

Making a Difference . . .

Healthy Teen Network



A BDI Logic Model for Working with Young Families Resource Kit

leadership,
education,
training, **resources,**
advocacy,
information and
support



Healthy Teen Network

MAKING A DIFFERENCE IN THE LIVES
OF TEENS AND YOUNG FAMILIES

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ABOUT HEALTHY TEEN NETWORK

Healthy Teen Network (HTN) is a national membership organization that provides resources and services to professionals working in the field of adolescent reproductive health—specifically teen pregnancy prevention, teen pregnancy, and teen parenting. Healthy Teen Network believes youth can make responsible decisions about sexuality, pregnancy, and parenting when they have complete and accurate information, resources, and support that are culturally relevant and appropriate to their age, gender, and developmental stage.

ACKNOWLEDGEMENTS

We would like to extend our most heartfelt thanks and appreciation to the professionals who helped to develop this logic model. Healthy Teen Network staff members Mary Martha Wilson, Janet Max, and Gina Desiderio formed an advisory committee with Healthy Teen Network members Marilyn Colby-Rivkin, Minnesota Organization on Adolescent Pregnancy, Prevention, and Parenting (MOAPPP), Sue Cupito, YWCA of Greensboro, North Carolina; Kathy Putnam, Adolescent Pregnancy Prevention Coalition of North Carolina (APPCNC); and Wanda Spann-Roddy, Health and Hospital Corporation of Marion County, Indiana. Additionally, Healthy Teen Network put out a call to the field to solicit logic models. We could not have developed this logic model without the expertise and support of these direct service providers and experienced professionals.

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BACKGROUND INFORMATION

In response to a need voiced by professionals working with young families, Healthy Teen Network designed a Behavior-Determinant-Intervention (BDI) Logic Model for Working with Young Families in collaboration with various professionals in the field.

To develop this logic model, Healthy Teen Network formed an advisory committee of experienced professionals working in the field of young families. In preparation, the advisory committee reviewed relevant research, including

- Outcome research conducted by the Center for Assessment and Policy Development¹
- Risk and protective factor research conducted by Douglas Kirby and Gina Lepore²
- Parent-child connectedness research BDI Logic Model developed by Steve Bean and Lori Roller³
- Program evaluation research conducted by Lorraine Klerman⁴
- Supportive housing research conducted by Janet Max and Pat Paluzzi^{5, 6}

By reviewing the relevant research, examining various logic models collected from the field, and meeting with the advisory committee, Healthy Teen Network developed a BDI Logic Model for Working with Young Families. The first version of this logic model was presented in a workshop at the Healthy Teen Network annual conference in Baltimore, Maryland in November, 2007. Workshop participants reviewed the logic model and, over the course of the next nine months, submitted suggestions for revising the logic model via a survey, resulting in a second version of the logic model (below).

It should be noted that this logic model is a general example of a BDI Logic Model that includes a comprehensive range of outcomes for working with young families. Not all programs working with young families will be as comprehensive; a focused-approach on selected outcomes may prove to be more effective and efficient given available resources as well as other services offered in the community. Also, this logic model is not meant to be an exhaustive list of all the determinants and relevant intervention activities; rather this logic model identifies what our committee has identified as the most relevant determinants and intervention activities.

Furthermore, while using a logic model is indeed a science-based approach (defined below), it cannot be affirmed that the intervention activities listed here are proven to be effective. Again, the primary prevention field is further along than the young families field in the rigorous evaluation of programs. Thus, at this time, we cannot provide a list of relevant science-based (or evidence-based) programs for working with young families. However, it is Healthy Teen Network's hope that the development of this BDI Logic Model provides professionals with another tool to aid them in the provision of services, as well as in the continued improvement and evaluation of these services.

