

# 2006 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.

In 2004, the combined effects of the elimination of Presumptive Eligibility for Medicaid benefits, along with the Department of Social Services' conversion to the Colorado Benefits Management System (CBMS) computer package, resulted in serious delays in and reductions of health services and basic need benefit packages. With an increasingly shrinking housing market and restrictions on benefits, teen-parent families are in even greater need of advocacy and support to ensure that they don't sink further into poverty and its associated problems.

The biggest challenge to the program in 2006, which will likely only escalate in the coming year(s) has been the mounting legislation directed at undocumented residents. Staff has noticed a marked decline in the number of undocumented clients seeking services; fear of deportation has resulted in many families avoiding critical services (such as well-child care and prenatal care). Staff has had to increase efforts with families to assure that they access services for which they are entitled, and also assist with getting their U.S.-born babies the appropriate documentation for government benefits

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.

### Planning Assumptions:

1. 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).
- ❖ 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. In 2005, GENESIS discontinued services to Weld County clients living within the St. Vrain Valley School District due to increasingly limited resources and an inability to adequately serve this population due to geographical difficulties (most needed services are located in Greeley).
  - ❖ 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 20% (127) in 2002, 24% (151) in 2003, 25% (152) in 2004, 24% (143) in 2005 and 21% (116) in 2006. These clients require more staff time because the bilingual parent educators are often needed to provide translation when accessing other community services. In addition, recent immigration legislation has negatively impacted the undocumented population; staff has noticed a marked decline in the number of undocumented

residents seeking services due to fear of deportation.

- ❖ A CDPHE report released in 8/2000, *Tipping the Scales: Weighing in on Solutions to the Low Birth Weight Problem in Colorado*, cited inadequate weight gain during pregnancy as the largest contributing factor to low weight births to Colorado babies. Also in 2005, Colorado began recording pregnancy weight gain on birth certificates. For these reasons, GENESIS has replaced the objective relating to premature births (which the program had less of an ability to impact) with a new objective that measures mother's weight gain during pregnancy.

**Number of Clients: 548**

OBJECTIVE	SERVICES/ACTIVITIES	EVALUATION	ACTUALS COMPLETED	RE-SULTS*	COMMENTS
<p>1. GENESIS will deliver supportive prenatal services to approximately 210 (90%) pregnant GENESIS clients.</p>	<p>a. GENESIS staff will assist with:</p> <ul style="list-style-type: none"> <li>❖ Nutritional education and/or referral.</li> <li>❖ Substance use education and/or referral.</li> <li>❖ Childbirth education and/or referral.</li> <li>❖ Tobacco cessation and/or referral.</li> <li>❖ Transportation to necessary prenatal appointments.</li> <li>❖ Stress reduction.</li> <li>❖ Case conferencing with prenatal providers.</li> <li>❖ Counseling and/or referral to address psychosocial concerns relating to pregnancy.</li> <li>❖ Prenatal Plus enrollment.</li> </ul>	<p>a. Chart notes will reflect staff activity related to prenatal support.</p> <p>b. Data will be managed on the Statistical Package for the Social Sciences (SPSS).</p>	<p>a. GENESIS supplied prenatal services to 97% (203/209) of GENESIS clients.</p>	<p>M</p>	<ul style="list-style-type: none"> <li>❖ Although the program exceeded the percentage of clients projected to meet this objective, it fell short of the expected number by nine clients.</li> <li>❖ Because the teen birth rate has remained steady in the county over the past several years, this is likely due to postpartum entry into the program.</li> <li>❖ Earlier enrollment continues to be a priority for the GENESIS team and will be addressed in 2007.</li> <li>❖ Once the 2006 Boulder County teen birth numbers become available, we will have a more complete picture of the program's success in reaching eligible pregnant teens for the year.</li> </ul>
<p>2. Less than 8% of babies born to GENESIS clients will be low birth weight:</p> <ul style="list-style-type: none"> <li>❖ 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.</li> </ul>	<p>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.</p> <p>b. All GENESIS clients who are eligible will receive Prenatal Plus services.</p>	<p>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 the Colorado Department of Public Health and Environment (CDPHE).</p>	<p>a. 2005 birth records indicate that 3.7% of GENESIS babies were born low birth weight. This compares very favorably with Boulder County non-participating teens who had a low birth weight rate of 11.4%; and it also is below the state rate of 10.7%</p>	<p>E</p>	<ul style="list-style-type: none"> <li>❖ The phenomenal low birth weight rate for the program can be attributed to numerous factors, among them the Prenatal Plus Program.</li> <li>❖ A little over half (56%) of pregnant clients participated in this program through GENESIS (the remainder either did not qualify—primarily because they were receiving emergency Medicaid (EMAC), or they received Prenatal Plus services through another provider).</li> <li>❖ In addition, in 2006 staff were</li> </ul>

