Introduction

Barre Family Health Center medical professionals and a clinician at Quabbin Regional High School (QRHS) report a rise in Barre teen pregnancy rates, which contrasts a state decline1. Additionally, QRHS does not provide sexual health education for students. Our project aims to increase sexual health awareness and improve sexual health education in hopes that these regional rates can mirror state decline.

Project Goals

Raise sexual health awareness in Quabbin Regional High School students in the hope that:

• Teen pregnancy and STI rates in Barre and surrounding communities will be reduced
• The partnership between Barre Family Health Center and Quabbin Regional High School will be strengthened to collaborate in administering a sexual health curriculum to students

Barre is a rural community in central Massachusetts with a population of 5,365. It is home to Barre Family Health Center, a facility that provides primary care and fosters other medical services to much of the community. Quabbin Regional High School educates students from Barre and four surrounding towns. Driving through the community revealed that the towns were sprawling with large distances between homes, a lack of businesses, few recreational activities and job opportunities, and no public transportation. In terms of adolescent access to reproductive health services, there is no sexual health education at QRHS and the nearest Planned Parenthood is approximately 30 minutes away.

Demographics

• White non-Hispanic population: 96.5% (MA: 78.6)2
• Per capita income: $20,476 (MA: $25,952)2
• Teen pregnancy and STI rates in Barre and surrounding towns have powerful effects on teen attitudes and behaviors, including risky sexual behaviors. These regional rates can mirror state decline.

Health Care Provider Survey Results

15 health care providers:

• 80% female, 20% male

Healthcare providers are more likely to have knowledge on sexual health and to have training in sexual health education and peer-to-peer teaching. However, little is known about their patients’ knowledge on sexual health. The largest barrier to providing for teens: Comfort level.

Home Visits with Teen Mothers

In addition to education and access, other factors need to be targeted, such as peer influences and media influences, which have powerful effects on teen attitudes.

• Trust in the patient-provider relationship is key to providing adequate health care (avoiding ageism and other judgmental behaviors is essential)

• For a collaborative effort amongst all adults (parents, health care providers, school faculty) in teens’ life to encourage healthy sexual practices and attitudes

Parent Survey Results: 61 respondents

Who do you think should be teaching teens about sexual health? Select all that apply.

Survey Results

Survey Conclusions

A large percentage of teens and parents would like to see sexual health education from educators and physicians. Currently, no classes at QRHS provide comprehensive sexual health curriculum and not all providers ask their teen patients about sexual health. It would be helpful to target these areas to improve delivery of health information. In addition, the largest percentage of parents and teens believe that group education would be best at the junior high level and discussions began in the home before the child was 13 years old. In implementing new curriculum, it would be best to focus on QRHS.

Collaboration with Quabbin Regional School

• 3 one hour sessions at QRHS during First Aid/Health class taught by Barre Family Health Center residents for approximately 1/3 of QRHS students in grades 9-12 between December and March

• 3 one hour sessions during Inquiry Skills Class for 9th grade students that has potential for collaboration with teacher who has training in sexual health education and peer-to-peer teaching

• Recruitment from QRHS and QRMS for Barre Family Health Center’s Girl Talk Curriculum that is designed as a discussion forum curriculum about various sexual health topics

Acknowledgments

We would like to thank Sue Begley, Dr. Cynthia Jeremiah, and Dr. Konstantinos Deliannidou for organizing and allowing us a meaningful and stimulating learning experience. We would also like to thank all of the Barre Family Health Center medical staff for allowing us to learn from them and being wonderful examples of dedicated and compassionate medical professionals. Thank you to Maureen Widing, the Quabbin Regional High School nurse and Quabbin Regional High School and Middle School principals Raymond Dewar and Suzanne Musnicki for their dedication to their students and willingness to allow us to be part of their collaboration. Thank you to Dr. Suzanne Cashman and Dr. Heather-Lyn Haley for organizing the Population Health Clerkships and enabling our growth.

References


Interprofessional Resources for Barre Adolescents

Red arrows indicate connections we aimed to strengthen.

Survey Results

If available, what teaching tools do you think would be helpful? Select all that apply.

Barriers

60% of BFHC physicians do not know if sexual health info is conveyed on insurance forms

If info is sent to the adolescents’ home

About half the time

More than half the time

Inquiry Skills Class for 9th grade students

• Teacher who has training in sexual health education and peer-to-peer teaching

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