RESOURCES

Healthy Teen Network
www.healthyteennetwork.org

Center for Assessment and Policy Development
www.capd.org

Chapin Hall Center for Children at the University of Chicago
www.chapinhall.org/

Children's Law Center of Los Angeles
www.clcla.org/facts_teens.htm

Child Welfare League of America
<http://www.cwla.org/programs/fostercare/sexualityfcyouth.htm>

ETR Associates
www.etr.org/recapp

National Campaign to Prevent Teen and Unplanned Pregnancy
www.thenationalcampaign.org

National Resource Center for Family-Centered Practice and Permanency Planning,
www.hunter.cuny.edu/socwork/nrcfcpp/info_services/pregnant-and-parenting-teens.html

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GOALS FOR WORKING WITH YOUNG FAMILIES

When working in the primary prevention field, the program goal is more straightforward—the sole focus of the program is usually to reduce teen pregnancy, STIs, and/or HIV. However, when working with young families, while one of many goals is usually preventing (or delaying) subsequent pregnancies and reducing STIs/HIV, this is usually or often times not the sole focus of the program.

Based on research from the Center for Assessment and Policy Development, a comprehensive program for young families would incorporate the following goals:



- Self-Sufficiency Outcomes for Young Mothers and Fathers
 - Increase high school graduation/GED completion
 - Increase completion of post-secondary education, vocational training, and/or employment at a livable wage
 - Increase self reliance and transition to independent living
 - Reduce/delay subsequent pregnancies
 - Reduce STIs/HIV
- Developmental Outcomes for Children of Young Mothers and Fathers
 - Increase healthy births
 - Increase age-appropriate physical, emotional, cognitive, and social development (and readiness for school success)
 - Increase appropriate discipline, nurturing behavior, and children who are well cared for
- Outcomes for Young Families
 - Increase healthy relationships between partner(s), peers, and family

Clearly, this list of goals extends far beyond the prevention of pregnancy, STIs, and HIV/AIDS; consequently, young families programs often have a wider focus of than primary prevention programs.

ABOUT SCIENCE-BASED APPROACHES

In 2002, CDC's Division of Reproductive Health (DRH) funded the national project, Promoting Science-Based Approaches in teen pregnancy, HIV and STI prevention with the goal to decrease teen pregnancy, STI, and HIV rates by increasing the use of research-proven practices and programs, or what we call "science-based approaches." As part of this project, national and state grantees worked together for over a year with CDC DRH staff to identify important science-based approaches (or practices) that should be integrated into the work of adolescent reproductive health practitioners. After reviewing adolescent pregnancy, HIV, and STI programs and initiatives that demonstrated effectiveness, the group identified the following science-based approaches that would become the focus of our project:

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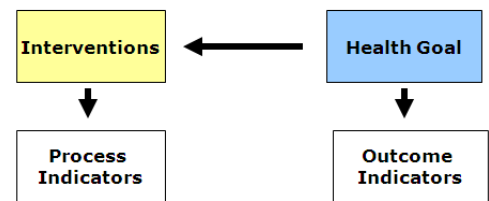
SCIENCE-BASED APPROACHES

1. **ASSESS** the priority population using social science research
2. Use health education & behavior **THEORY** to design intervention activities
3. Use **LOGIC MODELS** to design intervention activities, especially the Behavior-Determinant-Intervention (BDI) Logic Model
4. Use what works best: **SCIENCE-BASED PROGRAMS** and **PROMISING PROGRAMS**
5. Make strategic **ADAPTATIONS** to science-based programs
6. Conduct process & outcome **EVALUATION**

These science-based approaches are not exclusive to primary pregnancy, STI, or HIV prevention—they are methodical, strategic, and purposeful ways to plan for effective programs. The BDI Logic Model was originally designed for the primary prevention field; it was a clear progression to develop a BDI Logic Model for Working with Young Families.

ABOUT THE BDI LOGIC MODEL

Program developers use logic models to strategically, purposefully, and scientifically identify the causal pathways between goals and interventions. Logic models also point to the outcome and process indicators to be measured and evaluated.



Although there are many examples of program logic models, the Behavior-Determinant-Intervention (BDI) Logic Model was designed specifically for the adolescent reproductive health field by Douglas Kirby, PhD⁷. There are many easily accessible resources available to learn more about how to use the BDI Logic Model, including a free online course available through ETR Associates⁸.

