

**Department of Health Services/Primary Care and Family Health Maternal  
Child and Adolescent Health/Office of Family Planning Branch  
TeenSMART Outreach Program (TSO)**

**Program** The TSO Program was initiated as a demonstration project in July 1995 by the Office of Family Planning (OFP) to reduce the risk of unintended pregnancy and sexually transmitted infections (STIs) among adolescents aged 19 and younger. TSO is now an established component of Family PACT (Planning, Access, Care and Treatment) – a clinical program for personal family planning reproductive health services. Enhanced teen-sensitive counseling visits, in addition to those authorized for all Family PACT clients, are available in order to accomplish the TeenSMART program goals.

The specific goals for the TSO program are to:

- Reduce teen and unintended pregnancies
- Promote responsible parenting
- Promote postponing parenthood until one is able to provide for the physical, emotional, social and economic well-being of a child
- Increase community involvement in building healthy families through awareness of the effect of teen and unintended pregnancies
- Promote and support the development of self-assured, future-oriented youth capable of navigating through adolescence to responsible adulthood and contributing positively to society

The purpose of the TeenSMART Clinical Program is to help adolescents make and sustain “smart” decisions related to their sexual behavior and birth control, including abstinence education. TeenSMART clinics provide youth friendly services and staff with the appropriate education, training, and counseling experience to maintain proficiency in working with adolescents.

**Start Date:** The TSO was established in FY95/96 as a three year demonstration project under Gov. Pete Wilson’s Teen Pregnancy Prevention Initiative.

**Fund Source:** Title XIX

**History:** The TeenSMART Enhanced Counseling Program was initiated as a three-year demonstration project in July 1995 under Governor Wilson’s Teen Pregnancy Prevention Initiative. The OFP was charged with implementing innovative approaches to reduce the risk of unintended pregnancy and sexually transmitted infections (STIs) among adolescent aged 19 and younger. The focus was increasing utilization of clinical services by sexually active adolescents. In 1998 providers who had received these funds signed “Provider Agreements” to integrate their TeenSMART program into Family PACT while maintaining the TeenSMART program requirements.

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**Outcomes and Continuing Need**

- In 2005, births to teens ages 15 – 19 years declined to 37.1 per 1,000 live births. In 2000, the rate for that age group was 46.7 per 1,000 live births.
- In 2003, 61% of STIs in California were among youth and young adults
- 28% of all HIV infections in California are in persons between 13-29 years of age
- Teen births cost American taxpayers approximately \$7 billion in state and federal money each year.
- Nearly 80 percent of all unmarried teen mothers receive public assistance services.
- Two out of three teen moms never finish high school.
- California must continue the teen pregnancy prevention efforts to promote youth development and avoid unintended pregnancies.

**Program Evaluations**

- TSO agencies reported that, during the first half of FY 05/06, 29,202 teen clients (ages 10-19) visited their clinics for the purpose of receiving family planning or reproductive health care. Approximately 35% of these teens were visiting the clinic for the first time, and 65% were established clients returning for their first visit this fiscal
- To increase clinic referrals, TSO agencies established linkages with schools, community-based organizations, county social service departments and other groups that serve high-risk teens. During the first half of the year, TSO agencies built new relationships with 146 community organizations and participated in 228 collaborative activities with existing partners
- Surveys revealed that although most teens heard of the clinic through friends (60%), a significant proportion heard of the clinic through outreach activities, including school presentations (22%), clinic staff (14%), flyers/brochures (6%) and programs for teens (6%).
- Males were more likely than females to have heard of the clinic from clinic staff (20 vs. 13%) and a program for teens (12 vs. 5%), whereas white teens were more likely than API, African American, and Latino teens to have heard of the clinic through a school presentation (28 vs. 21, 19, and 21%, respectively).
- A large proportion of teens indicated that they would either forgo care (12%) or were unsure of what they would do (42%) if the TSO clinic was not available. Young men and women face many barriers to accessing family planning services, and these findings highlight the importance of outreach in reducing some of these barriers