. She hails from Canada and is still adjusting to living in MN. Her goal is to develop programs for medically underserved adolescents and homeless youth.

Carole Olson received a Professional Nurse Traineeship grant from the The University of Minnesota School of Nursing. This grant is funded by the the U.S. Department of Health and Human Services for academic year 2000/01. The purpose of the federal traineeships is to support and educate individuals to practice as nurse practitioners, nurse midwives, nurse educators and public health nurses, who plan to work with the medically underserved populations or are residents of health professional shortage areas.

Carole Olson, M.S., M.P.H., RN, was recently appointed by Minnesota Governor Jesse Ventura to the Board of Directors for the Minnesota Foundation for Student Organizations. In her four year commitment to the Board, she will represent health occupations. This creates an excellent opportunity to indirectly have an impact on the health of youth but also, directly promoting health occupations, especially nursing! Carole is a master’s graduate from public health nursing who focused on adolescent health. She will enter the doctoral program in nursing this fall. Congratulations to Carole on this new appointment.
instruction and practice related to communication skills that are crucial to adolescent care: active listening; establishing and maintaining rapport; asking open-ended questions; body language and voice; using appropriate language. These skills are taught with the overall objective of enabling students to take a psychosocial history in a way that helps the adolescent tell his or her authentic story. In the second training session, focus is on skills for exploring with the adolescent various issues of developing and safeguarding healthy sexuality: pregnancy prevention and/or management; prevention of HIV and other STDs; and sexual orientation issues. Analysis of preliminary data based on these two training sessions has shown a significant increase in trainee confidence both in history-taking skills and in eliciting pertinent information regarding issues of sexuality.

In addition to the training sequence offered to graduate nurses and pediatric residents, training in an altered format was piloted during Spring 2000 with psychiatry residents. There, one resident did a role-play interview with an actor while other residents and faculty observed. At the conclusion of the interview, the actor gave feedback followed by general discussion of the interview followed. Based on the success of the pilot, five similar training sessions are projected annually. Collaborative training with other departments is being considered.

Special workshops targeting specific adolescent health risks are also using the AATP methodology. For the fourth consecutive year, adolescent actors will participate in the The Cener for Adolescent Nursing’s Summer Institute. This year it will provide Institute participants with the opportunity to practice skills related to violence prevention and intervention. During Spring 2000, actors were an integral part of a workshop on smoking prevention and cessation attended by all second-year pediatric residents.

A third training segment to address intervention skills is under development and will become part of the training sequence in July 2000. Instruction in this segment will draw on psychologist James Prochaska’s “Stages of Change Model” and on the work of William R. Miller and Stephen Rollnick regarding “motivational interviewing” and brief office interventions. Prochaska points out that, while at least 80 percent of people are not ready to undertake change, our clinical care models are generally “geared toward people who are ready to take action.”

The importance and effectiveness of skillful, brief office interventions with adolescents has been documented in studies related both to sexually transmitted diseases (STDs) and substance use. Instruction for the intervention role-play will build on these bodies of knowledge and provide students with tools for identifying change readiness and for conducting brief interventions in clinic settings.

Accumulating evidence points to the need for interview training as an element of continuing health care education. In a 1999 Periodic Survey of Fellows conducted by the American Academy of Pediatrics, respondents cited both training regarding confidentiality and training in communicating with adolescents as “ways to reduce...barriers to providing adolescent health care.”

Pointing more specifically to the potential application of the AATP methodology in continuing health care education, a recent study concluded that “interactive CME sessions that enhance participant activity and provide the opportunity to practice skills can effect change in professional practice and, on occasion, health care outcomes. Based on a small number of well-conducted trials, didactic sessions do not appear to be effective in changing physician performance.” Support and partnerships are being sought in order to extend the AATP methodology beyond the training arena and into the realm of continuing education.

For further information, contact Mae Seely Sylvester at (612) 626-0162 or sylve001@tc.umn.edu.

CENTER FACULTY, STAFF AND STUDENT ACTIVITIES

PRESENTATIONS
October, 2000 - Renee Sieving presented, “Talking with Teens: Approaches for Health Care Providers” at a regional conference for nurse practitioners sponsored by the University of Iowa and the Iowa Association of Nurse Practitioners.


July, 2000 - Linda Halcón and Alan R. Lifson presented, “High Risk Behavior in Homeless Adolescents and Youth” to the Homeless Youth Service Provider’s Conference at The Minneapolis Youth Diversion Program.


May 26, 2000 - Elizabeth Saewyc presented, “Health Care for Out-of-Home Pregnant and Parenting Adolescents” at the 2000 Pediatric Grand Rounds held at Hennepin County Medical Center in Minneapolis.