A thorough needs and resource assessment guides the process of creating a BDI Logic Model—which is also a science-based approach. Uniquely, the BDI Logic Model focuses first on the goal or intended outcomes, in order to make sure that the intervention activities are strategically and purposefully designed to reach the goal or outcomes. Second, the BDI Logic Model focuses on the sexual risk-taking behavior(s) of the individual—something practitioners can influence within the context of programs. The third focus is on determinants, or risk and protective factors, that influence decisions and choices about sexual risk-taking behaviors. Lastly, the BDI Logic Model focuses on the specific intervention strategy, or set of intervention activities, that impact selected determinants that influence behaviors.

It may seem counter-intuitive to create a logic model starting with the

4 STEPS TO COMPLETE A BDI LOGIC MODEL

1. **Step One:** Establish a **GOAL**.
2. **Step Two:** Identify and select important **BEHAVIORS** that need to be changed.
3. **Step Three:** Identify and select **DETERMINANTS** of each of the behaviors selected.
4. **Step Four:** Design **INTERVENTION** activities to change each of the selected determinants.

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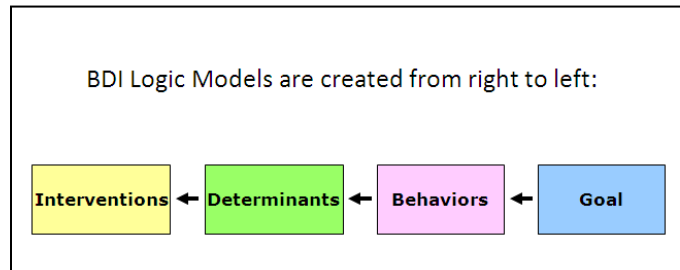
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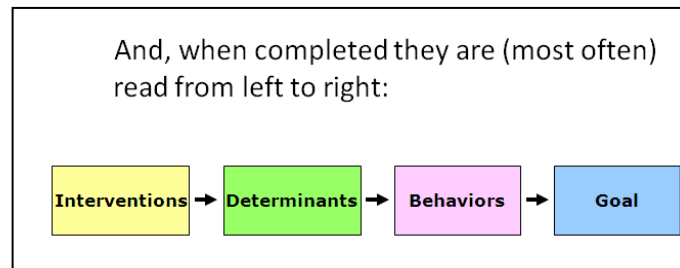
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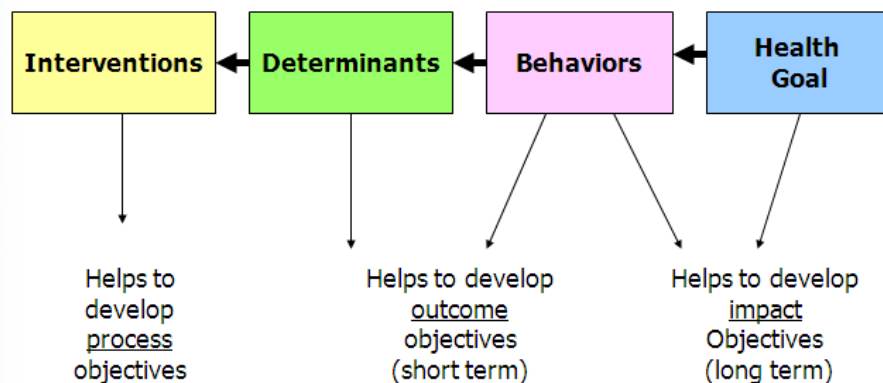
goal; often times, we are much more familiar with the intervention activities. However, BDI Logic Models are created from right to left in order to be more strategic and purposeful in designing or selecting an intervention that will be effective at reaching the program goal.



Once completed, BDI Logic Models may be read from left to right, if the desired focus is the intervention.



In a BDI Logic Model, the evaluation plan is set up because the goal and behaviors help to develop *impact objectives*. *Impact objectives* are long-term—greater than one year—changes in the program participants. The behaviors and determinants help to develop *outcome objectives*. *Outcome objectives* are short-term—less than one year—changes in the program participants. The interventions help to develop *process objectives*. *Process objectives* measure how the program was implemented and general participant satisfaction (such as number of staff trainings, number of youth attending program, number of materials distributed, etc.).

