

## Agenda

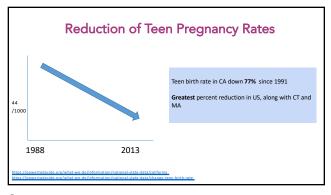
- Background on reproductive health and prevention of unintended pregnancy among foster youth
- Rights of youth in care
- Responsibilities of social workers and caregivers
- Senate Bill 89
- Supporting our Clients' Reproductive and Sexual Health
- Available Services in California
- Resources and additional information

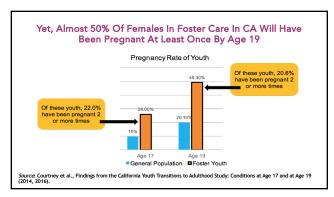
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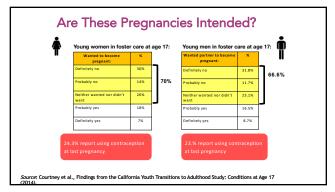
Reproductive and Sexual Health Disparities for Youth in Foster Care

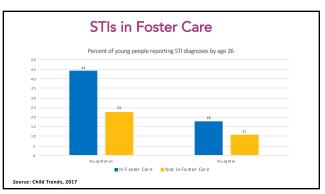
STAGE	FACTS
Early Adolescence	Puberty/concern with body changes and privacy
	Development of first crush
Females: 9-13 years old	Sexual fantasies common
Males: 11-15 years old	Sexual intercourse not common before age 13
Middle Adolescence	Increasing concern with appearance
	Peer influence strong
Females: 13-16 years old	<ul> <li>Dating/Experimentation with relationships and sexual behavior</li> </ul>
Males: 15-17 years old	common
	<ul> <li>Sexual behavior doesn't always match orientation</li> </ul>
Late Adolescence	Firmer and more cohesive sense of identity
	Ability to establish mutual trusting relationships
Females: 16-21 years old	More abstract thinking
Males: 17-21 years olds	

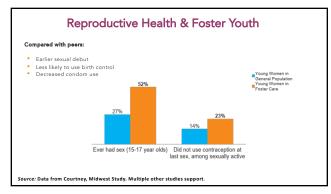
# California's Rich Network Of Sexual And Reproductive Health Information And Services Highlights: Mandatory comprehensive sexual health education in public middle and high schools Consent rights that allow adolescents who need care to confidentially access it A network of clinics, specially trained to address adolescent needs Public funding streams for sexual health services to ensure free access State agencies coordinating coverage, and Trustworthy information for teens and adult caregivers

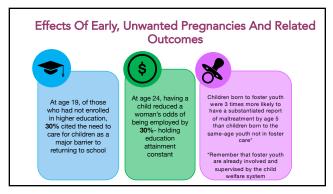


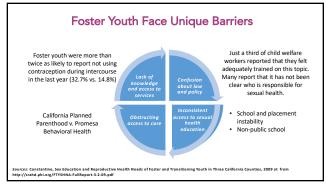






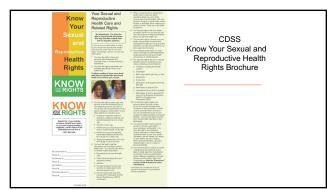






Rights of Youth in Care Related to Sexual and Reproductive Health

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## Reproductive Rights of all Youth in California

The right to  $\underline{\text{\bf consent to or decline medical }} care for:$ 



- The prevention or treatment of pregnancy, including contraception, at any age (except sterilization)
- 2. An abortion, at any age
- 3. Diagnosis and treatment of sexual assault, at any age
- age
  4. The prevention, diagnosis, and treatment of STIs and HIV, at age 12 or older

All rights are listed with legal and regulatory citations in ACL 16-82

What	Does	Right	To	Consent	Mean
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- •Youth can receive care without need for consent from a parent, caregiver, guardian, social worker, probation officer or the court.
- •The provider cannot require consent from anyone else but the youth.
- •The provider cannot provide the care without a youth's consent.

All children and youth in California have these rights – even yours!

