Opportunities and Strategies for Engaging Families and Key Stakeholders in Teen Pregnancy Prevention Efforts: Latino Communities in Texas as Critical Partners

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It’s Time for Texas: Moving Teen Pregnancy Strategy Forward
San Antonio, Texas
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Overview

I. Progress and opportunities for teen pregnancy prevention in Texas

II. Making a case for adolescent health in Texas

III. Innovations for teen pregnancy prevention
   • New approaches
   • Implementation science
   • Community collaboration and academic partnerships
• There are roughly 54 million* Latinos living in the U.S.

• Latinos comprise approximately 17% of the nation’s total population.

* Documented by U.S. Census Bureau in 2013.
• Latinos comprise a growing proportion of the U.S. population.

• Latinos are projected to make up approximately a quarter of the U.S. population by 2040 and comprise an estimated 106 million people by 2050.

Drivers of Latino Population Growth in the U.S.

Increase of approximately **2.5 million** Latinos

- Between 2010 and 2012, the Latino population grew **5.8%** while the overall population grew by **1.7%**.

# Latinos: A Young Population

Latinos are younger than the general U.S. population.

<table>
<thead>
<tr>
<th>Median age of Latinos: 27 years</th>
<th>Median age of overall population: 37 years</th>
</tr>
</thead>
</table>

However, Latino subgroups vary in their median ages:

- Mexicans: 25 years
- Guatemalans: 27 years
- Puerto Ricans: 28 years
- Cubans: 40 years

- Mexicans are the youngest Latino subgroup with a median age of 25 years.

Source: Pew Research Center, Hispanic Trends, 2012
Latino Adolescents: A Growing Population

• In the U.S., more than 1 out of 5 adolescents (ages 10-19) is Latino.

The Latino population is large, young and rapidly growing in the United States.
Geographic Distribution of Latinos in the U.S.

- The Latino population is primarily concentrated in 5 U.S. states.

<table>
<thead>
<tr>
<th>State</th>
<th># of Latinos (2011)</th>
<th>% of U.S. Latino Population (2011)</th>
</tr>
</thead>
<tbody>
<tr>
<td>California</td>
<td>14,358,393</td>
<td>27.7%</td>
</tr>
<tr>
<td>Texas</td>
<td>9,794,237</td>
<td>18.9%</td>
</tr>
<tr>
<td>Florida</td>
<td>4,353,748</td>
<td>8.4%</td>
</tr>
<tr>
<td>New York</td>
<td>3,497,332</td>
<td>6.7%</td>
</tr>
<tr>
<td>Illinois</td>
<td>2,077,841</td>
<td>4.0%</td>
</tr>
</tbody>
</table>

California and Texas account for **nearly half** of the Latino population in the U.S.

Sources: Pew Research Hispanic Center 2011 American Community Survey.; U.S. Census Bureau, 2013 American Community Survey.
Internal Movement of the Latino Population

States with greatest growth between 2000-2010: Alabama, South Carolina, Tennessee, Kentucky and Georgia.

- Fast Growth (≥75%)
- Slow Growth (<75%)
- < 1,000 Latinos in 2010

Sources: Pew Research Hispanic Center 2011 American Community Survey.; U.S. Census Bureau, 2013 American Community Survey.
The Latino Population in Texas

Texas Racial Demographics

- Latino, 44%
- White, 38%
- Black, 12%
- Asian, 4%
- Other, 2%

Total: 26,505,637

Median Age

<table>
<thead>
<tr>
<th>U.S.</th>
<th>Texas</th>
<th>Latinos in Texas</th>
</tr>
</thead>
<tbody>
<tr>
<td>37</td>
<td>34</td>
<td>27</td>
</tr>
</tbody>
</table>

Texas has a large Latino population (approximately 10 million) that is younger and more likely to be economically disadvantaged.

Sources: U.S. Census Bureau: State and County QuickFacts. Data derived from Population Estimates, American Community Survey, Census of Population and Housing, State and County Housing Unit Estimates, County Business Patterns, Nonemployer Statistics, Economic Census, Survey of Business Owners, Building Permits
Last Revised: Tuesday, 31-Mar-2015 15:14:14 EDT
The population pyramids highlight the young Latino population and their projected growth due to large numbers under the age of 30.