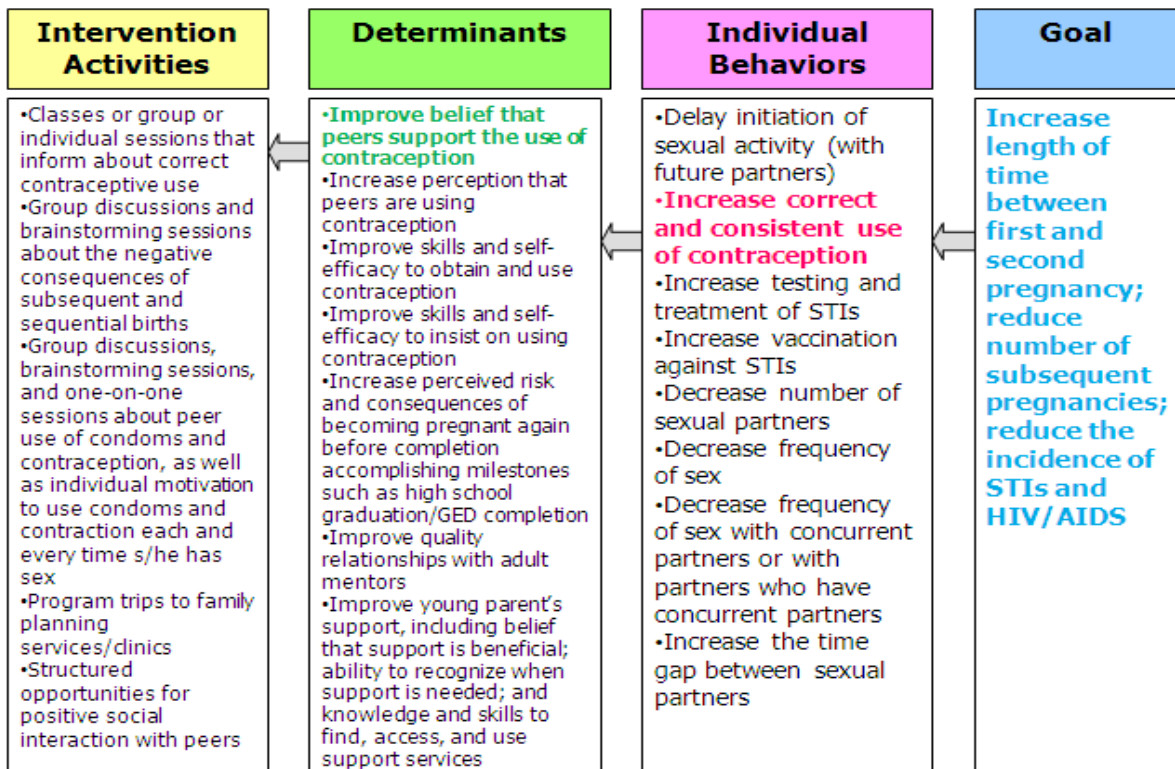


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A sample thread of a BDI Logic Model:



POTENTIAL USES FOR THE FIELD

Healthy Teen Network anticipates that this logic model may serve as an example for professionals providing services for young families. Logic models have two main purposes:

1. Based on assessment data, logic models may be used as a program planning, designing, and/or selection tool to identify the program goal, priority population, key behaviors, key determinants, and the range of intervention activities.
2. Logic models point to the program impact, outcome, and process objectives, thus setting up the program's evaluation plan.

Professionals working with young families may choose to use this sample logic model to guide in the program planning, design, and/or selection of services for young families. This logic model may be used as the foundation for a program and then modified based on that program's priority population, behaviors, determinants, and intervention activities. Modifying this logic model to fit one's own program will also then help to set up the evaluation plan for that program. By using the logic model as a science-based approach, programs may be more strategic, more purposeful, and ultimately, more effective.

