



This is a monthly publication from Jennifer O'Brien, the Adolescent Health Coordinator at the Minnesota Department of Health (see contact information at the end of this publication). This E-Newsletter will cover adolescent health/ youth development related research, data, resources, learning and funding opportunities for interested professionals. Past issues of the newsletter are available online at: <http://www.health.state.mn.us/youth/>

July 2008

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Research

1. Runaway and Pregnant: Risk Factors Associated with Pregnancy in a National Sample of Runaway/Homeless Female Adolescents

Thompson SJ, Bender KA, Lewis CM, and Watkins R. Journal of Adolescent Health 43 (2008) 125–132

“Purpose: Homeless youth are at particularly high risk for teen pregnancy; research indicates as many as 20% of homeless young women become pregnant. These pregnant and homeless teens lack financial resources and adequate health care, resulting in increased risk for low– birth-weight babies and high infant mortality. This study investigated individual and family-level predictors of teen pregnancy among a national sample of runaway/homeless youth in order to better understand the needs of this vulnerable population.

Methods: Data from the Runaway/Homeless Youth Management Information System (RHY MIS) provided a national sample of youth seeking services at crisis shelters. A sub-sample of pregnant females and a random sub-sample (matched by age) of nonpregnant females comprised the study sample (N - 951). Chi-square and t tests identified differences between pregnant and nonpregnant runaway females; maximum likelihood logistic regression identified individual and family-level predictors of teen pregnancy.

Results: Teen pregnancy was associated with being an ethnic minority, dropping out of school, being away from home for longer periods of time, having a sexually transmitted disease, and feeling abandoned by one’s family. Family factors, such as living in a single parent household and experiencing emotional abuse by one’s mother, increased the odds of a teen being pregnant.

Conclusions: The complex problems associated with pregnant runaway/homeless teens create challenges for short-term shelter services. Suggestions are made for extending shelter services to include referrals and coordination with teen parenting programs and other systems of care.”

2. LOCAL RESEARCH! Family Meals and Substance Use: Is There a Long-Term Protective Association?

Eisenberg ME, Neumark-Sztainer D, Fulkerson JA, Story M. Journal of Adolescent Health 43 (2008) 151–156

“Purpose: To examine 5-year longitudinal associations between family meal patterns and subsequent substance use in adolescents.

Methods: A total of **806 Minnesota adolescents** were surveyed in public schools in 1998–1999 (mean age, 12.8 years) and again by mail in 2003–2004 (mean age, 17.2 years) as part of a longitudinal population-based study. Logistic regression was used to estimate the odds of tobacco, alcohol, and marijuana use at follow-up for adolescents reporting regular family meals at baseline compared with those without regular family meals, adjusting for family connectedness and prior substance use.

Results: Family meal frequency at baseline was associated with significantly lower odds of cigarette smoking, alcohol use, and marijuana use at follow-up among female adolescents, even after adjusting for baseline substance use and additional covariates. Family meals were not associated with use of any substance at follow-up for male adolescents after adjusting for baseline use.

Conclusions: Results from this study suggest that regular family meals in adolescence may have a long-term protective association with the development of substance use over 5 years among females. Parents should be encouraged to establish a pattern of regular family meals, as this activity may have long lasting benefits.”

3. NLAES Releases New Study: Early Drinking Initiation Related To Ever Using Illicit Drugs

The earlier a person begins drinking alcohol, the more likely they are to have ever used other drugs illicitly, according to an analysis of data from the National Longitudinal Alcohol Epidemiologic Survey (NLAES). Approximately one-half of persons who began drinking at age 14 or younger had also used other drugs illicitly in their lifetime, compared to around one-tenth of those who began drinking at age 20 or older. Even after controlling for relevant socio-demographic and substance use factors*, starting alcohol use at a younger age was the strongest independent predictor of ever using drugs illicitly. A similar relationship was found between age at first alcohol use and ever being drug dependent—persons who began drinking before age 14 were nearly three times more likely to have ever been drug dependent than those who began drinking after age 20 (data not shown). According to the authors, these findings “point to a need to further explore why people who start drinking at early ages . . . are more likely to use drugs and develop drug dependence” (p. 200).

*Factors controlled for were age, gender, race/ethnicity, education, marital status, cigarette use history, childhood depression, family history of alcoholism, and personal history of alcohol dependence.

NOTE: Among those who ever drank alcohol, 22% ever used illicit drugs. Of those, 39% began to drink at least 1 year before they started using drugs, 29% began both during the same year, and 32%% started drug use at least a year before they began drinking.

SOURCE: Adapted by CESAR from Hingson, R.W., Heeren, T., and Edwards, E.M. "Age at Drinking Onset, Alcohol Dependence, and Their Relation to Drug Use and Dependence, Driving Under the Influence of Drugs, and Motor-Vehicle Crash Involvement Because of Drugs," *Journal of Studies on Alcohol and Drugs* 69(2):192-201, 2008.

