



2022, Issue 6: November

Dear state adolescent health colleagues,

The fall theater production at my kids' high school this year was an adaptation of the Tony-award winning "Spring Awakening." I learned quickly through local gossip and social media that the school had made a controversial choice: it's a ["coming of age rock musical"](#) about "teenagers discovering the inner and outer tumult of adolescent sexuality," among other topics like adolescent suicide, parental abuse, and abortion.

I picked up my daughter and her friend after they saw the Sunday matinee. I'm kicking myself now for prioritizing my Sunday afternoon chores over joining them.

(As most of you have experienced, the best learning lab for adults takes place as you drive a carpool of young people. You just sit quietly, look straight ahead, make no sudden movements, don't touch the radio, and listen. Your colleagues in [Alaska](#) and [Missouri](#), by the way, know stuff about talking to young people.)

My daughter and her friend raved about the production and their friends' inspiring performances, and we had a great conversation about how the school handled weighty topics.

"The Principal made them change the masturbation scene so it was less obvious what he was doing," they told me. In an [interview with the local news](#), the director shared that they "hired an intimacy coordinator to ensure the safety of his students in those scenes." I'm grateful and impressed that the director took on this production, especially in the current teaching climate. (I heard community members lament that it wasn't a family-friendly show. Last year's production was "Grease" – uh, can we unpack that?)

AND, it struck me (again) how odd it is that our culture accepts as fact the "controversial" nature of adolescent sexuality but that a scene featuring a young actor putting a gun in his mouth—an act of violent self-harm—didn't merit censorship.

School should be a place where young people are encouraged to engage in conversations about healthy sexuality and where they're given accurate information about what that entails. [Recent research by my colleagues at the Healthy Youth Development – Prevention Research Center at the U of M](#) corroborates this: parents see schools as a critical partner in teaching their children about sexuality.

The incredible, organic youth development opportunity that this theater production provided reminds me of the fundamental requirements for healthy youth development posited by Dr. Gisela Konopka in 1973 (on which much of SAHRC's work is based): youth need the opportunity to participate as responsible members of society, gain experience in decision-making, interact with peers and acquire a sense of belonging, reflect on self in relation to others, discuss conflicting values and formulate one's own value system, experiment within relationships with one's own identity, develop a feeling of accountability in the context of a relationship among equals, and cultivate a capacity to enjoy life.

As you spend time with family in the coming weeks, I hope you enjoy opportunities for meaningful conversation with the young people around your table. Your colleagues at SAHRC wish you a peaceful holiday season, however you celebrate.

On behalf of the State Adolescent Health Resource Center Team,

[Lynn Bretl](#), MPP

Director, State Adolescent Health Resource Center at the University of Minnesota

Share this newsletter with colleagues, grantees and other partners! Anyone may subscribe to SAHRC Connections by [signing up here](#).

# SAHRC's PYD-in-sexual-health resources

[Supports Youth Need and Strategies to Meet Those Needs](#) - This 7-page brief considers what these fundamental supports mean and provides examples of healthy youth development strategies to ensure young people have needed supports.

DRAFT of NEW RESOURCE! - [A Checklist for Putting Positive Youth Development Characteristics into Action in Teen Pregnancy Prevention Programs](#). We welcome your input on this emerging tool!

[Promoting PYD in your State](#) - "Operationalizing" PYD can be challenging for state level agencies as PYD is often characterized as community-level, direct-engagement activity only. This NNSAHC brief offers concrete examples and resources for state-directed initiatives to infuse a PYD approach into adolescent focused initiatives.

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## resources from the field

The [Office of Population Affairs/PYD](#) page links to [growing evidence](#) that adding PYD principles in youth-serving programs can have positive effects across multiple parts of young people's lives, including their physical and mental health, relationships, and academics. A PYD approach has also been particularly effective when working with vulnerable and underserved adolescents, including those who have been maltreated and those who are part of racial/ethnic minority groups. [These foundational documents](#) can help you make a case to your audiences:

- [Child Welfare Information Gateway – Tools for Promoting PYD](#)
- [Youth.gov – Positive Youth Development Tools](#)