POTENTIAL USES

1. Plan
2. Design
3. Select
4. Adapt
5. Improve
6. Evaluate
7. Fund

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A SAMPLE BDI LOGIC MODEL FOR WORKING WITH YOUNG FAMILIES

Goal #1: Increase Self-Sufficiency Outcomes for Young Mothers and Fathers

| Intervention Activities | Determinants | Behaviors | Goals |
|---|--|---|--|
| <ul style="list-style-type: none"> • Comprehensive educational and vocational support • Advocacy for equal access to quality education • On-site individual counseling, including school and career counseling • Meetings with school counselors who explain the process of enrollment in post-secondary education, vocational program, and/or job training programs • Study skills support and practice • Goal setting and planning practice • Group discussions and brainstorming sessions about benefits of high school graduation/GED • Group discussions with other young parents who have faced similar barriers and graduated from high school/earned a GED • Structured opportunities for positive social interaction with peers • Case management services • Home visits by a nurse or care provider • Mentoring activities • Transportation to support services, including for education and childcare • Connection to child care assistance programs, referrals to quality child care facilities, and/or quality school-based child care • Communicate with parent/guardian of young parent, if applicable, regarding school and behavioral issues • Mentor parent/guardian of young parent, if applicable, on how to communicate to the school to advocate for their teen • Visits to various support services that are available for young families • Referrals to transitional housing, subsidized housing and other housing supports • Medical health services • Mental health services, support, and counseling | <ul style="list-style-type: none"> • Improve connection to school • Improve awareness of benefits of completing high school/GED and belief that educational programs benefit long-term goals • Improve belief that peers support high school/GED enrollment • Improve ability to set and achieve goals and objectives • Improve effective study skills • Improve quality relationships with positive adult mentors • Improve young parent's support, including belief that support is beneficial; ability to recognize when support is needed; and knowledge and skills to find, access, and use support services | <ul style="list-style-type: none"> • Increase school attendance and progression toward school completion | <ul style="list-style-type: none"> • <i>Goal 1A:</i> Increase graduation from high school with diploma or completion of GED |

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Goal #1: Increase Self-Sufficiency Outcomes for Young Mothers and Fathers

| Intervention Activities | Determinants | Behaviors | Goals |
|--|--|--|---|
| <ul style="list-style-type: none"> • Campus tours and visits with admissions counselors • Visits to employment sites, job shadowing, and presentations on jobs/careers • Comprehensive educational and vocational support • Connection to financial aid resource; help with completion of paperwork • Financial planning skills practice and support • Goal setting and planning practice • Group discussions and brainstorming sessions about benefits of post-secondary education, vocational training, and employment at a livable wage • Group discussions with other young parents who have faced similar barriers and graduated from post-secondary education or vocational training program and who are employed at a livable wage • Meetings with school counselors who explain the process of enrollment in post-secondary education, vocational program, and/or job training programs • Study skills practice and support • Job readiness skills practice and support • Structured opportunities for positive social interaction with peers • Case management services • Home visits by a nurse or care provider • Mentoring activities • Transportation to support services, including for education and childcare • Connection to child care assistance programs, referrals to quality child care facilities, and/or quality school-based child care • Visits to various support services that are available for young families • Information/referrals for safe and stable housing • Medical health services • Mental health services, support, and counseling | <ul style="list-style-type: none"> • Improve awareness of benefits of completing post-secondary education/training and being employed at a livable wage • Increase belief that post-secondary education and employment at a livable wage is a viable possibility • Improve belief that peers support post-secondary education/training • Improve ability to set and achieve goals and objectives • Improve effective study skills • Improve financial knowledge, responsibility, and self-efficacy to budget • Improve quality relationships with adult mentors • Improve young parent's support, including belief that support is beneficial; ability to recognize when support is needed; and knowledge and skills to find, access, and use support services | <ul style="list-style-type: none"> • Increase enrollment in post-secondary education, vocational training, and/or employment at a livable wage • Increase attendance and progression toward completion of further education, training, and/or employment | <ul style="list-style-type: none"> • <i>Goal 1B:</i> Increase completion of post-secondary education, vocational training, and/or employment at a livable wage |

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Goal #1: Increase Self-Sufficiency Outcomes for Young Mothers and Fathers

