

# *With Always Right, Teens Get the Message*

**NEW YORK CITY, NY**

## THE HEALTH CONCERN

With a population of eight million, New York City (NYC) is one of the most culturally, ethnically, and linguistically diverse cities in the United States.<sup>1</sup> Medical and Health Research Association of New York City, Inc. (MHRA), and the NYC Department of Health and Mental Hygiene work together on many initiatives to meet the city's diverse public health needs. One such project, in conjunction with the New York State Center for Sudden Infant Death, provides bereavement counseling for parents who have experienced the sudden unexpected death of an infant due to Sudden Infant Death Syndrome (SIDS) and other causes. The project also provides community education on SIDS risk reduction.

Mothers who are younger than age 20 at their first pregnancy are at highest risk for SIDS. These young mothers are in double jeopardy because they are predisposed to other risk factors such as late or no prenatal care, cigarette smoking, drug or alcohol use, low birth weight and premature births.<sup>2</sup>

<sup>1</sup>New York City Department of Health and Mental Hygiene. (2004). *Health Disparities in New York City: A Report from the New York City Department of Health and Mental Hygiene*. Available at <http://www.nyc.gov/html/doh/downloads/pdf/epi/disparities-2004.pdf>

<sup>2</sup>Centers for Disease Control and Prevention. (2006). *Adolescent Reproductive Health, Teen Pregnancy*. Available at <http://www.cdc.gov/reproductivehealth/AdolescentReproHealth/index.htm>

*The Health Concern Continued*

Every NYC borough has a school for pregnant and parenting teens. These high schools provide a therapeutic environment for teen mothers. In addition to the regular academic curriculum, parenting and health classes are included. Onsite childcare is available and exemplifies the support these schools provide to the teen mother.

In 2000, a teen's baby died of SIDS while she was a student at one NYC high school for pregnant and parenting teens. The school called the MHRA NYC Satellite Office of the New York State Center for Sudden Infant Death and asked for help. The initial request was for a school-wide assembly to discuss the cause of death, provide support for the bereaved mother, and help students address their fears and sadness. Although the school




**New York State Center for  
Sudden Infant Death**

assembly was successful in addressing the immediate issues, it did not suffice to meet the ongoing need for safe sleep/SIDS risk reduction education within the school. Teachers and students wanted information on this subject routinely included in the school curriculum. A more comprehensive approach was needed to ensure that all mothers understand the issues around safe sleep and SIDS risk reduction practices.

## THE STRATEGY

A multifaceted approach was developed in collaboration with teachers and students for disseminating safe sleep and SIDS risk reduction education to teen mothers. Because effective health promotion approaches need to reflect the characteristics, preferences, culture, and needs of the intended audience, a different set of approaches was designed to reach the faculty and the teen mothers at this school. Staff of MHRA's Sudden Infant Death program recognized that, for teens, a specific nontraditional approach was needed

that could bridge their developmental issues, their need for nurturing, and their desire for autonomy and the rights of adulthood. Rebellion and mistrust of mainstream or adult thinking tends to be characteristic of adolescence, as is the need to establish and demonstrate independence and authority. In recognition of these elements of teen "culture," MHRA's Sudden Infant Death program created the ***Always Right*** approach to educate teens about safe infant sleep and SIDS risk reduction practices.

## THE ACTION

For the safe sleep messages to consistently reach the students, program staff believed it was important that all adults at the school support and reinforce that message. Thus, the program provided education for the teachers through lectures and discussion. Teachers were encouraged to identify logical additions of safe sleep and SIDS risk reduction messages to the existing health and childcare curriculum. The program also provided training to the school's childcare staff to ensure safe sleep practices were consistently implemented in the school's daycare setting.

***Always Right*** was developed for working directly with and engaging the teens. Danita Hall, a Licensed Clinical Social Worker and Program Educator, in the NYC satellite office, believes that taking a particularly nonjudgmental stance toward the young mothers and, as their ally, giving them choices about how they arrange their baby's sleep would be a productive approach. Always respecting and accepting the teens' views gives them a sense of being ***Always Right***, and encourages a mutual trust and respect that create a positive atmosphere within which teens are better able to hear, understand, and accept the information they are being provided.

Program staff and teens met in small-group settings designed to take advantage of having peers interact with each other to stimulate open discussion. The small size of the groups also motivated them to initiate their own learning strategies; for example, in one group, teenagers developed and performed a



rap risk-reduction song. Interactive games like “fill in the missing word” and “but-what if” question-and-answer games were also great ways to generate meaningful discussion. In addition, the participants received materials such as Back to Sleep brochures, door hangers, posters, and T-shirts for the babies, which the teens loved. More important, however, was a focus on the *key to successful learning*, that is, the discussion. Staff found that encouraging spontaneity was just as essential as drawing out the free exchange of ideas and “playing” to the teen parents’ immediate needs. Empowering the participants to teach others from the perspective of their wisdom and knowledge gained through experience was also a critical goal of the approach. Upon completion of the program, the teens received a certificate that served as a concrete acknowledgment of their accomplishment and reinforced the health message. Teachers and school social workers continued to promote the health message by “checking in” with the students regarding their babies’ sleep environment.