The [University of Minnesota's Healthy Youth Development - Prevention Research Center](#) offers over [20 interactive, skills-building health education trainings](#) to increase youth-serving professionals' and organizations' capacity. The HYD-PRC training team is deeply committed to addressing health disparities, and delivers content through a lens of equity, inclusion, and trauma-informed practice. With extensive experience providing training and professional development, they are sought-after as consultants, educators, and trainers, who can provide high quality, competitively-priced training and technical support:

- 20+ [evidence-based](#) sexual health curricula like Making Proud Choices, Making a Difference, SHARP (Sexual Health and Adolescent Risk Behavior), Safer Sex Intervention, and Promoting Health Among Teens.
- [Evidence-informed](#) sexual health curricula like 3Rs (Rights, Respect, Responsibility) and It's That Easy! A Guide to Raising Sexually Healthy Children.
- [Adolescent sexual health promotion](#) trainings that cover topics like Cultural Proficiency, LGBTQ+ Inclusivity, Trauma-Informed Approaches to Sex Ed, and Answering Sensitive Questions.
- A NEW OFFERING on **Mobilizing Continued Parental Support for Sex Ed!** Participants will review the latest research, create messages for their local communities, and identify concrete steps to advance the use of national sexuality education standards in their local schools and communities. To explore how the HYD-PRC can support your training and TA needs on the following topics (and get a quote) contact Jill Farris, Director of Adolescent Health Training & Education, at [farrisj@umn.edu](mailto:farrisj@umn.edu).

[Centering Racial Justice in Sex Education: Resources from the Sex Education Collaborative](#) - This practice paper serves as a guide to providing racially just practices for those working in the field of sex education.

[Free, online sex education e-learning modules - Advocates for Youth, along with SisterReach and other experts in the field, have created free, fully online modules to address issues of racial justice in sex education.](#) Through five engaging and dynamic e-learning modules delivered via [Moodle](#), each 30-45min in length, educators can learn and reflect on the following issues as they relate to sex education: Race and Racism; White Privilege and Sex Ed; Racism and Youth Sexual Health Outcomes; Racial Justice in Sex Ed; and Reproductive Justice in Sex Ed.

[The Importance of Cultural Competence](#) - this youth-led Youth Engaged 4 Change Radio podcast outlines cultural competence in various fields, [shares young people's personal experiences](#), and shares how young people can become empowered to pursue this subject.

[Working with Diverse Communities](#) - publications and tools emerging from the CDC's 2010-2015 effort to demonstrate the effectiveness of innovative, multicomponent, community-wide initiatives to raise awareness of [the link between teen pregnancy and social determinants of health](#).

[Gender-Affirming Care and Young People](#) - a 2-page fact sheet from the Office of Population Affairs.

[A Disabled Advocate's Guide to Romance, Sexuality, and Sexual Health](#) - a 35-page handbook from the Office of Developmental Primary Care at the University of California, San Francisco.

[ACT for Youth's Healthy Relationship Tools](#) - this website offers resources and tools to support young people in building healthy relationships including, The [Social and Emotional Learning \(SEL\) Toolkit](#); the SEL Toolkit's [Relationship Skills](#) page; [Romantic Relationships in Adolescence](#); and [Dating Violence](#) for

Services Bureau (FYSB) Adolescent Pregnancy Prevention Program, includes user-friendly checklists that facilitators can use before, during, and after program delivery to ensure that they are using a trauma-informed approach.

## spotlight on South Carolina

Tanisha Dixon, South Carolina's Adolescent Health Coordinator and Teen Pregnancy Prevention program grant manager, has a passion for service.

"My mom worked at city hall and the police department, and often signed me up for volunteer work," she says. Her mother not only "voluntold" her for community service, she advised her to always, "Do it happy." Tanisha attributes her specific passion for adolescent health to her lived experience as a young person who felt unheard in school. "As an adult, I try to help young people discover their voice. I've learned I'm really good at it."



Hailing from, "A 2-stoplight town called Maxton, NC," Tanisha earned her BA in Public Health from East Carolina University and her MA in Public Administration from UNC-Pembroke. An internship in adolescent teen pregnancy prevention in Robeson County proved to be a perfect career match and the beginning of a steady career trajectory: she soon advanced to be the coordinator of that program. Most recently, she serves as South Carolina's Teen Pregnancy Prevention Program Coordinator and MCH state adolescent health coordinator.