May 18, 2000 - Elizabeth Saewyc held a seminar on, “Sexual abuse history and its impact on later pregnancy: A fresh look at a complex issue for social workers in the new millennium” at the 24th Annual National Association of Perinatal Social Workers conference in Minneapolis, MN.

May 1, 2000 - Elizabeth Saewyc presented, “Meanings of pregnancy and motherhood among out-of-home pregnant adolescents” at Nursing Research Day, School of Nursing, University of Minnesota.

As the 2000 Irving Harris Visiting Professor Linda H. Bearinger provided research consultation and two formal presentations “Protecting Adolescents from Risk: Translation of Research to Policy and Priorities” and “Strategies for Health Promotion with Urban American Indian Adolescents” at the Department of Maternal-Child Nursing, College of Nursing, University of Illinois, Chicago, Illinois.

PUBLICATIONS
(* Center For Adolescent Nursing students or alumni)


RESNICK, Ph.D., and other members of the PRC Administrative Council to identify needs and plan endeavors that reflect the theme and purposes of the University of Minnesota PRC. Each of the 23 Prevention Research Centers are funded by the Centers for Disease Control to develop effective prevention strategies around a particular theme and apply these strategies at a community level. The PRC at the University of Minnesota is the only Prevention Research Center with a theme of Teen Pregnancy Prevention and Youth Development.

Training in Best Practices

One of the core purposes of the National Teen Pregnancy Center (PRC) is to enhance knowledge and skills related to teen pregnancy prevention and youth development. Faculty and staff from the PRC offer various types of training including:

- Courses and seminars in adolescent sexual health and teen pregnancy prevention to graduate and undergraduate students, pre- and post-doctoral fellows, and resident physicians enrolled in formal university programs;
- Continuing education programs in teen pregnancy prevention and adolescent health promotion to nurses, physicians, youth workers, health educators, psychologists, social workers, and other professionals who work with young people;
- Training and employment as peer health educators to youth living in an inner-city neighborhood of Minneapolis.

Research Projects

The PRC conducts a variety of research projects to understand how to best reduce risk and enhance protective factors in the lives of youth.

Prime Time, the core research demonstration project of the PRC, is a collaborative effort with community health clinics to identify best practices in providing health care to adolescents who are at high risk for pregnancy. Prime Time tests a model for clinic-based services grounded in a youth development framework.

Other PRC research projects focus on understanding risk and protection related to adolescents’ involvement in violence, early and unprotected sexual activity, and other health risk behaviors.

Getting the Word Out

Collaborating with various national, state and community partners, the PRC disseminates research findings related to best practices in teen pregnancy prevention. The latest “best practices” products include:

1) “...Psst:” The Spring, 2000 edition of the PRC newsletter focuses on peer leadership training and best practices in design and implementation of peer education programs.
2) Timely Matters: Human Papillomavirus. Written in collaboration with a University of Minnesota health educator, this PRC fact sheet discusses clinical issues related to HPV along with implications of this infection for health education and counseling. These products can be ordered by sending an e-mail request to the PRC (prc@tc.umn.edu). In addition to print materials, the PRC website (www.peds.umn.edu/peds-adol/prc.html) offers a range of information and resources related to teen pregnancy prevention and youth development.

Partners in Prevention Research

At the University of Minnesota, PRC endeavors bring together an inter-disciplinary group of professionals from Schools of Medicine, Nursing, Public Health, and the Carlson School of Management. Linda Bearinger, Ph.D., RN, Director of the Center for Adolescent Nursing Leadership, is the primary liaison between the School of Nursing and the PRC.
Its focus on adolescence will have positive implications for the field as political leaders and administrations begin to take a closer look at the work that has been developed by scholars across many disciplines. These disciplines span the gamut from nurses, pediatricians, mental health workers, educators, child development specialists, and social science experts, among many others. The President and The First Lady as well as various government agencies, including The Council of Economic Advisors, have all recognized the need for strengthening resources in adolescent health research, programs, and services. Future administrations will have to continue studying the issues of youth and providing the necessary support for continued focus on youth development.

The message about young people as resources to be developed is getting through. Last year, Texas Governor George W. Bush requested over 1000 copies of monograph, “Connections That Make A Difference” based on the work of adolescent health colleagues at the University of Minnesota. Al Gore’s own campaign has taken the message to heart, stressing the need to help strengthen resources that support young people. Based on many years of convening a national conference on families (organized by the University of Minnesota’s Consortium on Children, Youth and Families), Gore emphasizes the power of families in promoting resilience among teens. Likewise, his priorities for schools are on creating resources that foster healthy development of young people. As Karen Pittman effectively argued at the White House Conference on Teens, “Problem-free isn’t fully prepared. And academic confidence…is not enough to ensure success. We have to make sure that young people have the social, emotional, vocational and civic confidence that they need.” The emphasis in the 2000 presidential campaign on policies and priorities supporting families and schools is, indeed, an indication of the seriousness with which adolescent issues, in their many facets, are being taken.