- Latinos are expected to comprise the majority of the Texas population within the next decade.

Figures from Hobby Center for Public Policy. University of Houston. Houston, Texas

Sources: Hobby Center for Public Policy. University of Houston. Houston, Texas
# Teen Pregnancy in Texas

- Teen pregnancy and birth rates are at **historic lows**, with dramatic declines nationally and in Texas.

- Despite declines, Texas remains disproportionately impacted by teen pregnancy.
  - Teen birth rates declined **52%** from 1991 to 2012 nationally, but declined **43%** in Texas.
  - Disparate progress may be attributed to several social, political and contextual factors that characterize Texas and its diverse array of both metropolitan and rural areas.

<table>
<thead>
<tr>
<th></th>
<th>Teen pregnancy rate*</th>
<th>% change from 2008</th>
<th>Teen birth rate*</th>
<th>% change from 2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>U.S.</td>
<td>57</td>
<td>-13%</td>
<td>27</td>
<td>-11%</td>
</tr>
<tr>
<td>Texas</td>
<td>73</td>
<td>-14%</td>
<td>41</td>
<td>-8%</td>
</tr>
</tbody>
</table>

*per 1,000 girls 15-19 years; pregnancy rates are from 2010; birth rates are from 2013

A Closer Look: Latino Teen Pregnancy in Texas

- More than half (64%) of teen births in Texas occur among Latino teens.
- Latinos are disproportionately impacted by teen pregnancy in Texas and have experienced slower declines than other racial/ethnic groups in birth rates from the peak in 1992.

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Teen Pregnancy Rate*</th>
<th>Teen Birth Rate*</th>
<th>% Change in birth rate from peak year (1992)</th>
<th>Number of Teen Births</th>
</tr>
</thead>
<tbody>
<tr>
<td>Texas Overall</td>
<td>73</td>
<td>41</td>
<td>-48%</td>
<td>37,525</td>
</tr>
<tr>
<td>Latinos</td>
<td>98</td>
<td>62</td>
<td>-43%</td>
<td>24,166</td>
</tr>
<tr>
<td>Whites</td>
<td>45</td>
<td>26</td>
<td>-47%</td>
<td>8,065</td>
</tr>
<tr>
<td>Blacks</td>
<td>82</td>
<td>44</td>
<td>-63%</td>
<td>4,957</td>
</tr>
</tbody>
</table>

*per 1,000 girls 15-19 years; pregnancy rates are from 2010; birth rates are from 2013

Youth Along the Texas-Mexico Border

In the Rio Grande Valley (RGV) Texas Border area, youth face additional social, economic, political and environmental challenges which contribute to a context of high teen sexual risk.

- 400,00 youth in the RGV are under age 18.
- Latinos comprise 87-97% of the RGV population
- 40% of the population report not having health care coverage.

The RGV is a medically underserved area with a shortage of health and social welfare professionals.

There has been less emphasis on border communities in teen pregnancy prevention.

Teen Birth Rates by County (per 1,000 females ages 15-19 years) (2012)

The Texas Latino population is large and younger than the overall population—Latino teen pregnancy remains a key issue.
Making a Case for Adolescent Health
Global Distribution of Young People (Age 10-24)

- 1.8 billion young people in the world (1.2 billion teens) more than ever before.
- 27% of the world’s population, 90% live in low-middle income countries (LMIC), where barriers to health and social welfare access are complex.

Major Frameworks for Adolescent Health

1) **Life course** - childhood development, teen biological/social changes
2) **Social determinants of health** - ecological factors - economic, policy, etc.
3) **Risk and protective factors** - individual, family, peer, community factors

Complex interaction of three frameworks in adolescence impacts uptake of health-related behaviors & contributes to disparities in teen health outcomes

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Sawyer et al., Lancet 2012, 379, 1630-1640.
Health Risk Behaviors Emerge During Adolescence

- Health-risk behaviors that contribute to the leading causes of **morbidity** and **mortality** among youth and adults are often established during **adolescence**.

**Priority health-risk behaviors among adolescents (according to CDC):**

- Behaviors that contribute to unintentional injuries and violence
- Tobacco use
- Alcohol and other drug use
- Sexual behaviors that contribute to unintended pregnancy, STDs, HIV
- Unhealthy dietary behaviors
- Physical inactivity

- These behaviors often extend into adulthood, but are **preventable**.