Foster youth don't "lose them" when they become dependents

Minor Consent Sufficient	Parent/Guardian	Parent/Guardian	
		Notification Required	
Yes	No.		
Yes (except sterlization)	No (except sterfization)		
Yes!	No!		
Yes (minors ≥12 years)	Not needed for jminors ≥ 12 years	Not allowed without consent of minor	
Yos (minors ±12 years and assessed as competent to give informed consent)	Not Needed for minors ≥12 years, unless deemed incom- petent to consent		
Yes <sup>2</sup> (minors ≥12 years)	Yes (except <sup>2</sup> )	An attempt should be made, except when the provider believes it is inappropriate	
Yos (minora ≥12 years)	Not needed for minors a 12 years, except for methadone treatment <sup>1,3</sup>	Not allowed without consent of minor	
Yes (minors ≥12 years)	Not Needed¹ for minors ≥12 years		
Yes	No	An attempt must be made except when provider believes parent or guardian was resourceble.	
	Moor Consume Sufficient Visit 1988 Visit 1988 (except sterification) Visit 1988 Visit 1988 Visit 1988 (except sterification) Visit 1988 Visit 1988 (except sterification) Visit 1988 (except sterification) Visit 1988 (except sterification) Visit 1988 Visit 1988 (except sterification)	The Control Property Co	

See www.TeenHealthLaw.or

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## Reproductive Rights of all Youth in California



The right to patient <u>confidentiality</u> regarding reproductive and sexual health services and records unless there is written consent to disclosure or through court order.



\* Youth has a right to withhold consent to disclosure
The right to privacy for examination or treatment
by a medical provider, unless the youth specifically
requests otherwise.

All rights are listed with legal and regulatory citations in ACL 16-82

## Reproductive Rights of all Youth in California



#### What does the right to confidentiality mean?

- If youth receives reproductive and sexual health services and/or asks questions about sex, contraception or other related topics during a health appointment, the provider cannot share that information with the youth's parents, caregivers, group home, social worker, probation officer or others without the youth's written consent.
- Youth may ask their doctor before receiving care if the doctor will maintain confidentiality.

All rights are listed with legal and regulatory citations in ACL 16-82

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## Reproductive Rights of Foster Youth in California



The right to have access to age-appropriate, medically accurate <u>information</u> about

- reproductive and sexual health care,
- the prevention of unplanned pregnancy including abstinence and contraception,
- abortion care,
- pregnancy services, and
- the prevention, diagnosis, and treatment of STIs, including but not limited to the availability of the Human Papillomavirus (HPV) vaccination.

All rights are listed with legal and regulatory citations in ACL 16-82

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## Reproductive Rights of Foster Youth in California



The right to be provided with **transportation** to reproductive and sexual health related services.

\*Many reproductive health services are time-sensitive (e.g. emergency contraception, abortion); therefore, transportation must be provided in a timely manner in order to meet the requirement."



The right to obtain, possess and use the  $\underline{\text{\bf contraception}}$  of their choice, including condoms

 "Group home and short-term residential therapeutic program (STRTP) staff may not confiscate a youth's contraception as part of its disciplinary program."

All rights are listed with legal and regulatory citations in ACL 16-82

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Reproductive Rights of Foster Youth in California	
The right to have <u>private storage space</u> and to be free from unreasonable searches of his or her personal belongings.	
The right to receive medical services and to choose his or her own	
health care provider  The right to independently contact state agencies regarding violations of rightsto speak to representatives of these offices	
confidentially, and to be free from threats or punishment for making complaints	
All rights are listed with legal and regulatory citations in ACL 16-82	
LGBTQ and Gender Non-Conforming Youth	
Same rights as all other foster youth and NMDs.	
<ul> <li>Right to be placed and live in out-of-home care according to their gender identity regardless of gender or sex listed in their record</li> </ul>	
<ul> <li>Access to gender-affirming medical and behavioral health care</li> <li>Adequately trained caregivers and child welfare personnel</li> </ul>	
<ul> <li>Fair and equal access and freedom from harassment and discrimination</li> </ul>	
* ACIN 1-30-18 SB 731 Frequently Asked Questions	
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Obligations of Caseworkers	
and Caregivers to Support	

Healthy Sexual Development

Source: CDSS, A Guide for Case Managers: Assisting Foster Youth with Healthy Sexual Development and Pregnancy Prevention (2017); CDSS ACL 16-88; Welfare and Institutions Code 16501.1(g)(20),(21)

	Required	Res	ponsibilities	of ·	Casewor	kers
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- Inform youth of their rights upon entry into foster care and at least once every six months
  - "...ensuring the youth understands their rights based on their age and developmental level."