At the conference the First Lady, the President, and other national figures informally discussed their own experiences parenting teens. As in her Newsweek (May 8, 2000) article, Mrs. Clinton discussed her and her husband’s experiences with their daughter, Chelsea. She stressed the difficulties that parents face in today’s work environment where both parents work. She emphasized the importance of parents being supportive and remaining supportive in their teenagers’ lives. While informal, her remarks and those of many others like her all help bring to national attention the health and well-being of adolescents. These and other factors all increase resiliency even in the face of what might seem difficult circumstances.

The University of Minnesota faculty have worked on a series of research projects specifically focused on problems threatening the health and well-being of youth, approaching these problems within a resiliency paradigm. In view of the work Dr. Bearinger and colleagues have done, the invitation to assist in the planning of this one-day White House meeting was welcome. The format of this meeting was predicated on a preceding 1998 Health Resources and Service Administration’s Maternal and Child Health Bureau (MCHB)-sponsored conference that was widely considered to have had significant influence on priorities for youth health.

Dr. Bearinger’s earlier involvement in the 1998 Health Futures Youth II: Pathways to Adolescent Health already reflected the shifting focus that the University of Minnesota’s adolescent programs were taking. Essentially, this was a shift from traditional analyses of youth behavior and related risks towards one that focused more on resilience and those strengths or protective factors that enable and empower young people to survive and surmount adversity in their lives. In other words, it represented a shift from a risk-based focus to an emphasis on how protective factors at the family, school and individual levels strengthen vulnerable youth. The goal: to move thinking about adolescent health from a negative focus on risk factors towards a more positive, solution-oriented agenda. In the often cited words of Karen Pittman, “Teenagers are not problems to be solved but resources to be developed.”
Previous work from the Center of Adolescent Nursing, such as the 1999 published abstract, "Violence Perpetration Among Urban Indian American Youth: Can Risk be Offset by Protection?" took as its goal to study profiles of risk and protective factors among urban youth with regard to involvement in violence. As discussed in an afternoon session presided over by Secretary of Health Donna Shalala, recommendations from the urban American Indian study were in keeping with the focus of the conference. This work was the basis for Dr. Bearinger’s comments at the conference. She outlined the events, circumstances, and the experiences that buffer young people from involvement in high-risk behaviors that result in poor outcomes. Using her previous work on youth connectedness, she outlined those elements of connectedness with parents as well as with school, culminating in effective approaches for promoting that which protects from harm, even among the most vulnerable young people.

Her findings end on a note of hope, concluding with the observation that approaches to adolescent health risk behavior must not take a "nothing can be done" attitude about youth at risk, even those living in high-risk environments. She went on to explain that a dual approach must be taken: one that attempts to minimize risk while, at the same time, boosting and enhancing those protective factors, an approach whose effectiveness is supported by ample scientific evidence. According to this approach, those who work with issues of adolescent health would be able to prioritize among the day to day experiences and opportunities offered to young people. By nurturing competence, confidence, and connectedness, we provide good building blocks for healthy youth development and increase positive outcomes.

Overall this conference, by bringing together people in public policy, adolescent health, social service, education, parents and teens provided an opportunity to refocus on youth in new and more productive ways.

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**Plan Ahead... Application Deadlines**

**Master's Studies**

Do you enjoy working with adolescents? If so, consider a Master's of Science (M.S.) with a major in nursing at the University of Minnesota, where you can focus your graduate studies in adolescent health. The coursework is grounded in a public health nursing framework, integrating theory with clinical, research, and leadership skills. Students can also earn a Master’s in Public Health (M.P.H.) or certification as a nurse practitioner concurrent with our program.

**M.S. Application Deadlines are August 15, December 15, and February 15**

**Doctoral Studies**

Are you interested in research with adolescents? Ph.D. students have the opportunity to develop in-depth knowledge and experience with a faculty advisor and create an individualized program of study that focuses on the research students wish to pursue.

**Ph.D. Application Deadline for Fall Semester is December 1st**

For more information, contact the Center for Adolescent Nursing, (612) 624-3938 or e-mail adolnurs@tc.umn.edu. We look forward to hearing from you.
Coming soon...

Our New Logo and a new look!

Your next issue of Adolescent Nursing will have a different look. Watch for our new logo, format and colors in the coming issue.