The Importance of Adolescent Prevention Efforts

1/3 of the total disease burden in adults and nearly 70% of premature deaths is associated with processes that begin in adolescence.

<table>
<thead>
<tr>
<th>Morbidity</th>
<th>% prevalence among Latinos</th>
</tr>
</thead>
<tbody>
<tr>
<td>Major Illnesses</td>
<td></td>
</tr>
<tr>
<td>Obesity a</td>
<td>31.9%</td>
</tr>
<tr>
<td>Diabetes b</td>
<td>11.8%</td>
</tr>
<tr>
<td>Depression c</td>
<td>11.7%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Mortality</th>
<th>% of total Latino Deaths, 2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Leading Causes</td>
<td></td>
</tr>
<tr>
<td>of Death</td>
<td></td>
</tr>
<tr>
<td>Cancer a</td>
<td>21.1%</td>
</tr>
<tr>
<td>Heart Disease b</td>
<td>20.9%</td>
</tr>
<tr>
<td>Intentional &amp;</td>
<td>10.5%</td>
</tr>
<tr>
<td>Unintentional</td>
<td></td>
</tr>
<tr>
<td>Injuries c</td>
<td></td>
</tr>
</tbody>
</table>

*a Obesity: BMI>30, among people over 20 years old. b Diabetes: Type 1 and 2, among people over 20 years old. c Depression: Includes the DSM-IV category Depressive Disorder, Not Otherwise Specified, persons with "other depression" also might meet criteria for the category Dysthymia.*

*a Cancer includes oral, mouth, lip, breast, skin, etc., b Heart disease includes hypertension, pulmonary heart disease, disease of arteries, and cerebrovascular disease.; c Unintentional/intentional injuries include suicide, homicides, and accidents from transport and mechanical.*

A Compelling Case for Latino Adolescent Health & Social Welfare

- Contribution of adolescence to overall population health been underestimated.

The Case for Investing in Latino Youth in Texas:

Second Critical Period in Development
- Opportunity to correct early life disadvantage or modify childhood trajectories towards health\(^1\).

Demographic Dividend & Future Economic Growth
- A significant and increasing proportion of the overall Latino population are young people able to work\(^2\).
- The youth labor force (ages 16-24) is growing in the U.S., and 56.2% of Hispanic youth (ages 16-24) were employed in July 2014, shaping country level socioeconomic development.
- Economic potential is dependent on investment in the health & education of future Latino working population, youth\(^3\).

Latino prevention programs should adopt life-course approach with emphasis on adolescent years.

Economic Well-being Among Latino Youth

Demographic dividend and economic growth: When youth are in school or are participating in the labor market, they contribute to the nation’s economic opportunity.

Approximately 9% (133,000) of Texas teens ages 16-19 were not attending school and not working.*

10% of Latino teens (68,000) were not going to school or not working compared to 7% of Non-Hispanic White teens.*

Disconnected youth** (ages 16-24) contribute to an estimated fiscal burden*** of $93.7 billion annually.

** Refers to youth ages 16-24 who are not in school or participating in the labor market.  
*** Refers to lost taxes and higher government spending.

Texas teen childbearing—one of the leading causes of high school dropout—had associated costs of an estimated $1.1 billion in 2010.****

****Based on analyses from the National Campaign to Prevent Teen and Unplanned Pregnancy, 2014.

The overall well-being of Latino adolescents has significant implications for the economic well-being and overall future of Texas.
Current Approaches & Innovations for Teen Pregnancy Prevention
Approaches to Teen Pregnancy Prevention

- Dominant approaches to teen pregnancy prevention focus on teens directly.
- However, health risk among youth occurs in a context in which multiple influences shape behavior and outcomes.

- Targeted efforts in disadvantaged areas are most in need of teen pregnancy prevention programs.
- To facilitate reductions in teen pregnancy and births, novel strategies that extend current approaches are warranted.
Innovations for Teen Pregnancy Prevention

Innovation 1: The use of tailoring versus targeting: One size does not fit all, even for supposedly “homogeneous” groups.

Targeted interventions are customized to the unique characteristics of groups of individuals, such as Latinos or females.