Provide <u>access</u> to age-appropriate medically-accurate, and culturally sensitive information about all of the following:



- Sexual development
- Reproductive and sexual health care
- The prevention of unplanned pregnancies
- Use of birth controlAbortion
- The prevention and treatment of sexually transmitted infections (STIs)

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## Required Responsibilities of Caseworkers



Inform foster youth of their right to  $\underline{\textbf{consent}}$  to sexual and reproductive health care



Ensure <u>barriers</u> to services are addressed in a timely and effective manner



Inform foster youth of their rights to  $\underline{\text{confidentiality}}$  and written consent prior to any disclosure(s)



Ensure youth are up-to-date on their annual medical



Ensure personal  $\underline{\text{biases}}$  and/or religious beliefs are not imposed upon foster youth

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## Addressing Barriers to Care

Some examples of typical barriers the youth have faced:

- · Youth is unaware of their insurance information or doesn't have a copy of his/her medical card
- Youth doesn't know how to schedule a sexual health doctor's appointment or is too embarrassed
- Youth doesn't have transportation to a medical appointment
- Youth reports that placement prohibits or confiscates contraception
- · Youth reports that placement refuses to let youth seek sexual health care at preferred provider
- · Regular care provider doesn't feel trustworthy to youth

Required	Responsibilities	of Resource	<b>Families</b>
	and STR	ГРѕ	





- Use Reasonable and Prudent Parent (RPP) standard to support the healthy sexual development of youth
- Assist the youth and/or NMD to access health services



- Communicate with the caseworker if referrals must be made or if they
- require assistance to access resources and services
   Maintain the youth's privacy and confidentiality



Direct youth to reliable sources of information



 Arrange for timely transportation to health-related services
 STRTPs must provide a locked storage container to all youth so they may store condoms, birth control, emergency contraception pills etc.

Source: CDSS ACL 16-88, California Plan to Address Unintended Pregnancy

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## Senate Bill 89 Effective 7/2017



Case Plan Provision: New requirements to document that certain activities have been completed.



**Training Provision:** New training requirements for social workers, caregivers and judges.

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### Case Plan Provision: Social Worker Documentation

Youth has received the required <u>comprehensive sexual health</u> <u>education</u> in school, at least once in middle school and at least once in high school

- Applies to youth 10 years of age or older and NMDs
- If the youth/NMD did not receive the instruction in school, that case plan shall document how the county will ensure that they receive the education



### Comprehensive Sexual Health Education In California Schools

California Health Youth Act (CHYA), enacted 1/1/16

15 Teaching Criteria (partial list below)

- Age appropriate
  Medically accurate and objective
  Affirmatively recognize that people have
  different sexual orientations
  Teach pupils about gender, gender
  expression, gender identity
  Accessibility for disabled youth
  Culturally sensitive and appropriate for
  all ethnic hackgrounds

- all ethnic backgrounds

16 Required Topics (partial list below)

- Nature of HIV
- Effectiveness and safety of all FDA approved methods that prevent or reduce the risk of contracting HIV and other STIs
- Objective discussion of all legally available pregnancy
- outcomes

  Sexual harassment, sexual assault, sexual abuse, and human trafficking

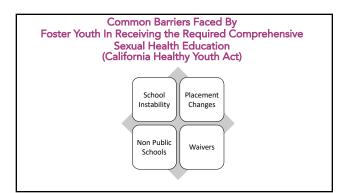
  Adolescent relationship abuse and
- intimate partner violence
   And more!





Full list of requirements: Chapter 5.6 of Part 28 of Division 4 of Title 2 of the Ed. Code

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# Child Welfare Worker Must Also Document That they have Informed youth 10 years and older and NMDs of: eir <u>risht to access</u> age-appropriate, medically accurate information about reproductive and sexual alth care. Their <u>right to consent to</u> sexual and reproductive health services and his or her confidentiality rights regarding those services. How to access reproductive and sexual health care services and facilitated access to that care including removing any barriers to care. uiring these activities have been completed to be documented in the case plan annually is:



## LA County: SB 89 Implementation Update

- Training for Social Workers began in July 2019
- FYI(1): Youth Reproductive Health and Pregnancy (0600-507.10)
   Revision Date: 02/04/19
   FYI (2): Implementation of senate bill 89 mandates part ii:
   improving access to sexual health education Issue 20-02; Issue Date 03/03/20
- 1726 Form Update
- Client Interview Survey

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Supporting Our Clients' Reproductive and Sexual Health Needs

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# Strategies to Support Reproductive Health Equity:

- 1. Knowledge : Comprehensive, accurate information from reliable sources.
- **2.** Access: Ensure that youth have access to tools and services that allow them to realize their decisions. Including identify and address barriers to care.
- Inspire Motivation: Motivation to make healthy decisions is tied to the ability to envision a bright future. Talk to youth about their vision and plan for the future.
- 4. Foster Relationships: Encourage them to speak with a trusted adult.