OBJECTIVE	SERVICES/ACTIVITIES	EVALUATION	ACTUALS COMPLETED	RE-SULTS*	COMMENTS
❖ 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.					required to track weight gain on all pregnant clients and utilized the "Healthy Baby is Worth the Weight" campaign materials to educate clients on the importance of adequate weight gain during pregnancy.
3. At least 80% of GENESIS clients will gain an adequate amount of weight (according to the Institute of Medicine) during their pregnancies.	<p>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.</p> <p>b. Staff will track client weight gain on a weight grid and provide feedback to clients during the course of their pregnancies.</p> <p>c. All GENESIS clients who are eligible will receive Prenatal Plus services.</p> <p>d. Clients that are not gaining appropriately will be referred to either the WIC or GENESIS PN+ RD.</p>	a. The percentage of clients that gain an adequate amount of weight during pregnancy will be tracked through birth data provided by CDPHE.	<p>a. This information is available from birth data provided by CDPHE, and unfortunately, the state did not meet their goal of providing this information on the birth records in 2005.</p> <p>b. 82.3% of GENESIS clients gained at least 25 pounds during their pregnancies.</p>	N/A	<p>❖ Although the state is reporting the weight gain on birth certificates, they are not measuring "adequate weight gain."</p> <p>❖ Adequate weight gain is determined by a woman's pre-gravid body mass index. Without this additional information, it is not possible to determine adequate weight gain.</p> <p>❖ In 2007, staff will rely on internal records (and change the program database, as necessary) to report on this objective if the information cannot be obtained through state birth records.</p>
4. At least 70% of mothers participating in the GENESIS Program will initiate breastfeeding. ❖ At least 30% will breastfeed for six 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>	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.	a. Ninety-three percent (138/149) of GENESIS mothers initiated breastfeeding. Thirty-seven percent (49/132) breastfed through six months.	E	<p>❖ GENESIS clients continue to dispel the myth that teen parents do not breastfeed.</p> <p>❖ Staff devotes a considerable amount of time during a client's pregnancy providing information to support a teen's breastfeeding efforts.</p> <p>❖ In addition, the GENESIS nurse will visit newly postpartum clients who are experiencing difficulties in nursing to troubleshoot and mitigate problems.</p>
5. No more than 15% of mothers participating in	a. Staff will educate clients about the impor-	a. The proportion of repeat births and progress to-	a. Eight percent (8/104) had a repeat pregnancy	M	❖ While it is clear that GENESIS has been remarkably success-

OBJECTIVE	SERVICES/ACTIVITIES	EVALUATION	ACTUALS COMPLETED	RE-SULTS*	COMMENTS
<p>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"> <li>❖ For clients entering the program prior to age 17, no more than 15% will have a subsequent birth within three years of the birth of their first GENESIS child.</li> <li>❖ For clients entering the program at age 17 years or older, no more than 15% will have a subsequent birth prior to age 20.</li> </ul>	<p>tance of creating at least a two-year time span between births to enhance bonding and subsequent emotional stability in children.</p> <ul style="list-style-type: none"> <li>b. Staff will assist clients in meeting personal goals that extend beyond the role of parenting, such as school or career, lessening the appeal of a second child.</li> <li>c. Staff will arrange home visits with a Boulder Valley Women's Health Center nurse who can provide hormonal birth control in the home.</li> </ul>	<p>ward educational/career advancement to participating GENESIS clients will be tracked through program data/case notes.</p>	<p>within two years of their first child.</p> <ul style="list-style-type: none"> <li>b. Thirty-six percent (5/14) of clients entering the program prior to age 17 had a subsequent birth within three years of the birth of their first child. Two percent (1/46) of clients entering the program age 17 or older had a subsequent birth prior to reaching age 20.</li> </ul>		<p>ful in impacting subsequent births among the teen parent population through innovative programming, such as home-based contraception, we have struggled more with the youngest segment of the population.</p> <ul style="list-style-type: none"> <li>❖ These clients, who enter the program prior to age 17, are at higher risk for multiple pregnancies, and are less reliable contraception users.</li> <li>❖ Unfortunately, the highly reliable IUD method is generally not an option for this group because of their age, and many are reluctant to use the long-lasting Depo shot due to unpleasant side effects.</li> <li>❖ In 2007, the program will continue to explore strategies to assist younger teens in their family planning efforts.</li> </ul>
<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"> <li>❖ Warm Welcome visit.</li> <li>❖ Referral to CIP, Special Connections, Child Protection, when appropriate.</li> <li>❖ Attendance at GENESIS group/peer support activities.</li> <li>❖ Home visits which address client's unique parenting needs.</li> <li>❖ Parenting education.</li> <li>❖ Age-appropriate child development education.</li> </ul>	<p>a. The proportion of participating GENESIS teens who have enhanced parent/child bonding will be tracked through case manager assessment.</p>	<p>a. Ninety-seven percent (473/486) of GENESIS clients received parenting/nurturing education.</p>	<p>E</p>	<ol style="list-style-type: none"> <li>1. GENESIS staff routinely provides education, role modeling, and support around bonding/parenting activities.</li> <li>2. Beginning in 2005, all staff was trained in Harvey Karp's Happiest Baby techniques and have been providing this information to all newly delivered moms.</li> </ol> <ul style="list-style-type: none"> <li>❖ Staff continues to stay abreast of best practices in teaching early childhood development and promoting positive bonding between parents and infants.</li> </ul>
<p>7. At least 85% of GENESIS babies will score at an appropriate developmental age ac-</p>	<p>a. Staff will administer the Ages &amp; Stages Questionnaire (ASQ, 2nd edition) annually for</p>	<p>a. The proportion of participating GENESIS babies scoring at an appropriate developmental level will</p>	<p>a. Ninety-eight percent (384/392) of GENESIS babies scored at an appropriate developmen-</p>	<p>E</p>	<ul style="list-style-type: none"> <li>❖ Certainly the early intervention provided to clients (prenatal and immediately postpartum) contributes to the strong</li> </ul>

