

2008 BOULDER COUNTY PUBLIC HEALTH (BCPH) ANNUAL REPORT

PROGRAM NUMBER 460: GENESIS PROGRAM

Goal: The goal of this program is to promote healthy behaviors in Boulder County's pregnant and parenting teen population, optimally impacting these families for generations to come.

Needs Statement:

Liz Schorr, in her landmark book *Within Our Reach* notes, "The baby of an adolescent mother is born into peril... Teenage childbearing may impose its heaviest burden on the next generation when it comes of age... They are more likely to have children themselves while still adolescents, their school dropout rates are higher, their achievement is lower, and they are more frequently retained in grade. The children of teenage mothers also start sexual activity earlier than their peers, are more frequently suspended from school, and more often run away from home, get drunk, and hurt someone seriously." Intensive and comprehensive early intervention geared toward enhancing bonding and attachment can mitigate the negative consequences of adolescent childbearing.

There are approximately 250 births to teens per year in Boulder County. GENESIS received 260 referrals to the program in 2006, resulting in 173 new teen families enrolling in GENESIS. Teens were not enrolled for various reasons including: miscarriage or abortion prior to enrollment, client was referred to the Nurse-Family Partnership Program, the teen refused services, the family moved prior to enrollment, and the teen did not follow through on multiple intake appointments. In 2006, 548 families participated in GENESIS.

While teen birth rates continue to drop on the national level, Boulder County teen fertility rates demonstrate a more complex picture. On a positive note, the fertility rate among older (18-19) teens has dropped from 34/1,000 in 2001 to 22.9/1,000 in 2005. However, the rate among younger teens (15-17) appears to be rising: 10.8/1,000 in 2001 to 16.7/1,000 in 2005. GENESIS clearly is able to positively impact subsequent pregnancies among current clients, contributing to the drop in the fertility rate among the older teens, but the program is not addressing primary pregnancy prevention targeted at preventing the initial pregnancy. Research indicates that the siblings of teen parents are 2 to 6 times more likely to become teen parents themselves (National Campaign to Prevent Teen Pregnancy), and, on an anecdotal level, staff has witnessed a trend in terms of teen pregnancies among siblings.

The intensity of needs of the monolingual, Spanish-speaking population is also a growing concern. In 2001, 14% (101) of the GENESIS caseload was monolingual, compared with 21% (116) in 2006. In addition, recent legislation concerning immigration has created new barriers for the immigrant teen parent population.

In 2007, BCPH began offering the HPV vaccine, Gardasil, through the Vaccines for Children Program (VFC) for teens up to 19 years. GENESIS clients over 19 are referred and can receive the immunization series through BCPH, but are not eligible under VFC.

Planning Assumptions: Caseload and staffing patterns remain constant.

Comments:

Referral numbers may differ from the numbers of teens giving birth due to the following factors:

1. The teen is referred postpartum (baby was born out of the county).
 2. Some referred individuals don't carry their pregnancies to term.
 3. Many referred individuals move out of the county prior to birth.
 4. Individuals referred in one calendar year may give birth the following calendar year.
 5. Teens are referred to the program at age 19 but give birth at age 20 (still receive GENESIS services).
 6. Comprehensive GENESIS services address (directly or indirectly) identified family, parent and/or child issues that can impact the immediate and long-term health and well-being of the child. These may relate to physical, social, emotional, developmental, educational, and/or economic issues.
- Large caseloads in the Longmont area remain an area of concern. The growing need for services has been addressed by redirecting staff to Longmont from other sites and by supplementing staff hours with social work intern hours. Ten-year birth trend data (1995-2005) demonstrates a 26% increase in the number of teen births in the city of Longmont. In 2008, staff will explore potential funding sources to increase Longmont caseworker hours to address growing demand.

- The growing monolingual client population requires more staff time, because the bilingual parent educators are often needed to provide translation when accessing other community services. Immigration legislation has intensified the need for GENESIS intervention to ensure that at-risk families access the services necessary to assure positive outcomes for their pregnancies and their children.
- GENESIS youth are at high risk for contracting human papillomavirus (HPV), and many are unaware of the vaccine and how to access it. GENESIS added a new objective for 2008 to address these knowledge and access barriers. It is anticipated that this will be a short-term objective, and by 2009, the vaccine will be well integrated into a teen's annual physical exam, eliminating the need for program intervention.