- There is substantial heterogeneity within traditionally targeted subgroups (e.g. Latinos).
- Homogenization can obscure important within-group differences.

Tailored interventions are customized to the unique characteristics of a specific individual.

- More effective than uniformly administered interventions.
- Tailored interventions can adapt to value systems and circumstances.
Identify Modifiable Variables that Impact Adolescent Sexual Decision Making

A Unified Theory of Behavior:
- Can be applied to any behavior at any point in an adolescent’s developmental sequence
- Can be used to think about strategies for outreaching to either adults or adolescents
- Focuses on constructs that are malleable
- Is a synthesis of literally thousands of studies grounded in major research traditions in the social and health sciences
Innovations for Teen Pregnancy Prevention

Innovation 2: Address parent-adolescent dyads, not just adolescents

- Widely recognized is that parents can have a substantial impact on adolescent behavior.

- While peers are important, peer networks change dramatically over time.

Sustainability

- Parents are a “constant” in adolescents’ life.

- “Exposures” to school based interventions in classrooms end after completion of the program. When parents are taught how to communicate, monitor and supervise their children, “intervention exposures” are ongoing and sustained through adolescence.
Parents as the “Glue” for Adolescents

• Parents are the “glue” that link their adolescents to the settings in which interventions are often delivered. Parents are also a key common element in each setting.

• Parents impact the participation and interaction of youth in school activities, health care settings, community organizations, etc. where interventions are implemented.

*Teen pregnancy prevention approaches that target parents take into account both adolescents and their all-important family contexts.*
Innovations for Teen Pregnancy Prevention

Innovation 3: *Use both positive youth development (PYD) and positive family development (PFD) strategies*

- **Positive Youth Development** (PYD) strategies can be enhanced, and prior research suggests that PYD-like constructs account for only about 35% of the variation in adolescent problem behaviors.\(^1\)

Integration of **Positive Family Development Strategies**

- Strategies that parents can use to establish, build upon, and maintain strong family bonds with their adolescents (independent of parenting with respect to sexual risks) are also important.

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Parenting Variables that Shape Behavior

- Variables consistently found to affect sexual risk behaviors:
  - Motivate parents to talk
  - Support parent-adolescent communication with specific content and delivery strategies
  - Provide specific guidance to parents on monitoring and supervision practices
  - Overall relationship quality is likely to encourage behavioral expectations set for the teen—emphasize key parental characteristics for higher relationship quality
Innovations for Teen Pregnancy Prevention

Innovation 4: Engage a systems approach to adolescent settings

- Teen pregnancy prevention efforts should examine the interactions and connections between component parts such as schools, clinic and community organizations that offer programs.
  - Questions to ask: How are the adolescent settings interconnected and how do they interact with one another?
    - How does one setting/system depend on the other?
    - What are the functions of each setting/system and what processes take place in the system to support optimal reductions in teen pregnancy rates?

A system is an organized entity whose interrelated elements interact with one another to achieve one of more common goals.

Systems theory uses a holistic approach rather than a reductionist approach, emphasizing both process and causal analysis.

Insufficient to work in settings independent of one another.
Engaging Systems to Mobilize for Teen Pregnancy Prevention

Systems Theory:

• System elements accomplish their work through specific set of functions, structures and capacities aimed at common goal
• Changes within a system are often bi-directional
• Well-functioning systems pay attention to nurturing and sustaining acts of cooperation and collaboration among all levels of stakeholders
• Systems achieve their desired outcomes when they are held accountable for performance both at element level and for performance of the overall system
• Effective “governance” structures in any system must be flexible and responsive to uncertainty, change and diversity within the system and its context

Through this lens, we can build reciprocity between system settings, coordinate and sustain “governance” structure within and across settings, and mobilize settings for targeted teen pregnancy prevention outcomes
Innovations for Teen Pregnancy Prevention

Innovation 5: Involve fathers in teen pregnancy prevention interventions

- Parent-based teen pregnancy prevention programs have almost exclusively focused on mothers.
- Fathers have a unique contributing in supporting their adolescents in sexual decision making.