## WHY IT WORKS

The ***Always Right*** approach has been well received by teens because it focuses on creating a group mindset for learning and changing behavior. This approach is developmentally and culturally appropriate for teens because they are greatly influenced by their peers. The use of rap songs and logo T-shirts for the babies plays to teen culture. Although peer group activities are useful, respecting the knowledge and role of the individual teen parent is also crucial. Thus, the ***Always Right*** approach to teen education promotes and supports the teen's own parental authority. The teen is engaged as a responsible person who wants to do what is best for her baby and can use safe sleep

and SIDS risk reduction information to make good decisions. ***Always Right*** expands the teens' range of choices and clarifies the difficulties of being a good parent. Signing a pledge was used as an indication of their capacity to commit to responsible behavior.

What started as a call for help at a school where a teen parent's baby died has grown into an enhancement of the school's curriculum. Safe sleep messages are now integrated into various lessons and classroom discussions. The ***Always Right*** approach engages teenagers by acknowledging their specific needs and interests and, by doing this, integrates safe sleep messages into teenage culture.

## THE NCCC PERSPECTIVE

The National Center for Cultural Competence (NCCC) chose this promising practice because it exemplifies key values of culturally and linguistically competent health promotion that include the following:

- Recognizes that aspects of diversity beyond race, ethnicity, and language impact health promotion. Factors such as age, developmental level, socioeconomic status, and educational level should be considered in developing health promotion approaches;
- Demonstrates respect for the cultural values, beliefs, and practices of the intended audience. A key challenge in health promotion with diverse populations is honoring beliefs of the intended audience while recognizing that some of those beliefs and practices may not be congruent with emerging knowledge of what supports healthy outcomes. Culturally competent health promotion supports and honors those practices and beliefs that are protective or benign, and respectfully helps identify and change those beliefs and practices that have a negative health impact; and
- Recognizes that health promotion cannot take place without considering the context. Too often, health promotion initiatives "blame the victim" when the behavior changes do not occur. Teen mothers may not have control over all aspects of raising their babies and may need support in changing practices that have not yet been embraced by the adults in their families. Approaches that provide them with information and support from respected adult authorities in the community can address the context within which they live.

*The NCCC Perspective Continued*

Additional NCCC resources on cultural and linguistic competence in health promotion follow:

- ***Infusing Cultural and Linguistic Competence into Health Promotion Training***  
<http://www.11.georgetown.edu/research/gucchd/nccc/projects/sids/dvd/index.html>
- ***A Guide to Choosing and Adapting Culturally and Linguistically Competent Health Promotion Materials***  
[http://www11.georgetown.edu/research/gucchd/nccc/documents/Materials\\_Guide.pdf](http://www11.georgetown.edu/research/gucchd/nccc/documents/Materials_Guide.pdf)

*En español:* [http://www11.georgetown.edu/research/gucchd/nccc/documents/Materials\\_Guide\\_Spanish.pdf](http://www11.georgetown.edu/research/gucchd/nccc/documents/Materials_Guide_Spanish.pdf)

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## ACKNOWLEDGMENTS

The Promising Practices for Cultural and Linguistic Competence in Addressing Sudden Infant Death Syndrome and Other Infant Death series was developed for the National Center for Cultural Competence by Jodi Shaefer, RN, PhD, Health Care Answers, Baltimore, MD in collaboration with Suzanne Bronheim, Ph.D. NCCC faculty. The NCCC would like to thank the programs featured in this series for their time and effort in providing the information about their promising practices.



### ABOUT THE NATIONAL CENTER FOR CULTURAL COMPETENCE

The NCCC provides national leadership and contributes to the body of knowledge on cultural and linguistic competency within systems and organizations. Major emphasis is placed on translating evidence into policy and practice for programs and personnel concerned with health and mental health care delivery, administration, education, and advocacy.

The NCCC uses four major approaches to fulfill its mission including (1) Web-based technical assistance, (2) knowledge development and dissemination, (3) supporting a “community of learners,” and (4) collaboration and partnerships with diverse constituency groups. These approaches entail the provision of training,

technical assistance, and consultation and are intended to facilitate networking, linkages, and information exchange. The NCCC has particular expertise in developing instruments and conducting organizational self-assessment processes to advance cultural and linguistic competency.

The NCCC is a component of the Georgetown University Center for Child and Human Development (GUCCHD) and is housed within the Department of Pediatrics of the Georgetown University Medical Center. The NCCC is funded and operates under the auspices of Cooperative Agreement #U40-MC-00145 and is supported in part by the Maternal and Child Health program (Title V, Social Security Act), Health Resources and Services Administration, U.S. Department of Health and Human Services (DHHS).

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