	-
Motivation: Support Planning for the Future	
<ul> <li>Talk to youth about their plans for their future</li> </ul>	
♦ Let them know you believe in them	
Questions to provide support:	
What do you want to do when you grow up?	
How can we make your dream a reality?	
What supports and services are in place to maintain stability in the youth's placement, education, and extra curricular activities to help them achieve their goals?	
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	_
Trusted Adults	
irusted Addits	
<ul> <li>Encourage youth to speak to a trusted adult</li> </ul>	
Who is the youth's trusted adult? If they can't identify one, what steps can be taken to identify one?	
What is your role?	
<ul> <li>Assume that no one else is talking to them about sexual health</li> </ul>	
<ul> <li>It's never too early to start a conversation about sex and relationships</li> </ul>	
<ul> <li>Have an open door for questions and conversations</li> <li>Be inclusive and affirming – over representation of LGBTQ youth in</li> </ul>	
out of home care	
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<del>1</del> 1	
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Having Sensitive Conversations with Youth	

## Keeping it Real...and Professional

- You can be yourself and still maintain professional boundaries
- You can build rapport without self disclosure
- Usually questions about your personal history are deeper values questions
- Get at the question behind the question
- If you are unsure about blurring boundaries, consult with supervisor or other staff

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## Shutting it down vs. Opening it up

- Our first responses to a client's comments can influence how that conversation will go, and whether there will be future conversations
- Is your first response usually a door opener or a door slammer?



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## **Door Slammers**

- Non-verbal:
- Looking disgusted, shocked, anxious
   Backing up, rolling eyes, avoiding eye contact
- Brushing off the question
- · Making snap judgements, criticizing
- Promising to answer later but never following up
- Examples of door slammers:
  - "That's gross!"
  - "I don't want to talk about that"
  - "That's inappropriate!"
  - "we are not here to talk about me"
  - "That is none of your business"



## **Door Openers**

- Non-verbal:
  - Looking calm, giving your full attention
  - Nodding, finding a quiet space
- Thank them for coming to you
- · Ask clarifying questions
- Respect their beliefs
- Answer factual questions simply with accurate information- if you don't know the answer, say so
- Summarize and encourage more discussion
- Use inclusive language, avoid heterosexual assumptions

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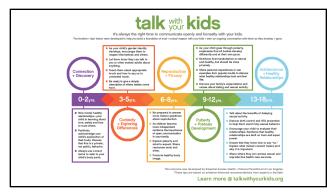
- What do you think?
- That's a good question
- Tell me what you know about that
- Do you know what that word means?
- Let's look that up online!
- Help me understand what you are feeling
- I'm really glad you told me about that
- I hope that answers your questions, please let me know if you need any more information
- A lot of people have this question...
- · What do you know about this?

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# Communicating with Youth from Youths' Perspective



- $\ensuremath{ \diamondsuit }$  Be inclusive and not gendered in how you ask questions
  - For example, "are you in a relationship?" instead of "do you have a boyfriend?"
- Look calm and give us your full attention
- $\begin{tabular}{l} $\diamondsuit$ Watch physical cues for signs of anxiety or stress \\ \end{tabular}$
- $\ \ \, \ \ \, \ \ \,$  Don't assume we are all sexually active and don't assume we are not
- $\ \ \, \ \ \, \ \ \,$  Some of us may have already experienced something nonconsensual
- $\ \ \, \ \ \,$  Don't set a lower bar for us just because we are in foster care
- ♦ Make sure there are no language barriers. Did youth really understand?