| Intervention Activities | Determinants | Behaviors | Goals |
|--|--|--|---|
| <ul style="list-style-type: none"> • Connection to financial aid resources; help with completion of paperwork • Financial planning skills practice and support • Visits to financial institutions to select and establish connections through initiation and/or maintenance of services • Job readiness skills practice and support • Group support sessions for those living in unsafe housing to make a plan for moving to safer housing • Independent living skills practice and support • Meetings with supportive housing officials who explain the process of enrollment in supportive housing programs • Structured opportunities for positive social interaction with peers • Case management services • Home visits by a nurse or care provider • Mentoring activities • Transportation to support services, including for education and childcare • Connection to child care assistance programs, referrals to quality child care facilities, and/or quality school-based child care • Visits to various support services that are available for young families • Information/referrals for safe and stable housing • Medical health services • Mental health services, support, and counseling | <ul style="list-style-type: none"> • Improve health insurance coverage • Improve job readiness • Improved ability to respond to crisis situations with a plan • Improve life management skills, such as educational support, job training, and time and money management • Improve quality relationships with adult mentors • Improve young parent's support, including belief that support is beneficial; ability to recognize when support is needed; and knowledge and skills to find, access, and use support services | <ul style="list-style-type: none"> • Increase number of young parents in safe and stable housing • Create and access safety net of family, community, and professional resources • Increase sustained employment at a living wage | <ul style="list-style-type: none"> • <i>Goal 1C:</i> Increase self-reliance and successful transition to safe and stable housing |

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Goal #1: Increase Self-Sufficiency Outcomes for Young Mothers and Fathers

| Intervention Activities | Determinants | Behaviors | Goals |
|--|--|---|--|
| <ul style="list-style-type: none"> • Classes or group or individual sessions that inform about correct condom and contraceptive use • Extended services (long term therapy, survivors' groups, etc) for disclosures of childhood sexual and/or physical abuse • Group and individual counseling for those who are in unhealthy relationships • Group discussions and brainstorming sessions about the negative consequences of subsequent and sequential births • Group discussions, brainstorming sessions, and one-on-one sessions about peer use of condoms and contraception, as well as individual motivation to use condoms and contraction each and every time s/he has sex • Practice developing and improving negotiation skills for using condoms and contraception with partners • Practice using condoms and contraception correctly • Practice saying no to unwanted or unprotected sex • Program trips to family planning services/clinics • Structured opportunities for positive social interaction with peers • Case management services • Home visits by a nurse or care provider • Mentoring activities • Transportation to support services, including for education and childcare • Connection to child care assistance programs, referrals to quality child care facilities, and/or quality school-based child care • Visits to various support services that are available for young families • Screening for intimate partner violence • Information/referrals for safe and stable housing • Medical health services • Mental health services, support, and counseling | <ul style="list-style-type: none"> • Improve belief that peers support the use of contraception, if having sex • Increase perception that peers are using contraception • Improve skills and self-efficacy to obtain and use contraception • Improve skills and self-efficacy to say no to unwanted or unprotected sex and/or insist on using contraception (Improve negotiation skills) • Increase perceived risk and consequences of becoming pregnant again before completion accomplishing milestones such as high school graduation/GED completion • Improve quality relationships with adult mentors • Improve young parent's support, including belief that support is beneficial; ability to recognize when support is needed; and knowledge and skills to find, access, and use support services | <ul style="list-style-type: none"> • Delay initiation of sexual activity (with future partners) • Increase correct and consistent use of contraception • Increase testing and treatment of STIs • Increase vaccination against STIs • Decrease number of sexual partners • Decrease frequency of sex • Decrease frequency of sex with concurrent partners or with partners who have concurrent partners • Increase the time gap between sexual partners | <ul style="list-style-type: none"> • <i>Goal 1D:</i> Increase length of time between first and second pregnancy; reduce number of subsequent pregnancies; reduce the incidence of STIs and HIV/AIDS |

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Goal #2: Improve Developmental Outcomes for Children of Young Mothers and Fathers