OBJECTIVE	SERVICES/ACTIVITIES	EVALUATION	ACTUALS COMPLETED	RE-SULTS*	COMMENTS
<p>ording to the Ages &amp; Stages Questionnaire (ASQ), 2nd edition.</p>	<p>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 intensive interventions.</p>	<p>be tracked through ASQ scores.</p>	<p>tal level on the ASQ.</p>		<p>scores that GENESIS babies achieve on developmental screens.</p> <p>❖ The GENESIS nurse also works part-time in the Special Needs Program, thereby providing a continuum of service provision to clients who qualify for additional services.</p>
<p>8. At least 65% of GENESIS clients who are eligible will actively pursue one of the following:</p> <ul style="list-style-type: none"> <li>❖ Vocational training.</li> <li>❖ School.</li> <li>❖ Employment activities.</li> </ul>	<p>a. Staff will assist clients in school enrollment and encourage attendance.</p> <p>b. Staff will collaborate with teen parenting school programs to optimize clients' educational achievement.</p> <p>c. Staff will refer clients to job training resource centers and will assist them with the resume and job application process.</p>	<p>a. Chart notes will reflect client educational and vocational achievement.</p>	<p>a. Seventy-nine percent (342/434) of GENESIS clients pursued vocational/educational activities.</p>	<p>E</p>	<p>❖ Although GENESIS clients met this objective for the year, the program has seen a drop in the number of clients employed.</p> <p>❖ This is in reaction to the changes in immigration legislation and the growing lack of employment and educational opportunities available to the undocumented population.</p>
<p>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>	<p>a. Staff will:</p> <ul style="list-style-type: none"> <li>❖ Check in with postpartum clients at least 2 times per reporting period on current contraceptive use.</li> <li>❖ Provide and re-view "Got Sex" informational packets with all clients.</li> <li>❖ Transport clients to family planning clinics, as necessary.</li> <li>❖ Educate clients regarding the importance of and reasons behind spacing children by at least 2 years.</li> </ul>	<p>a. Chart notes will reflect staff activity related to contraceptive education and support.</p> <p>b. The Home-based Contraception (HBC) Program enrollment will be tracked on the SPSS database.</p>	<p>a. Ninety-five percent (429/450) of GENESIS clients received birth control education and support.</p>	<p>M</p>	<p>❖ Family planning continues to be a top priority for the program.</p> <p>❖ In 2006, 29% of postpartum clients were utilizing the IUD for their contraception needs; all IUD users are counseled by clinic and GENESIS staff on increased STI risks with this method.</p> <p>❖ In addition, 30% of the postpartum population participated in the Home-Based Contraception Program and received Depo Provera injections.</p> <p>❖ Thus, 59% of the GENESIS population was utilizing a highly effective and long-term contraceptive method during the reporting period.</p>

OBJECTIVE	SERVICES/ACTIVITIES	EVALUATION	ACTUALS COMPLETED	RE-SULTS*	COMMENTS
	<ul style="list-style-type: none"> <li>❖ Assist in accessing birth control funds for clients who experience financial barriers to family planning services.</li> <li>❖ Encourage career development as an alternative to multiple children at a young age.</li> <li>❖ Problem-solve with clients who are experiencing difficulties with side effects from contraceptive methods.</li> <li>❖ Enroll and maintain clients in the Home-based Contraception Program.</li> </ul>				
10. An updated GENESIS web page will be available to the public at all times.	<ul style="list-style-type: none"> <li>a. Staff will evaluate the quality and content of the GENESIS web page monthly.</li> <li>b. A web committee representative will meet at least quarterly with program staff to assess the general quality and design of the web page and create a work plan to accommodate needed changes.</li> </ul>	a. Meeting notes will be filed and reviewed to ensure appropriate actions have been taken.	<ul style="list-style-type: none"> <li>a. The GENESIS website has been greatly improved and thoroughly updated.</li> <li>b. Staff meets quarterly with a web committee representative for quality assurance.</li> </ul>	M	❖ In 2005, the GENESIS website received 14,441 visits. In 2006, staff put considerable effort into creating a more informative and user-friendly website, and the number of visits increased to 25,000.

**STAFFING:**

Key Staff Members: Frank Campanella-Green, Community Health Division Manager  
 Jody Shulins, GENESIS Program Coordinator  
 # FTE: 11.76  
 # Volunteer Hours: 400