Available Services in California

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## Medi-CAL



- Medi-Cal covers the following services for teens for no copays):
  - oBirth control
  - $\circ \text{STD testing}$
  - $\circ \textbf{Pregnancy testing}$
  - oPrenatal care
  - oAbortion services

https://www.dhcs.ca.gov/

## **Family PACT**

Famil PACT

- Family PACT provides no-cost family planning services to men, women and teens. Some of the services include:
  - o Family planning counseling

  - Birth Control methods
     STI testing and treatment
     Pregnancy testing and counseling
- You are eligible if...
  - o You have no medical insurance
  - $\circ$  You have insurance, but it doesn't cover birth control or
  - o You have insurance but you haven't met your deductible
  - You have insurance or Medi-Cal, but you need to keep family planning services confidential





## Where To Find Services And Clinic Referrals?

In addition to a youth's own Medi-Cal provider, there are over 2,200 public and private clinics, health centers, and providers across the state with FamilyPACT and Title X funding to support access to free confidential sexual and reproductive health care and information for adolescents.

## www.TeenSource.org



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## <u>Be Aware</u> Before Making a Referral to an Unknown Clinic:

- Does this clinic provide a full range of contraception options to patients?
- · Are the providers licensed medical professionals?
- · Is this clinic part of Medi-Cal or FamilyPACT?
- · How do they discuss pregnancy options?
- Do they provide services to LGBTQ youth?



## **Condom Access Project**

- Free CONDOMS for teens through Condom Access Project via
- Condoms will be sent to the house or you can find out pick up
- Package includes condoms, lube and information





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#### **Resources for Professionals**

- LA RHEP: www.fosterreprohealth.org
- National Council of Juvenile and Family Court Judges, <a href="www.ncifci.org"><u>www.ncifci.org</u></a> (775) 784-6012
  - "When You Decide," A Judge's Guide to Pregnancy Prevention Among Foster Youth (includes checklists)
  - Critical Judgment: How Juvenile and Family Court Judges Can Help Prevent Teen and Unwanted Pregnancy
  - $\bullet \ \ \text{Ten Things Every Juvenile Court Judge Should Know About Trauma and Delinquency}$
- Public Health Institute, www.phi.org (510) 285-5500
- Sex Education and Reproductive Health Needs of Foster and Transitioning Youth in Three California Counties
- No Time for Complacency, Sexual Health Needs of California's Foster and and Transitioning Youth, Spring 2009

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## **Resources for Professionals**

- California Adolescent Health Collaborative (a PHI project), www.californiateenhealth.org. (510) 285-5712
  Promoting the Sexual and Reproductive Health of Adolescents in Foster Care
  National Center for Youth Law, www.outh

- http://www.cdss.ca.gov/inforesources/Foster-Care/Healthy-Sexual-Develop

  L.A. County Department of Public Health

  An Epidemiologic Profile of HIV and AIDS in Los Angeles County 2009,
  - http://publichealth.lacounty.gov/hiv
    Los Angeles County Sexually Transmitted Disease Morbidity Report, 2010, http://publichealth.lacounty.gov/std/reports

Resources	or Parents and	Caregivers

- LA RHEP: www.fosterreprohealth.org
- The National Campaign to Prevent Teen and Unplanned Pregnancy, <a href="www.thenationalcampaign.org">www.thenationalcampaign.org</a> (202) 478-8500
  - 10 Tips for Foster Parents to Help Their Foster Youth Avoid Teen Pregnancy
- Children Now, Talking with Kids About Tough Issues, www.childrennow.org/index.php/learn/talking with kids (510) 763-244
- California Department of Social Services, Resources for Caregivers, http://www.cdss.ca.gov/inforesources/Foster-Care/Healthy-Sexual-
- TalkWithYourKids.org for caring adults (Essential Health Access)

#### **Resources for Youth**

- Teen Source, <a href="http://teensource.org">http://teensource.org</a>
  Planned Parenthood, <a href="http://www.plannedparenthood.org">http://www.plannedparenthood.org</a>
  Planned Parenthood, <a href="http://www.sevetc.org">http://www.sevetc.org</a>
  Sex Etc. (by teens for teens), <a href="http://www.sevetc.org">http://www.sevetc.org</a>
  It dests Better Project (for GBTQ youth), <a href="http://www.sevetc.org">http://www.sevetc.org</a>
  Go Ask Alice (Columbia University), <a href="http://www.sevetc.org">http://www.sevetc.org</a>
  Hitching Ask Alice (Columbia University), <a href="http://www.sevetc.org">http://www.sevetc.org</a>
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- Www.hedsider.org
  LA County STD Hotline, 800-758-0880
  Text CLINIC +your zip code to 61827 to find clinics near u
  CDSS Know Your Sexual and Reproductive Health Care Rights,

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## Questions?

#### Contact:

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