| Intervention Activities | Determinants | Behaviors | Goals |
|--|--|--|---|
| <ul style="list-style-type: none"> • Individual and group sessions to discuss and brainstorm importance of prenatal care (including exercise) for mother and fetus and brainstorm solutions to barriers • Program trips to doctors' offices and clinics so that youth know where they are and what they offer, how much services cost, and how to ask for services • Visits to the local grocery stores/food coops, food banks to assess which healthy foods are available and best value for healthy food and affordable weekly budget • Structured opportunities for positive social interaction with peers • Case management services • Home visits by a nurse or care provider • Mentoring activities • Transportation to support services, including for education and childcare • Connection to child care assistance programs, referrals to quality child care facilities, and/or quality school-based child care • Visits to various support services that are available for young families • Information/referrals for safe and stable housing • Medical health services • Mental health services, support, and counseling | <ul style="list-style-type: none"> • Improve knowledge of, belief in, and skills relevant to the importance of prenatal care • Improve knowledge of, belief in, and skills relevant to the importance of good nutrition and folic acid in the prenatal period • Improve knowledge of, belief in, and skills relevant to the importance of exercise • Improve knowledge of the signs and symptoms of preterm labor • Improve knowledge of, belief in, and skills relevant to the prevention of harmful prenatal effects of violence, stress, smoking, substance abuse • Improve quality relationships with positive adult mentors • Improve young parent's support, including belief that support is beneficial; ability to recognize when support is needed; and knowledge and skills to find, access, and use support services | <ul style="list-style-type: none"> • Increase on-time receipt of appropriate prenatal care services • Increase appropriate physical activity and exercise • Increase eating a well-balanced diet, according to the American College of Obstetricians and Gynecologists (ACOG) guidelines • Decrease use of alcohol, tobacco, and other drugs | <ul style="list-style-type: none"> • <i>Goal 2A:</i> Increase healthy births |

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Goal #2: Improve Developmental Outcomes for Children of Young Mothers and Fathers

| Intervention Activities | Determinants | Behaviors | Goals |
|---|--|--|---|
| <ul style="list-style-type: none"> • Support for developing coping strategies for abuse and neglect • Classes for young parents to explore and become more knowledgeable about their own stress points, emotions, and how to articulate what they need from their partners and other people • Consultations with young mother her capacity emotionally and physically to breastfeed • Individual and group sessions to discuss and brainstorm importance of breastfeeding and learn how to breastfeed, and good health and child development practices • Knowledge of CPR, first aid, and when to call doctor for illness or injury • Observation of positive interactions with babies/toddlers at day care/child development center • Provision of infant/toddler care seats and instruction • Instruction on safe and developmentally appropriate playground use • Regular parent support groups for young mother and father to share, discuss, brainstorm and practice positive parenting strategies • Support and instruction on how to be their child's primary, best teacher • Comprehensive educational and vocational support • Parent literacy support and instruction that leads to economic self-sufficiency • Individual and group support to familiarize young parent with library and all its services • Support building a home library including provision of books and educational toys • Toy/book exchange program for young parents to learn and share with one another • Age-appropriate literacy education for the child(ren) • Instruction on infant/toddler play, games, toys, crafts, local trips, moms and tots groups, etc • Structured opportunities for positive social interaction with peers • Case management services • Home visits by a nurse or care provider • Mentoring activities • Transportation to support services, including for education and childcare • Connection to child care assistance programs, referrals to quality child care facilities, and/or quality school-based child care • Visits to various support services that are available for young families • Information/referrals for safe and stable housing • Medical health services • Mental health services, support, and counseling | <ul style="list-style-type: none"> • Improve recovery and coping strategies, as appropriate, from depression, abuse and/or neglect, multiple stressors • Improve knowledge of, belief in, and skills relevant to parenting, development, and attachment • Improve knowledge of, belief in, and skills relevant to breastfeeding • Improve knowledge of, belief in, and skills relevant to the importance of parent-child activities to promote physical, emotional, cognitive, and social development • Increase awareness of own child-rearing histories and own approach to parenting • Increased knowledge of, belief in, and skills relevant to preventing housing hazards for development • Improve knowledge of, belief in, and skills relevant to the importance of family literacy • Improve quality relationships with positive adult mentors • Improve young parent's support, including belief that support is beneficial; ability to recognize when support is needed; and knowledge and skills to find, access, and use support services | <ul style="list-style-type: none"> • Increase on-time receipt of appropriate health and child development services • Increase positive attachment using an infant mental health approach • Increase breast-feeding incidence and duration, as appropriate • Increase the number of children who reach school age without accidental injury • Increase incidence of family reading | <ul style="list-style-type: none"> • <i>Goal 2B:</i> Increase age-appropriate physical, emotional, cognitive, and social development, including readiness for school success |