- Increased father-adolescent communication about sex increased adolescent protective behaviors, and increased father involvement was associated with a decrease in sexual risk behaviors.
The Unique Role of Fathers

- Fathers have a unique contribution in supporting their adolescent sons and daughters in sexual decision-making, which has not be fully harnessed in previous research or prevention programs.

- Efforts to help fathers talk to their teens about sex and pregnancy can enhance extant teen pregnancy prevention efforts.

“I try to stay connected to my teenage son. I check up on him, I give his mom child support money, but he is starting to get into some trouble...”

Sometimes fathers wonder whether they can make a difference in the decisions and behaviors of their adolescent sons. The above quote is an example of a common concern expressed by the father of a 16-year old boy who just started having sex.

Many fathers may be unsure about how to help their adolescent sons address the challenges teens may face. Often, fathers think that providing for their sons financially is enough to keep them safe and healthy. When they learn that this is not the case, they may have questions about their father-son relationships, discipline, role as a father, and how to help their adolescent sons avoid unplanned pregnancy.

There is a lack of programs targeted specifically for boys to prevent teen and unplanned pregnancy, and boys may need guidance on this issue. Fathers Raising Responsible Men helps answer these questions and provides specific strategies and guidance to help fathers talk with their adolescent sons about ways to avoid teen pregnancy.
Innovations for Teen Pregnancy Prevention

Innovation 6: *Incorporation of a digital presence*

- An important aspect for scale-up of interventions is to create a digital present through the use of online & mobile technologies (OMTs).

- On-line access has changed dramatically over the past 10 years for economically disadvantaged populations.

- Studies have found that the percentage of homes with computers connected to the internet for resource limited Latino and African American families is about 70%—a rate that grows with each passing year.

### Advantages of OMT materials

- materials are available 24-7 from any location
- materials can be accessed multiple times over extended periods of time
- materials can utilize multiple media platforms (videos, text) that have interactive formats
- materials can be tailored to the individual characteristics of the users
- there is no need for training of staff to administer the materials
- program fidelity is, for all intents and purposes, assured (because it is computer controlled)
- the computer programs can be easily and centrally updated to reflect changing times and knowledge
Innovations for Teen Pregnancy Prevention

Innovation 7: Repeat pregnancy as a key target

- About 1 in 5 adolescent pregnancies are repeat pregnancies.
- Texas leads the nation in repeat teen births with 22% of U.S. repeat pregnancies occurring in Texas.
- Teens experiencing a teen pregnancy/birth are thus a key target subgroup for reducing unplanned adolescent pregnancies.
  - Limited prevention efforts have been aimed at this population.

Repeat Births in Numbers

There were **68,800** repeat births to teens in 2010

- **57,200** were 2\(^{nd}\) births
- **8,400** were 3\(^{rd}\) births
- **1,200** were 4\(^{th}\) births or higher

- Latino teens are about 1.5 times more likely to have a repeat teen birth than White teens.
- Only about 1 in 5 (22%) sexually active teen mothers use most effective forms of birth control.

As youth transition to late adolescence and become more sexually active, they often stop using condoms and adopt more effective contraception (i.e., pill or injections). No protection against STIs—which disproportionately impact sexually active youth. Need for a holistic approach to sexual health with emphasis on dual use for older sexually active adolescents as well as the development of healthy adolescent dating relationships.
Multipurpose Prevention Technologies

Multipurpose Prevention Technologies (MPTs) are new methods in development that combine family planning, HIV & STI prevention.

- **86 Million Unplanned Pregnancies Around the World Every Year**
- **Every 60 Seconds A Young Woman is Infected with HIV**
- **1 Million People Contract An STI Every Day**

**Women Need Better Protection**

**FOR WOMEN’S HEALTH**

- HIV Prevention
- STI Prevention
- Contraception

- Easy to Use
- Efficient
- Female Initiated

**Support MPT Research**

Source: PHI’s Coalition for Advancing Multipurpose Innovations (CAMI)
Innovations for Teen Pregnancy Prevention

Innovation 9: Documentation of implementation costs

- In 2011, teen pregnancy and childbirth cost an estimated $9.4 billion in costs to U.S. taxpayers.
- Teen pregnancy prevention interventions must be realistic and cost efficient.
- By documenting costs of program implementation, developing a taxonomy of challenges and obstacles to implementation, and evolving practical strategies to overcome each challenge, we can more efficiently implement strategies to reduce teen pregnancy.

