Adolescents Can Be Their Own Best Advocates

by Peggy Nerdahl, BSN, RN

Michelle, a 17-year-old mother of a toddler, held her audience spellbound and in tears as she told of her life. She was sexually abused at age 12 by her father, then separated from her family. By 14, Michelle was pregnant and had failed 9th grade. She had lived in both a homeless shelter and a home for pregnant girls and teen mothers. Michelle's first school success was after enrolling in a teen parent support program as her second attempt at passing 9th grade.

Who was in tears listening to her story? Legislators in the Minnesota House of Representatives and Senate. Michelle and other teen mothers were asked to testify on behalf of a bill to provide funding to schools in support of teen parents.

For a master's practicum, in December 1996 I joined the bill-writing efforts of a group of Twin Cities residents who had already been working on a proposal for statewide funding to support teen parents. Because of my inexperience in both policy and legislative issues, I chose a practicum that would bring me face to face with strategies for changing policies that affect the health of the adolescents I serve. The Minnesota Organization on Adolescent Pregnancy, Prevention, and Parenting (MOAPPP), who provided the guidance for my practicum, is a non-profit agency supporting teen pregnancy prevention and parenting programs throughout the state.

My practicum was devoted entirely to working on behalf of the teen parent support bill.

Nancy Nelson, co-director of MOAPPP, Barbara Kyle, coordinator of teen parent programs in Minneapolis schools, and I met with various senators and representatives during the winter months. We targeted the committees that would be discussing the bill. Half of the members of the Early Childhood Committee in the House were not responsive to our discussions. Arguments included, "we don't have a problem with teen parents in my district," "the language of pregnancy prevention sounds like it means abortion," "we already have MN-ENABL (Minnesota Education Now and Babies Later, a pregnancy prevention program for 12-14 year-olds) so why do we need more programs?"

Our best guess was the vote would be 6-7, one vote shy of passing, but one more opportunity to advocate remained: a hearing scheduled March 26 where we...
Welcome to Karen Friedl, BS, RN, who entered the program during winter quarter 1997. Karen has a BS in chemistry from the University of California, San Diego, and a BS in nursing from the College of Saint Benedict. She has served as a maternal and child health coordinator in Zaire and Sudan, East Africa, through the American Refugee Committee and as a nursing instructor with the Peace Corps in the Gambia, West Africa. She is currently a staff nurse on the telemetry and renal unit at Abbott Northwestern Hospital in Minneapolis. Karen is also pursuing studies in the Family Nurse Practitioner program and obtaining a dual MPH degree. Welcome, Karen!

Sarah Anne Stoddard, BSN, RN, received her BSN from Mankato State University, Minnesota, in June 1994. She is currently working as a Public Health Nurse in the Maternal-Child Health Program at Blue Earth County Human Services. She also provides childbirth education for adolescents in the local high school for the Teenage Pregnant and Parenting Program. Welcome Sarah!

Kate Casserly, BSN, RN, received her BSN from the College of St. Catherine, Minnesota, in 1987, and a BA in psychology with a specialty in criminal justice from the University of Minnesota in 1974. Kate has been a school nurse at Patrick Henry High School in north Minneapolis since 1990. Prior to this, she worked in a middle school, as well as for the Minneapolis Health Department and the Hennepin County Community Health Department in the Women’s Health Division. Welcome, Kate!

Lisa Peterson-Kirchner, BSN, RN, received her BSN from the University of Minnesota in 1997, and had previously obtained an Associate Degree in Nursing. She was recently inducted into Sigma Theta Tau International Nursing Honor Society, and is currently employed by the Fairview Medical Center-East Bank Campus as an admissions nurse and as a solid organ transplant nurse. Welcome Lisa!

The GSAN program wishes them all the best in their academic endeavors.

Activities of GSAN Faculty, Staff and Students Past and Present

Linda H. Bearinger, Ph.D., M.S., RN, served with Dexheimer Pharris and Sieving as core faculty at the GSAN Institute for Faculty Development in Adolescent Health, June 16-20. The focus of the 1997 Institute was on enhancing faculty capacity for teaching health assessment and intervention strategies necessary for working effectively with teenagers. Participants included an enthusiastic group of 30 faculty and graduate students from Schools of Nursing, Medicine, and Public Health throughout the United States.

Della Derscheid, M.S., RNC, PHN, Graduated with her MS in Nursing in June, 1997. Congratulations!


Renee Sieving, Ph.D., RNC, PNP, presented a paper titled, “How do parents influence the alcohol use of young adolescents? A structural equation modeling approach,” at the 1997 Society for Adolescent Medicine (S.A.M.) annual meeting in San Francisco in March. The paper was selected as one of five finalists for the S.A.M. New Investigator Award. Among the other finalists was a paper by former GSAN staff member Elizabeth M. Saewyc, BSN, RN, titled, “Sexual behavioral and outcome correlates of sexual orientation among American Indian adolescents.”


Sieving also completed a chapter, “Health Promotion of the Adolescent and Family” to be included in the sixth edition of Nursing Care of Infants and Children, Donna Wong, Ed. The sixth edition of this widely-used pediatric nursing text is scheduled for release in 1998.

Sieving and Bearinger are co-authors with other members of the Add Health Project Group of an article, “Protecting adolescents from harm: Findings from the national longitudinal study on adolescent health,” that was published in the Journal of the American Medical Association (JAMA) September 11.

AND FAREWELL...

To Della Derscheid, M.S., RNC, RHN, who has served as Coordinator of Outreach and Student Support for GSAN for the past year. Della received her MS in June, 1997; she begins a post-Masters Fellowship in Adolescent Health in the Medical School this autumn, as well as working as a Clinical Nurse Specialist in the Child and Adolescent Psychiatric Units at St. Mary’s Hospital, Mayo Hospital and Clinics. Congratulations, Della! You will be missed.