In her current role for three years, Tanisha sums up her mission and daily work as managing partnerships with PREP contract providers and building community relationships, with an eye on long-term program sustainability.

"My goal is to help every county in South Carolina have a thriving teen pregnancy prevention program," she says. "You have to be innovative. COVID-19 has brought a lot of changes: young people's attention spans are different. There's a mental health crisis. We're trying to use this unique time to make changes."

Like many jurisdictions, South Carolina's adolescent health programming isn't under one umbrella. Its SRAE program, for example, is run by a perinatal consultant under MCH. Fortunately, sisterhood is powerful: "My SRAE colleague is a sorority sister. We talk every day. Together, we're trying to build a continuum of adolescent health programming within a larger context of what sometimes feels like government red tape."

"Public health' means partnering together to reach a common goal. We're making people's lives better and easier by asking, 'How can I help you? How can you help me?'"

When Tanisha walked into this role, the PREP program had been recently reorganized by her predecessor. "I was asked to come in and provide TA. People were used to certain systems. My challenge was to streamline processes, figure out what my job *should* be, and ask grantees how we can serve them better. 'What barriers keep you from growing your program and how can we help?'"

This emphasis on capacity building helped Tanisha and her colleagues see and remove roadblocks like professional development gaps in technology for older workers. "We're breaking down these barriers for older folks in our grantee organizations, and it's working. People are communicating better."

"Most of us were hired during COVID. The TA coordinator, evaluators, and I are still learning, planning, and organizing. Our grantees appreciate that we show up for conversations and offer honest answers which are usually along the lines of, 'If I can figure this out, I'll do my best to advocate on your behalf and get around the red tape. Benefiting youth is the number one priority.'"

Her current projects include bringing some services in-house and further streamlining processes. Tanisha is proud of the trust she and her team are building in the community. When we asked what she would change if she could, Tanisha said, "I would want to have a discussion with state employees to make sure that we're using the same customer service skills with our colleagues that we do with the communities we serve. We need to help leaders know how to create safe spaces within their agencies. Good ideas come out of safe spaces. And we are all part of the populations we serve."

Tanisha's advice for new State Adolescent Health Coordinators? "Don't be afraid to jump in, ask questions, make mistakes, and challenge what is already going on. Be confident in your experiences and life knowledge. Talk to people and get all the information you can. You will get better. It is a journey."

The [2023 AMCHP Annual Conference](#) will be held May 6-9, 2023 at the New Orleans Marriott, in New Orleans, LA. The theme for the 2023 conference is *Cultivating Diverse Leaders in Maternal and Child Health*. Do you have an idea for a proposal? The deadline is November 22, 2022!

# announcements

**NNSAHC needs a Member at Large for Regions 3-4.** Add your name to [this cool group!](#)

Our next issue of *Connections* will feature tips on **talking about social determinants of adolescent health in ways that build support for your programs**. We're looking for examples to feature: if your communications do this (or are trying to), please share the details with Katie Pierson at [pie0122@umn.edu](mailto:pie0122@umn.edu). Other jurisdictions can learn from you!

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## about sahrc

The State Adolescent Health Resource Center (SAHRC) works to build a national network of states and territories in which adolescents and young adults (AYA) are bedrock priorities in practice and policy. Created by MCHB in 2000 to elevate AYA health as a state-level priority within the Title V/MCHB structure, we offer workforce development in the form of ongoing responsive leadership, technical assistance, research-based resources, and community-building opportunities. This newsletter is funded through SAHRC's partnership with The Adolescent and Young Adult Health – National Resource Center ("the Center") which also includes the [National Adolescent Health Information Center](#), the [Association for Maternal and Child Health Programs](#), and the [National Improvement Partnership Network](#). The Center is supported by the Maternal and Child Health Bureau, Health Services and Resources Administration, USDHHS cooperative agreement U45MC27709, Adolescent and Young Adult Health Capacity Building Program. The contents don't necessarily represent the views of or an endorsement by HRSA, HHS, or the U.S. Government.



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