Number of Clients: 626

OBJECTIVE	SERVICES/ACTIVITIES	EVALUATION	ACTUALS COMPLETED	RE-SULTS*	COMMENTS
1. GENESIS will deliver supportive prenatal services to approximately 210 (90%) pregnant GENESIS clients.	a. GENESIS staff will assist with: <ul style="list-style-type: none"> ▪ Nutritional education and/or referral. ▪ Substance use education and/or referral. ▪ Childbirth education and/or referral. ▪ Tobacco cessation and/or referral. ▪ Transportation to necessary prenatal appointments. ▪ Stress reduction. ▪ Case conferencing with prenatal providers. ▪ Counseling and/or referral to address psychosocial concerns relating to pregnancy. ▪ Prenatal Plus enrollment. 	a. Chart notes will reflect staff activity related to prenatal support. b. Data will be managed on the Statistical Package for the Social Sciences (SPSS).	GENESIS provided prenatal services to 247 (97%) pregnant GENESIS clients.	E	GENESIS received a high number of referrals and newly pregnant clients in 2008.
2. Less than 8% of babies born to GENESIS clients will be low birth weight: <ul style="list-style-type: none"> ▪ The percentage of low birth weight babies born to GENESIS clients will be lower than the percentage of low birth weight babies born to non-GENESIS Boulder County females, age 20 and under. 	a. Staff will collaborate closely with health care providers and WIC staff to reinforce health and nutritional recommendations that contribute to healthy birth weight outcomes. b. All GENESIS clients who are eligible will receive Prenatal Plus services.	a. The proportion of low birth weight babies born to participating GENESIS teens, non-participating Boulder County teens, and Colorado teens will be tracked through birth data provided by CDPHE.	In 2007 (most recent data available, 0.81% of GENESIS babies were born with low-birth weight, compared to 7.78% of babies born to non-participating Boulder County teens.	M	<ul style="list-style-type: none"> ▪ These data reveal a statistically significant finding, and the comparison with a control group provides strong validation of the impact of GENESIS services. ▪ Comparisons with state rates cannot be made because CDPHE has not yet released birth data for Colorado teens in 2007.

* - M = Met

E = Exceeded

NM = Not met

OT = On target at mid-year

Not = Not on target at mid-year

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<ul style="list-style-type: none"> The percentage of low birth weight babies born to GENESIS clients will be lower than the percentage of low birth weight babies born to Colorado women, age 20 and under. 					
<p>3. At least 30 GENESIS clients, age 18 and under, will begin the HPV vaccination series through the Vaccines for Children (VFC) Program; clients who remain eligible will be encouraged and supported in completing the vaccine series.</p>	<p>a. Staff will educate clients about HPV in the course of providing and reviewing Got Sex packets.</p> <p>b. Staff will provide vouchers for eligible clients to receive the vaccine through BCPH Vaccines for Children Program.</p> <p>c. Staff will provide transportation, as needed, for clients to BCPH to receive the vaccination.</p>	<p>a. All contacts regarding HPV education/case management will be documented in client chart notes and tracked on the SPSS database.</p>	<p>57 clients began the Gardasil vaccine series.</p>	<p>E</p>	<p>Parental consent laws have created a barrier for GENESIS clients in accessing this vaccine.</p>
<p>4. At least 70% of mothers participating in the GENESIS Program will initiate breastfeeding.</p> <ul style="list-style-type: none"> At least 30% will breastfeed for 6 months postpartum. 	<p>a. Staff will encourage and support participating GENESIS teens in breastfeeding their infants through at least six months postpartum by educational, referral, and emotional support.</p> <p>b. The nurse will do home visits with clients postpartum to trouble-shoot breastfeeding problems.</p>	<p>a. The proportion of participating GENESIS mothers that breastfeed during early postpartum and until babies are six months of age will be tracked through client self-report and staff observation.</p>	<ul style="list-style-type: none"> 93% of clients initiated breastfeeding. 32% of them continued through 6 months. 	<p>E</p>	
<p>5. No more than 15% of mothers participating in the GENESIS Program will have a subsequent birth within two years of the birth of their first GENESIS child.</p> <ul style="list-style-type: none"> For clients entering the program prior to age 17, no more than 15% will have 	<p>a. Staff will educate clients about the importance of creating at least a two-year time span between births to enhance bonding and subsequent emotional stability in children.</p> <p>b. Staff will assist clients in meeting personal goals that extend be-</p>	<p>a. The proportion of repeat births and progress toward educational/career advancement to participating GENESIS clients will be tracked through program data/case notes.</p>	<ul style="list-style-type: none"> 11% (12 out of 105) experienced a subsequent birth within two years of the birth of their first child. 12% (3 out of 25) of clients entering the program under age 17 had another baby within 3 years. 7% (3 out of 44) of cli- 	<p>M</p>	<p>GENESIS continues to demonstrate remarkable subsequent birth outcomes that run below national averages.</p>