Resources

4. Federal Interagency Forum on Child and Family Statistics "America's Children in Brief: Key National Indicators of Well-Being, 2008" Is Now Available On-Line

The Federal Interagency Forum on Child and Family Statistics has released *America's Children in Brief: Key National Indicators of Well-Being, 2008*.

The annual report profiles the status of the nation's children and youth, presenting up-to-date federal statistics in one convenient reference. The National Center for Education Statistics in the Institute of Education Sciences is one of the 22 federal agencies that participate in the Forum and contribute to the report.

The report documents that mathematics and reading scores of fourth and eighth graders have increased, but shows as well that the adolescent birth rate and the proportion of infants born at low birth weight have also risen. The report also includes indicators on child poverty, health care, housing, and at-risk behavior.

You can view, download, and print the report at <http://www.childstats.gov/>

5. Building on Strength: Positive Youth Development in Juvenile Justice Programs

2008

William H. Barton, Jeffrey A. Butts

This report describes the results of an exploratory study of juvenile justice programs where managers and practitioners are attempting to build youth interventions with strength-based, positive youth development principles. Previous researchers have not adequately documented how such reforms take place, let alone whether they produce effective results for youth, families, and communities. When juvenile justice programs attempt to incorporate strength-based, positive youth development approaches in their work with young offenders, they will likely face resistance from their own staff and from key stakeholders. This study suggests that it is possible to implement these approaches in juvenile justice settings, but more research is needed to substantiate their effects.

< http://www.chapinhall.org/article_abstract.aspx?ar=1471 >

Conferences

6. From Research to Practice: Designing Youth-Friendly Reproductive Health Services

August 11, 2008, 1:00 - 5:00 p.m.
Rondo Community Outreach Library,
461 N Dale Street, St Paul, MN
\$30 MOAPPP Member/\$65 Non-member

This workshop is for health educators, family planning clinic staff and youth-serving professionals. Laura Davis, Advocates for Youth, Washington, DC, reviews the latest research on adolescent contraceptive use, addresses best practices for youth-friendly reproductive health services, explores ways to expand contraceptive and condom access for underserved teens, and provides information on replicable, evaluated programs. This program is offered in conjunction with the Minnesota Reproductive Health Update.

Attached is the Program flyer which is also available on the MOAPPP website at (<http://www.moapp.org/Documents/events/2008/Aug11Flyer.pdf>) or contact Jill Farris 651-644-1447 x18 or jill@moapp.org. Registration deadline is August 7.

7. 2008 Minnesota Reproductive Health Update, August 12, 2008, University of MN Continuing Education and Conference Center, St. Paul Campus

Cost \$115 with an additional \$10 if a participant is interested in Nursing or CHES contact hours.

Information and to Register go to <http://www.hcet.org/events/MNupdate08.htm>

8. Teen Pregnancy Prevention 101

9:00 a.m. – 3:00 p.m.

American Red Cross

1301 West Saint Germain, St. Cloud

This training is intended for professionals new to the field of teen pregnancy prevention. Participants will review the basics of teen pregnancy prevention including pregnancy, STI and birth statistics; trends in teen pregnancy and sexual behaviors; basics of adolescent growth and development; risk and protective factors associated with teen pregnancy; and prevention strategies that work. Each participant will leave with a basic understanding of current research and resources in teen pregnancy prevention, what to do to promote adolescent sexual health and where to go for more information and support. For more information and to register for this training visit, see the event flyer (http://www.moapp.org/Documents/events/2008/TPP101Flyer_sept08.pdf). For questions, contact Lorie Alvshere at 651-644-1447 x12 or lorie@moapp.org.

Grants (Please note: MDH is NOT a contact for the following opportunities)

9. Apply for the Youth of Color Initiative ... for organizations and institutions addressing HIV/STI among youth of color -- deadline Aug 1

Half of all new HIV infections in the United States occur in young people under age 25. Moreover, youth of color, in particular young African American/black and Latina/Hispanic women, are disproportionately affected by high rates of HIV and other sexually transmitted infections (STIs) in our communities. To prevent HIV/STI infection among our youth most at risk, Advocates for Youth established a Youth of Color Initiative.

Through the Youth of Color Initiative, community-based, minority, youth-serving organizations and institutions may receive strategic capacity building assistance, including publications and materials; written and electronic correspondence; telephone consultations; on-site training; and seed grants in the amount of \$8,000 to implement HIV/STI and teen pregnancy prevention projects, made possible through a cooperative agreement with the Centers for Disease Control and Prevention's Division of Adolescent and School Health. Services offered through this initiative are tailored to fit the needs of the individual organizations.

Learn more about the initiative and download the application:

<http://www.advocatesforyouth.org/about/yoc.htm>

<<http://www.advocatesforyouth.org/about/yoc.htm>>

The deadline is August 1, 2008, 5:00 p.m. EDT

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