Conference Announcement


For conference and exhibitor information contact the NOAPPP office at: 202-783-5770.
DO PNP S FEEL COMPETENT TO ADDRESS ADOLESCENT HEALTH ISSUES? A NATIONAL STUDY

by Peggy Nerdahl, BSN, RN, and Deborah Berglund, BAN, RN, GSAN students. This abstract was developed from their joint master's papers.

Since the 1950s, patterns of morbidity and mortality among adolescents have shifted from infectious disease to social and environmental etiologies. This study examined pediatric nurse practitioners’ self-assessed competencies in addressing the common health concerns of adolescents. The analysis used a sample of 257 PNP s from a larger national data set of 637 nurses randomly sampled from three national organizations. The survey included self ratings of knowledge/skill and interest in training related to 28 common health concerns for adolescents, as well as barriers and attractions to working with adolescents.

The greatest deficits in perceived knowledge/skill as well as low interest in training and low perceived relevance to practice were in gang-related issues, gay/lesbian/bisexual/transgender youth, HIV/AIDS, and counseling about a positive pregnancy test. PNP s identified the lack of resources for adolescent referrals as the greatest barrier to working with this population.

PNP s assessed their lowest competencies in some areas of greatest threat to adolescents’ health and well-being. These deficits suggest needed curricular shifts in entry- and advanced-level preparation of PNP s, as well as new priorities for continuing education.

ADVOCACY continued from page 1

had 20 minutes to sway opinions. We allocated nearly all of the 20 minutes to letting teen parents tell their stories. That’s when the legislators heard Michelle’s stunning, but short life story.

One teen mother was from a rural community 40 miles away, another from urban Minneapolis, plus Michelle, who now lives in a suburban district. I met Michelle in a school-based teen parent program in St. Paul where I work as a school nurse. I wanted the legislators to hear her story, especially to bring to light the underlying threat to Michelle’s well-being, the childhood history of sexual abuse. She rose to the occasion, having researched how to testify to a state legislature. She even found the “code of conduct for testifying at the legislature” on the Internet. The three teens were coached by the MOAPP team, helping them to organize, preparing them for possible tough questions, and encouraging them to focus on prior school experiences that had been supportive.

On the day of the hearing I picked Michelle up at school. She was dressed up, wearing a suit and heels. She was nervous, as were the rest of us. Michelle began with, “Madam Chair, thank you for allowing me to testify,” just as the code of conduct had advised. She was articulate, passionate, organized, and maintained eye contact, especially with the legislators we knew were unsupportive. All three of the young mothers had different, but complex, life stories. The third girl closed with, “Yesterday I saved my son’s life with the Heimlich maneuver that I learned in my parent class at school.”

The bill passed in the Early Childhood Committee of the House with a vote of 12 to 1. The teen stories were again heard one week later, at repeat testimony to the Senate K-12 Education Committee. Together the testimonies led to unanimous support. Members of the audience encouraged the girls to return in 20 years as legislators!

We are pleased with an appropriation of 1.3 million for 2 metro programs and 2 out-state programs to support teen parents in the schools. Though it is one-tenth of the original request, it is a beginning, and we have gained support of the Governor and awareness in the legislature of the critical needs facing high school-aged parents.

What did I gain from this practicum? Most importantly, I realize the impact of advocacy when working to garner resources for at-risk families, those I serve daily as a school nurse. It is vital to talk with individual members of legislative committees where bills will be heard and reach legislators early in the session, before their calendars are too full. I learned to be ready with the 30-second sound bites, i.e., the one or two sentences that speak my message. Also do not antagonize a legislator who does not see your point of view, because, instead, another person, like Michelle, may be able to persuade them.

My story also illustrates how powerful the testimony of our clients can be, even if they are teenagers. We must choose the priority messages, involve clients from both urban and rural areas, and prepare them thoroughly for the experience of testifying.
**UPDATE: THE INSTITUTE FOR FACULTY DEVELOPMENT IN ADOLESCENT HEALTH**

The 1997 Institute for Faculty Development in Adolescent Health was held June 16-20, 1997 at the University of Minnesota. Thirty faculty and graduate students from throughout the United States participated in this intensive, multi-disciplinary, 5-day program for maternal and child health faculty, focusing on enhancing skills in teaching adolescent health assessment and interventions in university and college settings. The seven adolescent actors posing for a group picture participated in the institute, demonstrating the effectiveness of using teens to help train clinicians who work with teens.

**GRADS**

continued from page 1

and Adolescent Psychiatric units at St. Mary’s Hospital, Mayo Hospital and Clinics.

And, in the community, GSAN graduates are practicing as a community program specialist with a community-based youth development program for urban American Indians, as a public health nurse in the Disease Prevention and Control Division at a county public health department of Minnesota, and as a community health nurse in a local Minnesota agency.

We look forward to keeping in touch with our GSAN graduates and following their professional development and achievements.

---

**CALL FOR ABSTRACTS**

The Nursing Research Forum of the Society for Adolescent Medicine is accepting abstracts describing adolescent health research (completed or in progress) or innovative practices in adolescent health for the 1998 Annual Meeting, to be held March 4-8 in Atlanta, Georgia. The deadline for submission is September 26. For further information contact Dr. Lynn Rew at or email her at ellersw@mail.utexas.edu.

---

**UNIVERSITY OF MINNESOTA**

Graduate Studies in Adolescent Nursing
6-101 Weaver-Densford Hall
308 Harvard St. S.E.
Minneapolis, MN 55455