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<p>a subsequent birth within three years of the birth of their first GENESIS child.</p> <ul style="list-style-type: none"> ▪ For clients entering the program at age 17 years or older, no more than 15% will have a subsequent birth prior to age 20. 	<p>yond the role of parenting, such as school or career, lessening the appeal of a second child.</p> <p>c. Staff will arrange home visits with a Women's Health nurse who can provide hormonal birth control in the home.</p>		<p>ents entering the program age 17 or over had a subsequent birth prior to age 20.</p>		
<p>6. GENESIS staff will assess and provide individualized parenting/nurturing education/activities to enhance parent/child bonding to 90% of GENESIS clients.</p>	<p>a. Activities include:</p> <ul style="list-style-type: none"> ▪ Warm Welcome visit. ▪ Referral to CIP, Special Connections, Child Protection, when appropriate. ▪ Attendance at GENESIS group/peer support activities. ▪ Home visits which address clients' unique parenting needs. ▪ Parenting education. ▪ Age-appropriate child development education. 	<p>a. The proportion of participating GENESIS teens who have enhanced parent/child bonding will be tracked through case manager assessment.</p>	<p>GENESIS staff provided parenting education to 92% (474 out of 517) of GENESIS clients.</p>	<p>M</p>	
<p>7. At least 85% of GENESIS babies will score at an appropriate developmental age according to the Ages & Stages Questionnaire (ASQ), 2nd edition.</p>	<p>a. Staff will administer the Ages & Stages Questionnaire (ASQ, 2nd edition) annually for participating GENESIS babies.</p> <p>b. Staff will provide intervention and referrals for babies scoring below the normal developmental range.</p> <p>c. The GENESIS nurse will provide Children with Special Needs services to GENESIS babies requiring more in-</p>	<p>a. The proportion of participating GENESIS babies scoring at an appropriate developmental level will be tracked through ASQ scores.</p>	<p>97% (363 out of 373) of GENESIS babies scored at an appropriate developmental level on the ASQ.</p>	<p>E</p>	

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	tensive interventions.				
8. At least 65% of GENESIS clients who are eligible will actively pursue one of the following: <ul style="list-style-type: none"> Vocational training. School. Employment activities. 	<ul style="list-style-type: none"> a. Staff will assist clients in school enrollment and encourage attendance. b. Staff will collaborate with teen parenting school programs to optimize clients' educational achievement. c. Staff will refer clients to job training resource centers and will assist them with the resume and job application process. 	<ul style="list-style-type: none"> a. Chart notes will reflect client educational and vocational achievement. 	79% (409 out of 516) of GENESIS clients were actively engaged in school/work activities.	E	<ul style="list-style-type: none"> Research indicates that a future orientation is the most critical component for teen parents in helping them move forward successfully in life. GENESIS staff understands that education is the key to preventing subsequent unplanned pregnancies and fostering economic security for GENESIS clients.
9. Staff will provide referral, linkage, follow-up, and other case management services to assist with utilization of a reliable birth control method for at least 95% of GENESIS clients.	<p>Staff will:</p> <ul style="list-style-type: none"> a. Check in with postpartum clients at least twice per reporting period on current contraceptive use. b. Provide and review "Got Sex" informational packets with all clients. c. Transport clients to family planning clinics, as necessary. d. Educate clients regarding the importance of and reasons behind spacing children by at least 2 years. e. Assist in accessing birth control funds for clients who experience financial barriers to family planning services. f. Encourage career development as an alternative to multiple children at a young age. g. Problem-solve with clients who are experiencing difficulties with side effects from contraceptive methods. h. Enroll and maintain 	<ul style="list-style-type: none"> a. Chart notes will reflect staff activity related to contraceptive education and support. b. The Home-based Contraception (HBC) Program enrollment will be tracked on the SPSS database. 	90% (428 out of 477) of GENESIS clients received an adequate level of family planning case management.	NM	<ul style="list-style-type: none"> GENESIS sets the bar high regarding adequate family planning case management. Although 100% of GENESIS clients received some level of contraceptive case management, the high threshold of service expected by supervisors was not met in 5% of these cases. Data demonstrates that 66% of GENESIS clients were utilizing long-term, low-maintenance, and highly effective forms of contraception (either the Depo Provera injection, IUD, or the Implanon).

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	clients in the Home-based Contraception Program.				
10. Complete a community needs assessment of teen pregnancies among siblings of pregnant and parenting teens.	In conjunction with the BCPH health planner, staff will: a. Gather baseline data on the sibling population in Boulder County using both quantitative and qualitative methodology. b. Bring together potential partners to assess community willingness and readiness to address the issue.	a. A formalized report of the community needs assessment process, outcomes, and recommendations will be completed by December 2008.	<ul style="list-style-type: none"> ▪ Staff was hired in July to begin planning the sibling pregnancy prevention program. ▪ The Sibling Program Planner, in conjunction with the GENESIS Program Coordinator, conducted focus groups with the target population and the parents of the siblings and key informant interviews with community stakeholders. 	M	<ul style="list-style-type: none"> ▪ Start-up funding has been secured to launch a sibling pregnancy prevention pilot project for the younger siblings of GENESIS clients. ▪ It is anticipated that implementation will begin by summer 2009.

STAFFING:

Key Staff Members: Kim Hills, Community Health Division Manager
Jody Scanlon, GENESIS Program Coordinator

FTE: 11.76
Volunteer Hours: 400