



## Sexual and Reproductive Health: What DO Teenagers Want?

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## Objectives of This Talk

- To review the research on **what teens actually want** with respect to their reproductive health care
- To address aspects of the **adolescent mindset** relevant to their reproductive health
- To define **confidential care** for the adolescent



## Ask a Teen What They Want...

- Confidential care that is:
  - Highly effective
  - Easily accessible
  - Affordable (ideally free!)
  - Without judgement or punishment from family, health care providers, or staff.
  - Confidential
  - Takes into account their wants and needs



## Why Is Confidentiality Important to Adolescents?

- **18-30% of 13-17yo students did not seek needed health care due to concerns about privacy** (Klein. J Adoles Health 1999; 25: 120; Ford. JAMA 1999; 282: 2227)
- **50% of SA girls <18yo would NOT use the clinics if parental notification were made mandatory for prescription contraceptives** (Reddy. JAMA 2002; 288: 710; Jones JAMA 2005; 293: 340 )
- **10% would delay or not get tested/treated for STIs**

## Why Is Confidentiality Important to Adolescents?

- **1% of youth at a family planning clinic reported that they would stop having sex if parental involvement for reproductive health services were mandatory.**
- **20% of youth in this study said they would practice unsafe sex using withdrawal or lack of contraceptives IF parental notification were mandatory**
- **70% said THEIR PARENTS KNEW they were using the reproductive health clinic**

## Should Parents Have the Right to Know Everything?

“Restores parents’ ‘rights’”

“Parents’ rights >> teen’s rights”

BUT

-Teens seek repro health care more when offered CONFIDENTIAL CARE, with or without parental knowledge, with teen in charge of whether or not parent(s) aware.

## Establishing Confidentiality

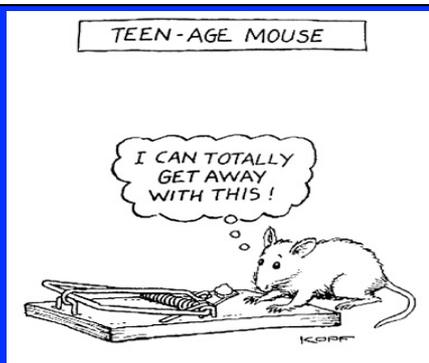
- Teens share the most information when confidentiality + *limits* of confidentiality are clearly defined (Ford et al. JAMA 1997; 278: 1029)
- “I will maintain confidentiality, that means I will not share your private information with your family, *unless* you tell me something life-threatening or dangerous, in which case I will tell you that I need to share that information with your parent(s).”

## With Teens: The HEADS Questions

- **H**ome: who lives at home? What happens when there is an argument at home?
- **E**ducation: what grade, how are grades
- **A**ctivities
- **D**rugs: cigs, drugs, alcohol/ Depression
- **S**ex: have they ever had sex? If so, what do they use for their 2 methods of contraception? Any prior STDs? Discharge, itching? Are they attracted to guys, girls, or both? Any abuse?

## The Art of Establishing Confidentiality

- Establish confidentiality early in the encounter
- USA: misconceptions about HIPAA (Health Insurance Portability and Accountability Act). HIPAA privacy rule created regulations guaranteeing adult patients access to their medical records. It did NOT create strong/uniform confidential protections for teens. And doesn’t override state rules.
- Bottom line: teen STI/preg data cannot be shared without teen’s consent

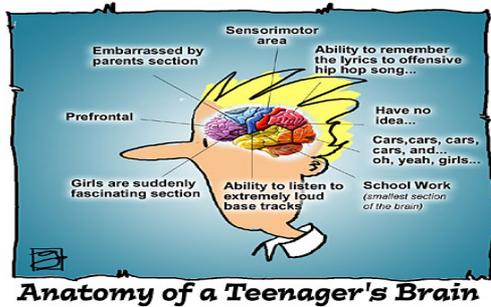


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## The Role of the Adolescent Mindset: Barriers to Care

- “It won’t happen to me”
- The Brittany Spears approach (“Oops I did it again!”)
- Planning it means you meant to have sex
- Didn’t learn about it in school...
- No access to contraception
- Can’t afford condoms/contraception

## Understand the Teen Brain



## What Do Pregnant Teens Want?

- Adolescent friendly waiting rooms and staff
- Interventions concretely targeted to THEIR needs (how to feed a child; where to go for safe help with childcare; help with getting diapers)
- 12 Belgian teen moms: want info not just on TAB but also on continuing pregnancy, effective contraception to avoid future pregnancies (Aujoulat. Patient Educ Couns 2010; 81: 448)

## Teens With HIV

- Zambian adolescents with HIV want basic information and access to **developmentally appropriate** reproductive health care.
- Participatory events **tailored to their needs**, were **welcoming, empowering and informative** about sustainable HIV services that would allow them to navigate safely through adolescence (Hodgson. AIDS Care 2012; 24: 1204)



## Surfing the Net: What Do Teens Want on the Web?

- 67 youth ages 16-22 years in UK focus groups:
  - Straightforward info on STIs, pregnancy, and the giving + receiving of sexual pleasure
  - Info on how to communicate with partner and emotions experienced during sexual activity + relationships
  - Wanted to see images/voices that reflected themselves and their own views and values (McCarthy. J Med Internet Res 2012; 14: e127)

## Surfing the Net (continued)

- Nonjudgmental information
- No medical jargon or slang
- Different levels of information, including:
  - How to approach first sexual contact
  - Negotiating condom use
  - Giving and receiving pleasure
  - Info on anal sex and fisting (not found in standard sexual education sites)
- BELIEVED that teens not ready for such info would not read them...

## Conclusions

- Set the rules regarding confidentiality and train staff appropriately.
- Obtain a contact number and/or email from the adolescent to aid in reporting of testing, billing issues, and other communication that the adolescent prefers to remain confidential.
- Whenever possible, help open the lines of communication between teen/parent

## Conclusions (continued)

- Speak in a way the adolescent can understand, without jargon
- Be respectful and non-judgmental.
- Facilitate collaborative decision-making.
- Respect the adolescent's growing autonomy.
- Nurture positive youth development.