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Goal #3: Improve Outcomes for Young Families

| Intervention Activities | Determinants | Behaviors | Goals |
|--|---|--|---|
| <ul style="list-style-type: none"> • Classes for young parents on infant and toddler play, games, toys, crafts, local trips, moms and tots groups, etc. • Classes for young parents on legal issues and the law • Classes for young parents to explore and become more knowledgeable about their own stress points, emotions, and how to articulate what they need from their partners and other supportive people • Individual and group counseling to focus on healthy relationships (couples counseling) • Individual and group sessions to discuss and brainstorm importance of positive parenting and appropriate disciplinary skills • Positive parenting skills (behavior management, discipline, and play time) practice, with in-home parent support person • Support for healing from any abuse and neglect in family of origin to construct positive parenting attitudes • Toy and book exchange program for young parents to share toys and learn from one another the benefit of playtime with their children • Regular parent support groups for young mother and father, lead by a parenting expert, whereby young parents can share, discuss and brainstorm parenting strategies that work for them • Structured opportunities for positive social interaction with peers • Case management services • Home visits by a nurse or care provider • Mentoring activities • Transportation to support services, including for education and childcare • Connection to child care assistance programs, referrals to quality child care facilities, and/or quality school-based child care • Visits to various support services that are available for young families • Information/referrals for safe and stable housing • Medical health services • Mental health services, support, and counseling | <ul style="list-style-type: none"> • Improve knowledge of legal issues and the law • Improve listening and communication skills and self-efficacy to use these skills • Improve negotiation and conflict resolution skills and self-efficacy to use these skills • Improve positive parenting skills, parent-child attachment skills, and self-efficacy to use these skills • Increase awareness of own child-rearing histories and understanding of own approach to parenting • Improve quality relationships with adult mentors • Improve young parent's support, including belief that support is beneficial; ability to recognize when support is needed; and knowledge and skills to find, access, and use support services | <ul style="list-style-type: none"> • Increase practice of good parenting skills | <ul style="list-style-type: none"> • <i>Goal 3A:</i> Increase incidence of appropriate discipline, of nurturing behavior, and of children who are well cared for |

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Goal #3: Improve Outcomes for Young Families

| Intervention Activities | Determinants | Behaviors | Goals |
|---|--|---|--|
| <ul style="list-style-type: none"> • Classes for young parents on legal issues and the law • Classes for young parents to explore and become more knowledgeable about their own stress points, emotions, and how to articulate what they need from their partners and other supportive people • Group discussions, brainstorming sessions, and individual sessions about healthy relationships • Individual and group counseling to focus on healthy relationships (couples counseling) • Individual and group sessions to discuss and brainstorm importance of positive parenting and appropriate disciplinary skills • Practice in healthy relationships skills, including listening, communication, and conflict resolution skills, in peer support group • Weekly parent support groups for young parent, led by a parenting expert, where young parents can share, discuss and brainstorm positive conflict resolution strategies that work for them • Structured opportunities for positive social interaction with peers • Case management services • Home visits by a nurse or care provider • Mentoring activities • Transportation to support services, including for education and childcare • Connection to child care assistance programs, referrals to quality child care facilities, and/or quality school-based child care • Visits to various support services that are available for young families • Screening for intimate partner violence • Information/referrals for safe and stable housing • Medical health services • Mental health services, support, and counseling | <ul style="list-style-type: none"> • Greater belief that peers and family support healthy relationships • Improve communication skills, including listening skills, and self-efficacy to use these skills • Improve knowledge of legal issues and the law • Improve knowledge/awareness of self-esteem and its link to good decision-making (Greater internal locus of control) • Improve negotiation and conflict resolution skills, and self-efficacy to use these skills • Increased knowledge of and positive attitude toward healthy relationships and interpersonal skills/Improve belief that s/he can be and deserves to be in a healthy relationships • Improve quality relationships with adult mentors • Improve young parent's support, including belief that support is beneficial; ability to recognize when support is needed; and knowledge and skills to find, access, and use support services | <ul style="list-style-type: none"> • Engage in healthy relationships with current/potential future partners, as well as peers and family • Cope with the challenges of parenting as an adolescent | <ul style="list-style-type: none"> • <i>Goal 3B:</i> Increase healthy relationships between the adolescent parent and her/his partner(s), peers, and family |

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