Help stakeholders by:

1. **Communicating** clearly to them what is involved in the intervention and what they need to do.
2. **Motivating** them to engage in prescribed activities and sustaining motivation over time.
3. **Facilitating** performance of the activities by helping relevant constituencies plan for and manage obstacles that arise.
By engaging an intervention evaluation strategy that uses the logic of a randomized explanatory trial, we can identify how specific mediators map onto a specific program component to impact the outcome.

Randomized explanatory trials identify which specific program facets worked and which need to be reworked and improved in terms of impacting the mediator they targeted.

- Paths a through c inform us whether a given program component that addressed a given mediator does have an impact on that mediator.
- Paths d through f tell us if our working assumptions about the importance of each mediator are, in fact, correct.
Innovations for Teen Pregnancy Prevention

Innovation 11: Implementation Matters

• Lack of scale-up of evidence-based pregnancy and other preventative interventions reflects limited attention to the important role of implementation science in rolling-out programs with demonstrated efficacy.

• Implementation science frameworks address the “critical gap” between demonstrating intervention efficacy and the research needed to fully understand the factors that shape successful dissemination and uptake of an evidence based intervention in a community.

• Specifically, implementation science addresses a set of research questions directly related to implementing and scaling up an efficacious intervention.
Implementation Science Framework

Framework can provide empirical guidance to inform strategies to ensure large-scale dissemination of evidence-based teen pregnancy prevention interventions.
Community Collaboration & Academic Partnerships
Involving Community Partners

- Community involvement is critical to teen pregnancy prevention efforts
  - Should be broad—include traditional and non-traditional partners

**Research & refinement of the intervention**
- Provide insight on the unique needs of the community
- Inform the appropriateness of the intervention
- Guide changes to facilitate relevance and comprehension of the intervention for community members

**Implementation and evaluation of program**
- Identify challenges for delivering program
- Inform recruitment and retention strategies
- Facilitate community awareness and participation in the program

**Dissemination of evaluation findings**
- Revise and provide suggestions for final reports and products
- Disseminate community report to constituents
- Identify media and press partners for wider distribution of findings

Community members/community advisory board
Academic Partnerships

• Partnering with academic and/or research organizations and institutions can facilitate the research and evaluation of the teen pregnancy prevention intervention and its implementation:
  • Can inform evidence-based practice and programs
  • Can increase study rigor
  • Can identify program components and elements most likely to impact teen pregnancy
  • Can facilitate use of programs shown to be effective at preventing teen pregnancy
  • Can increase scientific credibility and authority of the program
The Center for Latino Adolescent and Family Health (CLAFH)

CLAFH at New York University Silver School of Social Work investigates the role of families in shaping the development and well-being of adolescents.

The mission of CLAFH is to address the needs of adolescents and their families, specifically the prevention of problem behaviors among Latino youth and promotion of health and economic well-being of Latino families.

www.clafh.org
CLAFH’s research addresses key issues that affect Latino families. Specifically, CLAFH seeks to:

1) foster the development, evaluation, and dissemination of evidence-based family interventions designed to prevent and/or reduce problem behaviors among Latino adolescents;

2) develop, evaluate, and disseminate family interventions for positive youth development approaches to Latino adolescent development and well-being;

3) examine issues of immigration related to the experiences of Latino families; and

4) promote the economic well-being of the Latino community.

www.clafh.org
CLAFH in Critical Areas for Latino Health

CLAFH’s program of research addresses the needs of Latino communities in national and global contexts.

U.S.
- Community health workers to reach Latino families
- Parent-based program reducing teen sexual risk behavior
- Role of fathers in influencing youth behavior
- Youth binge-drinking
- Couples’ contraceptive decision making

Border Region
- Understanding contextual factors that impact adolescent risk behaviors (alcohol, sex)

Mexico
- Migration impacts family structure

D.R.
- Adapting an effective family-based program for the DR context

U.S.-Parent-based program reducing teen sexual risk behavior
- Role of fathers in influencing youth behavior
- Youth binge-drinking
- Couples’ contraceptive decision making
Video

Families Talking Together
Helping Parents and Teens Talk About Sex
THANK YOU

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